LEGISLATIVE COMMITTEE MINUTES

HB1379

Bill as Introduced

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16Mar2022... 0844h

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HB 1379 - AS AMENDED BY THE HOUSE

2022 SESSION

22-2527 05/10

HOUSE BILL	1379
AN ACT	relative to the department of health and human services' rulemaking authority regarding immunization requirements.
SPONSORS:	Rep. Kofalt, Hills. 4; Rep. Blasek, Hills. 21; Rep. Nunez, Hills. 37; Rep. Bernardy, Rock. 16; Rep. Hough, Belk. 3; Rep. True, Rock. 4; Rep. Love, Rock. 6; Rep. Spillane, Rock. 2; Sen. Avard, Dist 12
COMMITTEE:	Health, Human Services and Elderly Affairs
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AMENDED ANALYSIS

This bill limits immunization requirements to those diseases identified in statute. The bill also provides the commissioner of health and human services with limited authority to include an additional immunization requirement with the approval of the oversight committee on health and human services.

Explanation: Matter added to current law appears in *bold italics*. Matter removed from current law appears [in brackets and struckthrough.] Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Two

AN ACT relative to the department of health and human services' rulemaking authority regarding immunization requirements.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 1 Communicable Disease; Immunization. RSA 141-C:20-a, I is repealed and reenacted to read 2 as follows:

3 I. All parents or legal guardians shall have their children who are residing in this state 4 immunized against diphtheria, mumps, pertussis, poliomyelitis, rubella, rubeola, tetanus, and 5 varicella. Immunization against hepatitis B and haemophilus influenzae shall be required until 6 June 30, 2026, unless otherwise authorized by statute. The commissioner may add an immunization 7 requirement to the above list for up to 20 months with the approval of the legislative oversight 8 committee on health and human services established in RSA 126-A:13. Such action shall require a 9 3/5 vote by the oversight committee and shall be permitted only one time per communicable disease. 10 Continuation beyond 20 months shall require specific statutory authority for the immunization 11 requirement. The commissioner may only adopt rules under RSA 541-A relative to changes in the 12number of doses, dosage, route of administration, and age requirements for immunization against 13 the diseases identified in this paragraph. $\mathbf{14}$ 2 Communicable Disease; Rulemaking. Amend RSA 141-C:6, XIII to read as follows:

- 15 XIII. [Other] Communicable diseases requiring immunization under RSA 141-C:20-a, I.
- 16 3 Effective Date. This act shall take effect 60 days after its passage.

Amendments

Rep. Kofalt, Hills. 4 March 3, 2022 2022-0943h 10/08

Amendment to HB 1379

1 Amend the bill by replacing all after the enacting clause with the following:

2 3

1 Communicable Disease; Immunization. Amend RSA 141-C:20-a, I to read²as follows;

4 I. All parents or legal guardians shall have their children who are residing in this state immunized against [certain diseases. These diseases shall include,but $\mathbf{5}$ -not diphtheria, mumps, pertussis, poliomyelitis, rubella, rubeola, and tetanus, The commissioner shall 6 adopt-rules under RSA 541 A relative to other diseases which require immunization.] The rules 7 Hepatitis B, and Haemophilus adopted by the commissioner requiring varicella 8 influenzae type B (Hib) vaccinations shall remain in effect until their regular expiration 9 10 date of June 30, 2026.

11 2 Repeal. RSA 141-C:6, XIII, relative to rulemaking for other communicable diseases under 12 RSA 141-C:20-a, I.

13 3 Effective Date. This act shall take effect 60 days after its passage.

Committee Minutes

SENATE CALENDAR NOTICE Health and Human Services

Sen Jeb Bradley, Chair Sen James Gray, Vice Chair Sen Kevin Avard, Member Sen Tom Sherman, Member Sen Rebecca Whitley, Member

Date: April 7, 2022

HEARINGS

Wednesday	04/13/2022
(Day)	(Date)

d Human Services	8:30 a.m.	
Committee)	(Place)	(Time)
HB 1022	permitting pharmacists to dispense the drug is a standing order.	vermectin by means of
HB 1080	relative to the rights of conscience for medical	professionals.
HB 1379	-	—
HB 1488	• • •	
HB 1531-FN-A	modifies the oversight commission on children	's services.
	Committee) HB 1022 HB 1080 HB 1379 HB 1488	HB 1022permitting pharmacists to dispense the drug is a standing order.HB 1080relative to the rights of conscience for medicalHB 1379relative to the department of health and huma authority regarding immunization requirementHB 1488expanding the prohibition against discriminat individual's election not to participate in the standard

EXECUTIVE SESSION MAY FOLLOW

Sponsors: HB 1022 Rep. Cushman Rep. Blasek HB 1080 Rep. M. Pearson Rep. Wuelper HB 1379 Rep. Kofalt Rep. Hough Sen. Avard HB 1488 Rep. Prout Rep. T. Lekas HB 1531-FN-A Rep. Cornell

Rep. Kofalt Rep. Torosian Rep. Spillane Rep. Gould

Rep. Blasek Rep. True

Rep. Blasek

Rep. Rice

Rep. Sheehan Rep. Harley

> Rep. Notter Sen. Giuda

Rep. Nunez Rep. Love

Sen. Whitley

Rep. Binford

Rep. Yakubovich Rep. T. Lekas

Rep. Edwards

Rep. Bernardy Rep. Spillane

Rep. Johnson

Cameron Lapine 271-2104

<u>Jeb Bradley</u>

Chairman

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Senate Health and Human Services Committee Cameron Lapine 271-2104

HB 1379, relative to the department of health and human services' rulemaking authority regarding immunization requirements.

Hearing Date: April 13, 2022

Time Opened:11:14 a.m.Time Closed:11:47 a.m.

Members of the Committee Present: Senators Bradley, Gray, Avard, Sherman and Whitley

Members of the Committee Absent: None

Bill Analysis: This bill limits immunization requirements to those diseases identified in statute. The bill also provides the commissioner of health and human services with limited authority to include an additional immunization requirement with the approval of the oversight committee on health and human services.

Sponsors:		
Rep. Kofalt	Rep. Blasek	Rep. Nunez
Rep. Bernardy	Rep. Hough	Rep. True
Rep. Love	Rep. Spillane	Sen. Avard

Who supports the bill: In total, 94 individuals signed in in support of HB 1379. The full sign in sheets are available upon request to the Legislative Aide, Cameron Lapine (cameron.lapine@leg.state.nh.us).

Who opposes the bill: In total, 108 individuals signed in in opposition to HB 1379. The full sign in sheets are available upon request to the Legislative Aide, Cameron Lapine (cameron.lapine@leg.state.nh.us).

Who is neutral on the bill: In total, 1 individual signed in as neutral on HB 1379. The full sign in sheets are available upon request to the Legislative Aide, Cameron Lapine (cameron.lapine@leg.state.nh.us).

Summary of testimony presented in support:

Representative Jim Kofalt

Hillsborough County District 4

• Representative Kofalt said that HB 1379 is intended to shift the primary authority for childhood immunizations to the General Court, from the Commissioner of the Department of Health and Human Services (DHHS).

- Rep. Kofalt said that RSA 141-C:20-a gives DHHS the authority to make rules for childhood immunizations in New Hampshire. He said that there are currently three immunizations that are in administrative rule but not in statute: varicella, hepatitis B (Hep B), haemophilus influenzae type b (Hib).
- Rep. Kofalt said that while the Commissioner has exercised good judgement and not added to that list of required immunizations noting that New Hampshire's list of required immunizations is smaller than the recommended Centers for Disease Control and Prevention (CDC) and Advisory Committee on Immunization Practices (ACIP) he is concerned about the gravity that ought to be taken with such a decision through legislation.
- Rep. Kofalt said that while the rulemaking process has provisions for public input, it is not held to the same level of transparency and openness as the legislative process.
- Rep. Kofalt said that HB 1379 is not an anti-vaccine bill. He said that vaccines, especially the polio vaccine, have played an important role in public health. He said that it is a serious decision to vaccinate a child and making a vaccination a requirement should be done by the General Court.
- Rep. Kofalt said that HB 1379 as introduced would have just revoked the rulemaking authority of DHHS for additional childhood immunizations. He said that the House Health, Human Services, and Elderly Affairs Committee (HHSEA) noted that HB 1379 as introduced would immediately remove the immunization requirements for varicella, Hep B, and Hib. He said that the intent of the bill was not to cause an immediate, abrupt disruption.
- Rep. Kofalt said that HHSEA amended HB 1379 to allow for the varicella, Hep B, and Hib rules to exist in statute until June 30, 2026, giving the General Court time to put those requirements through the legislative process.
- Rep. Kofalt said that he had drafted a "clean amendment" and offered it to HHSEA but it failed on a 10-11 vote. He said that the "clean amendment" would have allowed the existing rules to stay in effect in rules until their prescribed expiration date.
- Rep. Kofalt said that HHSEA adopted a more complex amendment, on an 11-10 vote, which added varicella to statute permanently and added Hep B and Hib to statute with a repeal date. He said that the amendment also included a temporary mandate process whereby DHHS could require a vaccine for 20 months – with the understanding that that was the maximum amount of time the legislative process could take – with a 3/5 vote of the Health and Human Services Oversight Committee.
- Rep. Kofalt requested that the Committee adopt his "clean amendment". He said that two members who voted against the "clean amendment" in HHSEA have said that they could live with HB 1379 either way. He said that the bill is less confusing with the "clean amendment".
- Rep. Kofalt said that HB 1379 as amended adds varicella to statute, which violates the intent of the bill. He said that the intent is that if a childhood immunization is going to be required, then it deserves a full, transparent hearing like other legislation. He said that varicella was added in an amendment in HHSEA at the last minute and one
- member of HHSEA argued that it should have been ruled a non-germane amendment. He said that Speaker Packard did not rule the amendment non-germane.
- Rep. Kofalt said that adding a role for the HHS Oversight Committee adds a novel role for that committee that was not included in the original intention for that committee.

- Rep. Kofalt said that moving Hep B and Hib into statute, even with an expiration date, creates the potential for confusion and lacks clear intent. He said that those immunizations should undergo the same level of scrutiny. He said that a future legislator could see that those vaccinations were in statute, remove the expiration date, and then move on.
- Rep. Kofalt said that HB 1379 with the "clean amendment" would be better aligned with the original intent of the bill and have broad support.
- Senator Bradley asked if DHHS had seen the "clean amendment".
 - Rep. Kofalt said that they had, because the "clean amendment" was the As Introduced version of HB 1379.
- Senator Sherman said that when he was first elected, he was the only physician in the House. He said that DHHS has professional physicians and public health career professionals. He asked what was prompting a change in the current system, to a more cumbersome and complicated system. He asked why people with no medical background would be overseeing a process that requires medical expertise.
 - Rep. Kofalt said that it was not his intention that decisions would be made without substantial medical input. He said that the Commissioner is not required to have a medical background. He said that HHSEA heard testimony that DHHS has no intention of requiring immunization for Covid-19 for children because there is not a consensus. He said that he wants to look ahead to "what ifs" and the reality is that one person could make a decision that, without the objection of the Joint Legislative Committee on Administrative Rules (JLCAR), would have the full force of law. Rep. Kofalt said that decisions of such importance should have a wider hearing.

Summary of testimony presented in opposition:

Laura Condon

NH Director of Advocacy, National Vaccine Information Center

- Ms. Condon said that she had been working with Rep. Kofalt and has concerns about what happened to HB 1379 in HHSEA. She said that she opposes HB 1379 because of the amendment.
- Ms. Condon said that 72 vaccine doses are required between birth and age 18.
- Ms. Condon said that Covid-19 vaccines are mandated for children in foster homes through Rule HE-C 6446 because all ACIP recommended vaccines are required.
- Ms. Condon said that the full General Court should oversee vaccines for children.
- Ms. Condon said that HB 1379 was a good bill, as written. She said that the "clean amendment" preserves the existing rules and gives authority to the General Court, which will have notices, hearings, and testimony in an open, transparent, and inclusive process.
- Ms. Condon said that adding varicella, Hep B, and Hib to statute includes nine total vaccine doses and no discussion on the need to impose them, or the potential for harm.
- Ms. Condon said that she raised the issue of the HHSEA amendment to HB 1379 being non-germane.

- Ms. Condon said that Hep B is spread through intravenous drug use and Men Who Have Sex with Men. She questioned why that vaccine would be given to children. She said that pregnant women are tested and treated for Hep B; she questioned why further vaccination of the child would be needed.
- Ms. Condon said that the Vaccine Adverse Event Reporting System shows 121 deaths in New Hampshire from the varicella, Hep B, and Hib vaccines. She spoke about a 15month-old child in Nashua, a two-month-old boy named Hunter, and a boy named Marcus. She said that parents do not go to legislators with these cases but they do exist.
- Ms. Condon said that the bad amendment to HB 1379 takes bad rules and gives them to the HHS Oversight Committee. She said that the committee is not required to be open to the public and publicly noticed because it is not a standing committee. She said that the HHS Oversight Committee was not intended to be part of the legislative process and that inclusion cuts the public out entirely.
- Ms. Condon said that the 20-month period is arbitrary.
- Ms. Condon said that there is no need to add varicella, Hep B, and Hib to statute. She said that HHSEA could have left those requirements in Administrative Rules until they expired.
- Ms. Condon urged the Committee to consider Rep. Kofalt's amendment. She said that she would support HB 1379 if the "clean amendment" was adopted.

Kate Frey

Vice President of Advocacy, New Futures

- Ms. Frey said that New Hampshire has a strong vaccine program. She said that all children up to the age of 18 can receive vaccinations at no cost, because DHHS buys enough vaccines for all children.
- Ms. Frey said that DHHS has a nimble but careful process for adding vaccines to the requirements for childhood immunization. She said that there is a selection committee, as well as JLCAR oversight and hearings.
- Ms. Frey said that HB 1379 repeals DHHS' authority and re-enacts it in a confusing way. She said that some immunization requirements would be in statute and some would be in rules. She also questioned the 3/5 requirement from the HHS Oversight Committee.
- Ms. Frey said that HB 1379 will limit DHHS' ability to protect against vaccinepreventable diseases. She said that if it is harder for DHHS, then those disease will begin to emerge again.

Patricia Tilley and Abby Rogers

Director, Division of Public Health Services; Legislative Liaison, Division of Public Health Services, DHHS

• Director Tilley said that DHHS has repeatedly described immunization as the most important public health achievement of the last century. She said that parents no longer have to worry about their child becoming ill or dying from communicable diseases. She said that coverage is not 100%, and no vaccine is 100% effective. She

said that diseases can still spread when an unvaccinated person is infected and introduces the disease into the community.

- Director Tilley said that DHHS is concerned significantly about HB 1379. She said that the bill unnecessarily places limits on DHHS' ability to adopt rules regarding childhood immunization.
- Director Tilley said that RSA 141-C provides the Commissioner the authority to adopt rules regarding which diseases need vaccinations. She said that all Commissioners she has worked with have taken that responsibility seriously. She said that such decisions are not made by one person and the process is public and transparent. Director Tilley said that, of the 17 CDC and ACIP recommended vaccinations, only seven are required in New Hampshire for schools and child care.
- Director Tilley said that if HB 1379 was adopted, DHHS would be required to receive a 3/5 vote from the HHS Oversight Committee in order to enact rules.
- Director Tilley said that HB 1379 also only allows DHHS to propose adding a new immunization once per communicable disease. She said that the severity of a particular disease is not constant and this would tie the Department's hands. She said that this would not be in the best interests of public health.
- Director Tilley said that DHHS believes that varicella, Hep B, and Hib should be included in the required immunizations. She urged the Committee not to put children at risk with the sudden, arbitrary repeal of the immunization requirements in 2026.
- Director Tilley said that moving varicella into statute removes the Department's ability to respond as the disease changes.
- Director Tilley said that the last time a new vaccine was added to the required childhood immunization list was in 2003. She said that there was significant feedback from providers and the public regarding the decision to add varicella for chicken pox to the requirements.
- Director Tilley said that DHHS believes that the current statute, with the authority to enact rules for childhood immunizations, provides sufficient oversight and opportunity for public feedback and input. She reiterated that this is not a decision taken lightly.
- Director Tilley said that the last vaccine added to the immunization requirements before the 2003 decision was in 1996.
- Director Tilley said that DHHS has learned during the Covid-19 pandemic about the need for flexibility with emerging threats. She said that the current system works and has opportunities for input.
- Director Tilley said that the proposals in HB 1379 were confusing and unnecessarily complex.
- Director Tilley said that DHHS prioritizes feedback from medical providers and the public. She said that the Department does not want to cause immediate disruptions.
- Director Tilley urged the Committee to recommend Inexpedient to Legislate or, if the Committee wants to pass HB 1379, to amend the bill to be a study committee to have the opportunity for a discussion of the finer points involved between the House of Representatives and the community.
- Senator Avard asked for clarity that the Commissioner of DHHS does not have to have a medical background.
 - o Director Tilley said that that is her understanding.

- Senator Avard asked, if the Commissioner does not have to have a medical background, why the Committee should deny the public more input, through their elected representatives, to tease out more information.
 - Director Tilley said that although the Commissioner is not required to have a medical background, the process of a recommendation getting to the Commissioner would have extensive medical feedback. She said that Dr. Ben Chan, the State Epidemiologist, the Bureau of Infectious Disease Control, and the medical community would all be involved in bringing a proposal to the Commissioner, who would then authorize the proposal to be taken to JLCAR, where public input is built in.
 - Director Tilley said that when varicella was added in 2003, many people from a variety of sources were brought together for their input. She said that DHHS would do the same for a future requirement, although it would probably be even more robust. She said that DHHS would build feedback upfront before going to JLCAR and then the legislators would have the final say.
- Senator Bradley asked if DHHS had worked with HHSEA on their committee amendment.
 - Director Tilley said that DHHS opposed HB 1379 in the House and suggested issues with the amendment. She said that the process as it exists is sufficient.
- Senator Bradley asked if the HHSEA committee amendment did not improve HB 1379.
 - Director Tilley said that it did not. She that it added more confusion to the process. She said that the advocates for HB 1379 spoke frequently about openness and transparency but the bill as amended by the House is more confusing and would give the public a harder time trying to understand what was happening.

Neutral Information Presented: None.

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Date Hearing Report completed: April 15, 2022

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Speakers

Senate Health & Human Services Committee SIGN-IN SHEET

Date: Wednesday April 13, 2022 Time: 9:10 a.m.

HB 1379 AN ACT relative to the department of health and human services' rulemaking authority regarding immunization requirements.

Name/Representing (please print neatly)

		Support	Neutral	Oppose	Speaking?	Yes	No	
Λ	Rep. Peter Torosian						<u>9</u>	
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	Division of	Support	Neutral	Oppose	Speaking?	Yes	No	
U	Potricia Tilley Public Heath			5		ď		
-	Services	Support	Neutral	Oppose	Speaking?	Yes	No	
	DHHS							
		Support	Neutral	Oppose	Speaking?	Yes	No	
V	REP TONY LEKAS HILLS 37						Å	
×		Support	Neutral	Oppose	Speaking?	Yes	No	
1	Lawra Condon					Ľ dzí		
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	Kara Mcintyre/Shechan Phinnay Capitol Strong	Support	Neutral	Oppose	Speaking?	Yes	No	
	for Granite State Home Health & Hospice Asson			X			X	
		Support	Neutral	Oppose	Speaking?	Yes	No	
		Support	Neutral	Oppose	Speaking?	Yes	No	
		Support	Neutral	Oppose	Speaking?	Yes	No	
		Support	Neutral	Oppose	Speaking?	Yes	No	
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Senate Health & Human Services Committee SIGN-IN SHEET

Date: Wednesday April 13, 2022 Time: 9:10 a.m.

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HB 1379 AN ACT relative to the department of health and human services' rulemaking authority regarding immunization requirements.

Name/Representing (please print neatly)

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	Support	Neutral	Oppose	Speaking?	Yes	No	
	Support	Neutral	Oppose	Speaking?	Yes	No	
	Support	Neutral	Oppose	Speaking?	Yes	No	
	Support	Neutral	Oppose	Speaking?	Yes	No	
	Support	Neutral	Oppose	Speaking?	Yes	No	
	Support	Neutral	Oppose	Speaking?	Yes	No	
	Support	Neutral	Oppose	Speaking?	Yes	No	
	Support	Neutral	Oppose	Speaking?	Yes	No	

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Senate Remote Testify

Health and Human Services Committee Testify List for Bill HB1379 on 2022-04 Support: 90 Oppose: 104

Name	Title	Representing		Position
Grier, Cybele	A Member of the Public	Myself		Oppose
Smith, Carla	A Member of the Public	' Myself		Oppose
Phillips, Margery	A Member of the Public	Myself		Oppose
Mott-Smith, Wiltrud	A Member of the Public	Myself		Oppose
Gilston, Julie	A Member of the Public	Myself		Oppose
Keeler, Margaret	A Member of the Public	Myself	-	Oppose
Hatcher, Phil	A Member of the Public	Myself	-	Oppose
Fudge, Kim Marie	A Member of the Public	Myself		Oppose
almeida, zulmira	A Member of the Public	Myself		Oppose
kOCH, Laurie	A Member of the Public	Myself		Oppose
Cahill-Yeaton, Miriam	A Member of the Public	Myself	•	Oppose
Richman, Susan	A Member of the Public	Myself		Oppose
Pauer, Diane	An Elected Official	Myself		Support
Plourde, Monica	A Member of the Public	Myself		Support
Pouliot, Cheryl	A Member of the Public	Myself		Support
Smith, Julie	A Member of the Public	Myself		Support
Doughty, Patrick	A Member of the Public	Myself		Support
Nadeau, Eileene	A Member of the Public	Myself		Support
graustein, alan	A Member of the Public	Myself		Support
Brown, Phyllis	A Member of the Public	Myself		Support
Brown, Stephen	A Member of the Public	Myself		Support
Brennan, Barb	An Elected Official	Myself		Support
Foss, Tyler	A Member of the Public	Myself	•	Support .
Brown, Joanna	A Member of the Public	Myself		Support
Sweeney, Margaret	A Member of the Public	Myself		Support
Perencevich, Ruth	A Member of the Public	Myself		Oppose
Bryan, Anne	A Member of the Public	Myself		Support
Reed, Barbara	A Member of the Public	Myself		Oppose
- Jensen, Jean	A Member of the Public	Myself		Support
Andrus, Rep Louise	An Elected Official	Myself		Support
Slack, Michelle	A Member of the Public	Myself		Support
- Gladders, Barbara	A Member of the Public	Myself		Support
Kantor, Crissy	A Member of the Public	Myself		Support
Mason, Richard	A Member of the Public	Myself		Support
Lozito, Patrick	A Member of the Public	Myself		Support
Lozito, Viola Marie	A Member of the Public	Myself		Support
chapman, kevin	• A Member of the Public	Myself		Support
Moschetto, Grace	A Member of the Public	Myself		Support
Stefanile, Tom	A Member of the Public	Myself		Support -
Martin, Katie	A Member of the Public	Myself	,	Support
• Surman, Elizabeth	A Member of the Public	Myself		Support
Clark, Jeremy	A Member of the Public	Myself		Support
Marvin, Kurt	A Member of the Public	Myself		Support
Archambault, Luanna	A Member of the Public	Myself		Support
Kras, Krzysztof	A Member of the Public	Myself		Support
Aiello-Cunha, Candice	A Member of the Public	Myself.		Support
Hand, Cathy	A Member of the Public	Myself		Support
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/29/22, 10:36 AM		Senate Remote Testify	÷
Lucas, Janet	A Member of the Public	Myself	Oppose
Huntress, Susanne	A Member of the Public	Myself	Support
Huntress, Roy	A Member of the Public	Myself	Support
Geremia, Peter	A Member of the Public	Myself	Support
Baucom, Pam	A Member of the Public	Myself	Oppose
Jorgensen, Patricia	A Member of the Public	Myself	Support
Diggins, Margie	A Member of the Public	Myself	Support
Economakis, Melissa	A Member of the Public	Myself	Support
Tetrault, Leslie	A Member of the Public	Myself	Support
Henninger, Heidi	A Member of the Public	Myself	Oppose
-	A Member of the Public	Myself	
Sommese, Cheryl	A Member of the Public	•	Support
Johnson, Debra	A Member of the Public	Myself Maralf	Support
Liberman, Sheryl		Myself	Oppose
Lajoie, Katie	A Member of the Public	New Hampshire Nurses Association	Oppose
Jones, Andrew	A Member of the Public	Myself	Oppose
Devore, Gary	A Member of the Public	Myself	Oppose
Schreier, Lori	A Member of the Public	Myself	Support
Cumbee, Lydia	A Member of the Public	Myself	Support
DeBourke, Sheana	A Member of the Public	Myself	Support
Dahl, Dana	A Member of the Public	Myself	Oppose
Leavitt, Deborah	A Member of the Public	Myself	Oppose
Sylvain, Barbara	A Member of the Public	Myself	Support
Hackmann, Kent	A Member of the Public	Myself	Oppose
Gragg, Debbie	A Member of the Public	Myself	Support
Kriese, Clay	A Member of the Public	Myself	Support
Griffin, Amy	A Member of the Public	Myself	Support
Rhoades, Charles	A Member of the Public	Myself	Oppose
Martin, Patricia	A Member of the Public	Myself	Oppose
Barry, Liam	A Member of the Public	Myself	Support
QUISUMBING-KING, Cora	A Member of the Public	Myself	Oppose
Lindpaintner, Lyn	A Member of the Public	Myself	Oppose
Roy, Lucy	A Member of the Public	Myself	Support
Rousseau, Michael	A Member of the Public	Myself	Support
Guven, Taci	A Member of the Public	Mysclf	Support
Murphy, Kevin	A Member of the Public	- Myself	Support
Kras, Danielle	A Member of the Public	Myself	Support
SKIDMORE, CLARENCE	A Member of the Public	Myself	Support
Torpey, Jeanne	A Member of the Public	Myself	Oppose
Kenison, Pamela	A Member of the Public	Myself	Oppose
Corell, Elizabeth	A Member of the Public	Myself	Oppose
Taku, Fumio	A Member of the Public	Myself	Support
Merlone, Lynn	A Member of the Public	Myself	Oppose
Thomas, Anne	A Member of the Public	Myself	Oppose
Hershey, Jane	A Member of the Public	Myself	Oppose
Paschell, Susan	A Lobbyist	- NH Community Behavioral Health Association	Oppose
Schofield, Kim	A Member of the Public	Myself	Support
Kelly, Fran	A Member of the Public	Myself	Oppose
Moore, Susan	A Member of the Public	Myself	Oppose
Fournier, James	· A Member of the Public	Myself	Support
Russell, Leslie	A Member of the Public	Myself	Support
Swiderski, Ed	A Member of the Public	Myself	Support
Greenwood-Briggs, Sabrina	A Member of the Public	Myself	Oppose
Petrusewicz, Carol	A Member of the Public	Myself	Support
LaPointe, Susan	A Member of the Public	Myself	Support
Johnson, Janine	A Member of the Public	Myself	Support
soundar, saune	A Member of the Public	Myself	aupport

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6/29/22, 10:36 AM

Young, Susan Brown, Jean Istel, Claudia Verschueren, James Cormier, Jennifer Mooney, Jphn Maillet, Ivan Maillet, Brenda DuBose, Joseph Kenney, Robert Campion, Polly Doyle, Marcy Reardon, Donna Lutter, Kathleen Graham, Eric Roy, Ronald Garland, Ann thompson, julia Lessrd, Martha Lessard, Joseph kirsch, walter st-yves, claudia frechette, jeffrey Spencer, Louise Spencer, Rob york, md, gary Barton, Marjorie Schwab, Rebecca Steel, Sandra Fitzgerald, Jennifer Beame, Julia Cope, David See, Alvin BEHNKE, MARY Dewey, Karen Condon, Laura Cembalisty, Clara Cembalisty, Richard Warriner, Andrea Meszynski, Edwin Hayes, Randy Odom, Judith Ferrantello, Anthony Snow, Danielle Schmitt, Megan Sims, Julie Sims, Roy Young, Tim Mason, Angela McNeel, Joyce Enos, Liz Waisanen, Tyler Padmore, Michael Faunce, Mary Leslie, Sarah

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6/29/22, 10:36 AM

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Testimony

newfutures*

advocate · educate · collaborate to improve the health and wellness of all Granite Staters

and galaxies and a second s 1.01 April 13, 2022 3.1.1 . . ! . . l. en le substance de la companya de la e strager , the result of the second The Honorable Jeb Bradley, Chair Senate Health and Human Services Committee Legislative Office Building Room 103 Concord, NH 03301 and the art of the product of the state of the second sector of the second se ي. او الجوري الي 199 - الحير المائية التي المثلون في المائين في المائين المائين المائين المائين المائين المائين ا Scarges and the Re: New Futures' testimony in opposition to HB 1379, relative to the department of health

and human services' rulemaking authority regarding immunization requirements and the second in the second second second second Dear Chair Bradley and Members of the Committee:

New Futures appreciates the opportunity to provide written testimony in opposition to HB 1379, relative to the department of health and human services' rulemaking authority regarding immunization requirements. New Futures is a nonpartisan, nonprofit organization that advocates, educates, and collaborates to improve the health and wellness of all New Hampshire residents. In this role, we work extensively with policy makers, health care providers and communities to improve overall public health and improve health equity across the Granite State.

New Futures supports public health policy measures that decrease illness and disease, including immunizations and programs that ensure equitable and broad distribution of vaccines-especially for children. New Hampshire's vaccine for children program does just that. In New Hampshire, all children through the age of 18 years can receive vaccines at no cost through an innovative program that has been replicated by several other states. By combining general funds, federal funds and contributions from health insurance companies that do business in the state, the Department can purchase enough vaccines to provide every child in the state with all the vaccines recommended in the "Childhood Immunization Schedule, US." The Advisory Committee on Immunization Practices, the American Academy of Family Physicians and the American Academy of Pediatrics (ACIP) have approved this schedule.¹

There is a careful but nimble process within the New Hampshire Department of Health and Human Services regarding adding vaccines required for children. Before the New Hampshire Immunization Program adopts a new vaccine, the Vaccine Selection Committee within Department reviews input from providers, epidemiologists, and other stakeholders on the effectiveness of considered vaccine. The Department subsequently begins the administrative rule process which includes a public hearing and legislative oversight through the Joint Committee on Administrative Rules.

HB 1379 repeals the Department's rulemaking authority under RSA 141-C:20-a, Immunizations, and re-enacts the law in a very confusing manner. Some vaccines are kept in rules, while others are set expire in statute by 2026. The commissioner "may add an immunization requirement to the ...list for up to 20 months with the approval of the legislative oversight committee on health and human services established in RSA 126-A:13. Such action shall require a 3/5 vote by the oversight committee and shall be permitted only one time per communicable disease." This method is not based in science or evidence based policy. HB 1379 would undermine the Department's ability to provide protection for children from vaccine preventable diseases.

¹ https://www.dhhs.nh.gov/dphs/immunization/vfc.html

New Futures • 100 North Main Street, Suite 400 Concord, NH 03301 •: (603) 225-9540 • 'www.new-futures.org

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When you have a

Childhood vaccinations is considered one of the Ten Great Public Health Achievements in the United States² because it results in substantial health and cost savings. A 2011 economic analysis indicated that vaccination of each U.S. birth cohort with the current childhood immunization schedule prevents approximately 42,000 deaths and 20 million cases of disease, with net savings of nearly \$14 billion in direct costs and \$69 billion in total societal costs³.

Public health achievements such as vaccines are often a victim of its own success. Because of vaccines, many of us have never seen a child with polio, tetanus, whooping cough, bacterial meningitis, or even chickenpox, or known a friend or family member whose child died of one of these diseases. Childhood vaccines also protect the broader population because they build the state protective "firewalls" around us by increasing herd immunity and protecting those who can't get vaccinated, including infants, and children and adults with weakened immune systems.

New Hampshire has very high childhood vaccination rates and is often ranked in the top three states with the highest vaccination rates in the country. ⁴ RSA 141-C:20-c allows for medical and religious exemptions for students. It is important to note that New Hampshire has only required 10 of the 16 vaccines recommended by the ACIP. The Department on multiple occasions has said it has no plans at this time to mandate the COVID vaccine.

For these reasons. New Futures strongly urges the committee members to vote Inexpedient to Legislate on HB1379. The track the second data is the s

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² https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6019a5.htm

³ https://pubmed.ncbi.nlm.nih.gov/24590750/

⁴ https://www.americashealthrankings.org/explore/annual/measure/Immunize_b/state/NH

TESTIMONY FOR HB1379 Jim Kofalt, Primary Sponsor 603-769-2130 <u>staterep@jimkofalt.com</u>

- Currently the DHHS Commissioner has the authority to require specific childhood immunizations through the rulemaking process.
 - Currently there are three immunizations required under rule.
 - Our current Commissioner has exercised excellent judgement in the recent crisis, despite pressure to require the COVID-19 vaccine.
 - However, the decision to require a medical intervention should not be taken lightly, and the legislature should not delegate this task. We should give it the full, open hearing it deserves.
 - Although the rulemaking process allows for public input, it is not characterized by the same openness and transparency that the legislative process has.
- In its original form, HB1379 simply revoked rulemaking authority of the Commissioner with respect to mandatory immunizations for children in New Hampshire.
- The House HHS&EA Committee noted that the bill as written would have immediately invalidated existing immunization requirements in rule (HIB, Hepatitis B, and varicella). That was not the intention of the bill, however.
- The Committee therefore considered two competing amendments:
 - The first, which I will call the "clean" amendment, simply clarifies that the requirements established under rule would remain in effect until their expiration in June of 2026. This would allow ample time for the legislature to deliberate on the merits of those three requirements and, if it so chooses, to add those to statute. This amendment failed by a single vote, although several of the "no" votes stated that they "could live with either amendment".
 - The second amendment was preferred by a one-vote majority of the Committee. The result is the bill passed by the House, which you see before you today. This one adds varicella to statute permanently, and establishes an emergency process for requiring new immunizations for a limited period of time, with a three-fifths vote of the HHS Oversight Committee.
- I have two concerns with the amendment that passed:
 - First, it adds varicella to statute. It does so without the full public hearing that such an action deserves. In fact, one member of the Committee raised the concern that this was a non-germane amendment.
 - Second, it establishes a new function for the HHS Oversight Committee, one for which I don't believe it was originally intended.
 - While I appreciate the concerns about the need to act quickly during a medical emergency, in fact the Governor has broad powers to respond during a crisis if needed.
- I would therefore ask the Committee to consider amending the bill to restore the original language intention of the bill, by passing the so-called "clean" amendment. I'm confident that if this comes back to the House we can pass it in that form.



Biotechnology Innovation Organization 1201 Maryland Avenue SW Suite 900 Washington, DC, 20024 202-962-9200

Biotechnology Innovation Organization (BIO) Statement Opposing HB 1379

The Biotechnology Innovation Organization (BIO), a national trade association for the biotechnology industry, represents over 900 companies and academic institutions involved in the research and development of innovative healthcare, agriculture, industrial, and environmental biotechnology products. BIO membership includes vaccine developers and manufacturers who have worked closely with the public health community to support policies that help ensure access to innovation and life-saving vaccines for all individuals.

BIO and our member companies would like to express our **opposition to HB 1379**, as it puts New Hampshire residents at risk of preventable diseases.

Legislative efforts related to vaccines should focus on continuing to extend protection from these diseases and their side effects to all New Hampshire residents. The Legislature serves a critical function in passing laws to protect the people of New Hampshire. Decisions to change the immunization laws should be held to high standards of evidence-based scientific deliberation. Restricting the Department of Health and Human Service's ability to add required immunizations will have a detrimental effect on public health in New Hampshire. Preventing new vaccine requirements without statutory authorization risks outbreaks of preventable diseases such as measles and influenza. Such outbreaks put lives at risk and are accompanied by great economic costs to the State¹ and society.²

New Hampshire's school entry requirements already allow for religious exemptions. Limiting the Department's ability to add required immunizations puts the community at risk for serious disease. Vaccinations have led to steep decreases and eradication of many significant infectious diseases such as polio, measles, mumps, pertussis, and haemophilus influenza type B (Hib), one of the vaccination requirements set to sunset in 2026. Immunizations are our best protection against preventable disease and can help the people of New Hampshire live longer, healthier lives.

BIO and our member companies respectfully urge the Committee to **VOTE AGAINST HB 1379**. We stand ready to help in any discussion of legislation to strengthen immunizations and to share our knowledge of activities and initiatives from around the country.

Sincerely,

Ben Chandhok State Government Affairs Director, Eastern Region Biotechnology Innovation Organization

¹ <u>https://www.cdc.gov/mmwr/volumes/66/wr/mm6646a3.htm</u>

² <u>https://www.worldbank.org/en/news/feature/2020/06/08/the-global-economic-outlook-during-the-covid-19-pandemic-a-changed-</u>

world#:~:text=Businesses%20might%20find%20it%20hard.by%20almost%208%25%20in%202020

 1201 Maryland Avenue SW
 202.962.9200 #

 Suite 900
 202.488.6301 #

 Washington DC 20024
 bio.org

Cameron Lapine

'rom:Michelle Slack <khrisma888@gmail.com>Sent:Sunday, April 10, 2022 10:13 PMTo:Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron LapineSubject:Please Support HB 1379

Dear committee members please support this Bill HB 1379 Thank you

⁴ rom: Sent: To: Subject: MICHAEL O'BRIEN <obie6_7@msn.com> Monday, April 11, 2022 10:10 AM Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine SUPPORT—HB 1379,

St 9:10 a.m.—SUPPORT—<u>HB 1379</u>, relative to the department of health and human services' rule making authority regarding immunization requirements. This bill would remove authority from the Executive Department of Health and Human Services to determine what vaccines children must receive to go to school, and restore the Legislature's sole authority as the lawmaking branch of government to determine what vaccines ought to be required (religious and medical exemptions in other laws would still apply). The sponsor will be presenting a "clean" amendment that removes varicella from statute. Please ask that the committee adopt this amendment.

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Michael O'Brien Sunapee

،om:	Julia Beame <juliabeame@hotmail.com></juliabeame@hotmail.com>
Sent:	Tuesday, April 12, 2022 8:14 PM
То:	Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject:	SUPPORT HB 1379

Dear Senate Health & Human Services Committee Members,

The legislature, the representatives of the people, should determine what vaccines ought to be required for children to go to school...not un-elected officials in the department of Health and Human Services. Religious and medical exemption laws need to remain in effect.

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Please adopt the sponsor's amendment to HB 1379 that removes varicella from statute.

Thank you, Julia Beame Hancock, NH

om: Sent: To: Subject: David Cope <davidcope2000@hotmail.com> Tuesday, April 12, 2022 11:20 PM Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine SUPPORT HB 1379

Dear Senate Health & Human Services Committee Members,

The legislature, the representatives of the people, should determine what vaccines ought to be required for children to go to school...not un-elected officials in the department of Health and Human Services. Religious and medical exemption laws need to remain in effect.

Please adopt the sponsor's amendment to HB 1379 that removes varicella from statute.

Thank you, David Cope Hancock, NH

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hom:	Anthony Ferrantello <ajfnino@gmail.com></ajfnino@gmail.com>
	Wednesday, April 13, 2022 8:23 AM
То:	Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject:	Oppose HB1379 as Amended by House

This bill is badly amended by the House and should be opposed if left as is. Please utilize Jim Kofalt's amendment language in lieu of questionable language as amended by the House. Thank you,

Anthony Ferrantello Keene



Lori A. Shibinette Commissioner

Patricia M. Tilley Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

BUREAU OF INFECTIOUS DISEASE CONTROL

29 HAZEN DRIVE, CONCORD, NH 03301 603-271-4496 1-800-852-3345 Ext. 4496 Fax: 603-271-0545 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

Testimony for HB 1379 Relative to the department of health and human services' rulemaking authority regarding immunization requirements. Senate Health and Human Services April 13, 2022

Dear Chairman Bradley and Members of the Committee:

The Department is in opposition to HB1379 as amended.

Immunization is considered one of the most important public health achievements of the last century. Vaccines have prevented millions of illnesses, disabilities, and deaths in the United States.

The Department has significant concern about the public health impact of HB1379 as amended as it unnecessarily places limits on the commissioner of health and human services authority to adopt new immunization requirements. If HB1379 as amended were enacted, the department would need to obtain a 3/5 vote by the legislative oversight committee on health and human services in order to adopt a new school and child care immunization requirement and be further required to procure a statute change in order to continue the school and child care entry vaccine requirements beyond a 20 month period. Additionally, HB1379 permits new requirements to be brought to the committee only one time per communicable disease. This is problematic as the prevalence and severity of communicable diseases is not constant and would tie the hands of the commissioner from acting in the best interest to protect public health.

Currently RSA 141-C:20-a Immunization provides the DHHS commissioner with authority to adopt rules relative to which diseases require vaccination prior to school and child care entry. The administrative rules that specify these required vaccinations are He-P 301 Communicable Diseases. Under current law, children may be declared exempt from the requirements for medical or religious reasons. Philosophical objection is not permissible. The medical and religious exemption rate is New Hampshire is low (approximately 1%), however, there are some pockets of the state with higher exemption rates and outbreaks have occurred in schools in these areas. Schools and childcare providers are responsible for enforcing entry requirements. DHHS provides information and education to schools and childcare providers and monitors compliance through aggregated data collection. **The Department believes that the current statute which allows the Commissioner of Health and Human Services to make changes through administrative rule provides sufficient oversight and input through requiring the** Chairman Bradley April 13, 2022

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department to seek stakeholder input and legislative approval from the Joint Legislative Committee on Administrative Rules.

Immunization is considered one of the most important public health achievements of the last century. Safe and effective immunizations have prevented millions of illnesses, disabilities, and deaths in the United States. Immunization has led to eradication of disease like Smallpox, and historic low numbers of infectious disease cases like measles, hepatitis B, and certain bacterial infections, to name some examples. Despite this success, vaccine-preventable diseases, such as measles, mumps, and whooping cough (pertussis), continue to circulate and infect children resulting in hospitalizations and deaths every year. Vaccine coverage is not 100% nor are vaccines 100% effective so outbreaks can occur when an unvaccinated person becomes infected and introduces the disease into a community, especially those with low vaccination rates. It is essential that the Department retain its authority and oversight over school and child care entry requirements to prevent communicable diseases.

Currently, vaccination against 17 diseases is recommended during childhood and adolescence by the national Advisory Committee on Immunization Practices (ACIP). Any Administrative Rules process to add additional requirements involves feedback from the public and legislative concurrence through the Joint Legislative Committee on Administrative Rules (JLCAR). Not all vaccines recommended for children are required for school and childcare entry in New Hampshire. Of the 17 recommended vaccines, vaccination against 7 diseases (Diphtheria, Mumps, Pertussis, Poliomyelitis, Rubella, Rubeola, and Tetanus) is required by law (RSA 141-C:20) in New Hampshire, with an additional 2 (Hepatitis B and Varicella) required for school entry and 3 (Hemophilus Influenza Type B, Hepatitis B and Varicella) required for childcare entry by administrative rule (He-P 301). The Department of Health and Human Services does not require vaccination against any diseases that do not meet the definition of "communicable" in RSA 141-C:20.

There are several ACIP recommended vaccines that are not required for New Hampshire school and childcare entry, including those against human papilloma virus (HPV), meningococcal disease, pneumococcal disease, hepatitis A, rotavirus, influenza and COVID-19. While the Department does not intend at this time to add any new immunization requirements to protect against these communicable diseases, maintaining the Commissioner's authority to adopt rules is necessary to protect the health and safety of New Hampshire residents.

Prior to adopting new immunization requirements the Commissioner, in collaboration with state epidemiologist, medical providers and subject matter experts, carefully reviews childhood vaccine recommendations and key criteria including vaccine efficacy, vaccine safety (including side effects), severity of disease, likelihood of infection and method of transmission in order to determine which vaccines if any should be required for school and childcare entry. Following this process has worked well for the state and the Department has infrequently made changes to the vaccine requirements for school and child care entry. It has been more than seven years since the last two changes (Hepatitis B 1996 and Varicella 2003). No objections to the existing entry requirements were received during the public comment period for those two changes. While changes are infrequent, it is critical that the department maintain its authority to change requirements though administrative rule so changes can be made more quickly to protect the

Chairman Bradley April 13, 2022

public's health in the event of a new public health threat or the availability of a new vaccine. The ability for the Commissioner to adopt new childcare or school requirements in order to protect public health is an essential. Adopting new requirements under administrative rule (He-P 301) has been shown to safely and effectively protect NH's children from diseases that can lead to severe illnesses, disabilities, and deaths.

The Department is also opposed to HB1379 as it does not include Hepatitis B and Hemophilus Influenza Type B in the list of diseases identified in this statute. The Department believes that Hepatitis B and Hemophilus Influenza Type B to be included as the public health protection of children should not unnecessarily be placed at risk of having a June 30, 2026 expiration date.

Hepatitis B is a communicable virus transmitted through exposure to body fluids such as blood and saliva. Transmission can occur through contact between the eyes, mouth, or broken skin and hands, surfaces, or other objects contaminated with blood; the virus can remain infectious for at least 7 days on environmental surfaces and is transmissible even in the absence of visible blood. Most people infected with hepatitis B recover but some go on to develop chronic infection, which can result in liver cirrhosis and cancer. Two billion people in the world are infected with hepatitis B, and in the United States, 4-5,500 people die of hepatitis B-related liver cirrhosis and cancer each year. Historically, vaccinating only individuals at highest risk for hepatitis B (e.g. healthcare workers, dialysis patients, etc.) was the accepted approach, but disease incidence remained the same 10 years after implementation of these recommendations. The approach was revised to include routine hepatitis B vaccination for all infants and young children, a successful approach that has resulted in decreased disease incidence, virtually eliminating it in individuals less than 19 years of age. While rare, outbreaks of hepatitis B have been reported in school and childcare settings. Removal of the school and child care entry requirement could result in an increased number of unvaccinated children being enrolled in these communal settings, which are at high-risk for outbreaks, and children would be at greater risk for hepatitis B infection.

Haemophilus influenzae is a communicable bacterium that can cause severe infections, particularly among infants. Before introduction of effective vaccines in 1985, an estimated 20,000 infections and 1,000 deaths occurred each year in the United States. One strain of Haemophilus influenzae, type b (Hib), was the leading cause of bacterial meningitis among children younger than 5 years of age with one in 200 children in this age group developing invasive infections. Hearing impairment or other long-term neurologic damage occurs in 15%-30% of survivors and 3%-6% die, despite appropriate antimicrobial therapy. Incidence of Hib has decreased significantly following introduction of the Hib vaccine with just 40 cases reported in the United States in 2014. If the child care entry requirement were removed in New Hampshire, an increased number of unvaccinated children could be enrolled in these communal settings, which are at high-risk for outbreaks, and the children most vulnerable to these infections would be at greater risk for severe infection, meningitis, hearing loss, and death.

The Department opposes HB 1379. The existing statute and corresponding administrative rules provide public health protection while appropriately balancing individual and parental choice, legislative input, and the goal of keeping children enrolled in school while protecting the health of all children.

Chairman Bradley April 13, 2022

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Respectfully Submitted,

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Patricia Tilley, MS Ed Director, Division of Public Health Services

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Anne Marie Mercuri BSN, MPH Chief, Immunization Section

rom:Joyce McNeel <jImcneel@comcast.net>Sent:Wednesday, April 13, 2022 9:47 AMTo:Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron LapineSubject:HB1379

A.

Dear committee members,

I respectfully ask each of you too oppose HB1379 as amended by the House. I have concerns about the specifics on the commissioners powers and HHS oversight committee. I believe we should remove the commissioner's authority. Additionally, we absolutely don't want to add vaccines to statute.

Thank you for your consideration,

Joyce McNeel

Voting Sheets

Senate Health and Human Services Committee EXECUTIVE SESSION RECORD

2021-2022 Session

Bill # HB 1379

Hearing date: 4-13-22

Executive Session date: 4-13-22

Motion of: Amendment	0943	h	Vote	-3-3
Committee Member	Present	Made by	Second	Yes No
Sen. Bradley, Chair				
Sen. Gray, Vice Chair	<u>ک</u>	>		
Sen. Avard	<u> </u>		<u> </u>	
Sen. Sherman	<u>r</u>			
Sen. Whitley:	<u> </u>			
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Motion of: IS			Vote	3-2
Committee Member	Present	Made by	Second	Yes No
Sen. Bradley, Chair				and a second
Sen. Gray, Vice Chair			<u> </u>	
Sen. Avard				
Sen. Sherman		×		
Sen: Whitley	<u> </u>		<u> </u>	
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Motion of:			Vote	
Committee Member	Present	and the second		Yes No
Sen. Bradley, Chair				
Sen. Gray, Vice Chair				
Sen. Avard				
Sen. Sherman				
Sen. Whitley			1. A.	

Reported out by: Sen. Bradley

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Notes:

Committee Report

STATE OF NEW HAMPSHIRE

SENATE

REPORT OF THE COMMITTEE

Wednesday, April 13, 2022

THE COMMITTEE ON Health and Human Services

to which was referred HB 1379

AN ACT

relative to the department of health and human services' rulemaking authority regarding immunization requirements.

Having considered the same, the committee recommends that the Bill

BE REFERRED TO INTERIM STUDY

BY A VOTE OF: 3-2

Senator Jeb Bradley For the Committee

Sonja Caldwell 271-2117

HEALTH AND HUMAN SERVICES

HB 1379, relative to the department of health and human services' rulemaking authority regarding immunization requirements.

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Interim Study, Vote 3-2. Senator Jeb Bradley for the committee.

General Court of New Hampshire - Bill Status System

Docket of HB1379

Docket Abbreviations

Bill Title: relative to the department of health and human services' rulemaking authority regarding immunization requirements.

Official Docket of HB1379.:

Date	Body	Description
12/1/2021	Н	Introduced 01/05/2022 and referred to Health, Human Services and Elderly Affairs
2/3/2022	Н	Public Hearing: 02/14/2022 10:45 am LOB 210-211
3/1/2022	Н	Executive Session: 03/08/2022 09:30 am LOB 210-211
3/9/2022	Н	Committee Report: Ought to Pass with Amendment #2022-0844h (Vote 12-9; RC)
3/20/2022	Н	Amendment #2022-0844h : AA VV 03/16/2022 HJ 7
3/20/2022	Н	Ought to Pass with Amendment 2022-0844h: MA RC 169-164 03/16/2022 HJ 7
3/22/2022	S	Introduced 03/17/2022 and Referred to Health and Human Services; SJ 6
4/7/2022	S	Hearing: 04/13/2022, Room 100, SH, 09:10 am; SC 15
4/13/2022	S	Committee Report: Referred to Interim Study, 04/21/2022; SC 16
4/21/2022	S	Refer to Interim Study, MA, VV; 04/21/2022; SJ 9

NH House

NH Senate

Other Referrals

Senate Inventory Checklist for Archives

Bill Number: HB 1379

Senate Committee: 1115

Please include all documents in the order listed below and indicate the documents which have been included with an "X" beside

ڬ 🛛 Final docket found on Bill Status

Bill Hearing Documents: {Legislative Aides}

- **Solution** Bill version as it came to the committee
- 📥 🛛 All Calendar Notices
- \leq Hearing Sign-up sheet(s)
- Yepared testimony, presentations, & other submissions handed in at the public hearing
- <u>X</u> Hearing Report
- Revised/Amended Fiscal Notes provided by the Senate Clerk's Office

Committee Action Documents: {Legislative Aides}

All amendments considered in committee (including those not adopted):

_____- - amendment # _______ - amendment # ______

Executive Session Sheet

Committee Report

Floor Action Documents: {Clerk's Office}

All floor amendments considered by the body during session (only if they are offered to the senate):

_____ - amendment # ______ - amendment # ______

_____- - amendment # _______ - amendment # ______

Post Floor Action: (if applicable) {Clerk's Office}

<u>Committee of Conference Report (if signed off by all members. Include any new language proposed</u> by the committee of conference):

____ Enrolled Bill Amendment(s)

_____ Governor's Veto Message

All available versions of the bill: {Clerk's Office}

as amended by the senate

as amended by the house

_____ final version

Completed Committee Report File Delivered to the Senate Clerk's Office By:

Committee Aide

Date

Senate Clerk's Office