

# Vaccine-Related Bills Reach Record High in US

Analysis by The NVIC Advocacy Team

November 17, 2022

## STORY AT-A-GLANCE

- › More vaccine-related legislation has been filed in state legislatures across the U.S. in 2022 than in any other year
- › During the 2022 legislative session, NVIC analyzed, tracked and issued positions on an unprecedented 875 vaccine-related bills in 44 states and the District of Columbia
- › This was the highest number of bills monitored in the history of NVIC's state-based legislative advocacy program, which was established in 2010; it's close to four times the number of vaccine-related bills proposed in a single year in state legislatures
- › The 2022 legislative session featured 475 bills worthy of NVIC's support; another 214 bills were marked as a bill to "watch;" these may have been well-intentioned but contained problems that could be fixed with amendments
- › No state legislatures passed bills with COVID-19 mandates or mandating any type of vaccine; 25 states passed some form of protective language that prohibits COVID-19 vaccine passports or COVID-19 vaccine mandates in some capacity
- › Now more than ever, it is critical that people continue to be involved in the legislative process at all levels of city, county, state and federal government

***Record Breaking 475 Bills Worth Supporting  
in State Legislatures this Year***

More vaccine related legislation has been filed in state legislatures across the country in 2022 than in any other year.

The COVID-19 pandemic has proven to be an historic opportunity to inspire active citizen involvement in the law making process and educate state legislators about the urgent need to protect the human and legal right to exercise voluntary, informed consent to vaccination.

After more than a decade of grassroots organizing and focused public education efforts in the states, this year NVIC's 2022 Annual Report on U.S. State Vaccine Legislation provides evidence the tide is finally turning in our 40-year mission to prevent vaccine injuries and deaths through public education and secure vaccine informed consent protections in U.S. public health policies and laws.

## **2022 Session Has Most Vaccine Related Bills**

The nonprofit educational charity [National Vaccine Information Center \(NVIC\)](#) reports that during the 2022 legislative session, NVIC analyzed, tracked and issued positions on an unprecedented 875 vaccine related bills in 44 states and the District of Columbia (D.C.) through the [NVIC Advocacy Portal](#).

This was the highest number of bills monitored in the history of NVIC's state-based legislative advocacy program, which was established in 2010, and it is close to four times the number of vaccine-related bills proposed in a single year in state legislatures.

total vaccine related bills

Since its establishment in 1982, NVIC has provided well-referenced, accurate information to the public about vaccine science, policy, and law and defended the ethical principle of informed consent to medical risk taking. NVIC does not make vaccine use recommendations.

NVIC is opposed to mandatory vaccination and also has worked with families and state legislators to retain or secure flexible medical, religious and conscientious belief

exemptions in existing U.S. public health policies and laws.

In 2010, NVIC launched the [NVIC Advocacy Portal](#) (NVICAP), a free online vaccine choice advocacy network, for the purpose of securing and defending informed consent protections in U.S. vaccine policies and laws. Over the last 13 years, the NVIC Advocacy Program has analyzed, tracked, and issued positions on 2,471 vaccine-related bills.

NVICAP staff work collaboratively and share legislative information with U.S. health freedom groups and individuals supporting NVIC's four-decade call for the protection of vaccine informed consent rights in America.

The NVIC Advocacy Portal team, which includes volunteer NVIC Advocacy state directors and mission aligned groups, work with families and enlightened health care professionals to educate legislators and protect vaccine informed consent rights by advocating for voluntary vaccination and working to retain or secure flexible medical, religious and conscientious belief vaccine exemptions in existing public health laws.

NVIC issues action alerts and distributes them through email, online posts, social media, and our text alert program. The NVIC Advocacy Team provides referenced, accurate vaccine information and talking points for NVICAP users to educate legislators.

When this report was written in early November 2022, some states still had active vaccine-related bills filed for 2022, or their respective legislative sessions were in recess but still could be reactivated to work on bills. Other states have bills that will carry over until next session. For these reasons, it is especially important for registered users of the Portal to check it regularly because last minute legislative activity requiring your action is still possible.

Information about bills referenced in this report are published on the [NVIC Advocacy Portal](#). Registered users can obtain a more detailed bill analysis, including current status, as well as NVIC's position on each bill, along with any recommended action. Bills that display as a default are the bills that are current for this year.

However, selecting the view to display expired bills will show all other bills selected for inclusion on the Portal since 2010. This provides a unique and historical perspective not offered on any other website.

Some bills published on the NVICAP also contain language that falls outside of NVIC's mission. Bill analysis and NVIC positions published on the Portal are focused on sections that fall within NVIC's mission.

## **Far More Bills Worth Supporting Than Opposing in 2022**

The 2022 legislative session featured 475 bills worthy of NVIC's support, which means that this year NVIC supported more vaccine-related bills posted on the NVICAP than during any legislative session since NVIC launched the Advocacy Portal in 2010. Only 186 bills out of the 875 tracked on the portal were marked as bills that should be opposed.

2022 marks the second consecutive year in which NVIC supported more vaccine-related bills than we opposed and, this year, there were more than twice as many good vaccine bills introduced in state legislatures than bad ones. The ratio of bills supported to bills opposed has grown to more than 2.5 to 1.

nvicap supported legislation increases

There were 214 bills tracked on NVICAP in 2022 that were marked as a bill to "watch." This is usually done because our analysis indicates the bill may have been well-intentioned and even may have had sections worth supporting, but contained problems that could be fixed with amendments.

Sharing this information resulted in many positive changes to bills, as constituents used this information to share with their legislators. Legislators and staff also reached out to NVIC Portal staff for insight into how they could amend their bills to earn NVIC's support.

nvic advocacy portal activity 2002 total 875

When comparing the number of bills NVIC supported to those NVIC opposed, an impressive 32 states had more bills filed that were worthy of supporting than opposing. Of those 32 states, nine states had no opposition bills filed at all: Colorado, Indiana, Kansas, Kentucky, Oklahoma, Oregon, South Dakota, Tennessee, and Washington.

Only five states filed more bills that NVIC opposed than supported: California, Hawaii, Massachusetts, New York, and Pennsylvania. The District of Columbia was the only location in the U.S. where NVIC opposed all vaccine-related bills and supported none.

This shows us that the majority of states have legislators, who are listening to constituent concerns. These conscientious lawmakers have responded to the unprecedented infringement on human rights and civil liberties that many Americans have endured during the federal COVID pandemic response.

State legislatures in Arkansas and New Mexico were the only ones in active session this year where no vaccine related bills were filed. Connecticut, Utah and Maine had no vaccine related bills designated for NVIC support or opposition, only watching. Montana, Nevada, North Dakota, and Texas have biennial legislative sessions and did not hold a session in 2022, as their sessions are held in odd numbered years.

majority percentage of bills filed per state by nvic position

## Highlights From 2022 Enacted Bills

There are some significant and positive take away points from the 2022 legislative session:

**No state legislatures passed bills with COVID-19 mandates** — However, 13 states had bills that tried to enact COVID-19 vaccine mandates for some part of their population; expressly gave legislative clearance to certain entities to mandate, or tried to remove restrictions on mandates already passed.

These states are: California, Florida, Idaho, Illinois, Louisiana, Massachusetts, Minnesota, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Wyoming. Fortunately, none of these bills passed. The D.C. Council did however pass [District of Columbia B24-0423](#) to mandate COVID-19 vaccines for all public, private and parochial school students.

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**No state legislature passed any bills mandating any type of vaccine** — This is big news considering in previous years we have seen legislative mandates for many other vaccines.

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**No state legislature passed a bill giving minors the legal authority to consent to vaccination on their own without the knowledge or consent of their parents** — California, Louisiana, Massachusetts, Minnesota, New Hampshire, New Jersey, New York, Pennsylvania, South Carolina, Vermont, and Wisconsin had bills that tried to add minor consent in some capacity.

The biggest win in this category was the defeat of [California SB 866](#), which would have allowed minors age 15 and older to consent to vaccination without obtaining permission from their parents. This bill passed the California Senate, but it was stopped in the California Assembly. The D.C. Council passed a couple of bills allowing certain minors to consent to vaccines, but all state legislatures stopped all minor consent bills.

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**The majority of COVID-19 related bills that passed protect liberty** — There were 28 bills that passed which specifically named COVID-19 related disease control measures, but 23 of them had provisions specifically prohibiting COVID vaccine mandates or vaccine passports and protecting informed consent rights. Only five of the 28 COVID-19 related bills were opposed by NVIC.

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**25 states have passed some form of protective language that prohibits COVID-19 vaccine passports or COVID-19 vaccine mandates in some capacity** when bills that [passed in 2021](#) are combined with the bills that passed in 2022.

These states are: Alabama, Alaska, Arkansas, Arizona, Florida, Georgia, Iowa, Indiana, Kansas, Kentucky, Louisiana, Michigan, Missouri, Mississippi, Montana, New Hampshire, North Carolina, North Dakota, Ohio, Oklahoma, South Carolina, Tennessee, Texas, Utah, and West Virginia.

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**21 states in the U.S. now prohibit forcing students to get COVID shots as a requirement to attend school, and an additional three states prohibit COVID vaccine mandates for students under 12 years old as a condition for attending school by way of [legislative and executive action in 2021 and 2022](#).**

This is especially important in consideration of concerns brought up by the recent [addition of the COVID-19 vaccine to the childhood vaccine schedule](#) by the Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control (CDC).

These 21 states are: Alaska, Arkansas, Arizona, Florida, Georgia, Idaho, Indiana, Iowa, Kansas, Michigan, Mississippi, Missouri, Montana, Nebraska, New Hampshire, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, and West Virginia. The ban limited to students under 12 years old applies in North Dakota, Ohio, and Utah.

The bills that were passed in three states prohibiting COVID vaccine mandates for children under age 12 specify the ban applies to mandates of Emergency Use Authorization (EUA) vaccines only and, since there are currently [no COVID-19 vaccines licensed for children under 12](#), mandates for children under 12 are prohibited.

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## 2022 Enacted Bills

Out of the 55 vaccine-related bills that were enacted in 2022, NVIC supported 19, opposed 18, and watched 18. Of the 18 watched bills, 14 included some positive elements worthy of support and two were watched because the parts that were opposed were successfully removed before the bills passed.

## total bills passed in 2022

The breakout and analysis of vaccine-related bills that passed in these different categories identifies trends across the states. This serves as a guide to educating state legislators and communities in 2022, and it shows why it is so important to speak up and protect vaccine informed consent rights.

Now more than ever, it is critical that people continue to be involved in the legislative process at all levels of city, county, state, and federal government, which includes learning where candidates stand on issues important to your family and voting accordingly, and continuing to educate legislators, your governor, and local officials in order to protect informed consent and reject discrimination, segregation and forced vaccination.

Your voices are making a huge difference as you can see in this report, including all the positive bills that were passed protecting informed consent rights listed below. NVIC has grouped the bills that passed, which NVIC supported, into the following categories:

Prohibiting COVID-19 Mandates or Passports	Prohibiting Discrimination over COVID-19 Vaccine Status
Adding or Expanding Exemptions to COVID-19 Mandates	Acknowledging Natural Immunity
Improving Vaccine Exemptions and Limiting Mandates other than COVID	Prohibiting Discrimination based on any Vaccination Status
Limiting Emergency Powers	Limiting and Eliminating Vaccine Tracking

Some bills may be included in multiple categories.

## **Prohibiting COVID-19 Vaccine Mandates or Passports**



Businesses and state and local government entities go too far when they require patrons, employees, or citizens to receive injections of biological products that can injure or kill them and have unknown future consequences.

People need the protection granted by laws when government entities or private business violate informed consent rights, such as requiring use of a pharmaceutical product, which carries known and unknown risks that can be greater for some people, as a condition of holding a job or getting a school education.

There were 14 bills passed in this legislative session that affected 11 states and prohibited COVID-19 vaccine mandates or vaccine passports, which NVIC supported or contained sections that NVIC supported.

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**Arizona HB 2498** — Prohibits government entities from requiring COVID-19 vaccination, except healthcare institutions owned or operated by the state.

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**Arizona HB 2371** — Prohibits government entities from requiring children to receive a COVID-19 vaccine without parental consent.

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**Arizona HB 2086** — Prohibits the Arizona Department of Health Services director from mandating the COVID-19 vaccine for children to attend school.

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**Georgia SB 345** — Prohibits state and local governmental entities and schools from requiring proof of COVID-19 vaccination for services.

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**Iowa HF 2298** — Prohibits COVID-19 vaccine mandates for childcare, school and college until July 1, 2029.

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**Indiana HB 1001** — Prohibits government entities from requiring vaccine passports with exceptions and allows employers to mandate COVID-19 vaccines with limited exemptions. (Also posted in "Adding Exemptions to COVID-19 Mandates")

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**Michigan HB 5783** — Prohibits requiring proof of COVID-19 vaccination and provides privacy protection in a Department of Agriculture and Rural Development Budget bill.

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**Missouri HB 1606** — Prohibits political subdivisions including cities, towns, villages, schools, etc. from mandating COVID-19 vaccines for employment, but this does not apply to healthcare facilities or ambulance services.

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**Mississippi HB 1509** — Prohibits state agencies from refusing service or discriminating against a person based on COVID-19 vaccination status (with some exceptions), and prohibits COVID vaccine mandates for school attendance. (Also posted in “Prohibiting Discrimination over COVID-19 Vaccine Status”)

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**New Hampshire HB 1455** — Prohibits state and local enforcement of federal COVID-19 vaccine mandates with a health care facility exception.

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**New Hampshire HB 1495** — Prohibits governmental entities from forcing businesses to require proof of any vaccination including COVID and prohibits passports demonstrating evidence of “immunity.” (Also posted in “Improving Vaccine Exemptions and Limiting Mandates Other than COVID”)

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**South Carolina H 3126** — Prohibits the state and schools from mandating COVID-19 vaccine, allows payment of unemployment benefits for fired employees, and prohibits discrimination against persons who have not received COVID vaccine in public accommodations. (Also posted in “Prohibiting Discrimination over COVID-19 Vaccine Status”)

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**Tennessee SB 1884** — Prevents sections of a current good law passed in 2021, which prohibits government COVID vaccine mandates, from expiring on July 1, 2023.

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**West Virginia HB 4012** — Prohibits requiring COVID-19 vaccination for entry to state entities and hospitals unless the federal government requires it.

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## **Prohibiting Discrimination Over COVID-19 Vaccine Status**

It isn't enough to protect the legal right to exercise informed consent in the vaccine decision making process and to prohibit vaccine mandates. An employer, the government, or a business should not be able to legally discriminate against you and retaliate for declining a vaccine you have decided you don't want or need.

Some states, which have prohibited employer vaccine mandates or required exemptions to employer vaccine mandates, have seen employers make working conditions so miserable for an employee declining a vaccine that the protections in place for allowing employees to exercise informed consent to vaccination do little good. Anti-discrimination provisions must accompany legal protections prohibiting mandates.

There were eight bills passed in seven states that prohibited aspects of discrimination tied to COVID-19 vaccine status, which NVIC supported or contained sections that NVIC supported.

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**Arizona SB 1494** — Prohibits disqualifying individuals for unemployment benefits if they are fired for refusing a COVID-19 vaccine.

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**Missouri SB 710** — Prohibits taking organ donor and recipient COVID-19 vaccination status into consideration during the organ transplant process, with exclusions for lung transplants.

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**Missouri HB 2331** — Prohibits taking organ donor and recipient COVID-19 vaccination status into consideration during organ transplant process, with exclusions for lung transplants.

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**Mississippi HB 1509** — Prohibits state agencies from refusing service or discriminating based on COVID-19 vaccination status, with some exceptions, and prohibits COVID vaccine mandates for school attendance. (Also posted in "Prohibiting COVID-19 Vaccine Mandates or Passports")

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**New Hampshire HB 1003** — Prohibits most healthcare providers from discriminating against patients based on their vaccination status. (Also posted in "Prohibiting

## Discrimination Based on Vaccination Status for Any Vaccine")

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**South Carolina H 3126** — Prohibits the state and schools from mandating COVID-19 vaccines, allows unemployment for employees fired, and prohibits discrimination in public accommodations. (Also posted in "Prohibiting COVID-19 Vaccine Mandates or Passports")

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**Tennessee SB 568** — Prohibits discrimination based on COVID-19 vaccination status for placement on transplants and organ waiting lists.

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**Wyoming HB 82** — Ensures that Wyoming state benefits for veterans include those discharged for refusing a COVID-19 vaccine.

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## Adding or Expanding Exemptions to COVID-19 Mandates

There is legitimate concern that when state legislatures add exemptions to vaccine mandates in adult workplaces, the act of adding the exemption into state law is de facto state government endorsement of private businesses requiring vaccination as a condition of employment. Informed consent rights are violated when the government condones — or even encourages — corporations and private businesses to require vaccination as a condition of employment.

While NVIC is opposed to vaccine mandates in state law, state legislatures, which have codified and expanded vaccine exemptions, have helped many people who don't want a COVID-19 vaccine keep their jobs, stay in school, or continue to receive government services.

This legislative session, there were five bills in five states, which added or expanded vaccine exemptions related to some aspect of COVID-19 vaccine mandates.

- **Indiana HB 1001** — Prohibits government entities from requiring vaccine passports, with exceptions, and allows employers to mandate COVID-19 vaccine, with limited

exemptions. (Also posted in "Prohibiting COVID-19 Vaccine Mandates or Passports")

- [Michigan SB 845](#) — Requires community colleges that mandate COVID vaccine and receive certain funds to provide exemptions – in an Education Budget bill.
- [Nebraska LB 906](#) — Requires certain employers to allow for medical and religious exemptions to COVID-19 vaccine requirements for employment.
- [Tennessee SB 1823](#) — Requires employers mandating proof of COVID-19 vaccination to grant medical and religious exemptions.
- [Utah HB 63](#) — Requires employers mandating COVID-19 vaccines to allow exemptions, with some exceptions.

## Acknowledging Natural Immunity

Naturally acquired immunity from previous infection has long been recognized as being superior to vaccine acquired artificial immunity. The greater ability of natural immunity to prevent infection compared to the inability of [COVID-19 vaccine](#) to reliably prevent infection, has been acknowledged.

While it is NVIC's position that employers should not be permitted to mandate vaccination as a condition of employment, the acceptance of natural immunity derived from a previous SARS-CoV-2 infection in lieu of receiving COVID vaccine will help some people subjected to current employer mandates keep their jobs. Tennessee passed a bill requiring natural immunity to be recognized.

- [Tennessee HB 1871](#) — Prohibits entities from adopting COVID vaccine mandates that fail to recognize naturally acquired immunity.

## Improving Exemptions and Limiting Mandates Other Than COVID

Vaccination should be an opt-in process that allows people the freedom to make informed choices without threats, coercion, or any kind of societal sanction or

punishment. Individuals should be able to exercise informed consent to use a pharmaceutical product or medical intervention that carries a risk without having to file an exemption or jump through other bureaucratic hoops, such as formally opting-out of vaccine mandates and government operated electronic vaccine tracking systems.

New Hampshire passed one bill to lower the legal burden of obtaining a notarization on vaccine exemptions for school children and another bill to prevent government entities from requiring businesses to limit access based on vaccination status with any vaccine which would include the COVID-19 vaccine.

- [New Hampshire HB 1035](#) — Removes the notarization requirement for religious vaccine exemption requests for school vaccine mandates.
- [New Hampshire HB 1495](#) — Prohibits governmental entities from forcing businesses to require proof of any vaccination and prohibits passports demonstrating evidence of “immunity.” (Also posted in “Improving Vaccine Exemptions and Limiting Mandates Other than COVID”)

## **Prohibiting Discrimination by Shot Status for Any Vaccine**

It is a welcomed change that some legislatures are starting to make progress on enacting the prohibition of discrimination based on vaccination status. These Florida and New Hampshire bills recognize that people were being penalized over their vaccination status in specific areas and put an end to it. Filing and passing more bills like these is a high priority.

- [Florida SB 988](#) — Prohibits healthcare facilities from preventing visitation of in-patients based on a visitor’s vaccination status.
- [New Hampshire HB 1003](#) — Prohibits most healthcare providers from discriminating against patients based on their vaccination status. (Also posted in “Prohibiting Discrimination over COVID-19 Vaccine Status”)
- [New Hampshire HB 1280](#) — Prohibits using parents' decisions not to vaccinate their children as evidence in any legal proceeding to terminate parental rights.

## Limiting Emergency Powers

Legislation that prohibits vaccine mandates through exercise of emergency powers by public health officials is another high priority, especially for COVID-19 vaccine, a vaccine that **does not reliably prevent transmission, severe illness or deaths**. **Virginia SB 431** falls short of this, but at least it recognizes that overzealous quarantine policies hurt children by keeping them out of school for far too long. The bill is a small step in the right direction.

- **Virginia SB 431** — Requires the Board of Education and the Department of Health to recommend options and alternatives to the quarantining of the COVID positive students and employees of public schools.

## Limiting and Eliminating Vaccine Tracking

NVIC has opposed the mandatory inclusion of Americans in government operated electronic vaccine and health records tracking systems since the 1990s. Once personal medical information is put into a state government database, federal law allows that information to be shared without knowledge or consent for conducting public health surveillance, investigations, research, or interventions and for public health purposes.

See **45 CFR 64.512(b)(2)** and see **a list of core data elements** that can be gathered and included in electronic vaccine tracking registry systems.

Forced inclusion, forced reporting, and opt-out (rather than opt-in) electronic vaccine tracking registries and mandatory vaccination systems continue to threaten the medical privacy of citizens and their legal right to decline vaccines without being subjected to coercion or societal sanctions.

NVIC is prioritizing legislation that includes opt-in informed consent protections in vaccine tracking registries, as New Hampshire did with **HB 1606**, and removes public funding for vaccine registries that do not include opt-in informed consent protections.

- **Arizona SB 1346** — Prohibits state employees and contractors from inquiring about a person's vaccination status while making door-to-door home contact with residents.
- **New Hampshire HB 1606** — Requires individuals to give opt-in consent for their information to be included in the state's electronic vaccine tracking registry.
- **New Hampshire HB 1608** — Requires the health department to conduct a public information campaign to inform people that if their COVID-19 vaccine status information has been entered into the state's electronic vaccine tracking registry without their knowledge or consent, it can be removed.
- **New Hampshire HB 1488** — Expands the entities that are prohibited from discriminating against individuals who decline to be included in the state's electronic vaccine tracking registry.

## **WINS: Bills NVIC Initially Opposed but Changed for the Better**

There were multiple bills this session, which NVIC originally opposed, that were amended in response to NVIC's concerns. There were three bills, which ultimately passed with amendments that completely removed sections that NVIC had opposed.

- **California AB 1102** — Is a bill concerning telemedicine, but the proposed offensive amendment to allow employers to mandate COVID-19 vaccines for employees was not adopted.
- **California SB 1302** — Initially would have provided additional funding for vaccines at school health centers. This provision was removed from the bill before it passed, but the bill was ultimately vetoed.
- **Connecticut SB 457** — As amended, removes the expiration date for medical assistant education requirements. NVIC opposed the bill's language that would have expanded the vaccine tracking registry and mandated that people of all ages be included in it. That provision was removed from the bill before it passed.



## Opposed Bills That Passed

Out of 186 bills filed, which NVIC opposed, all but 18 were killed. The negative vaccine-related bills, which did pass in the 2022 legislative session, were confined to eight states and the District of Columbia.

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**California SB 1419** — Prohibits parents from accessing the vaccination records of their minor children for any vaccine in which California law allows a minor child to consent.

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**California AB 2098** — Subjects doctors to medical board discipline and loss of licensure for providing COVID-19 advice or treatment that does not conform with “scientific consensus.”

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**California AB 1797** — Mandates reporting of race and ethnicity to the state electronic vaccine tracking system and assessments by schools and county human services, and mandates the reporting of the vaccination status for California residents of all ages.

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**District of Columbia B24-0891** and **District of Columbia B24-0890** — Both allow certain minors to consent to vaccines without parental consent and allows doctors and other vaccine providers to vaccinate minors after a failed “reasonable” attempt to obtain parental consent.

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**District of Columbia B24-0423** — Mandates COVID-19 vaccines for all public, private and parochial school students and mandates reporting.

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**District of Columbia B24-0920** — Requires the DC Department of Health to report to the DC Council on the numbers of unvaccinated public school students and on efforts to increase compliance with vaccine mandates.

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**Delaware SB 253** — Allows nursing homes and assisted living facilities to require staff to receive influenza vaccinations.

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**Illinois HB 1167** — Denies benefits to school employees, who have not received all recommended COVID19 vaccinations, while providing benefits to those who are “fully” vaccinated.

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**Maryland SB 168** — Mandates the reporting of any vaccines given to long-term care facility residents to the state electronic vaccine tracking registry.

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**Missouri HB 2116** — Enacts the “No Patient Left Alone Act,” which fails to protect in-patients and visitors to hospitals from discrimination based on their vaccination status.

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**North Carolina HB 103** — Expands access to personal information in the state electronic vaccine tracking registry without consent through an amendment in an Appropriations Act.

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**New Hampshire HB 1487** — Codifies into law the New Hampshire HHS requirement for health care providers to sign vaccine tracking registry withdrawal forms for minors that are filed by parents.

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**New Hampshire HB 1604** — Limits religious and medical vaccine exemptions for individuals who fall under the federal government’s CMS vaccine mandate.

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**Pennsylvania HB 2679** — Allows pharmacists and interns to administer influenza and COVID-19 vaccines to children five years old and older with parental consent, and requires reporting of those vaccinations to the state electronic vaccine tracking registry. (Also posted in “Expanding Vaccine Administrators”)

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## Expanding Vaccine Administrators

Three states expanded authority for certain individuals to administer vaccines. There is legitimate concern that pharmacists have less training than doctors or nurses in terms of identifying and screening out children and adults, who are potentially at high-risk for

suffering vaccine reactions and should not be vaccinated, and for recognizing and ultimately reporting serious health problems, injuries and deaths following vaccination to the federal Vaccine Adverse Event Reporting System (VAERS).

- [Alaska HB 145](#) — Codifies into state law the authority of pharmacists to directly prescribe and administer vaccines.
- [Pennsylvania HB 2679](#) — Allows pharmacists and interns to administer influenza and COVID-19 vaccines to children five years old and older with parental consent, and requires reporting of those vaccinations to the state electronic vaccine tracking registry. (Also posted in “Opposed Bills that Passed”)
- [Virginia HB 1323](#) — Allows pharmacists to administer vaccines to children three years old and older under a statewide protocol developed by the Board of Pharmacy in collaboration with the Board of Medicine and the Department of Health vaccines included on the Immunization Schedule published by the Centers for Disease Control and Prevention or that have a current emergency use authorization from the U.S. Food and Drug Administration.
- [Virginia HB 939 and SB 647](#) — Gives authority to the Board of Health to allow persons, who are not normally authorized to administer vaccines, to do so through emergency orders.

## Unnecessary Bills

Sometimes bills are passed, which are not meaningful. [New Hampshire SB 288](#) was originally filed to prohibit COVID-19 vaccine mandates for children. It was significantly downgraded to a study bill, so it fails to protect children from COVID-19 mandates for daycare or school attendance.

- [New Hampshire SB 288](#) — Establishes a committee to study the listing of immunizations required for children and take testimony on COVID-19 vaccines for school and childcare.

## Vetoed Bills

It is a lot more difficult to pass a good bill than to stop a bad one. There have been good vaccine-related bills that NVIC has supported and state legislatures have spent a significant amount of time developing and voting to pass, only to have a governor veto it.

There were no vetoes of bad bills during this legislative session, but governors in five states vetoed bills that contained provisions NVIC either fully or provisionally supported. In general, the governors did not provide substantive evidence justifying their vetoes.

**Idaho SB 1381** — Prohibited COVID-19 vaccine mandates by businesses or employers with exceptions and an expiration date. NVIC put this bill in a “watch” category.

Idaho Governor Brad Little vetoed SB 1381 on March 28th. The governor said in his **veto statement** that he vetoed SB 1381 because it "significantly expands government overreach into the private sector."

He stated that, "businesses should be left to make decisions about the management of their operations and employees with limited interference from government," and cited other actions he had taken in response to COVID-19, such as banning (government) vaccine passports and not issuing any state COVID vaccine mandates.

NVIC maintains that the role of a government should not be to protect corporations and businesses at all costs, but to protect the individual rights of its citizens. Both the United States and Idaho constitutions state, "We the People," not "We the Businesses and Employers." Laws are needed to prevent corporations and businesses from trampling on the constitutional rights of employees.

Like other states, Idaho already has anti-discrimination laws, which regulate employers and businesses by prohibiting them from discriminating based on age, sex, religion, etc. SB 1381 would not have implemented heavy-handed regulations that were "bad for business." Rather, it would have ensured that more prospective

employees would meet the criteria and fill job vacancies, increasing their employability and potentially stimulating the economy.

Likewise, the bill would have temporarily prohibited businesses from discriminating against customers or clients based on their COVID-19 vaccination status, which would have allowed individuals declining COVID vaccine to pay for products and services in Idaho. Expanding a customer base is not a bad thing for business.

This bill was far from perfect as the exceptions were too broad and the protections would have expired too soon. However, if the bill had been enacted, it would have at least ensured some medical freedom protections for the people of Idaho for a short time until the legislature could come back and more effectively address these issues.

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**Kansas SB 34** — Prohibited the state from requiring vaccine passports, with exceptions, and prohibited state public health officials from ordering law enforcement officers to help enforce orders issued by public health officials, and it also prohibited schools from mandating vaccines that have not been licensed by the FDA, such as those being distributed under an Emergency Use Authorization (EUA). NVIC put this bill in a “watch” category.

Kansas Governor Laura Kelly vetoed SB 34 on May 13th. The bill in its final form as amended would have prohibited state government officials from issuing vaccine passports or requirements that state residents provide proof they have received COVID-19 vaccine. It also removed a section of state law enabling public health officials to issue orders compelling law enforcement officers to enforce those orders.

Governor Kelly was **quoted** criticizing the bill and explaining her veto. She said that the bill “implements a one-size-fits-all approach for all infectious diseases” and “significantly limits any government entity’s response to any infectious disease outbreak.”

While the exceptions in the bill were too broad and did not apply to a governmental entity that is a medical care facility, as defined in K.S.A. 65-425 and amendments, or an adult care home, this bill would have had protected some citizens from current COVID-19 vaccine requirements and discriminatory actions taken by overzealous public health officials against those who decline a government recommended vaccine in the future.

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**Louisiana SB 141** — Prohibited some insurance providers from requiring vaccination status in determining a person's eligibility for insurance coverage. NVIC supported this bill.

Governor John Bel Edwards stated in his [veto message](#) of June 18, 2022, that "... limiting the applicability of these protections to vaccination status only could serve to further complicate the already labyrinthine health insurance market.

Furthermore, the inclusion of vaccination status only contributes to the false narrative that vaccines are anything other than safe, effective, and vital to protecting public health." He continued: "Protecting healthcare consumers requires a comprehensive examination and overhaul of state statutes."

On the contrary, one way to start protecting healthcare consumers like the Governor mentions, is to ensure that they will not be discriminated against based on their vaccination status, as provided for in SB 141, which also provided the same protection for property, casualty, and liability insurance.

NVIC maintains that no individual should be denied healthcare coverage simply based on their vaccination status.

There are many valid reasons, including those related to the risk for vaccine complications that can be greater for some individuals and impacts their choice not to receive one or more government recommended vaccines. One way to begin removing complications in the health insurance market is to statutorily eliminate vaccination status requirements altogether.

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**Louisiana HB 54** — Prohibited government entities, including public education institutions from requiring COVID-19 vaccination for admission, and also prohibited employee discrimination tied to vaccination status. NVIC supported this bill.

HB 54 successfully passed the legislature but was vetoed by Governor John Bel Edwards on June 18, 2022.

HB 54 essentially served as a COVID-19 vaccine passport ban on governmental entities and public education institutions. This bill would have stopped them from requiring proof of COVID-19 vaccination as a condition for access. This provision would have protected the vaccine informed consent rights of both individuals and families living in Louisiana.

The Governor stated in his [veto message](#), "The bill is unnecessary and perpetuates the false narrative that the residents of Louisiana face vaccine mandates to access government services or attend schools. This is not the case. The bill also seeks to undermine public confidence in vaccines, which are safe, effective, and essential to public health. For these reasons, I have vetoed the bill."

There was concern about the contradictory content of his statement explaining the reasons for his veto because the Louisiana Department of Health had published a [Notice of Intent](#) on September 20, 2021, to add the COVID-19 vaccine to the list of required vaccines for school and daycare. The Louisiana Department of Health ultimately rescinded this mandate [after pressure from Attorney General Jeff Landry](#) in October 2022.

Some may argue that allowance of vaccine exemptions, in effect, negates the threat of vaccine mandates. However, there are state legislatures like [California](#), [Maine](#), [Connecticut](#) and [New York](#), which have removed religious and conscientious belief vaccine exemptions and restricted medical exemptions in vaccine mandates for children to attend daycare and school.

In addition, while the Governor states that COVID-19 vaccines are safe and effective, there is accumulating evidence they do not reliably stop transmission of infection,

and are also associated with many [vaccine injuries](#) and [deaths](#).

As COVID-19 vaccine mandates are being proposed and there has been an increase in intolerance of those who publicly advocate for informed consent to vaccination, Louisiana residents deserved the legal protections contained in HB 54. Hopefully, the legislature can again pass similar protections that will become law in the future.

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**Missouri HB 2090** — Prohibited state employees from being required to receive COVID-19 vaccinations for employment, with exceptions, for hospitals, long-term care & Medicare facilities. NVIC put this bill in a “watch” category.

HB 2090 was vetoed by Governor Michael L. Parson on July 1, 2022. His [veto letter](#) includes his reasons for opposing Section 2, saying, “Also of concern, Section 2 puts vulnerable Missourians at risk. This section risks critical federal funding for Medicare and Medicaid services in Missouri by potentially violating Centers for Medicare & Medicaid Services' federal regulations.

I have consistently opposed COVID-19 vaccination mandates, especially for state employees. Jeopardizing the State's Medicare and Medicaid services in this manner is unnecessary and could result in significant negative harm to Missourians.”

The bill did not apply to facilities certified by the Centers for Medicare and Medicaid. HB 2090, as filed, was a bill that only addressed a change to state employee pay periods. The bill was [amended in the Senate](#) and passed as [a senate committee substitute](#) that included a new section that prohibited requiring any state employee to receive a vaccination against COVID-19 as a condition of commencing or continuing employment, with exceptions.

Section 2 stated that “no state employee shall be required to receive a vaccination against COVID-19 as a condition of commencing or continuing employment with an exception that the section does not apply to any state employee who is employed by any facility that meets the definition of hospital in section 197.020, any long-term care facility licensed under chapter 198, any entity that meets the definition of



facility in section 199.170, or any facility certified by the Centers for Medicare and Medicaid Services.” This bill would have helped some employees facing oppressive COVID vaccine mandates.

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**Wisconsin AB 299** — Prohibited the state, any government entity or businesses from requiring proof of COVID-19 vaccination. NVIC supported this bill.

AB 299 was vetoed by Governor Tony Evers on April 15, 2022. The governor stated in his **veto letter** that his reasons for vetoing AB 299 were because of his objections to the "Legislature's continued efforts to inject partisan politics and rhetoric into public health practices by preventing public entities and businesses from making decisions that work for them, their customers, their workers, and their operations to help prevent and suppress the spread of COVID-19."

He went on to state that pandemic response should be focused on "following the science and the advice of public health experts and working to save as many lives as we can - not on finding ways to make it harder to fight this virus or keep Wisconsinites healthy and safe." He also stated that private entities and businesses should be able to implement their own COVID-19 "mitigation measures."

There are legitimate concerns about the "mitigation measures" and "decisions" that entities have made regarding COVID-19, which have resulted in restrictive vaccine mandates or vaccine passport requirements. While common-sense safety measures, such as not coming into work when sick, are appropriate to implement, heavy-handed vaccine mandates are not.

COVID-19 vaccines come with significant risks, such as heart inflammation (myocarditis) that can be greater for some people. As of Oct 21, 2022, there had been **1,442,155 adverse events** reported following COVID vaccinations recorded in VAERS, including **31,653 deaths**. Individuals who have received COVID vaccines can **still spread and catch it**.

AB 299 would have protected many Wisconsin residents, who were at high-risk for having a COVID vaccine reaction or had determined they didn't want or need a

COVID-19 vaccine, from being denied the right to be employed, or access state government services, or otherwise participate in society.

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**Wisconsin AB 316** — Prohibited the state from requiring proof of COVID-19 vaccines or discriminating based on vaccination status. NVIC supported this bill.

AB 316 was vetoed by Governor Tony Evers on April 15, 2022. The governor stated in his **veto message** that the bill does not define discrimination, and again cited his objection to the Legislature's "efforts to inject partisan politics and rhetoric into public health practices" regarding stopping public entities from "working to prevent and suppress the spread of COVID-19."

He also stated that government pandemic response should follow the science and advice of public health experts.

There was nothing in this bill which stopped public entities from trying to suppress the spread of COVID-19. It only prohibited them from making individuals show that they had received COVID vaccine.

While the governor stated in his veto message that the word "discrimination" is not defined by the bill, the bill states: "neither the state nor any governmental entity may discriminate against any person based on whether the person has received a vaccine against the SARS-COV-2 coronavirus, which causes COVID-19, or is able to show proof of having received such a vaccine."

The meaning of discrimination is clear. Public entities would not have been allowed to alter their treatment of individuals based on their COVID-19 vaccination status.

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**Wisconsin AB 675** — Allows employees to provide employers with evidence of natural immunity from an antibody test or statement from a health care provider that the person has had a previous SARS-CoV-2 infection, in lieu of complying with an employer's requirement providing proof of COVID-19 vaccination. NVIC put this bill in a "watch" category.

AB 675 was vetoed by Governor Tony Evers on April 8, 2022. The Governor stated in his [veto message](#) that he vetoed the bill because he objects "to preventing employers from making decisions that are informed by science and public health to help combat the spread of COVID-19. The COVID-19 vaccine remains the most effective tool we have to prevent serious illness, hospitalizations, and death."

He went on to state: "Private entities and businesses should remain free to implement COVID-19 mitigation measures to keep themselves, their workers, and customers safe without the Legislature's political interference."

NVIC maintains that the U.S. governmental system as outlined in the U.S. Constitution guarantees [protection of the natural rights of individuals](#) and does not condone discrimination against individuals by government or private entities. AB 675 only required private entities to accept proof of natural immunity as a condition of employment in lieu of proof of COVID vaccination.

The COVID-19 vaccine is the only tool that the government has heavily promoted in an effort to prevent serious illness, hospitalizations, and death from complications of SARS-CoV-2 infections. Some have noted that there has been a reluctance by federal health officials to promote therapeutics as a part of a treatment regimen for COVID-19 infection with the same zeal that COVID vaccines have been promoted.

Natural immunity to COVID-19 has been demonstrated to give "[longer lasting and stronger protection](#)" than what vaccination provides.

While NVIC maintained a "watch" position on this bill because it could have been amended for the protection to apply to more people who recovered from a past infection, it still would have provided some protection from COVID-19 vaccine mandates for residents of Wisconsin had it been allowed to go into effect.

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[Wisconsin AB SB 707](#) — Expanded the definition of "veteran" to include persons, who were dishonorably discharged from military service for declining COVID-19 vaccine, so that they could receive state benefits. NVIC supported this bill.

SB 707 was vetoed by Governor Tony Evers on April 15, 2022. According to his [veto statement](#), the governor of Wisconsin vetoed SB 707 because he objects to "expanding this definition [of the term 'veteran'] to reward individuals that refused to follow an order." He also said that the military determines what constitutes an honorable discharge, and that current state law only extends certain benefits to veterans who received an honorable discharge.

This bill was not attempting to redefine for the U.S. military what constitutes as a reason to issue a dishonorable discharge. It simply would have ensured that individuals, who were dishonorably discharged from military service, would qualify for state (versus federal or military) benefits if the only reason for their dishonorable discharge was refusal to take the COVID-19 vaccine.

There have been [multiple legal challenges](#) protesting the COVID-19 vaccine mandate for all U.S. military personnel. There are a number of [high-ranking individuals](#), who have served their nation honorably for years and whose careers have been ended by the COVID vaccine mandates.

It was appropriate for the Wisconsin State Legislature to pass legislation, which treated former military service members residing in the state with respect and allowed them to receive state benefits, despite the fact they were dishonorably discharged from the military for declining COVID vaccine.

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**Wisconsin AB SB 708** – Voided restrictive covenants between certain employers and workers fired for refusing COVID-19 vaccine.

SB 708 was vetoed by Governor Tony Evers on April 15, 2022. The governor, in his [veto statement](#), again mentioned the "Legislature's continued efforts to inject partisan politics and rhetoric into public health practices by preventing employers from making decisions that work for them, their customers, their workers, and their operations to help prevent and suppress the spread of COVID-19."

He also repeated his belief that there needs to be a focus on "following the science and the advice of public health experts."

State legislatures pass bills that **regulate businesses all the time**, and this legislation contained nothing egregious or burdensome. The bill only applied to larger entities employing 100 or more workers and terminated employees for not receiving a COVID-19 vaccine by voiding their non-compete agreements with employees.

The bill did not even prohibit employer COVID-19 vaccine mandates, it just protected an employee's ability to get another job in their same field of work at a company that did not require COVID-19 vaccination by voiding restrictive non-compete covenants.

NVIC maintains that individuals should not have to give up their right to work in their chosen field if they have made the decision they do not want or need the COVID-19 vaccine.

## Comparing Recent Sessions to 2022

875 bills represent the most proposed vaccine-related bills NVIC has recorded in the history of the NVIC Advocacy Portal, surpassing the previous all-time high of 473 bills filed in 2021, and 232 bills introduced in 2020. It is important to note that this increase occurred even without bills from the four states, Montana, Nevada, North Dakota, and Texas, that meet biennially in odd numbered years.

Also noteworthy, in 2022, just 44 states and the District of Columbia yielded the highest number of proposed vaccine related bills falling under NVIC's mission.

There were slightly more bills that NVIC opposed in 2022 - 186 - compared to the last two years, or 130 and 137 respectively but, with almost double the amount of total vaccine related bills filed this year, that was not unexpected. In 2022, the COVID-19 pandemic has continued to dramatically escalate interest in vaccine related legislation in the states.

However, there were far more bills filed in 2022 that NVIC supported than in any other session. NVIC supported 475 bills this session, which is almost 200 more bills than the 278 supported in 2021, and more than four times the 99 bills supported in 2020.

The gap between supported and opposed bills has continued to widen as more families, health care providers and lawmakers recognize the need to secure vaccine informed consent protections in public health policies and laws.



growth in vaccine informed consent advocacy outpaces restrictions and mandates

Enlightened legislators are not only listening to concerned constituents in greater numbers, many more are continuing or beginning to resist aggressive lobbying efforts by the pharmaceutical industry, medical trade, government health officials and other special interest groups, who benefit from laws that compel children and adults to use every vaccine sold by drug companies and recommended by federal health agencies and medical trade associations.

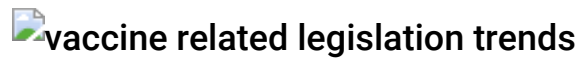
Only 18 bad vaccine bills passed out of the 186 proposed bills that NVIC opposed in the 2022 legislative session, which is the same amount that passed in 2016 and 2019 before the federal government issued a COVID pandemic emergency declaration at the beginning of 2020.

Individual citizen involvement in the legislative process, through personal communications and education of lawmakers, continues to make a tremendous impact on the outcomes of vaccine related bills filed in state legislatures.

Although federal government officials attempted to influence state COVID vaccine policies in 2022, more state legislators became aware of evidence demonstrating the negative health effects of COVID vaccine, even as some employers are still trying to mandate the vaccine as a condition of employment.

The recent vote by the CDC's Advisory Commission on Immunization Practices (ACIP) to add the COVID vaccine to the child vaccination schedule, including for babies as young as six months old, will place pressure on legislatures in some states to add the COVID vaccine to mandates for daycare and school attendance in 2023.

NVIC predicts that continuing lobbying efforts by the vaccine and medical trade industries and federal government officials to force children and adults to get COVID vaccine will continue to drive more Americans in every state to get more involved in the legislative process at every level to protect their informed consent rights.



## **Suggestions of Good Bills to File for 2023**

Public health laws that fail to respect informed consent rights affect you and your family. It is so important to contact your legislators and let them know how you feel about vaccine laws that use coercion and a threat of punishment to force use of federally recommended vaccines, such as the COVID vaccine, rather than allowing informed and voluntary vaccine decision making.

To have the most impact, we have compiled a list of some of the best bills in the country from different states filed in 2022 that are worthy of filing in other states. You can talk with your legislators about refiling bills in your state that NVIC supported in 2022, which did not pass or were vetoed by governors.

This “best bill” list contains links to those bills and is published on the NVIC Advocacy Portal in a post on our announcement page titled “[The Best Bills From 2022 to Share with Your Legislators NOW for Next Session.](#)”

Also, [Texas SB 1669 filed in 2021](#), is another comprehensive bill that would prohibit vaccine mandates and discrimination over vaccine status. It is worth having your legislators read and consider filing this kind of bill in your state.

## **What Else Can You Do?**

In light of the fact that all COVID-19 vaccine mandate bills failed to pass the states and that many bills protecting vaccine informed consent rights were passed in 2021 and 2022, NVIC expects that the federal government, the vaccine industry and their medical

trade association partners will continue to step up efforts in the 2023 legislative session to compel every resident of every state to get COVID vaccinations, and will move to restrict or eliminate vaccine exemptions in public health laws.

Please join the tens of thousands of Americans working with NVIC to hold the line in the states. Please become a registered user of the free online [NVIC Advocacy Portal](#) today and check in often to learn about ways to personally educate your legislators when vaccine bills that affect your rights are moving in your state. Please encourage your family and all of your friends to do the same. **Also, register for our text alerts by texting the full name of your state to (202) 618-5488.**

Clearly grassroots efforts in the states are making a much more significant difference than the mainstream media and those pushing “no exceptions” forced vaccination policies and laws are willing to admit, and your active participation is vital to protecting informed consent rights and vaccine choices in America.

If you see inaccurate information in news media reports or online conversations, especially in light of all the censorship that has occurred since 2020, please take the time to respond by making a constructive comment on the public comment boards. You can also provide accurate, well referenced [Diseases and Vaccines information](#) and accurate [state vaccine law information](#), which you can find on our website [NVIC.org](#).

NVIC’s illustrated and fully referenced [Guide to Reforming Vaccine Policy and Law](#) is another good vaccine education tool for legislators and friends and family, too.

NVIC has published many excellent referenced articles, commentaries and videos on vaccine science, policy and law posted on [NVIC.org](#) that you can use and forward. Be sure to also subscribe to the free weekly digital journal newspaper [The Vaccine Reaction](#) that features breaking news articles.

If you are censored online for providing accurate information about vaccination, infectious diseases and health, contest it and make an effort to educate those doing the censoring. The information seeds you plant today can make a difference tomorrow and into the future.



As always, the challenges are great, but so are the opportunities to educate and empower legislators and residents of every state to defend vaccine freedom of choice. NVIC is committed to continuing to make that happen, and we look forward to working with you through the [NVIC Advocacy Portal](#) to help you protect vaccine informed consent rights in your state in the remaining days of 2022, and in 2023 and beyond.

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