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FISCAL IMPACT REPORT

SPONSOR Hickey **ORIGINAL DATE** 02/09/21 **LAST UPDATED** 03/16/21 **HB** _____
SHORT TITLE Immunizations Detrimental to Some Children **SB** 244/aSFI#1/aHHHC
ANALYST Chilton

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY21	FY22	FY23	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total	NFI	NFI	NFI			

(Parenthesis () Indicate Expenditure Decreases)

Relates to Senate Bill 232 and Senate Bill 408.

SOURCES OF INFORMATION

LFC Files

Responses Received From

Medical Board (MB)

Public Education Department (PED)

Department of Health (DOH)

Early Childhood Education and Care Department (ECECD)

SUMMARY

Synopsis of HHHC Amendment

The House Health and Human Services Committee amendment removes the provisions of the Senate floor amendment, which would have allowed any “provider” (which is defined very broadly in the Public Health Act into which this bill fits). Instead, it adds physician assistants and nurse practitioners alongside physicians, as those who could write for medical exemptions for children medically unable to take some or all immunizations.

Synopsis of SFI#1 Amendment

The Senate floor #1 amendment to Senate Bill 244 replaces the words “certified nurse practitioner” with “provider” in two locations within the bill, opening up the certification for a medical exemption to anyone in the non-defined “provider” category.

Synopsis of Original Bill

According to current law (Section 24-5-3 NMSA 1978), children who otherwise would be required to be immunized against diseases specified by the Department of Health, can be granted exemptions. There are three types of exemptions granted: medical exemptions, exemptions based on being a member of a religious group opposed to immunizations, and having a personal religious objection to vaccines.

The current phrasing in the law regarding medical exemptions states that a medical exemption can be obtained if the child has obtained "...a certificate of a duly licensed physician stating that the physical condition of the child is such that immunization would seriously endanger the life or health of the child. Senate Bill 244 would add certified nurse practitioners to physicians as being able to certify children for medical exemptions.

The effective date of this bill is July 1, 2021.

FISCAL IMPLICATIONS

There is no appropriation in Senate Bill 244, and no anticipated costs for implementing it.

SIGNIFICANT ISSUES

In most jurisdictions, medical exemptions make up a small minority of children exempted from immunizations (Mississippi, California and West Virginia are the exceptions; those states grant no non-medical exemptions).

The Centers for Disease and Prevention (CDC) explains that an exemption could mean that

1. "The parent refused a dose of vaccine for their child.
2. The parent refused a specific vaccine series for their child.
3. The parent refused all vaccines for their child.

Based on available information, we believe parents refusing all vaccines for their children is an uncommon occurrence. A study of schoolchildren with nonmedical exemptions found that 75 percent of these children had received at least one vaccine previously. Additionally, over the past several years, vaccination coverage measured using data from the National Immunization Survey indicate that <1 percent of children 19–35 months received no vaccines of any type."

According to a 2019 newspaper account, although the number of exemptions to vaccination in New Mexico had increased 43 percent between 2014 and 2018, the vast majority – 94 percent -- fell into the third category, personal religious objections. Despite the increase, however, only slightly more than one percent of all New Mexico children had one of the three types of exemption.

Medical exemptions are thus rare (vaccines are generally very safe); as noted by DOH, the addition of nurse practitioners to the list of those who can write a certifying letter would not be expected to increase the number markedly. For those rare children who might be damaged by a vaccine, adding nurse practitioners to the process would add convenience, given that for many children, a nurse practitioner is their primary care provider.

Regarding religious exemptions, PED notes that “On Page 2, line 10, the proposal strikes the word “his” and adds “the parent’s or legal guardian’s”. The change implies that it is the parent’s or legal guardian’s religion, not the child’s, that does not permit the administration of vaccine or other immunizing agent. This change aligns with current statutory language regarding vaccine exemptions because religious teaching requires reliance upon prayer or spiritual means alone for healing.”

ADMINISTRATIVE IMPLICATIONS

PED states that it “would need to collaborate with the Department of Health to communicate the change to schools regarding the additional allowance of certified nurse practitioners to certify a medical condition for the purpose of immunization exemptions.”

RELATIONSHIP with Senate Bill 232, which would allow a fourth type of exemption, a “conscientious exemption,” and to Senate Bill 408, which would allow parents to exempt children from immunizations on the basis of a “right of bodily integrity.”

OTHER SUBSTANTIVE ISSUES

As noted by ECECD, it “licenses child care providers. Current licensing regulations include an immunization exemption. As described in the administrative requirements for child care centers, “ ...required children’s records must include: a copy of the child’s up-to-date immunization record or a public health division approved exemption from the requirement, [and] a grace period of a maximum of 30 days will be granted for children in foster care or homeless children and youth.” 8.16.2.22(E)(1)(e); *see also* 8.16.2.32(D)(1)(e) (same requirement for child care home licenses).”

LAC/al/rl