

1822

2015-2016 Regular Sessions

I N A S S E M B L Y

January 13, 2015

Introduced by M. of A. PAULIN, GUNTHER, MARKEY, ORTIZ, ROBINSON, HOOPER,  
SCHIMEL -- Multi-Sponsored by -- M. of A. DINOWITZ, LIFTON, RA -- read  
once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to requiring immuni-  
zation against human papillomavirus (HPV)

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEM-  
BLY, DO ENACT AS FOLLOWS:

1 Section 1. The section heading and subdivisions 2, 3, 5 and 6 of  
2 section 2164 of the public health law, as amended by chapter 189 of the  
3 laws of 2006 and subdivision 2 as separately amended by chapter 506 of  
4 the laws of 2006, are amended to read as follows:

5 Definitions; immunization against poliomyelitis, mumps, measles,  
6 diphtheria, rubella, varicella, HUMAN PAPILLOMAVIRUS (HPV), Haemophilus  
7 influenzae type b (Hib), pertussis, tetanus, pneumococcal disease, and  
8 hepatitis B.

9 2. a. Every person in parental relation to a child in this state shall  
10 have administered to such child an adequate dose or doses of an immuniz-  
11 ing agent against poliomyelitis, mumps, measles, diphtheria, rubella,  
12 varicella, HUMAN PAPILLOMAVIRUS (HPV), Haemophilus influenzae type b  
13 (Hib), pertussis, tetanus, pneumococcal disease, and hepatitis B, which  
14 meets the standards approved by the United States public health service  
15 for such biological products, and which is approved by the department  
16 under such conditions as may be specified by the public health council.

17 b. Every person in parental relation to a child in this state born on  
18 or after January first, nineteen hundred ninety-four and entering sixth  
19 grade or a comparable age level special education program with an unas-  
20 signed grade on or after September first, two thousand seven, shall have  
21 administered to such child a booster immunization containing diphtheria  
22 and tetanus toxoids, [and] an acellular pertussis vaccine, AND A HUMAN  
23 PAPILLOMAVIRUS (HPV) VACCINE, which meets the standards approved by the  
24 United States public health service for such biological products, and

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets  
[ ] is old law to be omitted.

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1 which is approved by the department under such conditions as may be  
2 specified by the public health council.

3 3. The person in parental relation to any such child who has not  
4 previously received such immunization shall present the child to a  
5 health practitioner and request such health practitioner to administer  
6 the necessary immunization against poliomyelitis, mumps, measles,  
7 diphtheria, Haemophilus influenzae type b (Hib), rubella, varicella,  
8 HUMAN PAPILLOMAVIRUS (HPV), pertussis, tetanus, pneumococcal disease,  
9 and hepatitis B as provided in subdivision two of this section.

10 5. The health practitioner who administers such immunizing agent  
11 against poliomyelitis, mumps, measles, diphtheria, Haemophilus influen-  
12 zae type b (Hib), rubella, varicella, HUMAN PAPILLOMAVIRUS (HPV),  
13 pertussis, tetanus, pneumococcal disease, and hepatitis B to any such  
14 child shall give a certificate of such immunization to the person in  
15 parental relation to such child.

16 6. In the event that a person in parental relation to a child makes  
17 application for admission of such child to a school or has a child  
18 attending school and there exists no certificate or other acceptable  
19 evidence of the child's immunization against poliomyelitis, mumps,  
20 measles, diphtheria, rubella, varicella, HUMAN PAPILLOMAVIRUS (HPV),  
21 hepatitis B, pertussis, tetanus, and, where applicable, Haemophilus  
22 influenzae type b (Hib) and pneumococcal disease, the principal, teach-  
23 er, owner or person in charge of the school shall inform such person of  
24 the necessity to have the child immunized, that such immunization may be  
25 administered by any health practitioner, or that the child may be immun-  
26 ized without charge by the health officer in the county where the child  
27 resides, if such person executes a consent therefor. In the event that  
28 such person does not wish to select a health practitioner to administer  
29 the immunization, he or she shall be provided with a form which shall  
30 give notice that as a prerequisite to processing the application for  
31 admission to, or for continued attendance at, the school such person  
32 shall state a valid reason for withholding consent or consent shall be  
33 given for immunization to be administered by a health officer in the  
34 public employ, or by a school physician or nurse. The form shall provide  
35 for the execution of a consent by such person and it shall also state  
36 that such person need not execute such consent if subdivision eight or  
37 nine of this section apply to such child.

38 S 2. Paragraph (a) of subdivision 7 of section 2164 of the public  
39 health law, as amended by chapter 189 of the laws of 2006, is amended to  
40 read as follows:

41 (a) No principal, teacher, owner or person in charge of a school shall  
42 permit any child to be admitted to such school, or to attend such  
43 school, in excess of fourteen days, without the certificate provided for  
44 in subdivision five of this section or some other acceptable evidence of  
45 the child's immunization against poliomyelitis, mumps, measles, diphthe-  
46 ria, rubella, varicella, HUMAN PAPILLOMAVIRUS (HPV), hepatitis B,  
47 pertussis, tetanus, and, where applicable, Haemophilus influenzae type b  
48 (Hib) and pneumococcal disease; provided, however, such fourteen day  
49 period may be extended to not more than thirty days for an individual  
50 student by the appropriate principal, teacher, owner or other person in  
51 charge where such student is transferring from out-of-state or from  
52 another country and can show a good faith effort to get the necessary  
53 certification or other evidence of immunization.

54 S 3. The opening paragraph of subdivision 8-a of section 2164 of the  
55 public health law, as amended by chapter 189 of the laws of 2006, is  
56 amended to read as follows:

1 Whenever a child has been refused admission to, or continued attend-  
2 ance at, a school as provided for in subdivision seven of this section  
3 because there exists no certificate provided for in subdivision five of  
4 this section or other acceptable evidence of the child's immunization  
5 against poliomyelitis, mumps, measles, diphtheria, rubella, varicella,  
6 HUMAN PAPILLOMAVIRUS (HPV), hepatitis B, pertussis, tetanus, and, where  
7 applicable, Haemophilus influenzae type b (Hib) and pneumococcal  
8 disease, the principal, teacher, owner or person in charge of the school  
9 shall:

10 S 4. Paragraph (a) of subdivision 1 of section 613 of the public  
11 health law, as amended by section 24 of part E of chapter 56 of the laws  
12 of 2013, is amended to read as follows:

13 (a) The commissioner shall develop and supervise the execution of a  
14 program of immunization, surveillance and testing, to raise to the high-  
15 est reasonable level the immunity of the children of the state against  
16 communicable diseases including, but not limited to, influenza, poliomy-  
17 elitis, measles, mumps, rubella, haemophilus influenzae type b (Hib),  
18 diphtheria, pertussis, tetanus, varicella, HUMAN PAPILLOMAVIRUS (HPV),  
19 hepatitis B, pneumococcal disease, and the immunity of adults of the  
20 state against diseases identified by the commissioner, including but not  
21 limited to influenza, smallpox, hepatitis and such other diseases as the  
22 commissioner may designate through regulation. Municipalities in the  
23 state shall maintain local programs of immunization to raise the immuni-  
24 ty of the children and adults of each municipality to the highest  
25 reasonable level, in accordance with an application for state aid  
26 submitted by the municipality and approved by the commissioner. Such  
27 programs shall include assurance of provision of vaccine, serological  
28 testing of individuals and educational efforts to inform health care  
29 providers and target populations or their parents, if they are minors,  
30 of the facts relative to these diseases and immunizations to prevent  
31 their occurrence.

32 S 5. This act shall take effect on the first of September next  
33 succeeding the date on which it shall have become a law; provided,  
34 however, that sections one, two and three of this act shall apply only  
35 to children born on or after January 1, 1996.