

# STATE OF NEW YORK

7729

2025-2026 Regular Sessions

## IN SENATE

May 1, 2025

Introduced by Sen. SKOUFIS -- read twice and ordered printed, and when printed to be committed to the Committee on Health

AN ACT to amend the public health law, in relation to requiring immunization against rotavirus for certain children

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Section 2164 of the public health law, as amended by chapter 401 of the laws of 2015, subdivision 6 as amended by chapter 35 of the laws of 2019, is amended to read as follows:

2 § 2164. Definitions; immunization against poliomyelitis, mumps, measles, diphtheria, rubella, varicella, Haemophilus influenzae type b (Hib), pertussis, tetanus, pneumococcal disease, meningococcal disease, [and] hepatitis B, and age appropriate rotavirus. 1. As used in this section, unless the context requires otherwise:

3 a. The term "school" means and includes any public, private or parochial child caring center, day nursery, day care agency, nursery school, kindergarten, elementary, intermediate or secondary school.

4 b. The term "child" shall mean and include any person between the ages of two months and eighteen years.

5 c. The term "person in parental relation to a child" shall mean and include [~~his father or mother~~] their parent, by birth or adoption, [~~his~~] their legally appointed guardian, or [~~his~~] their custodian. A person shall be regarded as the custodian of a child if [~~he has~~] they have assumed the charge and care of the child because the parents or legally appointed guardian of the minor have died, are imprisoned, are mentally ill, or have been committed to an institution, or because they have abandoned or deserted such child or are living outside the state or their whereabouts are unknown, or have designated the person pursuant to title fifteen-A of article five of the general obligations law as a person in parental relation to the child.

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

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d. The term "health practitioner" shall mean any person authorized by law to administer an immunization.

2. a. Every person in parental relation to a child in this state shall have administered to such child an adequate dose or doses of an immunizing agent against poliomyelitis, mumps, measles, diphtheria, rubella, varicella, Haemophilus influenzae type b (Hib), pertussis, tetanus, pneumococcal disease, ~~[and]~~ hepatitis B, and age appropriate rotavirus, which meets the standards approved by the United States public health service for such biological products, and which is approved by the department under such conditions as may be specified by the public health and health planning council; provided, however, no person in parental relation to a child in this state shall be required to have administered to such child any immunizing agent required by this section where such child would not be able to have such immunizing agent administered in a manner approved by the department under such conditions as may be specified by the public health and health planning council due to the child's age consistent with recommendations of the advisory committee on immunization practices.

b. Every person in parental relation to a child in this state born on or after January first, nineteen hundred ninety-four and entering sixth grade or a comparable age level special education program with an unassigned grade on or after September first, two thousand seven, shall have administered to such child a booster immunization containing diphtheria and tetanus toxoids, and an acellular pertussis vaccine, which meets the standards approved by the United States public health service for such biological products, and which is approved by the department under such conditions as may be specified by the public health and health planning council.

c. Every person in parental relation to a child in this state entering or having entered seventh grade and twelfth grade or a comparable age level special education program with an unassigned grade on or after September first, two thousand sixteen, shall have administered to such child an adequate dose or doses of immunizing agents against meningococcal disease as recommended by the advisory committee on immunization practices of the centers for disease control and prevention, which meets the standards approved by the United States public health service for such biological products, and which is approved by the department under such conditions as may be specified by the public health and health planning council.

3. The person in parental relation to any such child who has not previously received such immunization shall present the child to a health practitioner and request such health practitioner to administer the necessary immunization against poliomyelitis, mumps, measles, diphtheria, Haemophilus influenzae type b (Hib), rubella, varicella, pertussis, tetanus, pneumococcal disease, meningococcal disease, ~~[and]~~ hepatitis B, and age appropriate rotavirus, as provided in subdivision two of this section.

4. If any person in parental relation to such child is unable to pay for the services of a private health practitioner, such person shall present such child to the health officer of the county in which the child resides, who shall then administer the immunizing agent without charge.

5. The health practitioner who administers such immunizing agent against poliomyelitis, mumps, measles, diphtheria, Haemophilus influenzae type b (Hib), rubella, varicella, pertussis, tetanus, pneumococcal disease, meningococcal disease, ~~[and]~~ hepatitis B, and age appropriate

1 rotavirus, to any such child shall give a certificate of such immuniza-  
2 tion to the person in parental relation to such child.

3 6. In the event that a person in parental relation to a child makes  
4 application for admission of such child to a school or has a child  
5 attending school and there exists no certificate or other acceptable  
6 evidence of the child's immunization against poliomyelitis, mumps,  
7 measles, diphtheria, rubella, varicella, hepatitis B, pertussis, teta-  
8 nus, rotavirus, and, where applicable, Haemophilus influenzae type b  
9 (Hib), meningococcal disease, and pneumococcal disease, the principal,  
10 teacher, owner or person in charge of the school shall inform such  
11 person of the necessity to have the child immunized, that such immuniza-  
12 tion may be administered by any health practitioner, or that the child  
13 may be immunized without charge by the health officer in the county  
14 where the child resides, if such person executes a consent therefor. In  
15 the event that such person does not wish to select a health practitioner  
16 to administer the immunization, [~~he or she~~] they shall be provided with  
17 a form which shall give notice that as a prerequisite to processing the  
18 application for admission to, or for continued attendance at, the school  
19 such person shall state a valid reason for withholding consent or  
20 consent shall be given for immunization to be administered by a health  
21 officer in the public employ, or by a school physician or nurse. The  
22 form shall provide for the execution of a consent by such person and it  
23 shall also state that such person need not execute such consent if  
24 subdivision eight of this section applies to such child.

25 7. (a) No principal, teacher, owner or person in charge of a school  
26 shall permit any child to be admitted to such school, or to attend such  
27 school, in excess of fourteen days, without the certificate provided for  
28 in subdivision five of this section or some other acceptable evidence of  
29 the child's immunization against poliomyelitis, mumps, measles, diphthe-  
30 ria, rubella, varicella, hepatitis B, pertussis, tetanus, age appropri-  
31 ate rotavirus and, where applicable, Haemophilus influenzae type b  
32 (Hib), meningococcal disease, and pneumococcal disease; provided, howev-  
33 er, such fourteen day period may be extended to not more than thirty  
34 days for an individual student by the appropriate principal, teacher,  
35 owner or other person in charge where such student is transferring from  
36 out-of-state or from another country and can show a good faith effort to  
37 get the necessary certification or other evidence of immunization.

38 (b) A parent, a guardian or any other person in parental relationship  
39 to a child denied school entrance or attendance may appeal by petition  
40 to the commissioner of education in accordance with the provisions of  
41 section three hundred ten of the education law.

42 8. If any physician licensed to practice medicine in this state certi-  
43 fies that such immunization may be detrimental to a child's health, the  
44 requirements of this section shall be inapplicable until such immuniza-  
45 tion is found no longer to be detrimental to the child's health.

46 8-a. Whenever a child has been refused admission to, or continued  
47 attendance at, a school as provided for in subdivision seven of this  
48 section because there exists no certificate provided for in subdivision  
49 five of this section or other acceptable evidence of the child's immuni-  
50 zation against poliomyelitis, mumps, measles, diphtheria, rubella, vari-  
51 cella, hepatitis B, pertussis, tetanus, age appropriate rotavirus, and,  
52 where applicable, Haemophilus influenzae type b (Hib), meningococcal  
53 disease, and pneumococcal disease, the principal, teacher, owner or  
54 person in charge of the school shall:

55 a. forward a report of such exclusion and the name and address of such  
56 child to the local health authority and to the person in parental

1 relation to the child together with a notification of the responsibility  
2 of such person under subdivision two of this section and a form of  
3 consent as prescribed by regulation of the commissioner, and

4 b. provide, with the cooperation of the appropriate local health  
5 authority, for a time and place at which an immunizing agent or agents  
6 shall be administered, as required by subdivision two of this section,  
7 to a child for whom a consent has been obtained. Upon failure of a local  
8 health authority to cooperate in arranging for a time and place at which  
9 an immunizing agent or agents shall be administered as required by  
10 subdivision two of this section, the commissioner shall arrange for such  
11 administration and may recover the cost thereof from the amount of state  
12 aid to which the local health authority would otherwise be entitled.

13 10. The commissioner may adopt and amend rules and regulations to  
14 effectuate the provisions and purposes of this section.

15 11. Every school shall annually provide the commissioner, on forms  
16 provided by the commissioner, a summary regarding compliance with the  
17 provisions of this section.

18 § 2. Paragraph (a) of subdivision 1 of section 613 of the public  
19 health law, as amended by section 24 of part E of chapter 56 of the laws  
20 of 2013, is amended to read as follows:

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

40 § 3. This act shall take effect on the first of July next succeeding  
41 the date on which it shall have become a law. Effective immediately the  
42 addition, amendment and/or repeal of any rule or regulation necessary  
43 for the implementation of this act on its effective date are authorized  
44 to be made and completed on or before such date.