ASSEMBLY, No. 4576

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED AUGUST 25, 2020

Sponsored by:

Assemblyman HERB CONAWAY, JR.
District 7 (Burlington)
Assemblyman ANDREW ZWICKER
District 16 (Hunterdon, Mercer, Middlesex and Somerset)
Assemblywoman MILA M. JASEY
District 27 (Essex and Morris)

SYNOPSIS

Requires students and certain other children to be annually vaccinated for influenza as condition of enrollment at public and private K-12 schools, preschools, child care centers, and institutions of higher education.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 8/27/2020)

1 AN ACT concerning the annual vaccination of students and certain 2 other children for influenza and supplementing Title 18A of the 3 New Jersey Statutes.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

- 1. The Legislature finds and declares the following:
- a. In March 2020, Governor Murphy issued Executive Order No. 103, which declared both a public health emergency and a state of emergency in New Jersey in response to the novel coronavirus disease 2019 (COVID-19).
- b. COVID-19 is a newly discovered and highly contagious pandemic-level disease that has spread quickly throughout the world, nation, and State, and against which humans have no natural immunity.
- c. COVID-19 affects persons of all ages and ethnicities, particularly those persons who have other underlying health conditions, and it can result either in death or in severe illness that necessitates long-term hospitalization, intensive care, and ventilator support.
- d. COVID-19 is associated with a wide range of symptoms, including, but not limited to, fever, cough, difficulty breathing, chills, sudden loss of smell or taste, nausea, vomiting, and diarrhea.
- e. Influenza is an annually recurring seasonal disease, which shares many of the same symptoms as, and can be confused for, COVID-19.
- f. A person may become simultaneously infected with both COVID-19 and influenza, which may not only cause the person to experience more severe symptoms, but may also cause problems both for health care providers, in relation to their ability to provide the patient with an accurate diagnosis and appropriate treatment, and for administrators of public and private K-12 schools, preschools, child care centers, and institutions of higher education in relation to their ability to identify and appropriately respond to outbreaks occurring at those institutions.
- g. The vaccination of children and students for influenza will significantly reduce the number of children and students in the State who experience severe flu symptoms or a severe combination of flu and COVID-19 symptoms, will help reduce competition among flu and COVID-19 patients for similar medical resources, and will result in fewer emergency department visits and hospitalizations related to influenza, thereby enabling the State to preserve its hospital capacity and emergency and intensive care resources for patients who are infected with COVID-19 or other severe diseases and ailments.

- h. Preschools, child care centers, and K-12 schools, where children come into close contact with and freely mingle with each other and with adult faculty and staff members, and institutions of higher education, where students often live in communal settings and come into close contact with thousands of other students, faculty, and other staff in dormitories, lecture halls, sports arenas, and other large, on-campus venues, are the types of institutions that may facilitate the quick and uncontrollable spread of COVID-19; however, because these institutions operate during flu season, it may be difficult for these institutions and for health care officials to quickly determine, for the purposes of implementing preventative and responsive measures, whether an outbreak of illness at the institution is occurring as a result of the spread of COVID-19 or influenza.
 - i. The vaccination of children and students for influenza will make it easier for K-12 schools, preschools, child care centers, and institutions of higher education to identify enrolled students and children who may be showing signs of COVID-19 infection, thereby enabling these institutions to more promptly distinguish whether a COVID-19 or influenza outbreak is occurring at the institution.

- j. Children attending public or private K-12 schools, child care centers, and preschools in New Jersey are currently required to be vaccinated for various contagious and dangerous diseases, including diphtheria, hepatitis B, measles, meningitis, mumps, pertussis, pneumococcal disease, polio, rubella, tetanus, and varicella, as a condition of attendance at the institution, and students of higher education are required to verify their receipt of these vaccinations as a condition of their attendance at an institute of higher education.
- k. Although children in New Jersey who are between six and 59 months of age and are attending a child care center or preschool facility are also required by the State Sanitary Code to receive an annual vaccination for influenza, this requirement is not codified in the statutory law.
- 1. Given the severe, unprecedented, and unpredictable nature of COVID-19, the fact that there is currently no vaccine or preventative treatment for COVID-19, the commonalities that exist between COVID-19 and influenza, the fact that a person may simultaneously be infected with both diseases, the fact that patients with influenza will compete with COVID-19 patients and other severely ill patients for hospital space and resources, and the unique characteristics that make preschools, child care centers, K-12 schools, and institutions of higher education susceptible to outbreaks, it is both reasonable and necessary for the Legislature to require children and students of all ages to be annually vaccinated for influenza, as a condition of their enrollment and continued attendance at a public or private K-12 school, preschool, child care center, or institution of higher education.

- 2. a. The Commissioner of Health shall require each child in the State to annually receive a vaccination for influenza as a condition of the child's enrollment and continued attendance at a public or private K-12 school, preschool, or child care center.
 - b. Commencing with the 2020-2021 school year:
- (1) a principal, director, or other person in charge of a public or private school in this State shall not knowingly admit or retain in grades K through 12 a child whose parent or guardian has failed to submit acceptable evidence, by December 31 of the relevant school year, showing that the child has received an annual vaccination for influenza as required by this section; and
- (2) an executive director, administrator, or other person in charge of a preschool or child care center shall not knowingly admit or retain in the preschool or child care center a child whose parent or guardian has failed to submit acceptable evidence, by December 31 of the relevant school year, showing that the child has received an annual vaccination for influenza as required by this section.
- c. A child shall not be required to receive a vaccination pursuant to this section if:
- (1) a written statement is submitted to the K-12 school, preschool, or child care center, as applicable, by a licensed physician indicating that the vaccine is medically contraindicated for a specific period of time and the reasons for the medical contraindication, which shall be valid medical reasons as determined by regulation of the commissioner. Such statement shall exempt the child from the vaccination for the period of time stated therein; or
- (2) a written statement is submitted to the K-12 school, preschool, or child care center, as applicable, by the student or, if the student is a minor child, by the student's parent or guardian, explaining how the administration of the vaccine conflicts with the bona fide religious tenets or practices of the student or the student's parent or guardian, as the case may be, except that a general philosophical or moral objection to the vaccination shall not be sufficient for an exemption on religious grounds.

- 3. a. The Commissioner of Health shall require each student who is enrolled in a program leading to an academic degree at a public or private institution of higher education in this State to annually receive a vaccination for influenza as a condition of the student's enrollment and continued attendance at the institution.
- b. Commencing with the 2020-2021 school year, an administrator or other person in charge of an institution of higher education in this State shall not knowingly admit or retain a student who has not submitted acceptable evidence, by December 31 of the relevant school year, showing that the student has received an annual vaccination for influenza as required by this section.

- c. A student of higher education shall not be required to receive a vaccination pursuant to this section if:
- (1) a written statement is submitted to the institution of higher education by a licensed physician indicating that the vaccine is medically contraindicated for a specific period of time and the reasons for the medical contraindication, which shall be valid medical reasons as determined by regulation of the commissioner. Such statement shall exempt the student from the vaccination for the period of time stated therein; or
- (2) a written statement is submitted to the institution of higher education by the student or, if the student is a minor, by the student's parent or guardian explaining how the administration of the vaccine conflicts with the bona fide religious tenets or practices of the student, or of the parent or guardian, as the case may be, except that a general philosophical or moral objection to the vaccination shall not be sufficient for an exemption on religious grounds.

4. The Commissioner of Health shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), as may be necessary to implement the provisions of this act.

5. This act shall take effect immediately.

STATEMENT

This bill requires students who attend a public or private K-12 school, preschool, child care center, or institution of higher education to be annually vaccinated for influenza as a condition of enrollment and continued attendance at the school or center.

Commencing with the 2020-2021 school year:

- 1) a principal, director, or other person in charge of a public or private school in this State will be prohibited from knowingly admitting or retaining in grades K through 12 a child whose parent or guardian has not submitted acceptable evidence, by December 31 of the relevant school year, showing that the child has received an annual vaccination for influenza;
- 2) an executive director, administrator, or other person in charge of a preschool or child care center will be prohibited from knowingly admitting or retaining in the preschool or child care center a child whose parent or guardian has not submitted acceptable evidence, by December 31 of the relevant school year, showing that the child has received an annual vaccination for influenza; and
- 3) an administrator or other person in charge of an institution of higher education in this State will be prohibited from knowingly

admitting or retaining a student who has not submitted acceptable evidence, by December 31 of the relevant school year, showing that the student has received an annual vaccination for influenza.

Consistent with existing laws pertaining to the mandatory vaccination of children and students, the bill would provide that a child or student will be exempt from the bill's vaccination requirements if:

- 1) a written statement is submitted to the K-12 school, preschool, child care center, or institution of higher education by a licensed physician indicating that the vaccine is medically contraindicated for a specific period of time and the reasons for the medical contraindication, which are to be valid medical reasons as determined by regulation of the commissioner. Such statement will exempt the child or student from the vaccination for the period of time stated therein; or
- 2) a written statement is submitted to the K-12 school, preschool, or child care center by the child's or student's parent or guardian, if the child or student is a minor, or by the student, if the student is 18 years of age or older, explaining how the administration of the vaccine conflicts with the bona fide religious tenets or practices of the child or student, or of the parent or guardian, as the case may be, except that a general philosophical or moral objection to the vaccination will not be sufficient for an exemption to be granted on religious grounds.

Children attending public or private K-12 schools, child care centers, and preschools in New Jersey are already required by existing law to be vaccinated for various contagious and dangerous diseases, including diphtheria, hepatitis B, measles, meningitis, mumps, pertussis, pneumococcal disease, polio, rubella, tetanus, and varicella, as a condition of attendance at the institution. Students of higher education are further required to verify their receipt of these vaccinations as a condition of their attendance at an institute of higher education. Although children in New Jersey who are between six and 59 months of age and who are attending a child-care center or preschool facility are additionally required by the State Sanitary Code to receive an annual vaccination for influenza, this requirement is not codified in the statutory law.

In March 2020, Governor Murphy issued Executive Order No. 103, which declared a public health emergency and state of emergency in New Jersey in response to the coronavirus disease 2019 (COVID-19). COVID-19 is a newly discovered and highly contagious pandemic-level disease that has spread quickly throughout the world, nation, and State, and against which humans have no natural immunity. It is associated with a wide range of symptoms, including, but not limited to, fever, cough, difficulty breathing, chills, sudden loss of smell or taste, nausea, vomiting, and diarrhea, many of which overlap with the symptoms of seasonal influenza. It is also possible for a person to become simultaneously

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infected with both COVID-19 and influenza, which may not only cause the person to experience more severe symptoms, but may also cause problems both for health care providers, in relation to their ability to provide the patient with an accurate diagnosis and appropriate treatment, and for administrators of schools, preschools, and child care centers, in relation to their ability to identify and appropriately respond to outbreaks occurring at those institutions.

 The vaccination of children and students for influenza will significantly reduce the number of children and students in the State who experience severe flu symptoms or a severe combination of flu and COVID-19 symptoms, will help reduce competition among flu and COVID-19 patients for similar medical resources, and will result in fewer emergency department visits and hospitalizations related to influenza, thereby enabling the State to preserve its hospital capacity and emergency and intensive care resources for patients who are infected with COVID-19 or other severe diseases and ailments.

Preschools, child care centers, and K-12 schools, where children come into close contact with and freely mingle with each other and adult faculty and staff members, and institutions of higher education, where students often live in communal settings and come into close contact with thousands of other students, faculty, and other staff in dormitories, lecture halls, sports arenas, and other large, on-campus venues, are the types of institutions that may facilitate the quick and uncontrollable spread of COVID-19; however, because these institutions operate during flu season, it may be difficult for these institutions and for health care officials to quickly determine, for the purposes of implementing preventative and responsive measures, whether an outbreak of illness at the institution is occurring as a result of the spread of COVID-19 or influenza. By requiring the vaccination of children and students for influenza, the State can make it easier for these institutions to identify which children or students, if any, are showing signs of COVID-19 infection.

Because of the severe, unprecedented, and unpredictable nature of COVID-19, the fact that there is currently no vaccine or preventative treatment for COVID-19, the commonalities that exist between COVID-19 and influenza, the fact that a person may simultaneously be infected with both diseases, the fact that patients with influenza will compete with COVID-19 patients and other severely ill patients for hospital space and resources, and the unique characteristics of public and private K-12 schools, preschools, child care centers, and institutions of higher education, it is both reasonable and necessary for the Legislature to require children and students at these institutions to be annually vaccinated for influenza, as a condition of their continued enrollment and attendance at the institution, in each year going forward.