



General Assembly

February Session, 2026

***Raised Bill No. 450***

LCO No. 1604



Referred to Committee on PUBLIC HEALTH

Introduced by:  
(PH)

***AN ACT CONCERNING THE STANDARD OF CARE FOR IMMUNIZATION.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (a) of section 19a-7f of the general statutes is  
2 repealed and the following is substituted in lieu thereof (*Effective from*  
3 *passage*):

4 (a) The Commissioner of Public Health shall [determine] establish the  
5 standard of care for immunization for [the children] residents of this  
6 state. The standard of care for immunization shall (1) be based on a  
7 consideration of the recommended schedules for active immunization  
8 for [normal] adults, infants and children, including, but not limited to,  
9 such recommended schedules published by the National Centers for  
10 Disease Control and Prevention Advisory Committee on Immunization  
11 Practices, the American Academy of Pediatrics, the American College of  
12 Obstetrics and Gynecology and the American Academy of Family  
13 Physicians, and (2) include schedules recommended by the  
14 commissioner for active immunization and contraindications to  
15 administration of vaccines in accordance with such schedules. Not later

16 than thirty days after establishing such standard of care, the  
17 commissioner shall post such standard of care on the Department of  
18 Public Health's Internet web site and notify the Secretary of the State of  
19 such posting. Not later than thirty days after making any revisions to  
20 such standard of care, as deemed necessary by the commissioner, the  
21 commissioner shall post the revised standard of care on the  
22 department's Internet web site. Such standard of care, including any  
23 revised version thereof, shall not be considered regulations of  
24 Connecticut state agencies, as defined in section 4-166. The  
25 commissioner shall establish, within available appropriations, an  
26 immunization program [which] that shall: [(1)] (A) Provide [vaccine]  
27 vaccines at no cost to health care providers in Connecticut to administer  
28 to children so that cost of [vaccine] vaccines will not be a barrier to age-  
29 appropriate vaccination in this state; [(2)] (B) with the assistance of  
30 hospital maternity programs, provide all parents in this state with the  
31 recommended immunization schedule for [normal] infants and  
32 children, a booklet to record immunizations at the time of the infant's  
33 discharge from the hospital nursery and a list of sites where  
34 immunization may be provided; [(3)] (C) inform in a timely manner all  
35 health care providers of changes in the recommended immunization  
36 schedule; [(4)] (D) assist hospitals, local health providers and local  
37 health departments to develop and implement record-keeping and  
38 outreach programs to identify and immunize those children who have  
39 fallen behind the recommended immunization schedule or who lack  
40 access to regular preventative health care and have the authority to  
41 gather such data as may be needed to evaluate such efforts; [(5)] (E)  
42 assist in the development of a program to assess the vaccination status  
43 of children who are clients of state and federal programs serving the  
44 health and welfare of children and make provision for vaccination of  
45 those who are behind the recommended immunization schedule; [(6)]  
46 (F) access available state and federal funds, including, but not limited  
47 to, any funds available through the federal Childhood Immunization  
48 Reauthorization or any funds available through the Medicaid program;  
49 [(7)] (G) solicit, receive and expend funds from any public or private

50 source; and [(8)] (H) develop and make available to parents and health  
51 care providers public health educational materials about the benefits of  
52 timely immunization.

53 Sec. 2. Subparagraph (B) of subdivision (3) of subsection (b) of section  
54 19a-7f of the general statutes is repealed and the following is substituted  
55 in lieu thereof (*Effective from passage*):

56 (B) [Commencing January 1, 2013, (i) any] Any health care provider  
57 who administers vaccines to children (i) under the federal Vaccines For  
58 Children immunization program that is operated by the Department of  
59 Public Health under authority of 42 USC 1396s shall utilize, and the  
60 department shall provide, any vaccine licensed by the federal Food and  
61 Drug Administration, including any combination vaccine and dosage  
62 form, that is (I) recommended by the National Centers for Disease  
63 Control and Prevention Advisory Committee on Immunization  
64 Practices, and (II) made available to the department by the National  
65 Centers for Disease Control and Prevention, and (ii) [any health care  
66 provider who administers vaccines to children] shall utilize, and the  
67 department shall provide, subject to inclusion in such program due to  
68 available appropriations, any vaccine licensed by the federal Food and  
69 Drug Administration, including any combination vaccine and dosage  
70 form, that is (I) [recommended by the National Centers for Disease  
71 Control and Prevention Advisory Committee on Immunization  
72 Practices] set forth in the schedules for active immunization included in  
73 the standard of care for immunization established pursuant to  
74 subsection (a) of this section, (II) made available to the department by  
75 the National Centers for Disease Control and Prevention or by other  
76 means of procurement, provided such procurement conforms with  
77 practices designed to reduce state procurement costs and results in more  
78 efficient state procurement, and (III) equivalent, as determined by the  
79 commissioner, to the cost for vaccine series completion of comparable  
80 available licensed vaccines.

81 Sec. 3. Subsection (a) of section 19a-7j of the general statutes is

82 repealed and the following is substituted in lieu thereof (*Effective from*  
83 *passage*):

84 (a) Not later than September first, annually, the Secretary of the Office  
85 of Policy and Management, in consultation with the Commissioner of  
86 Public Health, shall (1) determine the amount appropriated for the  
87 following purposes: (A) To purchase, store and distribute vaccines for  
88 routine immunizations ~~[included]~~ for infants and children set forth in  
89 the [schedule] schedules for active immunization [required by] included  
90 in the standard of care for immunization established pursuant to section  
91 19a-7f, as amended by this act; (B) to purchase, store and distribute (i)  
92 vaccines to prevent hepatitis A and B in persons of all ages, as  
93 recommended by the [schedule for immunizations published by the  
94 National Advisory Committee for Immunization Practices] schedules  
95 for active immunization included in the standard of care for  
96 immunization established pursuant to section 19a-7f, as amended by  
97 this act, (ii) antibiotics necessary for the treatment of tuberculosis and  
98 biologics and antibiotics necessary for the detection and treatment of  
99 tuberculosis infections, and (iii) antibiotics to support treatment of  
100 patients in communicable disease control clinics, as defined in section  
101 19a-216a; (C) to administer the immunization program for infants and  
102 children described in section 19a-7f, as amended by this act; and (D) to  
103 provide services needed to collect up-to-date information on childhood  
104 immunizations for all children enrolled in Medicaid who reach two  
105 years of age during the year preceding the current fiscal year, to  
106 incorporate such information into the immunization information  
107 system, established pursuant to section 19a-7h, (2) calculate the  
108 difference between the amount expended in the prior fiscal year for the  
109 purposes set forth in subdivision (1) of this subsection and the amount  
110 of the appropriation used for the purpose of the health and welfare fee  
111 established in subparagraph (A) of subdivision (2) of subsection (b) of  
112 this section in that same year, and (3) inform the Insurance  
113 Commissioner of such amounts.

114 Sec. 4. Section 19a-522 of the general statutes is repealed and the

115 following is substituted in lieu thereof (*Effective from passage*):

116 (a) The [commissioner] Commissioner of Public Health, in  
117 consultation with the Commissioner of Social Services, shall adopt  
118 regulations, in accordance with chapter 54, concerning the health, safety  
119 and welfare of patients in nursing home facilities, classification of  
120 violations relating to such facilities, medical staff qualifications, record-  
121 keeping, nursing service, dietary service, personnel qualifications and  
122 general operational conditions. The regulations shall: (1) [Assure]  
123 Ensure that each patient admitted to a nursing home facility is protected  
124 by adequate immunization against respiratory viral diseases, including,  
125 but not limited to, influenza and pneumococcal disease in accordance  
126 with the [recommendations of the National Advisory Committee on  
127 Immunization Practices, established by the Secretary of Health and  
128 Human Services] schedules for active immunization included in the  
129 standard of care for immunization established pursuant to section 19a-  
130 7f, as amended by this act; (2) specify that each patient be protected  
131 annually against influenza and be vaccinated against pneumonia in  
132 accordance with the [recommendations of the National Advisory  
133 Committee on Immunization] standard of care for immunization  
134 established pursuant to section 19a-7f, as amended by this act; and (3)  
135 provide appropriate exemptions for patients for whom such  
136 immunizations are medically contraindicated and for patients who  
137 object to such immunization on religious grounds.

138 (b) The Commissioner of Public Health may implement policies and  
139 procedures necessary to administer the provisions of this section while  
140 in the process of adopting such policies and procedures as regulations,  
141 provided notice of intent to adopt regulations is published on the  
142 eRegulations System not later than twenty days after the date of  
143 implementation. Policies and procedures implemented pursuant to this  
144 section shall be valid until the time final regulations are adopted.

145 [(b)] (c) Nursing home facilities or residential care homes may not  
146 charge the family or estate of a deceased self-pay patient beyond the

147 date on which such patient dies. Nursing home facilities or residential  
148 care homes shall reimburse the estate of a deceased self-pay patient,  
149 within sixty days after the death of such patient, for any advance  
150 payments made by or on behalf of the patient covering any period  
151 beyond the date of death. Interest, in accordance with subsection (a) of  
152 section 37-1, on such reimbursement shall begin to accrue from the date  
153 of such patient's death.

154 Sec. 5. Section 19a-7q of the general statutes is repealed and the  
155 following is substituted in lieu thereof (*Effective from passage*):

156 [On or before October 1, 2021, the] The Commissioner of Public  
157 Health shall develop and make available on the Internet web site of the  
158 Department of Public Health a certificate for use, in a form and manner  
159 prescribed by the commissioner, by a licensed physician, licensed  
160 physician assistant or licensed advanced practice registered nurse  
161 stating that, in the opinion of such physician, physician assistant or  
162 advanced practice registered nurse, a vaccination required by the  
163 general statutes is medically contraindicated for a person because of the  
164 physical condition of such person. The certificate shall include (1)  
165 definitions of the terms "contraindication" and "precaution", (2) a list of  
166 contraindications and precautions [recognized by the National Centers  
167 for Disease Control and Prevention] included in the standard of care for  
168 immunization established pursuant to section 19a-7f, as amended by  
169 this act, for each of the statutorily required vaccinations, from which the  
170 physician, physician assistant or advanced practice registered nurse  
171 may select the relevant contraindication or precaution on behalf of such  
172 person, (3) a section in which the physician, physician assistant or  
173 advanced practice registered nurse may record a contraindication or  
174 precaution that is not recognized by the National Centers for Disease  
175 Control and Prevention, but in his or her discretion, results in the  
176 vaccination being medically contraindicated, including, but not limited  
177 to, any autoimmune disorder, family history of any autoimmune  
178 disorder, family history of any reaction to a vaccination, genetic  
179 predisposition to any reaction to a vaccination as determined through

180 genetic testing and a previous documented reaction of a person that is  
181 correlated to a vaccination, (4) a section in which the physician,  
182 physician assistant or advanced practice registered nurse may include a  
183 written explanation for the exemption from any statutorily required  
184 vaccinations, (5) a section requiring the signature of the physician,  
185 physician assistant or advanced practice registered nurse, (6) a  
186 requirement that the physician, physician assistant or advanced practice  
187 registered nurse attach such person's most current immunization  
188 record, and (7) a synopsis of the grounds for any order of quarantine or  
189 isolation pursuant to section 19a-131b.

190 Sec. 6. Subsection (e) of section 10-204a of the general statutes is  
191 repealed and the following is substituted in lieu thereof (*Effective from*  
192 *passage*):

193 (e) The definitions of adequate immunization shall reflect the  
194 [schedule] schedules for active immunization [adopted pursuant to  
195 section 19a-7f and be established by regulation adopted in accordance  
196 with the provisions of chapter 54] included in the standard of care for  
197 immunization established pursuant to section 19a-7f, as amended by  
198 this act, by the Commissioner of Public Health, who shall [also be  
199 responsible for providing] provide procedures under which such  
200 boards and such similar governing bodies shall collect and report  
201 immunization data on each child to the Department of Public Health for  
202 (1) compilation and analysis by the department, and (2) release by the  
203 department of annual immunization rates for each public and nonpublic  
204 school in the state, provided such immunization data may not contain  
205 information that identifies a specific individual.

206 Sec. 7. Subsection (a) of section 10a-155 of the general statutes is  
207 repealed and the following is substituted in lieu thereof (*Effective from*  
208 *passage*):

209 (a) Each institution of higher education shall require each full-time or  
210 matriculating student born after December 31, 1956, to provide proof of

211 adequate immunization against measles, rubella, mumps and varicella,  
212 as [recommended by the national Advisory Committee for  
213 Immunization Practices] set forth in the schedules for active  
214 immunization included in the standard of care for immunization  
215 established pursuant to section 19a-7f, as amended by this act, before  
216 permitting such student to enroll in such institution.

217 Sec. 8. Subsection (a) of section 19a-131a of the general statutes is  
218 repealed and the following is substituted in lieu thereof (*Effective from*  
219 *passage*):

220 (a) In the event of a state-wide or regional public health emergency,  
221 the Governor shall make a good faith effort to inform the legislative  
222 leaders specified in subsection (b) of this section before declaring that  
223 the emergency exists and may do any of the following: (1) Order the  
224 commissioner to implement all or a portion of the public health  
225 emergency response plan developed pursuant to section 19a-131g; (2)  
226 authorize the commissioner to isolate or quarantine persons in  
227 accordance with section 19a-131b; (3) order the commissioner to  
228 vaccinate persons in accordance with section 19a-131e; (4) apply for and  
229 receive federal assistance; [or] (5) order the commissioner to suspend  
230 certain license renewal and inspection functions during the period of the  
231 emergency and during the six-month period following the date the  
232 emergency is declared to be over; or (6) authorize the commissioner, or  
233 the commissioner's designee, to issue a standing order to permit medical  
234 interventions, including vaccination, necessary to respond to the public  
235 health emergency. As used in this subsection, "standing order" means a  
236 nonpatient specific regimen applicable state-wide that (A) includes, but  
237 is not limited to, a prescription or order that is issued by a physician  
238 licensed pursuant to chapter 370 allowing licensed health care providers  
239 to dispense or administer a medical intervention to control and prevent  
240 the spread of, mitigate or treat any infectious or noninfectious disease  
241 or threat to the public health, and (B) does not require any individual to  
242 receive or utilize such medical intervention.

243       Sec. 9. (NEW) (*Effective from passage*) (a) As used in this section,  
244 "eligible health care provider" means a free clinic, as defined in section  
245 19a-630 of the general statutes, municipal health authority established  
246 under chapter 368e of the general statutes, district department of health  
247 established under chapter 368f of the general statutes and any other  
248 health care provider, as determined by the Commissioner of Public  
249 Health, who is licensed as a health care provider in the state and  
250 provides vaccinations for persons nineteen years of age or older.

251       (b) There is established, within available appropriations, a vaccines  
252 for adults program to be administered by the Department of Public  
253 Health. The program shall provide for the department to purchase and  
254 distribute vaccines to eligible health care providers. The Commissioner  
255 of Public Health shall determine the vaccines to be purchased and  
256 distributed under the program based on the efficacy of such vaccines in  
257 preventing serious disease and death in the adult population and the  
258 eligible health care providers to whom such vaccines shall be  
259 distributed. In making such determination regarding the vaccines to be  
260 purchased, the commissioner may consult with the advisory committee  
261 established pursuant to section 19a-131n of the general statutes. An  
262 eligible health care provider may administer a vaccine provided under  
263 the program to a patient only if such vaccine is not a covered benefit for  
264 the patient under any self-funded employee health benefits plan, health  
265 benefit plan, as defined in section 38a-1080 of the general statutes,  
266 Medicaid, as defined in section 19a-508c of the general statutes, the State  
267 employee plan, as defined in section 3-123aaa of the general statutes, or  
268 a payment plan entered into between the health care provider and the  
269 patient for health care services provided by such health care provider to  
270 such patient. The list of vaccines for purchase and distribution and the  
271 eligibility requirements for eligible health care providers determined by  
272 the commissioner pursuant to this subsection shall not be considered  
273 regulations of Connecticut state agencies, as defined in section 4-166 of  
274 the general statutes.

275       Sec. 10. Subsection (d) of section 4-186 of the 2026 supplement to the

276 general statutes is repealed and the following is substituted in lieu  
277 thereof (*Effective from passage*):

278 (d) The provisions of this chapter shall not apply to: (1) [To  
279 procedures] Procedures followed or actions taken concerning the lower  
280 Connecticut River conservation zone described in chapter 477a and the  
281 upper Connecticut River conservation zone described in chapter 477c,  
282 (2) [to] the administrative determinations authorized by section 32-9r  
283 concerning manufacturing facilities in distressed municipalities, (3) [to]  
284 the rules made pursuant to section 9-436 for use of paper ballots, [and]  
285 (4) [to] guidelines established under section 22a-227 for development of  
286 a municipal solid waste management plan, (5) the list of vaccines for  
287 purchase and distribution and eligibility requirements for health care  
288 providers determined by the Commissioner of Public Health pursuant  
289 to section 9 of this act, and (6) upon the Commissioner of Public Health's  
290 notification to the Secretary of the State of publication on the  
291 Department of Public Health's Internet web site of the standard of care  
292 for immunization pursuant to section 19a-7f, as amended by this act,  
293 such standard of care and any subsequent revisions thereto.

294 Sec. 11. Subsection (a) of section 38a-492r of the general statutes is  
295 repealed and the following is substituted in lieu thereof (*Effective January*  
296 *1, 2027*):

297 (a) Each individual health insurance policy providing coverage of the  
298 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469  
299 delivered, issued for delivery, renewed, amended or continued in this  
300 state that provides coverage for prescription drugs shall provide (1)  
301 coverage for immunizations recommended by the American Academy  
302 of Pediatrics, American Academy of Family Physicians [and] or the  
303 American College of Obstetricians and Gynecologists, [and] (2) with  
304 respect to immunizations that have in effect a recommendation from the  
305 Advisory Committee on Immunization Practices of the Centers for  
306 Disease Control and Prevention with respect to the individual involved,  
307 coverage for such immunizations and at least a twenty-minute

308 consultation between such individual and a health care provider  
309 authorized to administer such immunizations to such individual, and  
310 (3) coverage for immunizations within the schedules for active  
311 immunization included in the standard of care for immunization  
312 established pursuant to section 19a-7f, as amended by this act.

313 Sec. 12. Subsection (a) of section 38a-518r of the general statutes is  
314 repealed and the following is substituted in lieu thereof (*Effective January*  
315 *1, 2027*):

316 (a) Each group health insurance policy providing coverage of the type  
317 specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469  
318 delivered, issued for delivery, renewed, amended or continued in this  
319 state that provides coverage for prescription drugs shall provide (1)  
320 coverage for immunizations recommended by the American Academy  
321 of Pediatrics, American Academy of Family Physicians [and] or the  
322 American College of Obstetricians and Gynecologists, [and] (2) with  
323 respect to immunizations that have in effect a recommendation from the  
324 Advisory Committee on Immunization Practices of the Centers for  
325 Disease Control and Prevention with respect to the individual involved,  
326 coverage for such immunizations and at least a twenty-minute  
327 consultation between such individual and a health care provider  
328 authorized to administer such immunizations to such individual, and  
329 (3) coverage for immunizations within the schedules for active  
330 immunization included in the standard of care for immunization  
331 established pursuant to section 19a-7f, as amended by this act.

332 Sec. 13. Subdivision (1) of subsection (a) of section 20-633 of the  
333 general statutes is repealed and the following is substituted in lieu  
334 thereof (*Effective from passage*):

335 (a) (1) Any person licensed as a pharmacist under part II of this  
336 chapter may order, prescribe and administer any vaccine approved or  
337 authorized by the United States Food and Drug Administration as  
338 follows:

339 (A) Any such vaccine [, approved or authorized by the United States  
340 Food and Drug Administration] that is listed [on] in the National  
341 Centers for Disease Control and Prevention's age-appropriate  
342 immunization schedule or the schedules for immunization included in  
343 the standard of care for immunization established pursuant to section  
344 19a-7f, as amended by this act, to any patient who is: (i) Eighteen years  
345 of age or older; or (ii) at least twelve years of age but younger than  
346 eighteen years of age with (I) the consent of such patient's parent, legal  
347 guardian or other person having legal custody of such patient, or (II)  
348 proof that such patient is an emancipated minor;

349 (B) Any such vaccine that is not [included on] listed in the National  
350 Centers for Disease Control and Prevention's Adult Immunization  
351 Schedule or in the schedules for immunization included in the standard  
352 of care for immunization established pursuant to section 19a-7f, as  
353 amended by this act, to any patient who is eighteen years of age or older;  
354 [, provided the vaccine administration instructions for such vaccine are  
355 available on the National Centers for Disease Control and Prevention's  
356 Internet web site;] and

357 (C) Any such vaccine pursuant to a verbal or written prescription of  
358 a prescribing practitioner for a specific patient.

359 Sec. 14. (*Effective from passage*) Not later than ninety days after the  
360 Commissioner of Public Health notifies the Secretary of the State of the  
361 commissioner's posting on the Department of Public Health's Internet  
362 web site of the standard of care for immunization established pursuant  
363 to section 19a-7f of the general statutes, as amended by this act, the  
364 Secretary of the State shall update the official compilation of the  
365 regulations of Connecticut state agencies posted on the eRegulations  
366 System to comply with the provisions of chapter 54 of the general  
367 statutes and section 16 of this act.

368 Sec. 15. Section 52-571b of the general statutes is repealed and the  
369 following is substituted in lieu thereof (*Effective from passage and*

370 applicable to any civil action pending on or filed after said date):

371 (a) The state or any political subdivision of the state shall not burden  
372 a person's exercise of religion under section 3 of article first of the  
373 Constitution of the state even if the burden results from a rule of general  
374 applicability, except as provided in [subsection (b)] subsections (b) and  
375 (f) of this section.

376 (b) The state or any political subdivision of the state may burden a  
377 person's exercise of religion only if it demonstrates that application of  
378 the burden to the person (1) is in furtherance of a compelling  
379 governmental interest, and (2) is the least restrictive means of furthering  
380 that compelling governmental interest.

381 (c) A person whose exercise of religion has been burdened in  
382 violation of the provisions of this section may assert that violation as a  
383 claim or defense in a judicial proceeding and obtain appropriate relief  
384 against the state or any political subdivision of the state.

385 (d) Nothing in this section shall be construed to authorize the state or  
386 any political subdivision of the state to burden any religious belief.

387 (e) Nothing in this section shall be construed to affect, interpret or in  
388 any way address that portion of article seventh of the Constitution of  
389 the state that prohibits any law giving a preference to any religious  
390 society or denomination in the state. The granting of government  
391 funding, benefits or exemptions, to the extent permissible under the  
392 Constitution of the state, shall not constitute a violation of this section.  
393 As used in this subsection, the term "granting" does not include the  
394 denial of government funding, benefits or exemptions.

395 (f) Enforcement by the state or any political subdivision of the state  
396 of the requirements set forth in sections 10-204a, as amended by this act,  
397 10a-155, as amended by this act, 10a-155b, 19a-79 and 19a-87b shall not  
398 be construed as a violation of any provision of this section.

399        [(f)] (g) For the purposes of this section, "state or any political  
 400 subdivision of the state" includes any agency, board, commission,  
 401 department, officer or employee of the state or any political subdivision  
 402 of the state, and "demonstrates" means meets the burdens of going  
 403 forward with the evidence and of persuasion.

404        Sec. 16. Notwithstanding the provisions of chapter 54 of the general  
 405 statutes, section 10-204a-2a of the regulations of Connecticut state  
 406 agencies is repealed. (*Effective upon the Commissioner of Public Health's*  
 407 *notification to the Secretary of the State of publication on the Department of*  
 408 *Public Health's Internet web site of the standard of care for immunization*  
 409 *determined pursuant to section 19a-7f of the general statutes*)

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	19a-7f(a)
Sec. 2	<i>from passage</i>	19a-7f(b)(3)(B)
Sec. 3	<i>from passage</i>	19a-7j(a)
Sec. 4	<i>from passage</i>	19a-522
Sec. 5	<i>from passage</i>	19a-7q
Sec. 6	<i>from passage</i>	10-204a(e)
Sec. 7	<i>from passage</i>	10a-155(a)
Sec. 8	<i>from passage</i>	19a-131a(a)
Sec. 9	<i>from passage</i>	New section
Sec. 10	<i>from passage</i>	4-186(d)
Sec. 11	<i>January 1, 2027</i>	38a-492r(a)
Sec. 12	<i>January 1, 2027</i>	38a-518r(a)
Sec. 13	<i>from passage</i>	20-633(a)(1)
Sec. 14	<i>from passage</i>	New section
Sec. 15	<i>from passage and applicable to any civil action pending on or filed after said date</i>	52-571b

Sec. 16	<i>upon the Commissioner of Public Health's notification to the Secretary of the State of publication on the Department of Public Health's Internet web site of the standard of care for immunization determined pursuant to section 19a-7f of the general statutes</i>	New section
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**Statement of Purpose:**

To clarify the standard of care for immunization in the state.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*