

MAINE STATE LEGISLATURE

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132nd MAINE LEGISLATURE

SECOND REGULAR SESSION-2026

Legislative Document

No. 2146

S.P. 864

In Senate, January 7, 2026

An Act to Increase Access to Critical Vaccinations

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 203.

Reference to the Committee on Health and Human Services suggested and ordered printed.

A handwritten signature in black ink, appearing to read "D M Grant", is positioned above the printed name of the Secretary of the Senate.

DAREK M. GRANT
Secretary of the Senate

Presented by President DAUGHTRY of Cumberland.

Cosponsored by Senators: BAILEY of York, INGWERSEN of York, Representatives: Speaker FECTION of Biddeford, MATHIESON of Kittery, ZAGER of Portland.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA §1066, sub-§3, ¶E**, as amended by PL 2025, c. 440, §11 and
3 affected by §17, is further amended to read:

4 E. By January 1, 2011 and annually thereafter, the board shall determine the list of
5 vaccines to be made available by the program during the succeeding program year
6 beginning July 1st. In making its determination, the board shall consider:

7 (1) Vaccines that are available under contract with the United States Department
8 of Health and Human Services, Centers for Disease Control and Prevention, by
9 direct manufacturer purchase, through the Minnesota Multistate Contracting
10 Alliance for Pharmacy or a its successor organization, through the Northeast Public
11 Health Collaborative or its successor organization or by any other low-cost bulk
12 purchase option;

13 (2) Recommendations of the department; ~~and~~

14 (3) Clinical and cost-benefit analyses; ~~and~~

15 (4) Recommendations of the Northeast Public Health Collaborative or its
16 successor organization as long as any recommendation preserves and strengthens
17 access to vaccines as part of the routine standard of care; is based on evidence from
18 scientific and public health experts; and is not intended to weaken or replace
19 evidence-based immunization standards of the United States Department of Health
20 and Human Services, Centers for Disease Control and Prevention Advisory
21 Committee on Immunization Practices or its successor organization.

22 The board shall review new vaccines and update the list of vaccines to be made
23 available through the program on a timely basis in accordance with the considerations
24 described in this paragraph.

25 **Sec. 2. 22 MRSA §1066, sub-§5, ¶F**, as enacted by PL 2009, c. 595, §2, is
26 amended to read:

27 F. If the combination of funding available from the United States Department of Health
28 and Human Services, Centers for Disease Control and Prevention, Vaccines for
29 Children Program and the immunization grant program under the federal Public Health
30 Service Act, Section 1928 of the Social Security Act, 42 United States Code, Section
31 1396s is insufficient to provide coverage for vaccines for the children who qualify for
32 vaccines under the Vaccines for Children Program, money from the fund may not be
33 used to cover the cost of vaccines for children who would otherwise be provided
34 vaccines under the Vaccines for Children Program, except that the board may request
35 funding from the State to cover the cost of vaccines for children who qualify for
36 vaccines under the Vaccines for Children Program for those vaccines that are
37 recommended by the department or the Northeast Public Health Collaborative or its
38 successor organization in accordance with subsection 3, paragraph E. Any funding
39 request made by the board under this paragraph is subject to legislative approval in the
40 biennial budget process. The board shall submit the funding request to the State Budget
41 Officer in accordance with the provisions of law that apply to departments of State
42 Government and Title 5, section 1665. At the same time that the funding request is
43 submitted to the State Budget Officer, the board shall also notify the joint standing

1 committee of the Legislature having jurisdiction over health and human services
2 matters of the amount of the funding request.

3 **Sec. 3. 22 MRSA §1066, sub-§5, ¶G**, as amended by PL 2025, c. 440, §12 and
4 affected by §17, is further amended to read:

5 G. If the assessments under this subsection are insufficient to cover the cost of vaccines
6 to be provided to individuals covered by assessed entities, the State is not required to
7 cover the cost of vaccines for those individuals, except as otherwise provided in
8 paragraph F.

9 **Sec. 4. 32 MRSA §13831, sub-§8** is enacted to read:

10 **8. Immunity from liability.** A pharmacist licensed in this State who meets the
11 qualifications and requirements of section 13832 and rules adopted by the board is not
12 liable in any civil action alleging negligence for the act of administering a vaccine that is
13 outside the guidelines recommended by the United States Department of Health and
14 Human Services, Centers for Disease Control and Prevention Advisory Committee on
15 Immunization Practices, or its successor organization, as long as the administration of the
16 vaccine is in accordance with guidelines recommended by the State or the Northeast Public
17 Health Collaborative or its successor organization.

18 SUMMARY

19 This bill requires the Maine Vaccine Board to consider vaccines that are recommended
20 by and available through the Northeast Public Health Collaborative or its successor
21 organization when making its annual determination of vaccines that must be made available
22 through the Universal Immunization Program. If federal funding is not available for certain
23 vaccines under the United States Department of Health and Human Services, Centers for
24 Disease Control and Prevention, Vaccines for Children Program, the bill also authorizes
25 the Maine Vaccine Board to request state funding to cover the costs of vaccines for children
26 who qualify for vaccines under the Vaccines for Children Program for those vaccines that
27 are recommended by the Department of Health and Human Services or the Northeast Public
28 Health Collaborative or its successor organization.

29 The bill provides a pharmacist licensed in this State with immunity from liability for
30 negligence for administering a vaccine that is outside the guidelines recommended by the
31 United States Department of Health and Human Services, Centers for Disease Control and
32 Prevention Advisory Committee on Immunization Practices, or its successor organization,
33 as long as the administration of the vaccine is in accordance with guidelines recommended
34 by the State or the Northeast Public Health Collaborative or its successor organization.