

Public Health Committee JOINT FAVORABLE REPORT

Bill No: HB-5044 / [Bill Status](#) / [Public Hearing Testimony](#)

Title: AN ACT ESTABLISHING CONNECTICUT VACCINE STANDARDS.

Vote Date: 3/18/2026

Vote Action: House Favorable Substitute

PH Date: 3/11/2026

File No.: 405

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SPONSORS OF BILL:

Public Health Committee

REASONS FOR BILL:

During COVID, legislation was passed that would attempt to ensure that vaccination rates in our state remain high by establishing vaccination schedules for school-age children, adding a provision for an adult vaccination program, and removing religious exemptions. HB 5044 is proposed to make technical revisions that would tighten up the requirements for vaccinations and improve access to vaccines. HB 5044 proposes the following:

- Allows the Commissioner of the Department of Public Health (DPH) to establish an adult vaccine schedule.
- Clarifies that the commissioner is not restricted from using schedules of key advisory committees or groups and adds the American College of Obstetrics and Gynecology (ACOG) to the advisory list.
- Allows vaccines to be procured from sources other than just the Centers for Disease Control (CDC).
- Requires DPH to consult with the Department of Social Services (DSS) in adopting regulations concerning the health, safety, and welfare of nursing home patients.
- Allows for regulations to include other vaccines for respiratory viruses.
- Clarifies that the DPH commissioner must set a standardized way for residents to apply for a medical contraindication certificate for vaccines.
- Amends the statute that sets the vaccine mandates for schools in the state to refer to the new state standard of care established in the bill.
- Amends the state statute for students matriculating at an institute of higher learning to adhere to state immunization standards rather than that of the CDC.

- Adds additional authority for the governor under a statewide public health emergency to authorize the DPH commissioner to issue standing orders for medical interventions, specifically vaccines, necessary for said emergency.
- Exempts the list of vaccines for purchase and distribution under the newly established Vaccines for Adults program from the requirements under the Uniform Administrative Procedure Act (UAPA).
- Beginning January 1, 2027, requires individual and group health insurance policies to cover the vaccines listed in the standard of care for immunizations.
- Allows for pharmacists to order, prescribe, and administer vaccines that are listed in the standard of care for immunization.
- Explicitly carves out the statutes where the vaccine religious exemption was repealed in Public Act 21-6 from the state's Religious Freedom Restoration Act (RFRA).

SUBSTITUTE LANGUAGE (IF APPLICABLE):

1. Removes provisions exempting DPH immunization standards of care from the regulatory process under UAPA.
2. Specifies that the bill's provisions on nursing home regulations apply only to immunization requirements for respiratory viral diseases.
3. Includes the removal of the exemption from, and makes minor changes to the provision on the Religious Freedom Restoration Act

RESPONSE FROM ADMINISTRATION/AGENCY:

Ned Lamont, Governor, State of Connecticut:

For decades, Connecticut has taken a steady, evidence-based approach to immunization policy. This commitment has helped position our state as one of the most consistent and highly vaccinated in the country. HB 5044 preserves this record of success by strengthening the Department of Public Health's (DPH's) authority to establish a clear vaccine standard of care for adults, children, and infants, ensuring that immunization recommendations remain grounded in proven scientific evidence. The bill also requires the use of recommendations across age groups by multiple long-standing expert bodies, not just the CDC. Finally, the bill authorizes the DPH Commissioner, or their designee, to issue standing orders for vaccines or other medical interventions during public health emergencies. When rapid response to emerging health risks is crucial, this authority allows Connecticut to expedite access to vaccinations while maintaining appropriate clinical oversight. HB 5044 reinforces Connecticut's long-standing approach to immunization policy by affirming that vaccine standards in our state will remain grounded in scientific evidence and medical expertise.

Manisha Juthani, MD, Commissioner, Department of Public Health:

The decision to receive a vaccine—personally or for one's family—has always been, and should remain, a matter of individual choice. Protecting that choice is a central goal of this bill. House Bill 5044 would expand the commissioner's authority to establish Connecticut's standard of care for vaccines for adults as well. Establishing a standard of care does not create a mandate. It simply provides a recommended schedule that individuals may choose to follow to protect themselves and their communities from vaccine-preventable diseases. The bill also ensures that vaccine recommendations and requirements for respiratory viral diseases for residents in nursing homes remain current. Any vaccines that may be added to this list will be added through the regulatory process.

DPH asks for policy and procedure authority, with a requirement that regulations be submitted to the Legislative and Regulations Review Committee within six months of the policies and procedures being posted. HB 5044 does not create any new vaccine mandates, expand state authority to impose mandates, or restrict personal choice. Its goal is to preserve choice by ensuring that Connecticut maintains control over its vaccine standards, has the authority to procure necessary vaccines, and can act swiftly during public health emergencies.

Andrea Barton Reeves, Commissioner, Department of Social Services (DSS):

Currently, vaccines are provided by the federal government at no cost to the Medicaid program through the Vaccines for Children program. HB 5044 provides DPH the authority to purchase vaccines that are included in the standard of care for immunizations established by the commissioner of DPH that may not be available through a federal government purchasing agreement. DSS supports putting in place this alternate means of procurement should the federal government make changes to the Vaccines for Children program. HB 5044 also addresses regulations for standard of care for immunizations to protect against respiratory viral diseases for nursing home residents. DSS is supportive of this change.

Brian Cafferelli, Commissioner, Department of Consumer Protection (DCP):

HB 5044 ensures consistent quality of care and vaccine access for all Connecticut families. As the agency responsible for registering pharmacies and pharmacists who administer vaccines, it is critical that frontline health care administrators receive reliable guidance and regulatory support that is grounded in established scientific research. Section 13 of HB 5044 will help ensure uninterrupted access to vaccines at pharmacies in the state by ensuring the continued use of reliable scientific and medical information to establish consistent vaccine standards in Connecticut.

NATURE AND SOURCES OF SUPPORT:

Eilish Collins Main, Representative, 146th District, CT General Assembly (CGA):

There is a lot of public discourse about the rise in measles cases, and deaths due to the spread of the measles, and failure to vaccinate. I add my personal testimony today to raise the topic of the lesser known, but unfortunate and well-documented and researched side effects from contracting the measles virus. I am someone who suffered profound hearing loss as the result of contracting the measles as a child. I lost more than 40% of my hearing in my right ear due to the measles. Despite being vaccinated in 1963, it wasn't until 1968 that the CDC released an updated, and much more effective version of the measles vaccine, the version that is responsible for the near eradication of the disease. You cannot understate the value of vaccines when they can prevent debilitating side effects such as mine.

Carl Baum, MD, FAAP, DFACMT, Professor of Pediatrics and Emergency Medicine, Yale School of Medicine:

I have cared for children in pediatric emergency departments and have witnessed the near elimination of disease from measles, hepatitis B, rotavirus, Hemophilus influenzae, meningitis, and pertussis, to name just a few. But when completely unqualified people like Secretary of Health and Human Services Robert F. Kennedy, Jr., cast doubt on vaccines, parents become confused, and then choose to skip-even to delay-vaccines, leaving their children vulnerable to disease and death when these viruses and bacteria surge again.

The bills before the Connecticut General Assembly are meant to reverse the damage done to public confidence in vaccines and vaccine schedules, and to restore science and evidence-based medicine to these preventive strategies that only protect our children.

Maritza Bond, MPH, MDiv President, Chair, CT Association of Directors of Health (CADH) Advocacy Committee:

Vaccination programs have saved millions of lives and remain a cornerstone of disease prevention. HB 5044 strengthens Connecticut's immunization infrastructure and supports equitable vaccine access for residents across the state.

Dr. Molly Markowitz, Pediatrician, Connecticut Chapter, American Academy of Pediatrics (CT-AAP):

H.B. 5044 helps ensure that Connecticut's vaccine policies remain aligned with this established medical standard of care. Our state has long been a leader in protecting child health through strong immunization policies. As a result, our state maintains high vaccination coverage. These high vaccination rates protect not only the children who receive vaccines, but also infants and individuals with medical conditions who cannot be vaccinated. High vaccination coverage strengthens community health by preventing outbreaks and protecting vulnerable populations who cannot be vaccinated. Ensuring that Connecticut continues to follow established medical standards for immunization is critical to sustaining these protections.

Gregg Gonsalves, MD, Epidemiologist, Professor, Yale School of Public Health:

The ability to protect ourselves and our communities depends on maintaining herd immunity— significant coverage of vaccines to hold back infectious disease. The threshold for herd immunity for measles is very high, typically requiring 95% or more of the population to be vaccinated with two doses of the MMR vaccine. Exemptions from vaccination as the opponents of this bill are calling for are the single most reliable way of breaking herd immunity and allowing pathogens to thrive among us. An unvaccinated child in a classroom risks the health, safety and lives of children in that class, in that school, as well as the teachers and staff who work there, those who live with them, the elderly, the immunocompromised, cancer patients and others who may be at high risk for infection due to weakened immunity. HB 5044 has other key provisions that are essential to protecting our state: giving Connecticut the ability to purchase childhood vaccines, requiring health insurance plans to cover vaccines, permitting pharmacists to administer vaccines, and allowing the DPH commissioner to issue a standing order for vaccines in the case of a public health emergency. These are all important steps to protect vaccine access.

Elizabeth Znamierowski, MSN, APRN, CPNP-PC, Pediatric Nurse Practitioner:

HB 5044 affirms that vaccination is part of an accepted medical standard of care. It ensures that Connecticut's immunization policies remain grounded in evidence-based science and public health expertise, guided by nationally recognized medical standards. The science is clear: vaccines are one of the few public health initiatives that simultaneously protect individuals, families, and communities. Multiple studies have failed to link vaccines to conditions such as autism, sudden infant death syndrome, immune dysfunction, diabetes, or neurologic disorders. Vaccines are protective. Vaccines save lives. Supporting vaccines means you love your neighbor as yourself.

Anthony Yoder, DO, MPH, FACP, Co-Chair, Health and Public Policy Committee, Connecticut Chapter, American College of Physicians (ACP):

At the front lines of clinical medicine, the commitment to do no harm comes with the responsibility to provide the best possible guidance for patients based on data-driven evidence and wisdom accumulated from years of scientific research.

Actions such as the sweeping changes to the childhood vaccine schedule announced by the Centers for Disease Control and Prevention (CDC) and the U.S. Department of Health and Human Services (HHS) on January 6, 2025, dilute and diminish the perceived validity of decades of rigorous, scientifically proven research. When ideology and political influence take the place of medical care and science, our patients suffer. It is in this landscape that states are compelled to fill the void with legislation such as HB 5504 which is unfortunately necessary to protect robust scientifically based recommendations.

Jennifer L. Waldo RN, MS, President-elect, CT Association of Public Health Nurses:

This bill establishes a clear, evidence-based standard of care for immunization, developed and maintained by the Commissioner of Public Health. This approach ensures that immunization policy in Connecticut remains responsive to evolving medical science while providing consistency across health care, education, long-term care, and insurance systems statewide. HB 5044 also improves alignment across existing statutes by ensuring that vaccine requirements for schools, institutions of higher education, nursing homes, pharmacists, and insurance coverage all reference the same scientifically grounded standard. This consistency reduces confusion for providers, patients, families, and institutions, while reinforcing Connecticut's long-standing commitment to disease prevention and community health.

Connecticut Hospital Association (CHA):

HB 5044 seeks to allow a mechanism through which the DPH can ensure that Connecticut's list of available and recommended vaccinations is current, and evidence based. DPH already has the responsibility to determine the immunization standards under existing law. HB 5044 provides for continuity in carrying out this responsibility at a time when the federal government vaccine recommendation process is undergoing significant changes causing significant disruption and confusion in the medical field. We also commend Section 9 of the bill, which would create a "vaccines for adults' program" to be administered by DPH. Our understanding, after discussion with DPH and the Public Health Committee, is that this program is in addition to other pathways through which adults receive vaccinations and is not intended to interfere with or limit those other care access points.

Others in Support of HB 5044:

- Janet Spinner, CNM, MSN
- Nicole Sequeira, MBBS
- Leila Henry, MPH Student, Yale School of Public Health
- Amani Edwards, MD
- Robert Dubrow, MD, PhD, Yale School of Public Health
- Mary Weber, RDH
- Michael Virata, MD, FIDSA, FACP
- Almasa Talovic, MD, Pediatrician
- Monika Szydlik Golanski, Mother

- Samantha Cousins, MSN, Public Health Nurse
- Michael Simms, MD, ID Specialist

NATURE AND SOURCES OF OPPOSITION:

Mark Dicaprio, Representative, 48th District, CGA:

When you evaluate HB 5044, I believe it represents one of the most sweeping and dangerous expansions of unaccountable government power this legislature has considered in years — and the people of Connecticut deserve better. HB 5044 removes the checks and balances that protect Connecticut residents by handing an unelected DPH commissioner sweeping, largely unchecked authority to unilaterally set vaccine standards, mandate insurance coverage across all state-regulated health plans, and issue standing orders during emergencies — all without meaningful legislative oversight or accountability to the taxpayers of Connecticut. The insurance mandate embedded in these bills will have real, painful consequences for working families and small businesses already struggling under the weight of rising healthcare costs. Most alarming, with the substitute language, HB 5044 deliberately eliminates any pathway for religious exemptions, effectively declaring that the sincerely held religious beliefs of Connecticut families have no standing in our law. I believe in the God-given and constitutionally protected right of every parent to make informed medical decisions for their children without government coercion.

Donna M. Veach, Representative, 30th District, CGA:

No single individual or agency should have unchecked authority to make public health decisions, particularly when it concerns something as personal and consequential as an individual's own health. Granting the DPH the ability to mandate or require vaccines beyond the recommendations of the CDC raises serious concerns about oversight, accountability, and constitutionality. Freedom of religion and personal choice is fundamental, particularly regarding healthcare decisions for oneself and for their children. The state should not have the authority to override parental rights in determining the medical care and immunizations of their children. Connecticut can protect public health without eroding these essential freedoms.

Rob Sampson, Senator, 16th District, CGA:

At the heart of this bill is a very simple but very powerful change. The commissioner of DPH would be authorized to establish what the state calls the “standard of care for immunization” and then revise that standard whenever the commissioner decides it should change. That single determination would then influence vaccination policy across large portions of Connecticut law including schools, colleges, health care providers, insurance coverage and various state vaccination programs. Normally when statewide standards are created, they go through the regulatory process. That process exists for a reason. It allows transparency, public input and legislative oversight before policies that affect millions of residents take effect. This bill deliberately avoids that process. Over the last several years I have seen a troubling pattern develop in Connecticut where state policy increasingly pressures and marginalizes people who question or dissent from prevailing medical policy. In a constitutional republic, government does not bully people into compliance on deeply personal medical decisions. Medical decisions are among the most personal decisions individuals and families make. Those decisions should come from conversations between patients and doctors, not from an evolving administrative standard that can be changed without public

input. Public health policy works best when it respects both sound medical guidance and the fundamental liberty of individuals to make informed decisions about their own care. H.B. 5044 moves Connecticut further away from that balance.

Erin E. Stewart, Former Mayor, City of New Britain:

HB 5044 would grant expanded authority to the state's commissioner of DPH to mandate vaccines for schoolchildren. In my view, that represents an unnecessary and troubling shift of decision-making power away from parents. Parents are best positioned to make informed healthcare decisions for their children in consultation with medical professionals who understand their individual circumstances. Policies that concentrate this authority in the hands of unelected bureaucrats risk undermining both parental rights and public trust in our institutions. Government plays an important role in promoting public health through education, access to care, and transparent communication. However, expanding state authority to compel medical interventions—particularly for children—moves beyond encouragement and into coercion. Connecticut has always valued both public health and personal liberty. We can protect both without granting the state sweeping new powers over private medical decisions.

Karen Barber, Board Member, CT Residents Against Medical Mandates (CTRAMM):

I vehemently oppose removing the Regulations Review Committee. I vehemently oppose giving unilateral authority to the unelected DPH commissioner with no bipartisan or public oversight. I vehemently oppose creating a new adult vaccine schedule for Connecticut residents. I vehemently oppose removing RFRA protections for vaccines. Religious liberty is a fundamental right that is guaranteed by the Constitution, and Americans should never be coerced into mandates that violate their deeply held religious beliefs. Decisions that affect the health and personal autonomy of Americans should include transparency and appropriate checks and balances in a bipartisan fashion.

Rachel Black, Licensed Professional Counselor:

Because of my vaccine-injury history, I carry a medical exemption, and my son's pediatric providers have been extremely careful with his medical care since birth. Our family works closely with physicians to make thoughtful, individualized decisions about health and safety. Legislation that expands state authority over vaccination policies risks undermining the ability for individualized medical decision-making between families and their doctors. Every patient's medical history is unique, and blanket standards cannot safely account for all circumstances. In a democratic society, decisions about a child's medical care should primarily remain between parents and qualified medical professionals, not be dictated through broad administrative powers. Children's health should never become a political battleground, and families should not be placed in the position of feeling that the government is making deeply personal medical decisions on their behalf.

Jamie Dalessio, Medical professional:

I am the mother of a vaccine product injured child, and a medical professional who has seen vaccine product injury. Connecticut's public health proposed policy is alarming. Instead of maintaining a system that requires review and accountability these bills consolidate authority to an unelected administrative official, the DPH commissioner. Medicine is not one size fits all. Science evolves and putting one single person in authority over a vaccine schedule that's already controversial is not great policy and only adds to a climate that is already distrusting. Also, by removing a bipartisan Regulatory Review Committee, when one party already holds

a majority is concerning. By removing this committee, it removes checks and balances. I oppose statutory protections during an active constitutional litigation. Connecticut was wrong to remove our religious exemption. It violates our constitution. Medical providers are flagged, targeted and backed into a corner by this state when it comes to medical exemptions.

Ash Waechter, CEO, Ash Waechter:

I believe residents must retain the right to claim religious exemptions when government policies conflict with their faith. The removal of the exemption from the Religious Freedom Restoration Act (RFRA) denies people this right. I oppose removing the Regulations Review Committee from the vaccine approval process, and I also oppose giving unilateral authority to the commissioner of DPH to add vaccines to the schedule without public oversight.

Catherine Vlasto, Licensed Clinical Social Worker (LCSW):

Religious freedom is a right in our country. HB 5044 targets the right for citizens to choose what they put into their body. I am in favor of medical choices for adults and for children that are based on religious reasons that do not need to be challenged by any authority. I believe that vaccines can be beneficial for those who choose to have them. But not everyone feels that way or is even able to have a vaccine. To create legislation that mandates adults are on a vaccine schedule is taking away rights and creates another health controversy that is not needed.

Caitlin Van Tongeran, Madison, CT

This bill represents a deeply concerning expansion of government authority over medical decision making and sets a dangerous precedent for the future of healthcare policy in our state. HB05044 effectively allows the Commissioner of Public Health to determine and update the “standard of care” for immunizations by adopting recommendations from outside medical organizations without the full legislative review and rulemaking process that such significant policy changes deserve. This approach bypasses the system of checks and balances that exists to ensure transparency, public input, and accountability to Connecticut residents. Medical decisions, including whether to receive a vaccine, should remain between individuals, families, and their healthcare providers. The government should not create frameworks that make it easier to impose broad medical mandates or erode personal autonomy and parental rights.

Shannon Turner, Master Sargeant:

I spent my career defending the constitutional liberties Americans rely on. Those liberties include bodily autonomy and the freedom to live according to one’s religious conscience. Policies that allow the state to pressure or mandate medical interventions raise serious concerns for me as someone who gave half my life defending those principles. The legislation expands access to what it describes as free vaccines through state programs. Connecticut participates in federally funded vaccine purchasing and distribution programs, which involve substantial taxpayer investment and advance procurement of vaccines such as COVID vaccines and HPV vaccines. When the state procures large quantities of medical products, it creates pressure to increase utilization to justify those costs. That financial structure risks shifting public health policy away from individualized medical care and toward program compliance. It is deeply troubling that in a free society the state could mandate an injection into a person’s body, removing their right to choose. Science works best when patients and providers can make informed decisions based on evolving evidence, not under pressure or coercion. Medical decisions should remain within the doctor patient relationship

where individual health circumstances, informed consent, and personal beliefs can be respected. Public health policy should never place the state in a position where medical compliance becomes more important than informed consent.

Others in Opposition to HB 5044:

- Alyssa Backus
- Rachel Bertels
- Alexandra Hanks-Caldwell
- John Chunis, Rocky Hill
- Sarah Colvill, Clinton
- Robert Zdanowski
- Luisa Yuhouse, Implementation Project Manager
- Janice Pena-Velilla
- Patricia Underwood, RN
- Benjamin Strenkowski, Father
- Sal Simsek, President, CT Republican Assembly
- Dr. Len Scalfari, Chiropractor
- RoseMarie, Rosa, Grandmother, Litchfield
- Amanda Roberto, Sr. Financial Analyst, West Hartford
- Joanna Pogunski, RN
- Michael Oconnell

Additionally, over 1600 testimonies were submitted anonymously, overwhelmingly in opposition to HB 5044.

Reported by: Dave Rackliffe, Asst Clerk

• **Date: March 19, 2026**