APPENDIX 2
Excerpts from State Laws and Regulations
ALABAMA:

§ 22-21-10 (2001); Flu . . . vaccination program . . .
(1) Employee. An individual who is a part-time or full-time employee of the long term care facility.

(2) Long term care facility. The term includes a skilled nursing facility, intermediate care facility, specialty care assisted living facility or dementia care facility, or an assisted living facility licensed under this chapter.

(b) Each long term care facility in this state shall conduct an immunization program as provided in this section which gives . . . employees the opportunity to be immunized against influenza virus.

(d) A long term care facility shall document the annual immunization against influenza virus . . . for . . . each employee, as provided in this section. Upon finding that . . . an employee has not been immunized against influenza virus, or if the long term care facility is unable to verify that the individual has received the required immunizations, the long term care facility shall provide or arrange for immunization.

(f) For an individual who . . . is newly employed by the long term care facility after November 30, but before March 30 of the following year, the long term care facility shall determine the individual's status for the influenza virus required under this section, and if found to be deficient, the long term care facility shall provide the required immunizations.

(g) No individual . . . or employee, shall be required to receive vaccine under this section if the vaccine is medically contraindicated, if the vaccine is against the individual's religious beliefs, or if the individual refuses the vaccine after being fully informed of the health risks of not being immunized.

(j) The State Board of Health shall make available to long term care facilities educational and informational materials pertaining to the vaccination program provided in this section.

ALA. Admin. CODE r. 420-5-4-.04 (1975); Personnel and Training . . .
Vaccines. Assisted living facilities shall immunize employees in accordance with current recommended CDC guidelines. Any particular vaccination requirement may be waived or delayed by the State Health Officer in the event of a vaccine shortage.

(b) In addition to requirements at 420-5-7-.16, each hospital shall: 1. Establish vaccination requirements for employees that are consistent with current recommendations from the Federal Centers for Disease Control and Prevention (CDC) and the Federal Occupational Safety and Health Administration (OSHA) (as a minimum will require annual influenza vaccinations). 2. Personnel absent from duty because of any communicable disease shall not return to duty until examined by a physician for freedom from any condition that might endanger the health of patients or employees. Documentation of freedom from communicable disease shall be available in facility records.
ALA. Admin. Code r. 420-5-20-.04 (2000); Personnel And Training . . .
3. Vaccines. Specialty care assisted living facilities shall immunize employees in accordance with current recommended CDC guidelines. Any particular vaccination requirement may be waived or delayed by the State Health Officer in the event of a vaccine shortage.

ALASKA: No law regarding vaccination of health care workers

ARIZONA: No law regarding vaccination of health care workers

ARKANSAS:


All nursing home facilities shall . . . full or part-time employees to be immunized against influenza disease . . .

1. Employees
Any individual who is employed or accepts employment at any nursing home facility, as a condition of employment, must agree to receive an annual influenza immunization. Employees may be exempt, if they qualify for medical or religious reasons. (See Exemptions)

Exemptions: Employees
1. Medical: Only a letter issued by the MEDICAL DIRECTOR, DIVISION OF COMMUNICABLE DISEASE/IMMUNIZATION, stating the vaccine or vaccines for which an individual is exempt is to be accepted as a valid medical exemption by the Nursing Home. Statements from a private physician are not to be accepted by the Nursing Home without this letter.

2. Religious: The Arkansas Department of Health's standard form for religious ex-exemptions must be submitted to the Division of Communicable Disease/Immunization. A notarized statement is required from a Pastor or church official that the individual is a member or adherent of a recognized church or religious denomination whose tenets are opposed to immunization.

Documentation: . . . Nursing homes must maintain a current log or list of . . . employees in their facility and document that each has been immunized. The log must include, at a minimum, the individual's name, date of birth, type of vaccine and date administered. Additionally, the reason or reasons vaccine were not administered to any . . . employee must be documented on the log or list. A copy of this log must be submitted to the Office of Long-Term Care by December 1, of each year. Nursing homes are required to retain a copy of the log for a period of fifteen (15) months from the date of submission to the Office of Long-Term Care. These log forms may be obtained from the Arkansas Department of Health by calling 501-661-2169.

The Office of Long-Term Care will monitor and enforce the rules and regulations to assure compliance with the law. Any nursing home which does not enforce the provisions of this act will be in violation of Ark. Code Ann. § 20-10-205 and 206 and will be subject to the

Responsibilities and Implementation The Arkansas Department of Health shall provide sufficient quantities of vaccine, supplies, and the staff necessary to immunize . . . staff members in all nursing home facilities. Area Health Office or local health unit staff members will co-ordinate immunization activities with nursing home staff members to assure that all . . . employees receive all required doses of vaccine.

ARK. CODE ANN. § 20-10-1303 (2003); Definitions . . .
(1) "Document" means evidence from a person's physician or health care provider in written format indicating the date and place when the individual received the influenza virus vaccine …

(2) "Medically contraindicated" means either that the influenza . . . vaccines should not be administered to an individual because of a condition that individual has that will be detrimental to the individual's health if the individual receives either of the vaccines;

(3) (A) "Nursing home facilities" means facilities that include any building, structure, agency, institution, or place for the reception, accommodation, board, care, or treatment of two (2) or more individuals who because of physical or mental infirmity are unable to sufficiently or properly care for themselves and for which reception, accommodation, board, care, or treatment a charge is made.

(B) "Nursing home" shall not include the offices of private physicians and surgeons, residential health care facilities, hospitals, institutions operated by the federal government, any other similar facility where individuals reside, or any facility which is conducted by and for those who rely exclusively upon treatment by prayer alone for healing in accordance with the tenets or practices of any recognized religious denomination; and

(4) "Report" means to maintain a current list or roster of vaccine status for . . . employees and by December 1 of each year to provide that list to the Office of Long-Term Care.

ARK. CODE ANN. § 20-10-1304. (2003); Implementation . . .
(b) Each nursing home facility in this state shall . . . (2) As a condition of their employment, require all employees to participate in immunization programs conducted while they are employed at the facility, unless the employee meets the qualifications for exemptions as listed in §20-10-305; and (3) (A) Document and report annually immunizations against influenza virus for . . . full-time and part-time employees. . . (d) The Department of Health shall provide vaccines, supplies, and staff necessary for the immunizations of nursing home . . . employees as provided for in this subchapter.

ARK. CODE ANN. § 20-10-1305 (2003); Exemptions . . .
All . . . full-time or part-time employees of nursing home facilities shall be immunized according to this subchapter with the following exemptions: (1) No individual shall be required to receive either an influenza virus vaccine . . . if the vaccine is medically contraindicated as described in the product labeling approved by the Food and Drug Administration.
CALIFORNIA:

CAL. HEALTH & SAFETY CODE § 1288.7 (2007); Required actions of general acute care hospitals . . .
By July 1, 2007, the department shall require that each general acute care hospital, in accordance with the Centers for Disease Control guidelines, take all of the following actions:

(a) Annually offer onsite influenza vaccinations, if available, to all hospital employees at no cost to the employee. Each general acute care hospital shall require its employees to be vaccinated, or if the employee elects not to be vaccinated, to declare in writing that he or she has declined the vaccination.

(b) Institute respiratory hygiene and cough etiquette protocols, develop and implement procedures for the isolation of patients with influenza, and adopt a seasonal influenza plan.

(c) Revise an existing or develop a new disaster plan that includes a pandemic influenza component. The plan shall also document any actual or recommended collaboration with local, regional, and state public health agencies or officials in the event of an influenza pandemic.

(a) "General acute care hospital" means a health facility having a duly constituted governing body with overall administrative and professional responsibility and an organized medical staff that provides 24-hour inpatient care, including the following basic services: medical, nursing, surgical, anesthesia, laboratory, radiology, pharmacy, and dietary services. A general acute care hospital may include more than one physical plant maintained and operated on separate premises as provided in Section 1250.8. A general acute care hospital that exclusively provides acute medical rehabilitation center services, including at least physical therapy, occupational therapy, and speech therapy, may provide for the required surgical and anesthesia services through a contract with another acute care hospital. In addition, a general acute care hospital that, on July 1, 1983, provided required surgical and anesthesia services through a contract or agreement with another acute care hospital may continue to provide these surgical and anesthesia services through a contract or agreement with an acute care hospital. The general acute care hospital operated by the State Department of Developmental Services at Agnews Developmental Center may, until June 30, 2007, provide surgery and anesthesia services through a contract or agreement with another acute care hospital. Notwithstanding the requirements of this subdivision, a general acute care hospital operated by the Department of Corrections and Rehabilitation or the Department of Veterans Affairs may provide surgery and anesthesia services during normal weekday working hours, and not provide these services during other hours of the weekday or on weekends or holidays, if the general acute care hospital otherwise meets the requirements of this section.

CAL. CODE REGS. tit. 8 § 5199 (2009); Aerosol Transmissible Diseases . . .
Health care worker. A person who works in a health care facility, service or operation, or who has occupational exposure in a public health service . . .
CAL. HEALTH & SAFETY CODE § 1288.8 (2007); HAI surveillance and prevention program; Databases; Development of program by hospitals . . .

(b) On and after January 1, 2008, each general acute care hospital shall implement and annually report to the department on its implementation of infection surveillance and infection prevention process measures that have been recommended by the federal Centers for Disease Control and Prevention Healthcare Infection Control Practices Advisory Committee, as suitable for a mandatory public reporting program. Initially, these process measures shall include the CDC guidelines for central line insertion practices, surgical antimicrobial prophylaxis, and influenza vaccination of patients and healthcare personnel. In consultation with the advisory committee, the department shall make this information public no later than six months after receiving the data.

COLORADO: No law regarding mandatory vaccination of health care workers

CONNECTICUT: No law regarding mandatory vaccination of health care workers

DISTRICT OF COLUMBIA:


Health Care Facility- A clinic, freestanding ambulatory care facility, freestanding laboratory, hospital, nursing home, or therapeutic radiological center.

Health care provider or provider - a health care clinic, a physician, a health maintenance organization, a nurse, a hospital, a charitable organization that provides medical care or advice, or any other entity that provides medical care or advice.

D.C. Mun. Regs. Tit. 22 § B3222 (2002); Immunizations . . .

3222.1 As described further in this Section, each facility shall ensure that each employee has either received immunization against influenza virus or has refused such vaccination . . . The facility shall be required to maintain written evidence of each such immunization or refusal.

3222.2 Influenza . . . immunizations shall be provided and updated in accordance with the latest recommendations of the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention. To the extent that the ACIP recommendations may differ from the terms of this Section, the ACIP recommendations shall control.

3222.3 Except as provided in subsection 3222.9 . . . each employee shall, no later than November 30 [th] of each calendar year or six (6) weeks after the vaccination becomes readily available in the District of Columbia, whichever is later, undergo immunization for influenza virus as required pursuant to subsection 3222.2.

3222.4 Pursuant to subsection 3222.3, each . . . employee may obtain the required immunization from a medical provider of his or her choice . . . employee shall provide the facility, no later than November 30 [th] or six (6) weeks after the vaccination becomes readily available in the District.
of Columbia, whichever is later, with documentation of the immunization. The facility shall record such documentation within twenty-four (24) hours of its receipt.

3222.5 The facility shall . . . for each employee hired between December 1 [st] and March 31 [st], determine, within seventy-two (72) hours of admission or the start of employment, whether the . . . employee has received immunization against influenza virus as required pursuant to subsections 3222.2, 3222.3, and 3222.4 . . . If the facility determines that an employee has not received such immunization, the facility shall instruct the employee to obtain the immunization and to provide documentation thereof, or of refusal, to the facility within seven (7) days of the determination.

D.C. Mun. Regs. Tit. 22 § B2017 (2008); Health Examination . . .
Immunization against communicable disease shall be required of all employees and all other persons who routinely come in contact with patients or patient areas. Immunizations shall be in accordance with current standards and guidelines developed by the Centers for Disease Control and Prevention.

DELAWARE: No law regarding mandatory vaccination of health care workers

FLORIDA: No law regarding mandatory vaccination of health care workers

GEORGIA: No law regarding mandatory vaccination of health care workers

HAWAII: No law regarding mandatory vaccination of health care workers

IDAHO: No law regarding mandatory vaccination of health care workers

ILLINOIS:

ILL. ADMIN. CODE tit. 77 § 956.10 (2009); Definitions . . .
Health care employee - All paid and unpaid persons working in health care settings who have the potential for exposure to infectious materials, including body substances, contaminated medical supplies and equipment, contaminated environmental surfaces, or contaminated air. Health care employees include, but are not limited to, physicians, nurses, nursing assistants, therapists, technicians, emergency medical services employees, pharmacists, laboratory employees, and persons not directly involved in patient care (e.g., clerical, dietary, housekeeping, maintenance and volunteers) but potentially exposed to infectious agents that can be transmitted to and from health care employees.

Health care setting:
A facility licensed under the Alternative Health Care Delivery Act; An ambulatory surgical treatment center, as defined in the Ambulatory Surgical Treatment Center Act; An assisted living facility, a shared housing establishment, or a board and care home, as defined in the Assisted Living and Shared Housing Act; A community living facility, as defined in the Community Living Facilities Licensing Act; A life care facility, as defined in the Life Care Facilities Act; A long-term care facility, as defined in the Nursing Home Care Act; A freestanding emergency
center, licensed under the Emergency Medical Services Systems Act; A home health agency, home services agency or home nursing agency, as defined in the Home Health, Home Services, and Home Nursing Agency Licensing Act; A hospice care program or voluntary hospice program, as defined in the Hospice Program Licensing Act; A hospital, as defined in the Hospital Licensing Act;

**ILL. ADMIN. CODE tit. 77 § 956.30 (2009); Influenza Vaccination . . .**

Beginning with the 2010 to 2011 influenza season, each health care setting shall ensure that all health care employees are provided education on influenza and are offered the opportunity to receive seasonal, novel and pandemic influenza vaccine, in accordance with this Section, during the influenza season (between September 1 and March 1 of each year), unless the vaccine is unavailable (see subsection (e)).

a) Each health care setting shall notify all health care employees of the influenza vaccination provisions of this Part and shall provide or arrange for vaccination of all health care employees who accept the offer of vaccination. Each health care setting shall provide all health care employees with education about the benefits of influenza vaccine and potential consequences of influenza illness. Information provided shall include the epidemiology, modes of transmission, diagnosis, treatment and non-vaccine infection control strategies.

b) Each health care setting shall develop and implement a program that includes the following:

1) A plan to offer seasonal, pandemic or any other influenza vaccine;

2) The time frame within which health care employees will be offered vaccination; and

3) Any required documentation relating to the health care employee vaccination requirement of this Part.

c) Declination of Vaccine

1) Health care employees may decline to accept the offer of vaccination for reasons including the following:

   A) The vaccine is medically contraindicated, which means that administration of influenza vaccine to that person would likely be detrimental to the person's health;

   B) Vaccination is against the person's religious beliefs;

   C) The person has already been vaccinated; or

   D) For any other reasons documented by the person as the basis of the refusal.

2) Health care employees who decline vaccination for any reason indicated in subsection (c)(1) shall sign a statement declining vaccination and certifying that he or she received education about the benefits of influenza vaccine.
d) Unavailability of Vaccine. A health care setting shall not be required to offer influenza vaccination when the vaccine is unavailable for purchase, shipment or administration by a third party, or when complying with an order of the Department that restricts the use of the vaccine. A health care setting shall offer to provide or arrange for influenza vaccination for health care employees as soon as the vaccine becomes available.

e) Documentation

1) Each health care setting shall maintain a system to track the offer of vaccination to health care employees. The system shall include documentation that each person either accepted the offer or declined the offer by signing a declination statement pursuant to subsection (c)(2).

2) If a health care setting is unable to provide or arrange for influenza vaccination for health care employees who wish to be vaccinated, the reasons why the vaccination could not be provided or arranged for shall be documented.

3) Individual declination statements should be handled in a manner that ensures individual confidentiality.

4) Documentation shall be maintained for at least three years.

f) Health care settings may choose to develop and implement more stringent influenza vaccination policies, strategies or programs designed to improve health care employee vaccination rates than those required by this Part and that are consistent with existing law and regulation.

**INDIANA:** No law regarding mandatory vaccination of health care workers

**IOWA:** No law regarding mandatory vaccination of health care workers

**KANSAS:** No law regarding mandatory vaccination of health care workers

**KENTUCKY:**

*902 KY. ADMIN. REGS. 2:065 (2003); Immunization requirements for long-term care facilities . . .*

Section 2. Vaccine Availability. (1) If vaccine is available, a long-term care facility shall:

(a) Obtain a sufficient quantity of influenza . . . vaccine to immunize each employee . . . of a facility for whom the vaccine is medically indicated; or

(b) Enter into an agreement with a local health department or other health care provider to obtain and administer influenza . . . vaccine to each employee . . . of a facility for whom the vaccine is medically indicated.

(2) A long-term care facility may charge a third party . . . or an employee for the cost of the: (a) Vaccine; and (b) Administration of the vaccine.
Section 3. Immunization Schedule.
(1) A long-term care facility shall request that each current employee . . . agree to be vaccinated on an annual schedule against influenza when the vaccine is: (a) Available; and (b) Medically indicated . . .

(3) Upon . . . employment, a long-term care facility shall request that each new employee . . . agree to be vaccinated on an annual schedule against influenza when the vaccine is: (a) Available; and (b) Medically indicated.

5) If a long-term care facility is located within a larger facility, such as a hospital, the provisions of this administrative regulation shall apply to every employee of the larger facility who may also work in the long-term care facility on a full-time, part-time, or contractual basis.

Section 4. Health Records. (1) A long-term care facility shall maintain an immunization health record for each employee . . . that shall document: (a) The immunization status of the employee . . . for influenza virus. (b) The date that the employee . . . received counseling on the risks and benefits of the vaccines; (c) The date the employee . . . was requested to be immunized against influenza virus . . . and (d) The date the employee . . . was vaccinated against each disease. (2) If after being advised of the risks and benefits of the vaccine, an employee . . . refuses to be vaccinated, as provided in KRS 209.552(5), a long-term care facility shall document in the health record: (a) The date each vaccine was offered; (b) Each vaccine that was not administered; and (c) The reason each vaccine was refused.

Section 5. Reporting. (1) Upon recognition of an outbreak of ILI, a long-term care facility shall report the outbreak within twenty four (24) hours, by telephone, facsimile, or e-mail to the: (a) Local health department serving the jurisdiction in which the long-term care facility is located; or (b) Department for public health. (2) Upon receipt of a report of an outbreak from a long-term care facility, a local health department shall: (a) Immediately notify the Department for Public Health, Division of Epidemiology; and (b) Assist the department in carrying out a public health response as instructed. (3) Within one (1) week of reporting an outbreak of ILI, a long-term care facility shall submit a completed Kentucky Reportable Disease Form for each affected employee . . . to: (a) The local county health department serving the jurisdiction in which the long-term care facility is located; or (b) The Department for Public Health, Division of Epidemiology. (4) Upon notification of an outbreak of ILI, the Department for Public Health shall contact the long-term care facility to make recommendations for appropriate confirmation of the etiology of illness and intervention. (5) The Department for Public Health shall maintain a data-base of confirmed occurrences of influenza . . . occurring in long-term care facilities. (6) The Department for Public Health shall maintain a data system to report the number of long-term care residents diagnosed with influenza . . . and associated complications, and the number of hospitalizations of long-term care facility . . . each year due to influenza virus… and associated complications, pursuant to the requirements of KRS 209.554(4).

Section 6. Educational Literature. Within ninety (90) days of publication by the CDC, the Department for Public Health shall provide each licensed long-term care facility with a camera-ready copy of the most current vaccine information statements for influenza . . .
902 KY. ADMIN. REGS. 8:040 (1993); Immunization requirements for long-term care facilities . . .
(25) "Full-time employee" means an employee who is compensated on a salary basis for a standard biweekly pay period . . .

(33) "Part-time employee" means an employee who is compensated on a biweekly basis for hours worked and whose hours worked average less than 100 hours of work per month.

KY. REV. STAT. ANN. § 216.510 (2002); Definitions for KRS 216.515 to 216.530 . . .
(a) "Long-term care facilities" means those health care facilities in the Commonwealth which are defined by the Cabinet for Health and Family Services to be family care homes, personal care homes, intermediate care facilities, skilled nursing facilities, nursing facilities as defined in Pub. L. 100-203, nursing homes, and intermediate care facilities for the intellectually and developmentally disabled;

KY. REV. STAT. ANN. § 209.550 (2002); Definitions for KRS 209.550 to 209.554 . . .
(2) "Annual schedule" means the schedule for administering a once-a-year vaccination against influenza, established by ACIP to ensure that in the event of a shortage or delay in production of vaccine, persons at greatest risk are served first.

(3) "If vaccine is available" means that a sufficient supply of vaccine has been produced by vaccine manufacturers and is available for purchase and shipment.

(4) "Influenza" means an acute viral infection of the respiratory tract: (a) Caused by an influenza virus: (b) Confirmed by laboratory culture; and (c) Characterized by the sudden onset of a group of signs and symptoms such as fever, headache, myalgia, coryza, sore throat, and a dry cough.

(6) "Influenza vaccine" means a vaccine licensed by the Food and Drug Administration which produces immunity to influenza.

LOUISIANA: No law regarding mandatory vaccination of health care workers

MAINE:

ME. REV. STAT. tit. 10 144 264 (2002); Immunization Requirements for Health Care Workers . . .
This rule is issued pursuant to the statutory authority of the Department of Human Services to require immunization of the employees of designated health care facilities as set forth in 22 M.R.S.A. §802, as amended by P.L. 2001, Ch. 185. It prescribes the dosage for required immunizations and defines responsibilities, exclusion periods, record keeping and reporting requirements for officials of hospitals and healthcare facilities . . .

Section 2. Immunizations Required.
C. All Designated Healthcare Facilities shall adopt and implement a policy that recommends and offers annual immunizations against seasonal influenza to all personnel who provide direct care to residents of the facility.
E. No chief administrative officer may permit any employee to be in attendance at work without a certificate of immunization for each disease or other acceptable evidence of immunity to each disease, or documentation of exemption or declination.

Section 3. Exceptions and Declinations. An employee who does not meet the immunization/immunity requirement may be permitted to attend work under the following conditions:

A. The employee presents to the designated healthcare facility a physician's written statement that immunization against one or more of these diseases is medically inadvisable. If the statement does not include all diseases, the employee must meet the immunization/immunity requirements for any diseases not covered by the statement.

B. The employee states in writing an opposition to immunization because of a sincere religious belief or for philosophical reasons.


A. Certificate of Immunization. To demonstrate proper immunization against each disease, an employee shall present the designated healthcare facility with a Certificate of Immunization from a physician, nurse or health official who has administered the immunizing agent(s) to the employee. Physicians within their own practice may authorize their own employees to issue a certificate of immunization on behalf of the physician. The certificate shall specify the immunizing agent, and the date(s), including month and year, on which it was administered. Physicians, having reviewed official patient records created by another practitioner which indicate that a particular patient has received an immunization on a specified date, demonstrating at a minimum the month and year the immunization was given, may certify that the immunization was given. Adequately prepared secondary and/or collegiate school health records will also be considered acceptable for the purpose of meeting this requirement.

B. Proof of Immunity. To demonstrate that an employee is immune to any of the diseases, the employee shall present the hospital/facility with laboratory evidence demonstrating immunity, or other acceptable evidence of immunity…

6. Exclusions from the Workplace.
A. Exclusion by order of Public Health Official. An employee not immunized or otherwise immune from a disease shall be excluded from the worksite, when in the opinion of a public health official, the employee’s continued presence at work poses a clear danger to the health of others . . . The chief administrative officer shall exclude the employee during the period of danger or for one incubation period following immunization of the employee, when one or more cases of disease are present . . .

B. Except as otherwise provided for by law, contract or collective bargaining Agreement, an employer will not be responsible for maintaining an employee in pay status as a result of this rule.
C. When a public health official determines there are reasonable grounds to believe a public health threat exists, an exempted employee may be immunized or tested for serologic evidence of immunity. Employees without serologic evidence of immunity and those who become immunized against the disease in question at the time of a documented case or cases of disease must be excluded from the work site during one incubation period . . .

Section 7. Records and Record Keeping.
D. Required Reports, 1. Routine Reporting

The chief administrative officer of each designated healthcare facility is responsible for submitting a summary report on the immunization status of all employees by December 15 of each calendar year, on a form prescribed by the Department, to the Director of the Maine CDC of the Department of Health and Human Services. The summary report will include the following information at a minimum: Specific information identifying the facility; the chief administrative officer; the total number of employees; the number of employees born on or after January 1, 1957; and the number of employees identified by vaccine type as either immunized, serological proof of immunity, exempt, having declined hepatitis B vaccine, or out of compliance. The summary report may be constructed so as to reflect meaningful data by groupings within the facility (e.g., pediatric unit). Each report shall be signed by the hospital/facility's chief administrative officer as a certification that the information is accurate.

22 M.R.S. § 802 (1989); Authority of department . . .
A. "Designated health care facility" means a licensed nursing facility, residential care facility, intermediate care facility for the mentally retarded, multi-level health care facility, hospital or home health agency.

C. "Employee" means any person who performs a service for wages or other remuneration for a designated health care facility.

4-B. EXEMPTIONS TO IMMUNIZATION. Employees are exempt from immunization otherwise required by this subchapter or by rules adopted by the department pursuant to this section under the following circumstances.

A. A medical exemption is available to an employee who provides a physician's written statement that immunization against one or more diseases may be medically inadvisable.

B. A religious or philosophical exemption is available to an employee who states in writing a sincere religious or philosophical belief that is contrary to the immunization requirement of this subchapter.

5. IMMUNIZATION REQUIREMENTS FOR NURSING FACILITY STAFF. A nursing facility or licensed assisted living facility shall adopt a facility policy that recommends and offers annual immunizations against influenza to all personnel who provide direct care to residents of the facility.

6. ACCEPTANCE OF FUNDS. The department is authorized to accept any public or private
funds that may be available to create a supply or stockpile of antiviral medications, influenza vaccines or other items necessary in the event of a severe outbreak of influenza or an outbreak of another infectious disease.

MARYLAND:

**MD. CODE ANN., [HEALTH-GENERAL] § 18-404 (2002); Immunization against influenza virus . . .**

(2) "Employee" means an individual employed full-time or part-time directly, through contract with another entity, or as an independent contractor, by a related institution.

(b) Immunizations generally; consent. – (2) Subject to subsection (e) of this section, each related institution in the State shall immunize employees against the influenza virus.

(3) Before an immunization under this section is administered, the related institution shall obtain written consent to administer the immunization from: (i) The . . . employee receiving the immunization.

(c) Protocol. -- Each related institution shall conduct the immunizations required under subsection (b) of this section:

(1) In accordance with the recommendations established by the Advisory Committee on Immunization Process of the United States Centers for Disease Control and Prevention that are in effect at the time the related institution conducts the immunizations; and

(2) By December 1 of each year that the immunization is required.

(d) New . . . employees. -- A related institution that . . . accepts an individual as a new employee after December 1 but before April 1 shall: (1) Determine the individual's status for immunization as required under subsection (b) of this section; and (2) If necessary, provide or arrange for an immunization as required under subsection (b) of this section.

(e) Circumstances under which vaccine not required. – A[n] . . . employee is not required to receive a vaccine under this section if: (1) The vaccine is medically contraindicated for the . . . employee; (2) The vaccine is against the . . . employee's religious beliefs; or (3) After being fully informed by the related institution of the health risks associated with not receiving a vaccine, the . . . employee refuses the vaccine.

(f) Documentation. -- (1) . . . (ii) Each related institution shall document the annual immunization against influenza virus received by each employee in the employee's personnel file. (2) If a[n] . . . employee refuses to be immunized as required under subsection (b) of this section, the related institution shall document the refusal and the reason for the refusal.

(g) Notification; educational and informational materials. -- Each related institution shall: (1) Notify each prospective . . . employee of the immunization requirements of this section and request that the . . . employee agree to be immunized in accordance with subsection
(b)(3) of this section; and (2) Make available to all . . . employees of the related institution educational and informational materials relating to immunization against influenza virus…

MD. REGS. CODE tit. § 10.07.02.21-1 (2008); Employee Health Program . . .
(7) The facility shall request that each employee receive immunization from influenza virus in accordance with Health-General Article, § 18-404, Annotated Code of Maryland. . . The facility shall document refusals and shall conduct surveillance of nonimmune employees during the recognized influenza season.

MD. REGS. CODE tit. § 10.07.01.34 (2008); Infection Prevention and Control Program . . .
(5) Immunizations for influenza shall be offered to staff and licensed independent practitioners. Reasons for refusal of the influenza vaccine by an employee shall be documented by the infection control or employee health program.

MD. REGS. CODE tit. § 10.07.02.21-3 (2008); Volunteer health Program . . .
A. The facility shall urge that volunteers, defined as individuals who spend an average of 8 hours per week or more in the institution patient care areas and who receive no pay or benefits, accept annual influenza vaccination . . . as considered necessary by the facility. The facility shall give appropriate health care information to such volunteers to provide maximum protection to residents. B. The facility shall maintain documentation of the discussion between the facility and the volunteer concerning influenza vaccine and tuberculin testing.

MASSACHUSETTS:

MASS. REGS. CODE tit. 105 § 130.325(A) (2009); Definitions . . .
(A) Definitions. (1) For purposes of 105 CMR 130.325, personnel means an individual or individuals employed by or affiliated with the hospital, whether directly, by contract with another entity, or as an independent contractor, paid or unpaid, including but not limited to employees, members of the medical staff, contract employees or staff, students, and volunteers who either work at or come to the licensed hospital site, whether or not such individual(s) provide direct patient care. (2) For purposes of 105 CMR 130.325, the requirement for influenza vaccine or vaccination means immunization by either influenza vaccine, inactivated or live; attenuated influenza vaccine including seasonal influenza vaccine pursuant to 105 CMR 130.325(B); and/or other influenza vaccine pursuant to 105 CMR 130.325(C).

(B) Each hospital shall ensure that all personnel are vaccinated with seasonal influenza vaccine unless an individual declines vaccination in accordance with 105 CMR 130.325(F). When feasible, and consistent with any guidelines of the Commissioner of Public Health or his/her designee, each hospital shall ensure that all personnel are vaccinated with seasonal influenza vaccine no later than December 15, 2009 and annually thereafter.

(C) Each hospital also shall ensure that all personnel are vaccinated against other pandemic or novel influenza virus(es) as specified in guidelines of the Commissioner or his/her designee, unless an individual declines vaccination in accordance with 105 CMR 130.325(F). Such guidelines may specify: (1) the categories of personnel that shall be vaccinated and the order of priority of vaccination of personnel, with priority for personnel with responsibility for direct patient care.
patient care; (2) the influenza vaccine(s) to be administered; (3) the dates by which personnel must be vaccinated; and (4) any required reporting and data collection relating to the personnel vaccination requirement of 105 CMR 130.325(C).

(D) Each hospital shall provide all personnel with information about the risks and benefits of influenza vaccine.

(E) Each hospital shall notify all personnel of the influenza vaccination requirements of 105 CMR 130.325 and shall, at no cost to any personnel, provide or arrange for vaccination of all personnel who cannot provide proof of current immunization against influenza, as required pursuant to 105 CMR 130.325(B) and (C), unless an individual declines vaccination in accordance with 105 CMR 130.325(F).

MASS. REGS. CODE tit. 105 § 130.325(F) (2009); Exceptions . . .

(F) Exceptions. (1) A hospital shall not require an individual to receive an influenza vaccine pursuant to 105 CMR 130.325(B) or (C) if: (a) the vaccine is medically contraindicated, which means that administration of influenza vaccine to that individual would likely be detrimental to the individual's health; (b) vaccination is against the individual's religious beliefs; or (c) the individual declines the vaccine. (2) An individual who declines vaccination for any reason shall sign a statement declining vaccination and certifying that he or she received information about the risks and benefits of influenza vaccine.

MASS. REGS. CODE tit. 105 § 130.325(G) (2009); Unavailability of Vaccine . . .

(G) Unavailability of Vaccine. A hospital shall not be required to provide or arrange for influenza vaccination during such times that the vaccine is unavailable for purchase, shipment, or administration by a third party, or when complying with an order of the Commissioner which restricts the use of the vaccine. A hospital shall obtain and administer influenza vaccine in accordance with 105 CMR 130.325 as soon as vaccine becomes available.

MASS. REGS. CODE tit. 105 § 130.325(H) (2009); Documentation . . .

(H) Documentation. (1) A hospital shall require and maintain for each individual proof of current vaccination against influenza virus pursuant to 105 CMR 130.325(B) and (C) or the individual's declination statement pursuant to 105 CMR 130.325(F). (2) Each hospital shall maintain a central system to track the vaccination status of all personnel. (3) If a hospital is unable to provide or arrange for influenza vaccination for any individual, it shall document the reasons such vaccination could not be provided or arranged for.

MASS. REGS. CODE tit. 105 § 130.325(I) (2009); Reporting and Data Collection . . .

(I) Reporting and Data Collection. Each hospital shall report information to the Department documenting the hospital's compliance with the personnel vaccination requirements of 105 CMR 130.325, in accordance with reporting and data collection guidelines of the Commissioner or his/her designee.

MASS. REGS. CODE tit. 105 § 150.002 (2009); Administration . . .

(8) Requirement that Personnel be Vaccinated Against Influenza Virus. (a) Definitions. 1. For purposes of 105 CMR 250.002(D)(8), personnel means an individual or individuals employed by
or affiliated with the facility, whether directly, by contract with another entity, or as an independent contractor, paid or unpaid, including but not limited to employees, members of the medical staff, contract employees or staff, students, and volunteers who either work at or come to the licensed facility site, whether or not such individual(s) provide direct patient care. 2. For purposes of 105 CMR 150.002(D)(8), the requirement for influenza vaccine or vaccination means immunization by either influenza vaccine, inactivated or live; attenuated influenza vaccine including seasonal influenza vaccine pursuant to 105 CMR 150.002(D)(8)(b); and/or other influenza vaccine pursuant to 105 CMR 150.002(D)(8)(c). (b) Each facility shall ensure that all personnel are vaccinated annually with seasonal influenza vaccine unless an individual declines vaccination in accordance with 105 CMR 150.002(D)(8)(f). When feasible, and consistent with any guidelines of the Commissioner of Public Health and his/her designee, each facility shall ensure that all personnel are vaccinated with seasonal influenza vaccine no later than December 15, 2009 and annually thereafter. (c) Each facility also shall ensure that all personnel are vaccinated against other pandemic or novel influenza virus(es) as specified in guidelines of the Commissioner or his/her designee, unless an individual declines vaccination in accordance with 105CMR 150.002(D)(8)(f). Such guidelines may specify:

1. The categories of personnel that shall be vaccinated and the order of priority of vaccination of personnel, with priority for personnel with responsibility for direct patient care; 2. The influenza vaccine(s) to be administered; 3. The dates by which personnel must be vaccinated; and 4. Any required reporting and data collection relating to the personnel vaccination requirement of 105 CMR 150.002(D)(8)(c). (d) Each facility shall provide all personnel with information about the risks and benefits of influenza vaccine. (e) Each facility shall notify all personnel of the influenza vaccination requirements of 105 CMR 150.002(D)(8) and shall, at no cost to any personnel, provide or arrange for vaccination of all personnel who cannot provide proof of current immunization against influenza unless an individual declines vaccination in accordance with 105 CMR 150.002(D)(8)(f). (f) Exceptions. 1. A facility shall not require an individual to receive an influenza vaccine pursuant to 105 CMR 150.000(D)(8)(b) or (c) if: a. the vaccine is medically contraindicated, which means that administration of influenza vaccine to that individual would likely be detrimental to the individual's health. b. vaccination is against the individual's religious beliefs; or c. the individual declines the vaccine. 2. An individual who declines vaccination for any reason shall sign a statement certifying that he or she received information about the risks and benefits of influenza vaccine. (g) Unavailability of Vaccine. A facility shall not be required to provide or arrange for influenza vaccination during such times that the vaccine is unavailable for purchase, shipment, or administration by a third party or when complying with an order of the Commissioner of Public Health which restricts the use of the vaccine. A facility shall obtain and administer influenza vaccine in accordance with 105 CMR 150.002(D)(8) as soon as vaccine becomes available

MASS. ANN. LAWS. ch 111 § 52 (2006); Definitions for Sections 51 to 56 . . .
"Hospital", any institution, however named, whether conducted for charity or for profit, which is advertised, announced, established or maintained for the purpose of caring for persons admitted thereto for diagnosis, medical, surgical or restorative treatment which is rendered within said institution.

"Clinic", any entity, however organized, whether conducted for profit or not for profit, which is
advertised, announced, established, or maintained for the purpose of providing ambulatory medical, surgical, dental, physical rehabilitation, or mental health services. In addition, "clinic" shall include any entity, however organized, whether conducted for profit or not for profit, which is advertised, announced, established, or maintained under a name which includes the word "clinic", "dispensary", or "institute", and which suggests that ambulatory medical, surgical, dental, physical rehabilitation, or mental health services are rendered therein. With respect to any entity which is not advertised, announced, established, or maintained under one of the names in the preceding sentence, "clinic" shall not include a medical office building, or one or more practitioners engaged in a solo or group practice, whether conducted for profit or not for profit, and however organized, so long as such practice is wholly owned and controlled by one or more of the practitioners so associated, or, in the case of a not for profit organization, its only members are one or more of the practitioners so associated or a clinic established solely to provide service to employees or students of such corporation or institution. For purposes of this section, clinic shall not include a clinic conducted by a hospital licensed under section fifty-one or by the federal government or the commonwealth.


"Health care facility", a hospital, institution for the care of unwed mothers or clinic, as defined in section fifty-two; a long-term care facility, which is an infirmary maintained in a town, a convalescent or nursing home, a rest home or a charitable home for the aged, as defined in section seventy-one; a clinical laboratory subject to licensing under chapter one hundred and eleven D, a public medical institution, which is any medical institution, and, after December first, nineteen hundred and seventy-two, any institution for the mentally ill or retarded, supported in whole or in part by public funds, staffed by professional, medical and nursing personnel and providing medical care, in accordance with standards established through licensing, approval or certification for participation in the programs administered under Titles 18 and 19 of the Federal Social Security Act, by the department; and any part of such facilities; provided, however, that "health care facility" shall not include a facility operated by and for persons who rely exclusively upon treatment by spiritual means through prayer for healing, in accordance with the creed or tenets of a church or religious denomination and in which health care by or under the supervision of doctors of medicine, osteopathy, or dentistry is not provided.

"Acute-care hospital", any hospital licensed under section fifty-one of chapter one hundred and eleven, and the teaching hospital of the University of Massachusetts Medical School, which contains a majority of medical-surgical, pediatric, obstetric, and maternity beds, as defined by the department.

MICHIGAN: No law regarding vaccination of health care workers

MINNESOTA: No law regarding vaccination of health care workers

MISSISSIPPI: No law regarding vaccination of health care workers

MISSOURI: No law regarding vaccination of health care workers

MONTANA: No law regarding vaccination of health care workers

Developing A Model State Law
Appendix 2 – Page 17
NEBRASKA: No law regarding vaccination of health care workers

NEW HAMPSHIRE:

NH REV. STAT. ANN. § 151:33 (2011); Hospitals and Ambulatory Surgical Facilities Required to Report . . .
(b) Hospitals shall also initially identify, track, and report process measures including . . . (3) Coverage rates of influenza vaccination for health care personnel and patients/residents.

II-a. Any ambulatory surgical facility licensed pursuant to this chapter shall maintain a program capable of identifying and tracing infections for the purpose of reporting under this section. Such program shall have the capacity to identify the following elements . . . (c) Coverage rates of influenza vaccination for health care personnel.

NH REV. STAT. ANN. § 438; 151:9-b (2005); Immunizations by Hospitals, Residential Care Facilities, Adult Day Care Facilities, and Assisted Living . . .
IV. Before November 30 of each year, each hospital, residential care facility, adult day care facility, and assisted living facility licensed under this chapter shall provide to its consenting employees annual immunizations against influenza, in accordance with the recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, subject to the availability of an adequate supply of the necessary vaccine, and subject to exemptions for medical contraindications and religious beliefs. Consenting employees beginning employment between October 1 and February 1 shall be provided with immunization against influenza prior to or upon reporting to work, subject to the availability of an adequate supply of the necessary vaccine, and subject to exemptions for medical contraindications and religious beliefs.

Section 3. Exceptions and Declinations.
An employee who does not meet the immunization/immunity requirement may be permitted to attend work under the following conditions:

(A) The employee presents to the designated healthcare facility a physician's written statement that immunization against one or more of these diseases is medically inadvisable. If the statement does not include all diseases, the employee must meet the immunization/immunity requirements for any diseases not covered by the statement.

(B) The employee states in writing an opposition to immunization because of a sincere religious belief or for philosophical reasons.

Section 4. Certification of Immunization and Proof of Immunity.
A. Certificate of Immunization

To demonstrate proper immunization against each disease, an employee shall present the designated healthcare facility with a Certificate of Immunization from a physician, nurse or health official who has administered the immunizing agent(s) to the employee. Physicians within
their own practice may authorize their own employees to issue a certificate of immunization on behalf of the physician. The certificate shall specify the immunizing agent, and the date(s), including month and year, on which it was administered. Physicians, having reviewed official patient records created by another practitioner which indicate that a particular patient has received an immunization on a specified date, demonstrating at a minimum the month and year the immunization was given, may certify that the immunization was given. Adequately prepared secondary and/or collegiate school health records will also be considered acceptable for the purpose of meeting this requirement…

N.H. REV. STAT. ANN. § 151-C: 2 (1999); Definitions . . .

XV-a. "Health care facility" means hospitals, ambulatory surgical facilities, specialty hospitals and licensed nursing homes including all services and property owned by such. Health care facilities shall include facilities which are publicly or privately owned or for-profit or not-for-profit, and which are licensed or required to be licensed in whole or in part by the state.

XX. "Hospital" means an institution which is engaged in providing to patients, under supervision of physicians, diagnostic and therapeutic services for medical diagnosis, treatment and care of injured, disabled, or sick persons, or rehabilitation services for the rehabilitation of such persons. The term "hospital" includes psychiatric and substance abuse treatment hospitals.

NEW JERSEY: No law regarding vaccination of health care workers

NEW MEXICO: No law regarding vaccination of health care workers

NEW YORK:

N.Y. PUB. HEALTH § 2191 (2000); Definitions . . .

1. "Long-term care facility" or "facility" means a residential health care facility as defined in section twenty-eight hundred one of this chapter, adult home as defined in subdivision twenty-five of section two of the social services law or enriched housing program as defined in subdivision twenty-eight of section two of the social services law, adult day health care program in accordance with regulations of the department, and any other facility providing residential housing for five or more persons over the age of sixty-five unrelated to the operator and supportive services including, but not limited to, food service, housekeeping, laundry, arranging for medical care, and assistance with daily living.

2. "Documentation" means written evidence from an individual's health care provider indicating the date and place when the individual received the influenza vaccine …

3. "Medically contraindicated" means influenza . . . vaccine should not be administered to an individual because it may be detrimental to the individual's health if the individual receives the vaccine.

4. "Employee" means an individual employed (whether directly, by contract with another entity or as an independent contractor) by a long-term care facility, on a part-time or full-time basis.
N.Y. PUB. HEALTH § 2192 (2000); Long-term care . . . employee immunization required . . .
Except as provided in section twenty-one hundred ninety-five of this article, every long-term care facility in this state shall require . . . employees to be immunized for influenza virus . . . in accordance with regulations of the commissioner.

N.Y. PUB. HEALTH § 2194 (2000); Employee immunization . . .
1. Every long-term care facility shall notify every employee of the immunization requirements of this article and request that the employee agree to be immunized against influenza virus . . .

2. The long-term care facility shall require documentation of annual immunization against influenza virus . . . for each employee. Upon finding that an employee is lacking such immunization or the long-term care facility or individual is unable to provide documentation that the individual has received the appropriate immunization, the long-term care facility must provide or arrange for immunization. Immunization and the documentation thereof shall take place no later than November thirtieth of each year.

3. An individual who is newly employed as an employee after November thirtieth but before April first shall have his or her status for influenza . . . determined by the facility, and if found to be deficient, the facility shall provide or arrange for the necessary immunization.

N.Y. PUB. HEALTH § 2195 (2000); Exceptions . . .
No individual shall be required to receive either an influenza vaccine . . . if the vaccine is medically contraindicated, or if it is against his or her religious beliefs, or if he or she refuses the vaccine after being fully informed of the health risks of such action.

N.Y. PUB. HEALTH § 2196 (2000); Rules and regulations; report . . .
1. The commissioner shall promulgate regulations relating to the immunization requirements of this article, taking into consideration the recommendations of the centers for disease control and prevention.

2. The commissioner is hereby directed to make available educational and informational materials to all long-term care facilities with respect to vaccination against influenza virus . . .

3. The commissioner shall report three years from the effective date of this article to the governor, the temporary president of the senate, the speaker of the assembly, the minority leader of the senate and the minority leader of the assembly on the number of outbreaks in long-term care facilities each year due to influenza virus . . . and number of hospitalizations of long-term care facility residents each year due to influenza virus . . . and complications thereof.

NEVADA: No law regarding vaccination of health care workers

NORTH CAROLINA:
N.C. GEN. STAT. § 131D-9 (2003); Immunization of employees . . . of adult care homes . . .
Immunization of employees . . . of adult care homes (a) Except as provided in subsection (e) of this section, an adult care home licensed under this Article shall require . . . employees to be
immunized annually against influenza virus . . . (b1) An adult care home shall notify every employee of the immunization requirements of this section and shall request that the employee agree to be immunized against the influenza virus. (c) An adult care home shall document the annual immunization against influenza virus . . . for each . . . employee, as required under this section. Upon finding that . . . an employee has not been immunized against influenza virus, or if the adult care home is unable to verify that the individual has received the required immunization, the adult care home shall provide or arrange for immunization. The immunization and documentation required shall occur not later than November 30 of each year. (d) For an individual who . . . is newly employed by the adult care home after November 30 but before March 30 of the following year, the adult care home shall determine the individual's status for the immunizations required under this section, and if found to be deficient, the adult care home shall provide the immunization. (e) No individual shall be required to receive vaccine under this section if the vaccine is medically contraindicated, or if the vaccine is against the individual's religious beliefs, or if the individual refuses the vaccine after being fully informed of the health risks of not being immunized. (f) Notwithstanding any other provision of law to the contrary, the Commission for Public Health shall have the authority to adopt rules to implement the immunization requirements of this section.

(g) As used in this section, "employee" means an individual who is a part-time or full-time employee of the adult care home.

N.C. GEN. STAT. § 131E-113 (2003); Immunization of employees . . .
Health Care Facilities and Services. Health Care Facility Licensure Act. Nursing Home Licensure Act. Immunization of employees . . . (a) Except as provided in subsection (e) of this section, a nursing home licensed under this Part shall require . . . employees to be immunized against influenza virus . . . (b1) A nursing home shall notify every employee of the immunization requirements of this section and shall request that the employee agree to be immunized against influenza virus. (c) A nursing home shall document the annual immunization against influenza virus . . . for each . . . employee, as required under this section. Upon finding that . . . an employee has not been immunized against influenza virus, or if the nursing home is unable to verify that the individual has received the required immunization, the nursing home shall provide or arrange for immunization. The immunization and documentation required shall occur not later than November 30 of each year. (d) For an individual who . . . is newly employed by the nursing home after November 30 but before March 30 of the following year, the nursing home shall determine the individual's status for the immunizations required under this section, and if found to be deficient, the nursing home shall provide the immunization. (e) No individual shall be required to receive vaccine under this section if the vaccine is medically contraindicated, or if the vaccine is against the individual's religious beliefs, or if the individual refuses the vaccine after being fully informed of the health risks of not being immunized. (f) Notwithstanding any other provision of law to the contrary, the Commission for Public Health shall have the authority to adopt rules to implement the immunization requirements of this section. (g) As used in this section, "employee" means an individual who is a part-time or full-time employee of the nursing home.
N.C. GEN. STAT. § 131E-101 (2004); Definitions . . .
(6) "Nursing home" means a facility, however named, which is advertised, announced, or maintained for the express or implied purpose of providing nursing or convalescent care for three or more persons unrelated to the licensee. A "nursing home" is a home for chronic or convalescent patients, who, on admission, are not as a rule, acutely ill and who do not usually require special facilities such as an operating room, X-ray facilities, laboratory facilities, and obstetrical facilities. A "nursing home" provides care for persons who have remedial ailments or other ailments, for which medical and nursing care are indicated; who, however, are not sick enough to require general hospital care. Nursing care is their primary need, but they will require continuing medical supervision.

NORTH DAKOTA: No law regarding vaccination of health care workers

OHIO: No law regarding vaccination of health care workers

OKLAHOMA:

OKLA. ADMIN. CODE § 310:667-5-4 (2009); Employee and/or worker health examinations . . .
Each hospital shall have an annual influenza vaccination program consistent with the recommendations of the Centers for Disease Control and Prevention Advisory Committee on Immunization Practices that shall include at least the following: (1) The offer of influenza vaccination onsite, at no charge to all employees and/or workers in the hospital or acceptance of documented evidence of current season vaccination from another vaccine source or hospital; (2) Documentation of vaccination for each employee and/or worker or a signed declination statement on record from each individual who refuses the influenza vaccination for other than medical contraindications; and (3) Education of all employees and/or workers about the following: (A) Influenza vaccination; (B) Non-vaccine influenza control measures; and (C) The symptoms, transmission, and potential impact of influenza. (4) Each hospital influenza vaccination program shall conduct an annual evaluation of the program including the reasons for non-participation. (5) The requirements to complete vaccinations or declination statements for each employee and/or worker may be suspended by the hospital's medical staff executive in the event of a shortage of vaccine as recognized by the Commissioner of Health. (f) Health examination records. A file shall be maintained for each employee and/or worker, containing the results of the evaluations and examinations specified at OAC 310:667-5-4 (a) through (d) and the dates of illnesses as relate to employment.

OKLA. STAT. ANN. tit. 63 § 1-701 (2003); Definitions . . .
1. "Hospital" means any institution, place, building or agency, public or private, whether organized for profit or not, devoted primarily to the maintenance and operation of facilities for the diagnosis, treatment or care of patients admitted for overnight stay or longer in order to obtain medical care, surgical care, obstetrical care, or nursing care for illness, disease, injury, infirmity, or deformity. Except as otherwise provided by paragraph 5 of this subsection, places where pregnant females are admitted and receive care incident to pregnancy, abortion or delivery shall be considered to be a "hospital" within the meaning of this article, regardless of the number of patients received or the duration of their stay. The term "hospital" includes general medical
surgical hospitals, specialized hospitals, critical access and emergency hospitals, and birthing centers;

2. "Employee" means a person permitted to work by an employer in employment;

OREGON: No law regarding vaccination of health care workers

PENNSYLVANIA:

35 PA. CONS. STAT. § 632.2 (2003); Definitions . . .
"Employee." An individual employed, whether directly, by contract with another entity or as an independent contractor, by a long-term care nursing facility on a part-time or full-time basis.

"Long-term care facility" or "facility." A long-term care nursing facility as defined in section 802.1 of the act of July 19, 1979 (P.L. 130, No. 48), known as the Health Care Facilities Act.

35 PA. CONS. STAT. § 632.5 (2003); Employee Immunization . . .
(a) NOTICE TO EMPLOYEES.-- Every facility shall notify every employee of the immunization requirements of this act and request that the employee agree to be immunized against influenza virus.  (b) RECORDS AND IMMUNIZATIONS.-- The facility shall require documentation of annual immunization against influenza virus for each employee, which includes written evidence from a health care provider indicating the date and location the vaccine was administered. These documents shall be maintained by the facility for not less than 18 months. Upon finding that an employee is lacking such immunization or the facility or individual is unable to provide documentation that the individual has received the appropriate immunization, the facility shall make available the immunization. The immunization and documentation shall take place in a manner consistent with the recommendations of the Centers for Disease Control and Prevention . . . Except as provided in section 6, every facility in this Commonwealth shall request that . . . employees be immunized for influenza virus … in accordance with this act.

35 PA. CONS. STAT. § 632.6 (2003); Exceptions . . .
No . . . employee shall be required to receive either the influenza . . . vaccine if any of the following apply: (1) the vaccine is contraindicated; (2) it is against his religious beliefs; or (3) the employee . . . refuses the vaccine after being fully informed of the health risks of such action.

35 PA. CONS. STAT. § 448.802a (1980); Definitions . . .
"Long-term care nursing facility." A facility that provides either skilled or intermediate nursing care or both levels of care to two or more patients, who are unrelated to the licensee, for a period exceeding 24 hours. Intermediate care facilities exclusively for the mentally retarded, commonly called ICF/MR, shall not be considered long-term care nursing facilities for the purpose of this act and shall be licensed by the Department of Public Welfare.
20 PA. CONS. STAT. § 5422 (2006); Definitions . . .
"Health care provider." A person who is licensed, certified or otherwise authorized by the laws of this Commonwealth to administer or provide health care in the ordinary course of business or practice of a profession. The term includes personnel recognized under the act of July 3, 1985 (P.L. 164, No. 45), known as the Emergency Medical Services Act.

RHODE ISLAND:

(2) "Employee" means an individual employed, whether directly, by the contract with another entity or as an independent contractor, by a long-term care nursing facility on a part-time or full-time basis;

(3) "Long-term care facility or facility" means a health care facility as defined in chapter 17 of this title, which provides long-term health care.

Except as provided in §23-17.19-6, every facility in this state shall request that . . . employees be immunized for influenza virus . . . in accordance with this chapter.

(a) Notice to employees. Every facility shall notify every employee of the immunization requirements of this chapter and request that the employee agree to be immunized against influenza virus.

(b) Records and immunizations. The facility shall require documentation of annual immunization against influenza virus for each employee, which includes written evidence from a health care provider indicating the date and location the vaccine was administered. Upon finding that an employee is lacking the immunization, the facility shall make available the immunization. Immunization and the documentation of the immunization shall take place no later than November 30 of each year.

(c) Other immunizations. An individual who is newly employed as an employee and after November 30 and prior to April 2 shall have his status for influenza determined by the facility, and if found to be deficient, the facility shall make available the necessary immunization.

R.I. GEN. LAWS. § 23-17.19-6 (2000); Exceptions . . .
No . . . employee shall be required to receive either the influenza . . . if any of the following apply: (1) the vaccine is contraindicated; (2) It is against his or her religious beliefs . . .

R.I. GEN. LAWS. § 23-17.19-7 (2000); Regulations . . .
(a) Promulgation by department. The department shall promulgate regulation relating to the immunization requirements of this chapter, taking into consideration the recommendations of the advisory committee on immunization practices (ACIP) of the centers for disease control and prevention.
(b) Educational materials. The department, in conjunction with the department of elderly affairs, shall make available educational and informational materials to all facilities with respect to vaccination against influenza virus.

(c) Report to general assembly. Three (3) years from July 13, 2000, the department shall report to the general assembly on the number of outbreaks in facilities each year due to influenza virus . . . The number of hospitalizations of facility residents each year due to influenza virus . . . and complications of those must be reported as well.

**Rules and Regulations Pertaining to Immunization, Testing, and Health Screening for Health Care Workers (R23-17-HCW)**

6.3 The health care facility shall develop an active surveillance program to track and record influenza vaccination levels among health care workers, including vaccinations obtained outside of the formal health care facility program. Each health care facility shall be responsible for documenting and reporting to the Center for Epidemiology at the Department annually (by July 1st of each year commencing on July 1, 2008): 1) the number of health care workers who are eligible for said vaccination; 2) the number of health care workers who accept said vaccination; and 3) for those who declined, the reason(s) for such declination. Such reporting shall occur according to procedures and format outlined by the Center for Epidemiology.

**SOUTH CAROLINA:**

**S.C. CODE ANN. § 61-17 (2010); Standards for Licensing Nursing Homes**

W. Direct Care Staff Member and Direct Care Volunteer. A licensed nurse, or nurse aide; any other licensed professional who provides to residents 'hands on' direct care or services and includes, but is not limited to, a physical, speech, occupational, or respiratory care therapist; a person who is not licensed but provides 'hands on' physical assistance or care to a resident. It does not include a family member, a faculty member or student enrolled in an educational program, including clinical study in a nursing home.

MM. Institutional Nursing Home. A nursing home (established within the jurisdiction of a larger nonmedical institution) that maintains and operates organized facilities and services to accommodate only students, residents or inmates of the institution.

VV. Licensed Nurse. A person licensed by the South Carolina Board of Nursing as a registered nurse or licensed practical nurse.

DDD. Nursing Care. A degree of care provided to a resident that reaches a level that such care, due to the degree of complexity required, can only be safely and effectively carried out by a licensed nurse or other legally authorized healthcare provider in accordance with South Carolina law.

EEE. Nursing Home. A facility with an organized nursing staff to maintain and operate organized care and services to accommodate two (2) or more unrelated individuals over a period exceeding twenty-four (24) hours that is operated either in connection with a hospital or as a freestanding facility for the express or implied purpose of providing nursing care for individuals
who are not in need of hospital care. Rehabilitative therapies may be provided on an outpatient basis.

**B. Influenza.**

1. Direct care staff . . . shall have an annual influenza vaccination unless the vaccine is medically contraindicated or the person is offered the vaccination and declined. In either case, the decision shall be documented.

2. Persons receiving influenza vaccination shall, as appropriate, receive influenza vaccination each influenza season from October through March. Consideration may be made for availability issues, *e.g.*, vaccine shortages.

**SOUTH DAKOTA:** No law regarding vaccination of health care workers

**TENNESSEE:**

**TENN. COMP. R. & REGS. 1200-08-01-01 (1974); Definitions . . .**

(9) **Certified Nurse Practitioner.** A person who is licensed as a registered nurse and has further been issued a certificate of fitness to prescribe and/or issue legend drugs by the Tennessee Board of Nursing.

(32) **Health Care.** Any care, treatment, service or procedure to maintain, diagnose, treat, or otherwise affect an individual's physical or mental condition, and includes medical care as defined in T.C.A. § 32-11-103(5).

(35) **Health Care Institution.** A health care institution as defined in T.C.A. § 68-11-1602.

(36) **Health Care Provider.** A person who is licensed, certified or otherwise authorized or permitted by the laws of this state to administer health care in the ordinary course of business or practice of a profession.

(37) **Hospital.** Any institution, place, building or agency represented and held out to the general public as ready, willing and able to furnish care, accommodations, facilities and equipment for the use, in connection with services of a physician or dentist, to one (1) or more nonrelated persons who may be suffering from deformity, injury or disease or from any other condition for which nursing, medical or surgical services would be appropriate for care, diagnosis or treatment. All hospitals shall provide basic hospital functions and may provide optional services as delineated in these rules. A hospital shall be designated according to its classification and shall confine its services to those classifications described below.

(a) **General Hospital.** To be licensed as a general hospital, the institution shall maintain and operate organized facilities and services to accommodate one or more non-related persons for a period exceeding twenty-four (24) hours for the diagnosis, treatment or care of such persons and shall provide medical and surgical care of acute illness, injury or infirmity and obstetrical care. All diagnosis, treatment and care shall be administered by or performed under the direction of persons currently licensed to practice the healing arts in the State of Tennessee. In addition, a
general hospital must specifically provide:

1. An organized staff of professional, technical and administrative personnel.

2. A laboratory with sufficient equipment and personnel necessary to perform biochemical, bacteriological, serological and parasitological tests.

3. X-ray facilities which shall include, as a minimum requirement, a complete diagnostic radiographic unit.

4. A separate surgical unit which shall include, as minimum requirements, one operating room, a sterilizing room, a scrub-up area and workroom.

5. Obstetrical facilities which shall include, as minimum requirements, one delivery room, a labor room, a newborn nursery, an isolation nursery, and patient rooms designated exclusively for obstetrical patients.

6. An emergency department in accordance with rule 1200-08-01-.07(5) of these standards and regulations.

(50) Medical Staff. An organized body composed of individuals appointed by the hospital governing board that operates under bylaws approved by the governing body and is responsible for the quality of medical care provided to patients by the hospital. All members of the medical staff shall be licensed to practice in Tennessee, with the exception of interns and residents.

(79) Shall or Must. Compliance is mandatory.

(84) Supervising Health Care Provider. The designated physician or, if there is no designated physician or the designated physician is not reasonably available, the health care provider who has undertaken primary responsibility for an individual's health care.

TENN. COMP. R. & REGS. 1200-08-01-.06 (2000); Basic Services . . .
(f) The facility shall have an annual influenza vaccination program which shall include at least:

1. The offer of influenza vaccination to all staff and independent practitioners or accept documented evidence of vaccination from another vaccine source or facility;

2. A signed declination statement on record from all who refuse the influenza vaccination for other than medical contraindications;

3. Education of all direct care personnel about the following: (i) Flu vaccination, (ii) Non-vaccine control measures, and (iii) The diagnosis, transmission, and potential impact of influenza;

4. An annual evaluation of the influenza vaccination program and reasons for non-participation;
5. The requirements to complete vaccinations or declination statements are suspended by the Medical Director in the event of a vaccine shortage.

TEXAS:

TEX. HEALTH & SAFETY CODE § 161.0051 (2004); Required Immunizations for Nursing Homes . . .
This section applies only to a nursing home that: (1) is an institution licensed under Chapter 242; and (2) serves residents who are elderly persons as defined by Section 242.002. (b) The board by rule may require nursing homes to offer, in accordance with an immunization schedule adopted by the board, immunizations to . . . staff who are in contact with elderly residents against diseases that the board determines to be (1) caused by infectious agents; (2) potentially deadly; and (3) preventable by vaccine. (c) The board by rule shall require nursing homes to offer, in accordance with an immunization schedule adopted by the board: . . . (2) influenza vaccine . . . to staff who are in contact with elderly residents.

UTAH:

UTAH ADMIN. CODE § 432-40-5 (2004); Immunization Offer and Exemptions . . .
Each long-term health care facility shall make available to all employees an influenza immunization during the recommended vaccine season. The facility shall be deemed to have made influenza immunization available if the facility documents that each employee on staff had the opportunity to receive an influenza immunization under their existing health plan coverage. If the employee does not have health plan coverage for influenza immunization, then the facility shall be deemed to have made influenza immunization available if the facility documents that each employee on staff had the opportunity to receive an influenza immunization at a cost to the employee that is at or below that charged by their local health department. (2) Each long-term health care facility shall document circumstances beyond its control that prevent it from providing immunizations, such as non-availability of vaccine. If the facility is unable to obtain the necessary vaccines, it shall provide documentation and request an alternative plan from the local health department or Utah Department of Health. (3) The following are exempt from influenza . . . immunizations . . . (b) an employee who has refused the immunization(s) after having been given the opportunity to be immunized; (c) . . . an employee who has a condition contraindicated for immunization according to the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practice (ACIP) recommendations for influenza vaccine . . . (2) For . . . employees who is not immunized, the facility shall document in the . . . employee's respective files the reason for not becoming immunized. The long-term care facility shall annually make influenza . . . immunizations available to all . . . employees who have claimed an exemption. The long-term care facility shall document each refusal to receive and medical contraindication to influenza . . . immunizations.

UTAH CODE ANN. § 58-31b-102 (1998); Definitions . . .
(10) "Long-term care facility" means any of the following facilities licensed by the Department of Health pursuant to Title 26, Chapter 21, Health Care Facility Licensing and Inspection Act: (a) a nursing care facility; (b) a small health care facility; (c) an intermediate care facility for
the mentally retarded; (d) an assisted living facility Type I or II; or (e) a designated swing bed unit in a general hospital.

VERMONT: No law regarding vaccination of health care workers

VIRGINIA:

V.A. CODE ANN. § 5-410-490 (2006); Infection control . . .

3. Develop, periodically evaluate, and revise as needed, infection control policies, procedures and techniques for all appropriate phases of hospital operation and service in order to protect patients, employees, and visitors. These policies shall include, but are not limited to, appropriate employee health screening and immunization.

WASHINGTON: No law regarding vaccination of health care workers

WEST VIRGINIA: No law regarding vaccination of health care workers

WISCONSIN: No law regarding vaccination of health care workers

WYOMING: No law regarding vaccination of health care workers