SENATE
STATE OF MINNESOTA
NINETY-FOURTH SESSION

S.F. No. 4416

(SENATE AUTHORS: WIKLUND)

DATE	D-PG	OFFICIAL STATUS
03/12/2026	6669	Introduction and first reading Referred to Health and Human Services

A bill for an act

relating to health; changing immunization provisions; amending Minnesota Statutes 2024, sections 121A.15, subdivisions 9, 12; 135A.14, subdivision 7; repealing Minnesota Rules, part 4604.0200, subpart 2a.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. Minnesota Statutes 2024, section 121A.15, subdivision 9, is amended to read:

Subd. 9. **Definitions.** As used in this section the following terms have the meanings given them.

(a) "Elementary or secondary school" includes any public school as defined in section 120A.05, subdivisions 9, 11, 13, and 17, or nonpublic school, church, or religious organization, or home school in which a child is provided instruction in compliance with sections 120A.22 and 120A.24.

(b) "Person enrolled in any elementary or secondary school" means a person born after 1956 and enrolled in grades kindergarten through 12, and a child with a disability receiving special instruction and services as required in sections 125A.03 to 125A.24 and 125A.65, excluding a child being provided services at the home or bedside of the child or in other states.

(c) "Child care facility" includes those child care programs subject to licensure under chapter 142B, and Minnesota Rules, chapters 9502 and 9503.

(d) "Family child care" means child care for no more than ten children at one time of which no more than six are under school age. The licensed capacity must include all children of any caregiver when the children are present in the residence.

(e) "Group family child care" means child care for no more than 14 children at any one time. The total number of children includes all children of any caregiver when the children are present in the residence.

(f) "Medically acceptable standards" means the immunization schedule as determined by the commissioner of health and published in the State Register and on the department of health's website. The commissioner's determination shall be based upon evidenced-based medical science and must consider and assess the specific recommendations of the Centers for Disease Control and Prevention Advisory Committee on Immunization Practices, the American Academy of Pediatrics, and the American Academy of Family Physicians. The determination under this paragraph is exempt from the rulemaking requirements of chapter 14.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 2. Minnesota Statutes 2024, section 121A.15, subdivision 12, is amended to read:

Subd. 12. **Modifications to schedule.** (a) The commissioner of health may adopt modifications to the immunization requirements of this section. A proposed modification made under this subdivision must ~~be part of~~ take into consideration the current immunization recommendations of each of the following organizations: the United States Public Health Service's Advisory Committee on Immunization Practices, the American Academy of Family Physicians, ~~and~~ or the American Academy of Pediatrics. In proposing a modification to the immunization schedule, the commissioner must:

(1) consult with (i) the commissioner of education; the commissioner of children, youth, and families; the chancellor of the Minnesota State Colleges and Universities; and the president of the University of Minnesota; and (ii) the Minnesota Natural Health Coalition, Vaccine Awareness Minnesota, Biological Education for Autism Treatment (BEAT), the Minnesota Academy of Family Physicians, the American Academy of Pediatrics-Minnesota Chapter, and the Minnesota Nurses Association; and

(2) consider the following criteria: the epidemiology of the disease, the morbidity and mortality rates for the disease, the safety and efficacy of the vaccine, the cost of a vaccination program, the cost of enforcing vaccination requirements, and a cost-benefit analysis of the vaccination.

(b) Before a proposed modification may be adopted, the commissioner must notify the chairs of the house of representatives and senate committees with jurisdiction over health policy issues. If the chairs of the relevant standing committees determine a public hearing

regarding the proposed modifications is in order, the hearing must be scheduled within 60 days of receiving notice from the commissioner. If a hearing is scheduled, the commissioner may not adopt any proposed modifications until after the hearing is held.

(c) The commissioner shall comply with the requirements of chapter 14 regarding the adoption of any proposed modifications to the immunization schedule.

(d) In addition to the publication requirements of chapter 14, the commissioner of health must inform all immunization providers of any adopted modifications to the immunization schedule in a timely manner.

Sec. 3. Minnesota Statutes 2024, section 135A.14, subdivision 7, is amended to read:

Subd. 7. **Modifications to schedule.** (a) The commissioner of health may adopt modifications to the immunization requirements of this section. A proposed modification made under this subdivision must ~~be part of~~ take into consideration the current immunization recommendations of each of the following organizations: the United States Public Health Service's Advisory Committee on Immunization Practices, the American Academy of Family Physicians, ~~and~~ or the American Academy of Pediatrics. In proposing a modification to the immunization schedule, the commissioner must:

(1) consult with the commissioner of education; the commissioner of human services; the chancellor of the Minnesota State Colleges and Universities; and the president of the University of Minnesota; and

(2) consider the following criteria: the epidemiology of the disease, the morbidity and mortality rates for the disease, the safety and efficacy of the vaccine, the cost of a vaccination program, the cost of enforcing vaccination requirements, and a cost-benefit analysis of the vaccination.

(b) Before a proposed modification may be adopted, the commissioner must notify the chairs of the house of representatives and senate committees with jurisdiction over health policy issues. If the chairs of the relevant standing committees determine a public hearing regarding the proposed modifications is in order, the hearing must be scheduled within 60 days of receiving notice from the commissioner. If a hearing is scheduled, the commissioner may not adopt any proposed modifications until after the hearing is held.

(c) The commissioner shall comply with the requirements of chapter 14 regarding the adoption of any proposed modifications to the immunization schedule.

(d) In addition to the publication requirements of chapter 14, the commissioner of health must inform all immunization providers of any adopted modifications to the immunization schedule in a timely manner.

Sec. 4. **REPEALER.**

Minnesota Rules, part 4604.0200, subpart 2a, is repealed.

4604.0200 DEFINITIONS.

Subp. 2a. **Medically acceptable standards.** "Medically acceptable standards" means immunization recommendations promulgated by the Centers for Disease Control and Prevention Advisory Committee on Immunization Practices.