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NCSL Resources - NCSL Resources - News from CDC

Debate is heating up about whether or not to require girls to be vaccinated against Human Papillomavirus (HPV), which causes virtually all cases of cervical cancer and genital warts. This flurry of state activity stems from the June 2006 recommendation by the national Advisory Committee on Immunization Practices (ACIP) that routine vaccination is recommended for girls between ages 11 and 12.

According to the Centers for Disease Control and Prevention (CDC), HPV infects approximately 20 million people in the United States with 6.2 million new cases each year. There is no treatment for HPV, only treatment for related health problems. There are more than 30 strains of HPV that affect at least half of sexually active people in their lifetime. Most strains of HPV do not produce any symptoms and disappear on their own.

Cervical cancer is the second leading cancer killer of women worldwide. In the United States, nearly 10,000 women are diagnosed with cervical cancer each year and 3,700 women die. This number is much smaller than in other countries largely because of the Papanicolaou (Pap) test, a screening tool for cervical cancer. The American Cancer Society reports that, with early detection, cervical cancer is usually treatable.

Currently, the only HPV vaccine approved by the federal Food and Drug Administration (FDA) is Merck's Gardasil, which protects against HPV strains 6, 11, 16 and 18. Almost 70 percent of cervical cancer cases and 90 percent of genital warts cases are linked to these four strains of HPV. The Advisory Committee on Immunization Practices (ACIP) recommends administering the vaccine to girls between 11 and 12 years of age, before they become sexually active. GlaxoSmithKline also has developed a vaccine (Cervarix) to target HPV strains 16 and 18 and is awaiting FDA approval.

Even after recommendations by the ACIP, school vaccination requirements are decided mostly by state legislatures. Some state legislatures have granted regulatory bodies such as the Health Department the power to require vaccines, but they still need the legislature to provide funding.

The debate in states has centered--in part--around school vaccine requirements, which are determined by individual states. Some states grant regulatory bodies, like the Board of Health, the power to require vaccines, but the legislature must still provide funding. Some people who support availability of the vaccine do not support a school mandate, citing concerns about the drug's cost, safety, and parents' rights to refuse. Still others may have moral objections related to a vaccine mandate for a sexually transmitted disease. Financing is another concern: if states make the vaccine mandatory, they must also address funding issues, including for Medicaid and SCHIP coverage and youth who are uninsured, and whether to require coverage by insurance plans. This has caused some to push for further discussion and debate about whether or not to require the vaccine.

The CDC announced that the HPV vaccine is available through the federal Vaccines for Children (VFC) program in all 50 states, Chicago, New York, Philadelphia, San Antonio and Washington DC. VFC provides vaccines for children ages nine to 18 who are covered by Medicaid, Alaskan-Native or Native American children, and some underinsured or uninsured children.

## State Action

The Michigan Senate was the first to introduce legislation (S.B. 1416) in September of 2006 to require the HPV vaccine for girls entering sixth grade, but the bill was not enacted. Ohio also considered legislation in late 2006 to require the vaccine (H.B. 703), which also failed. Legislators in at least 41 states and D.C. have introduced legislation to require, fund or educate the public about the HPV vaccine and at least 19 states have enacted this legislation, including Colorado, Indiana, Iowa, Louisiana, Maine, Maryland, Michigan, Minnesota, Nevada, New Mexico, New York, North Carolina, North Dakota, Rhode Island, South Dakota, Texas, Utah, Virginia and Washington. The CDC announced that The New Hampshire Health Department announced in 2006 that it will provide the vaccine at no cost to girls under age 18. As of May 2007, the department reports they have distributed over 14,000 doses in the state. South Dakota's governor also announced a similar plan in January 2007 that combines \$7.5 million in federal vaccine funds and \$1.7 million from the state's general fund. As of May 2007, the department reports distributing over 20,000 doses of the vaccine. The Washington legislature approved spending \$10 million to voluntarily vaccinate 94,000 girls in the next two years. On February 2, 2007, Texas became the first state to enact a mandate--by executive order from the governor--that all females entering the sixth grade receive the vaccine, with some exceptions. Legislators in Texas passed H.B. 1098 to override the executive order and the governor withheld his veto.

The Virginia legislature passed a school vaccine requirement in 2007 and considered a bill that would delay that requirement but it was passed by indefinitely by the Senate Committee. In 2007, at least 24 states and D.C. introduced legislation to specifically mandate the HPV vaccine for school (California and Maryland withdrew their bills). DC's bill was enacted and requirement will started 30 days after Congressional Review Period expired. See the bills marked under the school mandate column in the table below for more information.

As of March of 2009, 12 state have proposed HPV related legislation or resolutions. See the charts below for more information.

### NCSL Resources



#### Preventing Cervical Cancer

Jody Hatz and Leah Oliver, NCSL Legisbrief, November/December 2006.

Specific Cancer Types: Information on Risk Factors, Prevention, Screening, Treatment and Policy

#### Other Resources

March 2009. News from the Immunization Safety Office at CDC- The CDC has just posted an update to the information presented on the CDC website on the safety of

http://www.cdc.gov/vaccinesafety/vaers/gardasil.htm

### Resources from CDC

HPV Vaccine Safety Update: In June the Immunization Safety Office posted an update on the safety of HPV vaccine.

CDC Report: Subject: CDC Releases First Estimate of HPV-Associated Cancer Data

A new series of studies released online today indicates that 25,000 cases of human papillomavirus (HPV)-associated cancers occurred in 38 states and the District of Columbia each year from 1998 to 2003.

The report, "Assessing the Burden of HPV-Associated Cancers in the United States (ABHACUS)," represents the largest, most comprehensive assessment of HPV-associated cancer data to date in the United States. It will be published in the November 15, 2008 supplement to the journal Cancer.

The top HPV-associated cancer sites were the cervix, head and neck (oral cavity and oropharynx), anus, vulva, penis, and vagina. HPV is the name of a group of viruses that includes more than 100 different types. Most people with HPV infection do not develop health problems, but some HPV types can cause cancer and other HPV types can cause genital warts.

## Highlights:

- -More HPV-associated cancers occurred in the cervix than any other site—about 10,800 per year.
- -Nearly 7,400 potentially HPV-associated cancers of the head and neck (oral cavity and oropharynx) occurred per year—nearly 5,700 among men and about 1,700 among women.
- -More than 3,000 HPV-associated anal cancers occurred per year—about 1,900 in women and 1,100 in men.
- -About 2,300 new cases of vulvar cancer occurred each year during the study period.
- -Penile cancer was relatively rare, striking about 800 men each year.
- -About 600 women per year developed vaginal cancers.

For information, visit HPV-Associated Cancers.

CDC Report: Burden of Cervical Cancer in the US 1998-2003

November 4, 2008

# CDC Urges Parents to Protect Preteens with Three Recommended Vaccines

CDC Press Release, 1 August, 2007.

# Quadrivalent Human Papillomavirus Vaccine: Recommendations of the Advisory Committee on Immunization Practices

CDC: Morbidity and Mortality Weekly Report, March 2007.

## Prevalence of HPV Infection Among Females in the United States

Journal of the American Medical Association, February 2007.

## HPV Vaccine Implementation and Financing Policy Fact Sheet

Kaiser Family Foundation, January 2007.

HPV Vaccine: Introduced Legislation 2009-2010 BLUE rows indicate legislation passed by legislature. Powered by StateNet

State	Summary	Mandated for School Attendance
Alabama	HB 42 would allow parents the option of immunizing female students entering the sixth grade, and requires the Department of Health and Senior Services to directly mail age appropriate information to parents or guardians to those students regarding the connection between HPV and cervical cancer and the availability of the immunization. (In committee 2/09)	
California	SB 158 Would require health care service plans and health insurance policies that include coverage for the treatment of cervical cancer to also provide coverage for human papillomavirus vaccination. (Passed Senate and Assembly health committee, sent to suspense file 7/09)	
Georgia	HB 736 Would require public Schools to provide parents or guardians of sixth grade female students information concerning the infection and the immunization against the human papillomavirus.	
Hawaii	HCR 51 Requests the Department of Health to expand its educational programs to increase cervical screening and awareness by both men and all women, in particular, and suggest new and innovative measures to better disseminate information in order to prevent, and eventually eradicate, cervical and related cancers. (In committee 2/09)	

Kansas	HR 6019 Resolution would urge the U.S. Food and Drug Administration to use caution in approving new vaccines such as Gardasil which has had a number of health problems including some deaths associated with the use of this vaccine. (Recommended "do pass" from committee	
Kentucky	and sent to full House 4/2/09)  HB 69 Would requires immunization against human papillomavirus for female children and require that parental statements to withhold consent be filed with the immunization certificate. Would also require educational resources to the public and all schools with special information. (In committee)	X
Minnesota	HF 1758 Would require the commissioner of health to prepare informational materials on vaccines including the HPV vaccines and encourages private and private schools with students in grades 6-12 to provide this information to parents in a cost-effective and programmatically effective manner. (Introduced 3/16/09)	
Minnesota	SF 1533 Would require the commissioner of health to prepare informational materials on vaccines including the HPV vaccines and encourages private and private schools with students in grades 6-12 to provide this information to parents in a cost-effective and programmatically effective manner. (Introduced 3/13/09)	
Missouri	HB 413 Would require health insurers to provide coverage for human papillomavirus screenings for cervical cancer. (In House committee 5/09)	
Missouri	SB 104 Would state that female students enrolling in sixth grade in public school may receive, at the option of a parent or guardian, an immunization for the human papillomavirus (HPV). Would allow the Department of Health and Senior Services to directly mail age appropriate information to parents or guardians of female students entering the sixth grade regarding the connection between HPV and cervical cancer and the availability of the HPV immunization. (Adopted by Senate committee 2/09)	
New York	A 778 Would require immunization against HPV to be administered to children in New York State in the same manner and according to the same time schedule that other immunizations are currently administered. (In committee 2/09)	X
New York	A 3203 /S 1983 Would require that parents and guardians of a child in New York State be encouraged, through written educational materials and consultation, to be vaccinated against human papillomavirus (HPV); The measure also encourages voluntary, informed vaccination against human papillomavirus (HPV) for adults. (In committee)	
New York	A 5159 Would ensure human papilloma vaccinations are included as a component of well-child coverage. This legislation does not mandate coverage of prescribed HPV immunizations. (In committee)	
New York	S 1905 Would require insurers of cervical cancer detection to provide human papilloma virus vaccine to females ages 9 to 26. (In committee)	
New York	S 2909 Would require insurance companies to provide coverage for the vaccine against human papilloma virus.	
Oregon	HB 2794 Would require health benefit plans to provide coverage of human papillomavirus vaccine for female beneficiaries who are 11 years of age or older. (Passed Senate, Passed House, signed by governor 6/26/09, Chaptered. Chapter No. 630, 7/17/09)	
Pennsylvania	HB 524 Would require health insurance policies to provide coverage for vaccinations for human papilloma virus. (In committee)	
Texas	HB 2220 Would allow the Executive Commissioner of the Health and Human Services Commission to require immunization against human papillomavirus or other immunizations for a person's admission to elementary or secondary school. (In committee 3/17/09)	X (would allow)



HPV Vaccine: Introduced Legislation 2007-2008 BLUE rows indicate legislation passed by legislature.

State	Summary	Mandated for School Attendance
California	A.B. 16 Would require insurance coverage for HPV screening, cervical cancer treatment, as well as HPV vaccine coverage.	
	(Passed Senate and concurred by Assembly on 7/14/08. Vetoed by governor 9/30/08)	
Hawaii	HB 2141 (SB 2124) Would require the department of education, in collaboration with the department of health, to provide accurate information on human papillomavirus, the link between HPV infection and cervical cancer, and the availability of HPV immunizations to parents of female sixth graders in public schools. (In committee 2/08)	
Iowa	HF 2145 Would require insurance companies to cover HPV vaccinations. (Signed by governor 4/18/08)	
Kentucky	HB 396 Would require immunization against HPV for school-age children; requires parental statements to withhold consent to be filed with the immunization certificate; requires the department to provide educational resources to the public and all schools with specific information; permits parent to withhold consent for immunization for any reason with a signed statement. (Passed House, sent to Senate 2/20/08)	X
Louisiana	HB 357 Would require insurance companies to cover HPV vaccinations. (In committee)	
Louisiana	HB 359 Would require schools to provide HPV information and vaccines under certain circumstances. (Passed House, Passed Senate, Became Act 210 without governor's signature 6/16/08)	
Louisiana	HB 543 Would require insurance companies to cover HPV vaccinations. (In committee)	
Michigan	HB 5322 (SB 415) Would require schools to provide HPV information and vaccines under certain circumstances. (passed House 2/12/08, passed Senate 4/24/08, signed by governor on 5/8/08 as Public Act 121)	
Michigan	HB 5171 (see chart below)	
New Jersey	SB 2913 (AB 4486) Would require Medicaid, New Jersey FamilyCare, and the State Health Benefits Program to cover the cost of HPV vaccines. (In committee)	
New Mexico	SB 244 Would require parents or guardians of female students to receive educational information about cervical cancer and the human papillomavirus vaccine; provides for the human papillomavirus vaccine for school entry. (Failed)	X
Oklahoma	SB 1522 Would require schools to provide information on HPV and the vaccine and parents to sign a form of receipt. (In committee)	
Virginia	SB 722 Would REMOVE the requirement for girls to receive the vaccine for school attendance. (passed by indefinitely 1/31/08)	(would remove)
Wisconsin	AB 492 (SB 252) Would require schools to provide HPV information (Failed 3/21/08).	



State	Summary	School Mandat
Arizona Session Ended	s.B. 1385 Would allocate \$2.6 million from the 2007-2008 state general fund to pay for the HPV vaccine for women 21 to 26 years of age. Also reports a federal funding match of \$5.6 million. Referred to Rules and Appropriations (2/1/07) S.B. 1437 Would appropriate \$200,000 for outreach and education on numerous vaccines, including the HPV vaccine. Referred to Rules and Appropriations (2/1/07) S.B. 1502 Would require insurance providers to cover the cost of the HPV vaccine. Held in Rules, Health and Financial Institutions Insurance and Retirement Committees (1/30/02) S.B. 1093 Would prohibit the health department from requiring the HPV vaccine. The health department still has authority on all other vaccine requirements. (This is in the form of an amendment to a budget bill.) Held in House.	
	H.B. 2086 Would require insurance coverage of the HPV vaccine and cervical cancer screenings. Held in Rules Committee.	
Arkansas Session Ended	S.B. 954 Would require the Department of Health and Human Services to provide HPV vaccinations to every girl 12 years and older. Withdrawn by author (3/27/07)	
California ±	A.B. 16 Would require all girls entering sixth grade to be vaccinated with the HPV Vaccine. Withdrawn for further consideration.  A.B. 1429 Would expand any insurance plan that covers cervical cancer screening or surgery to also cover the HPV vaccine with a referral from the healthcare provider. Passed Legislature, sent to Governor	AB 16 X
Colorado Session Ended	S.B. 80 Would require information be given to parents about the HPV vaccine and requires the vaccine be given to girls before the age of 12 in order to attend school. Allows exemption if parent or guardian objects. Also requires the Executive Director of the Department of Public Health and Environment to decide the content of information given to parents. Senate Committee on Appropriations Postpone Indefinitely (4/5/07)  H.B. 1016 Would request a Medicaid waiver from the federal government to provide the HPV vaccine for girls 12 to 18 with parental consent. House Committee on Health and Human Services Postpone Indefinitley (2/26/07)  Co. Chapter No. 41 (2007) (S.B. 97) Allocates four percent of state tobacco settlement money to the cervical cancer immunization fund. Signed into Law  Co. Chapter No. 212 (2007) (H.b. 1292) Includes information on HPV, the link to cervical cancer and the vaccine in sexual education in schools. Signed into Law  Co. Chapter No. 318 (2007) (H.B. 1301) Creates the cervical cancer immunization program. Encourages use of the HPV vaccine and adds it to the list of Medicaid benefits. Also requires certain health insurance providers to cover the cost of the vaccine. Appropriates funds for the program. Signed into Law	SB 80 X
Connecticut Session Ended	S.B. 86 Would require the Department of Health to develop standards for giving the vaccine. Public Hearing Scheduled (2/16/07)  H.B. 5485 Would provide coverage of the HPV vaccine through the state's insurance plan (HUSKY). Senate Committee on Appropriations (3/23/07)  H.B. 6085 Would create an awareness campaign on cervical cancer and HPV. Referred to Joint Committee on Public Health (1/18/07)  H.B. 6977 Would require the first dose of the HPV vaccine for girls before entering sixth grade. Public Hearing Scheduled (2/16/07)	нв6977 Х
District of Columbia ±	B.17-0030 Would mandate the HPV vaccine for girls before the age of 13 and gives parent's the right to opt-out their daughter. (Passed City Council, passed Congressional Review Period 5/4/07)	Х
Florida Session Ended	S.B. 86 Would allow the Board of Medicine and Board of Osteopathic Medicine to establish guidelines concerning information given to parents on HPV and also requires insurance policies to cover the HPV vaccine. Withdrawn (1/23/07)  S.B. 660 Would prohibit certain students from entering school without the HPV vaccine and would require public and private schools to provide information on HPV and the HPV vaccine to parents of certain children. (H.B. 561 is identical) <b>Died in</b> Committee on Education Pre-k12 Appropriations (5/4/07)	SB 660 X
Georgia ± Session Ended	H.B. 11 Would mandate insurance coverage for the vaccine. House Prefiled (11/29/06)  S.B. 155 Would require the HPV vaccine for sixth grade girls unless parents provide a written statement that they cannot afford the vaccine. Senate Second Read (3/1/07)	SB 155 X
Hawaii ± Session Ended	H.B. 590 Would require health insurance providers to cover the HPV vaccine and adds the vaccine to the teen vax program. This would allow the department of health to decide if the vaccine should be a school requirement. Carried Over (8/27/07)  H.B. 1000 Would add the HPV vaccine to the teen vax program. Carried Over (8/27/07)  H.R. 116 Would add the HPV vaccine to the teen vax program and urge insurance providers to cover the cost of the HPV vaccine for females ages 11 to 26. (Companion: H.C.R. 147) In Committee (4/3/07)	
Illinois ±	H.B. 115 Would create an awareness campaign on HPV and cervical cancer; provide parents with information; and require the HPV vaccine for girls entering sixth grade unless their parents choose to exempt them. Rules Committee (5/25/07)  S.B. 10 Would require the HPV vaccine for girls ages 11-12, but allows parents to opt-out. Also requires the school to track the number of immunized children attending the school. Referred to Senate Rules Committee (3/2/07)	HB 115 X SB 10 X
	H.B. 2033 Would require the department of health to provide and promote information on the HPV vaccine. Rules Committee (5/16/07)  Public Act 095-0422 (2007) (S.B. 937) Requires insurance companies to provide coverage for the HPV vaccine. It also requires the department of health to cover girls under 18 that are not covered by a provider. The department shall develop standards. Effective August 24, 2007. Signed into Law.	
Indiana Session Ended	Public Law No. 80 (2007) (S.B. 0327) Requires the parents of girls entering the sixth grade to receive information about the link between HPV and cervical cancer and the availability of an HPV vaccine. Parents of sixth graders must sign a statement notifying the school of their decision to vaccinate or not vaccinate their child. The school must provide the information to the state Health Department. This bill does not mandate the vaccine for school attendance. Effective July 1, 2007. Signed into Law.	

Iowa ± Session Ended	S.F. 43 Would include HPV as a sexually transmitted disease, its link to cervical cancer and availability of the HPV vaccine in human sexuality education in schools. (Companion H.B. 87) Education Subcommittee (1/25/07)	
	H.F. 661 Would require insurance providers to cover the cost of the HPV vaccine for females nine to 26 years of age. Human Resources Subcommittee (3/13/07)	
	S.F. 326 Makes an appropriation to the Department of Health to provide HPV vaccinations to uninsured females between the ages of 19 and 26 with incomes below 250 percent of federal poverty guidelines at no charge. Also funds a public awareness campaign about HPV and cervical cancer, including identifying medically accurate information, making that information	
	available on the Department's Web site, notifying school districts of the information, and educating the public and health professionals. Appropriations Subcommittee (3/14/07)	
	S.F. 514 Would require insurance providers offering certain plans to cover the cost of the HPV vaccine. Referred to Commerce Committee (4/26/07)	
	H.F. 789 Would require insurers offering certain health insurance contracts to provide coverage for the HPV vaccine. Referred to Commerce Committee (4/28/07)	
	H.F. 611 Requires that educational content for the seventh grade also include information on HPV and the availability of the HPV vaccine. Effective July 1, 2007. <b>Signed into Law.</b>	
ansas ± ssion Ended	H.B. 2227 Would require vaccination against HPV for girls before entering sixth grade. Also requires that parents receive information on the link between HPV and cervical cancer before the vaccination of their child. Scheduled Hearing (2/7/07)	HB 2227
entucky ession Ended	H.B. 143 Would require all girls entering middle school to be vaccinated against HPV. Referred to House Committee on Health and Welfare (1/3/07)	HB 143 )
	H.B. 345 Would require the HPV vaccine for girls entering middle school, but allows parents the right to exempt their child for any reason. Referred to Senate Committee on Appropriations and Revenue (3/1/07)	115 5 15 7
	H.B. 327 Would appropriate \$4,116,000 from the general fund to provide the HPV vaccine on a voluntary basis to uninsured females ages nine to 26. House Floor Amendments Filed (3/8/07)	
Naine± ession Ended	Maine Chapter No. 73 (2007) (L.D. 137) Establishes financial coverage for the HPV vaccine through the MaineCare program and improve public awareness of the vaccine. Signed into Law	
Maryland	S.B. 54 Would require all girls entering sixth grade to be vaccinated against cervical cancer starting in 2008. Withdrawn	SB 54 X
Session Ended	Md. Chapter No. 191 (2007) (H.B. 1049) Establish a task force for the HPV vaccine. Duties would be to make recommendations for a state plan for the vaccine including possible requirements, cost and education efforts. (Crossfiled with SB 774). Effective July 1, 2007. Signed into Law	
	Md. Chapter No. 190 (2007) (S.B. 774) Establishes the HPV subcommittee in the Cervical Cancer of the Maryland Comprehensive Cancer Control Plan. Effective Jule 1, 2007). Signed into Law	
lassachusetts ±	Docket # 604 Would require all girls entering sixth grade to receive the HPV vaccine. Allows parents to opt-out of the requirement if the vaccine contradicts religious beliefs. Promises state financing of the vaccine for any girl in a family with	Doc 604
	income below 300 percent of federal poverty guidelines.  S.B. 102 Would require sixth grade girls to be vaccinated against HPV before entering school. Allows medical exemptions. Also provides universal coverage of the vaccine. Public Hearing (7/11/07)	SB 102 2
1ichigan ±	H.B. 4164 Would require the HPV vaccine. Provides information to parents and allows exemptions. Referred to Committee on Commerce (1/30/07)	HB 4164 HB 4104
	H.B. 4104 Would require the HPV vaccine for girls entering sixth grade. Allows exemptions. Referred to Committee on Health Policty (1/23/07)	HB 5171
	H.B. 5171 Would require that pupils and parents receive information on regarding the availability, effectivness and potential risks of immunization for human papillomavirus. Referred to Committee on Health Policy (9/5/07)	SB 133 )
	S.B. 133 Would require parents to receive information on the HPV vaccine and sign a form saying their child has had the vaccine for entry into sixth grade, or that the parent has opted their child out of the vaccine. Referred to Committee on Health Policy (1/31/07)	
	S.B. 132 Would require the HPV vaccine for girls entering sixth grade, requires parents receive information on the vaccine and allows exemptions. Referred to Committee on Health Policy (1/31/07)	
	S.B. 415 Would require the department of health to distribute information about the HPV vaccine to schools in the state and encourage the schools to share the information with parents. Referred to Committee on Health Policy (5/29/07)	
	S.B. 416 Would require schools that distribute information to parents on any immunization to students in the sixth grade to also include information on the HPV vaccine. Referred to Committee on Health Policy (5/29/07)	
dissouri ession Ended	H.B. 802 Mandates that girls entering the sixth grade prove that they have had the HPV vaccine or begun the immunization series (with intent to complete the 3-dose vaccination). Allows parents to decline the vaccine for their daughters on medical or religious grounds, but they must sign an informed consent and receive information on the relationship between HPV and	HB 802
	cervical cancer. Laid Over (5/7/07)  S.B. 514 Would provide parents with information on HPV, cervical cancer and the HPV vaccine. Would require all sixth grade girls to be vaccinated against HPV. Allows religious and medical exemptions. Senate Committee on Seniors, Families and Public Health (4/17/07)	SB 514
flinnesota ± ession Ended	S.F. 243 Would require the HPV vaccine for girls entering school at the age of 12. Provides parents with information and allows exemptions. (Companion: H.B. 530) Referred to Health, Housing and Family Security (1/25/07)	SF 243
	2007 MN Laws, Chapter 147 (H.F. 1078) Reconvenes the cervical cancer elimination study with assistance from the Minnesota advisory committee on immunization practices. The study will be on the risks, benefits, availability, efficacy and coverage of the HPV vaccine. (Part of a health and human services finance bill). <b>Signed into Law</b>	
Mississippi	H.B. 895 Would require all girls entering sixth grade to be vaccinated against HPV. Also relates to financing and Medicaid	HB 895

Nebraska ± Session Ended	L.R. 170 Would create an interim study of the HPV vaccine, studying the efficacy, funding and population served by the vaccine. Referred to Health and Human Services Committee (5/18/07)	
Nevada Session Ended	Nev. Chapter No. 527 (2007) (S.B. 409) Requires insurance companies to cover the cost of the HPV vaccine for policyholders and their dependents without prior authorization. Effective July 1, 2007. Signed into Law	
New Jersey	New Jersey Chapter No. 134 (2007) (S. 2286) Requires distributing information about HPV to parents and guardians. Also proposes a public awareness campaign. Effective immediately. <b>Signed into Law</b> (Identical Bill: A.B. 3920)	
	S. 2284 Would mandate insurance and state health program coverage of the HPV vaccine. (Companion: A.3659) Reviewed by the Pension and Health Benefits Commission Recommend to not enact (1/19/2007)	
	A. 4050 Would mandate insurance and state health program coverage of the HPV vaccine. Reviewed by the Pension and Health Benefits Commission Recommend to not enact (6/8/2007)	
New Mexico Session Ended	NM Chapter No. 278 (2007) (S.B. 407) Requires insurance plans in the state to cover the FDA-approved HPV vaccine for girls age 9 to 14. Existing deductibles and coinsurance may apply. Signed into Law	
	H.J.M. 39 Will create the human papilloma virus- papanicolaou advisory panel to study cervical cancer disparities and find cost-effective strategies for primary and secondary cervical cancer interventions, including the HPV vaccine. <b>Adopted</b>	
	effectivenessH.B. 965 Would allocate funds from an increased cigarette tax to the department of health to increase cervical cancer vaccination outreach. House taxation and Revenue Committee	
	S.B. 1174 Would require the HPV vaccine for girls between nine and 14 years of age. Allows parents to elect not to have their child vaccinated. Also provides information to parents. <b>Vetoed</b>	SB 1174 X
New York ±	A.B. 2856 Would include information on the HPV vaccine and its relation to cervical cancer in sexual education. (Companion S.B. 1342) Referred to Health (3/27/07)	
	S.B. 4172 Would require insurance providers that cover cervical cancer detection to also cover the HPV vaccine for females 9 to 26 years of age. Referred to Insurance (3/29/07)	
	A.B. 7403 Would encourage parents to voluntarily vaccinate their daughters against HPV through educational materials.  Referred to Health (4/13/2007)	SB 4394 >
	S.B. 4394 Would require the HPV vaccine for females born after January 1, 1996 unless the parent or guardian withholds consent for the vaccination. Referred to Health (4/13/07)	45 5040
	A.B. 8536 Would include the HPV vaccine in any insurance plan that covers well-child visits. (Companion: S.B.5629). Referred to Insurance (5/18/07)	AB 5810 )
	A.B. 5810 Would require the HPV vaccine, allows religious exemptions. Referred to Health (2/23/07)	
	A.B. 6296 Would add the HPV vaccine to insurance coverage of well child visits. Referred to Insurance (3/6/07)	
	NY Chapter No. 54 (2007) (A.B. 4304) Budget bill that allocates five million dollars to promote the HPV vaccine. (Identical: S.B.2104) Effective immediately. <b>Signed into Law</b>	
North Carolina ± Jession Ended	NC Session Law 2007-59 (S.B. 260) Requires the department of health to distribute information on the HPV and the vaccine through schools to all parents of children in grades five through 12. Effective July 1, 2007. (Companion: H.B.938) Signed into Law	
North Dakota Tession Ended	North Dakota Chapter No. 232 (2007) (H.B. 1471) Provides funding for distribution of educational materials on HPV and the HPV vaccine. Effective July 1, 2007. <b>Signed into Law</b>	
Ohio ±	H.B. 81 Requires all female students entering the sixth grade to receive the HPV vaccine. The student may not attend school for more than 14 days without providing documentation that they have received the vaccine or are in the process of receiving it. Allows parents to opt out after they are given information on the link between HPV and cervical cancer. Also creates an HPV Immunization Advisory Committee within the Department of Health. Referred to Health Committee (2/28/07)	HB 81 X
Oklahoma ± ession Ended	S.B. 487 Would require the HPV vaccine for all girls before entering the sixth grade. Referred to Rules (2/8/07)	SB 487 X
Oregon ession Ended	H.B. 3253 Would require health benefit plans to cover the HPV vaccine for girls 11 years and older. Referred to Human Services and Women's Wellness (3/15/07)	
Pennsylvania ± Jession Ended	H.B. 352 Would amend the Insurance Company Act of 1921 to require insurance providers to cover the cost of the HPV vaccine. Referred to Insurance (2/9/07)	
	H.R. 21 Would create a cervical cancer awareness week to promote awareness of cervical cancer's relation to HPV and the availability of the HPV vaccine. Referred to Judiciary (1/30/07)	
	H.R. 42 Would designate January as cervical cancer awareness month and includes the HPV vaccine in the campaign. Referred to Local Government (1/30/07)	
	H.B. 845 Known as the HVP and Cervical Cancer Education, Immunization and Prevention Act, this instructs the Department of Health to make educational materials available about the link between HPV and cervical cancer, the value of prevention, early detection and diagnosis and treatment of both HPV and cervical cancer. The information must be available in schools, on the Department of Health's Web site, and through health care providers. Also permits the Department of Health to accept grants from both government and non-government organizations to make these materials available to the public. Includes an insurance mandate that plans cover the cost of the vaccine and requires parental consent for women under 18 to receive the vaccine. Referred to Health and Human Services (3/19/07)	
Rhode Island ± Session Ended	H.B. 5061 Would require providers to cover the cost of the HPV vaccine. Signed into Law	
South Carolina ± Session Ended	H.B. 3136 Would enact the "Cervical Cancer Prevention Act" to require the HPV vaccine for girls before entering sixth grade or after their 11th birthday. Allows for religious exemptions. Tabled (4/18/07)	HB 3136 >
South Dakota Session Ended	H.B. 1061 Gives the Department of Health \$9.2 million to offer the HPV vaccine to young women age 11 to 18. Signed Into Law	

Tennessee ±	H.R. 1517 Would require the department of health to report on the appulations by one effected by HDV and appulations by	
Session Ended	H.B. 1517 Would require the department of health to report on the populations by age affected by HPV and report to the legislature with a recommendation concerning the HPV vaccine. (Companion: S.B.1995) Referred to Public Health and Family (2/27/07)	
Texas Session Ended	S.B. 110 Would provide information for parents and guardians on HPV and requires the HPV vaccine for girls entering the sixth grade. (Companion: effectiveness PolicyH.B.215) Referred to Public Health (4/25/07)	SB 110 X
	H.B. 146 Would require the Department of Health to educate the public about HPV and cervical cancer and promote immunization against HPV. Referred to Public Health (1/30/07)	
	H.B. 1098 Will prohibit any elementary or secondary school requirement for the HPV vaccine. Mandates that schools distribute medically accurate, scientific, unbiased, and peer reviewed information about the vaccine to parents or legal guardians at the appropriate time in the immunization schedule. Overrides Executive Order 4 to mandate the vaccine. Effective Immediately.  Signed into Law. (S.B. 438 is identical. H.B.1115 is duplicate)	
	H.B.2609 Would not allow the governor to require the HPV vaccine in elementary or secondary school. Referred to Public Health (3/13/07)	
	H.B. 1215 Would prohibit the HPV vaccine from being added to the immunization schedule and does not allow the executive commissioner of the Health and Human Services Commission to require the vaccine for school entry. Referred to Public Health (2/13/07)	
	S.B. 815 Would require health benefit plans to cover the cost of the HPV vaccine. Referred to s/c by Chair (4/2/07)	
	H.B. 1379 Requires the Department of Health to develop and distribute educational materials to the public in both English and Spanish. Includes a number of statements that must be included in the materials. Effective September 1, 2007. <b>Signed</b> into Law	Exec. Order X
	Executive Order 4 signed by Governor Rick Perry February 2, 2007 - Mandates that all females entering the sixth grade must receive the HPV vaccine. Orders the Vaccines for Children program to make the vaccine available to eligible children up to age 18 and the state Medicaid program to finance the vaccine for eligible females age 19-21. Allows parents to refuse the vaccine for their daughters. Signed into Law- Overridden by H.B.1098	
Utah Session Ended	H.B. 358 Establishes an awareness campaign on the causes, prevention, and risks of cervical cancer. Signed into Law	
Vermont ± Session Ended	H.B. 256 Requires all females entering sixth grade to receive the HPV vaccine. Allows exemptions for medical, moral or religious beliefs. If the parent refuses the HPV vaccine, they must sign a "refusal to vaccinate" statement that they understand the link between HPV and cervical cancer. Appropriates nearly \$8 million dollars to the health department to pay for and administrate the vaccine to all 11-year-old girls and 25 percent of the population age 10, or 12-26. Referred to Human Services (2/8/07)	SB 256 X
	S.B. 139 Would require all girls to be vaccinated against HPV before entering sixth grade. Allows exemptions for medical, moral or religious beliefs. If the parent refuses the HPV vaccine, they must sign a "refusal to vaccinate" statement that they understand the link between HPV and cervical cancer. Appropriates nearly \$8 million dollars to the health department to pay for and administrate the vaccine to all 11-year-old girls and 25 percent of the population age 10, or 12-26. Referred to Health and Welfare (2/27/07)	SB 139 X
Virginia Session Ended	Va. Chapter No. 922 (2007) (S.B. 1230) Requires the HPV vaccine for girls entering sixth grade. Effective October 1, 2008.  Signed into Law	SB 922 X HB 2035 X
Session Ended	Va. Chapter No. 858 (2007) (H.B. 2035) Requires the HPV vaccine for girls on or after their 11th birthday and allows parents to exempt their child. Effective October 1, 2008. (Identical to above, S.B.1230) <b>Signed into Law</b>	HB 1914 X
	H.B. 1914 Would add the HPV Vaccine to the required vaccination schedule for girls, 11 years of age. Incorporated by Health, Welfare and Institutions H.B.2035 (1/23/07)	
	H.B. 2877 Would require insurance coverage of the HPV vaccine. Tabled in Commerce and Labor (1/23/07)	
Washington ± Session Ended	Wash. Chapter No. 276 (2007) (H.B. 1802) Provides every parent of sixth grade girls with information on HPV and where they can get the vaccine. Does not require the vaccine. Effective July 22, 2007. Signed into Law	
West Virginia Session Ended	H.B. 2835 Would require the HPV vaccine for girls entering sixth grade. Allows medical exemptions. Referred to House and Human Resources (2/5/07)	HB 2835 X

 $\pm$  Represents a state that will carryover bills from 2007 to the 2008 legislative session.

Source: National Conference of State Legislatures, 2009.

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