MASSACHUSETTS MEDICAL SOCIETY
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TESTIMONY IN SUPPORT OF H.2554 & S.1557
AN ACT RELATIVE TO ROUTINE CHILDHOOD IMMUNIZATIONS/ AN ACT RELATIVE TO VACCINES AND PREVENTING FUTURE DISEASE OUTBREAKS
BEFORE THE JOINT COMMITTEE ON PUBLIC HEALTH
June 6, 2025

The Massachusetts Medical Society (MMS) wishes to be recorded in strong support of H.2554, *An Act relative to routine childhood immunizations*, and S.1557, *An Act relative to vaccines and preventing future disease outbreaks*.

The MMS is a professional association of over 24,000 physicians, residents, and medical students across all clinical disciplines, organizations, and practice settings. The Medical Society is committed to advocating on behalf of patients, for a better health care system, and on behalf of physicians, to help them provide the best care possible. A cornerstone of that advocacy is our long-standing support for vaccine policies that keep children and communities healthy. Vaccines are the safest and most effective way to prevent the spread of infectious and life-threatening illnesses, including measles, whooping cough, and polio.[1] In alignment with this evidence, the MMS opposes non-medical vaccine exemptions in all settings where vaccinations are required in Massachusetts.

In the interest of protecting public health, Massachusetts law requires children to be vaccinated before enrolling in school. However, the law currently allows two exemptions: one for medical reasons and one for religious beliefs. The proposed legislation would eliminate the non-medical (religious) exemption, which permits parents or guardians to forgo vaccination requirements based on sincerely held religious beliefs. Research shows that the ease in obtaining non-medical exemptions is associated with lower vaccination rates, increasing the risk of disease outbreaks.[2]

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[1] American Academy of Pediatrics. Healthy Children. Vaccine Safety: Examine the Evidence. https://www.healthychildren.org/English/safety-prevention/immunizations/Pages/vaccine-studies-examine-the-evidence.aspx?_gl=1*13m8tol*_ga*NDM0NDQ4NjkuMTc1MTg5Mzg4Mg..*_ga_FD9D3XZVQQ*czE3NTE4OTM4ODEkbzEkZzEkdDE3NTE4OTM5NTQkajYwJGwwJGgw

[2] Bednarczyk RA, King AR, Lahijani A, Omer SB. Current landscape of nonmedical vaccination exemptions in the United States: impact of policy changes. Expert Rev Vaccines. 2019 Feb;18(2):175-190. doi: 10.1080/14760584.2019.1562344. Epub 2019 Jan 4. PMID: 30572729; PMCID: PMC6386772. https://pmc.ncbi.nlm.nih.gov/articles/PMC6386772/

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Preventable diseases pose an increasing threat to the Commonwealth, not only due to missed vaccinations during the COVID-19 pandemic, but also due to a broader trend of declining vaccination rates that began years earlier. This decline is largely driven by rising rates of non-medical exemptions, undermining the herd immunity that has historically protected our communities. These bills would eliminate non-medical (religious) exemptions to school vaccination requirements and strengthen immunization policy statewide. This change is essential to reversing the decline in immunization rates and preventing outbreaks of diseases that were nearly eradicated.

Massachusetts has long benefited from high childhood vaccination rates and the herd immunity they produce—safeguarding our most vulnerable residents, including infants, immunocompromised individuals, and those with chronic conditions. However, recent trends are deeply concerning. School-level data show increasing numbers of non-medical exemptions, particularly in specific regions such as Western Massachusetts and the Cape and Islands, where vaccination rates have fallen below the 90–95% threshold required to prevent transmission of diseases like measles.[3] Nationally, the consequences of these vulnerabilities have become clear. In 2025, the United States experienced a significant measles outbreak, with confirmed cases surpassing 1,000 across 30 states.[4] The majority of cases were linked to outbreaks, particularly those stemming from communities with low vaccination coverage.[5] Diseases once under control are returning, placing unnecessary strain on health care systems and endangering lives.

In addition to eliminating non-medical exemptions, this legislation takes an important step toward greater transparency by requiring the Department of Public Health to collect and publicly report school-level immunization and exemption data. This information will empower parents, especially those with medically vulnerable children, to make informed decisions about their child's school environment and health risks. The current system is voluntary and incomplete, with too many kindergartens failing to report data. Requiring comprehensive reporting will fill critical gaps in our understanding of vaccine coverage at the community level.

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[3] Massachusetts Department of Public Health. School Immunizations. https://www.mass.gov/info-details/school-immunizations#grade-7-data

[4] Anh, Lien, and Kim Mulholland. "Measles 2025." *New England Journal of Medicine*. https://www.nejm.org/doi/full/10.1056/NEJMra2504516

[5] Ibid.

Data from other states, including California, Connecticut, Maine, and New York, demonstrate that eliminating non-medical exemptions is the most effective way to improve vaccination rates.[6] As vaccine misinformation becomes more widespread, it is more critical than ever for Massachusetts to follow suit. As physicians, we know firsthand the critical role vaccines play in preventing disease, hospitalization, and death. We also understand the importance of listening to families' concerns, offering evidence-based guidance, and maintaining trust. However, public health policy must be grounded in science—not misinformation. These bills provide the strongest public health response available to ensure vaccine coverage, prevent future outbreaks, and safeguard our children and communities.

For these reasons, we urge the committee to favorably advance H.2554/S.1557. Thank you for your consideration.

[6] Goldstein ND, Suder JS. Towards Eliminating Nonmedical Vaccination Exemptions Among School-Age Children. Dela J Public Health. 2022 Mar 29;8(1):84-88. doi: 10.32481/djph.2022.03.014. PMID: 35402928; PMCID: PMC8982917. https://pmc.ncbi.nlm.nih.gov/articles/PMC8982917/#:~:text=The%20increase%20in%20childhood%20vaccine,in%20vaccine%2Dpreventable%20disease%20incidence.