

What every Healthcare Worker needs to know about Maine CDC's updated COVID vaccine mandate

[Maine CDC Rules | Maine Center for Disease Control & Prevention](#)

- The COVID-19 vaccine was added to existing rules for healthcare employees that work in designated, LICENSED settings. The previous versions of rules included vaccine mandates for flu, MMR, chicken pox, and hepatitis B. **These requirements are NOT tied to individual licenses, but to facility licenses.** A designated healthcare facility is defined as: a licensed nursing facility, residential care facility, Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), multi-level healthcare facility, hospital, or home health agency subject to licensure by the State of Maine, DHHS.
- This power is given under 22 MRS 802. [Title 22, §802: Authority of department \(maine.gov\)](#) Maine CDC is granted authority to write rules under this statute. During LD 798, the 2019 bill that removed all religious and philosophical exemptions from state law, the bill sponsor made an amendment to change vaccine requirements to “major substantive”, which means it must go to the legislature first. It was later realized the amendment was only applied to school vaccine laws, and not to the other settings that LD 798 impacted. Based on the intent of this amendment, the addition of the COVID-19 vaccine for healthcare settings SHOULD have gone through a full vote by the legislature, but wasn't. Likewise, a new governor and administration can also exercise this same power to REMOVE vaccine requirements from the rules. VOTE WISELY IN THE NEXT ELECTION.
- Dental practices and EMS providers are no longer included in the CDC mandate. These settings were added to the initial emergency rule making [Maine CDC Rules | Maine Center for Disease Control & Prevention](#), as well as the proposed permanent rules. At adoption on November 10th, 2021, these additions did NOT ultimately stay in the rules. It is our belief, based on analysis of the statute, that the Maine CDC was NOT authorized to add additional settings nor individual licenses without going through the legislature and changing the STATUTE, as the settings are expressly named in law, and should be limited to the law.
- **EMS is still affected by the Maine EMS mandate**, within their emergency rulemaking, until November 21st.
<https://www.maine.gov/ems/sites/maine.gov/ems/files/inline-files/Chapter%202021%20Imm%20unization-10-27-21.pdf>
We are hopeful that this will change, or a compromise can be made to allow other options (such as testing) during the permanent rulemaking. Public hearings on the permanent rules will be at 6pm on November 22nd, and 9am November 23rd by Zoom. **EMS workers MUST speak out and provide testimony, to hopefully prevent a permanent mandate.** Go here for details on the public hearings. Be prepared with a 3 minute written testimony and focus on the impact of the mandate on Maine communities and patients.
[Public Rules Hearing on Immunization Requirements Nov 22 and 23 | Maine Emergency Medical Services](#)

- Medical exemptions are left to the discretion of the granting medical provider, under state law. The Maine CDC cannot set forth guidelines or restrictions on medical exemptions. This applies to ANY MD, DO, NP or PA licensed in Maine. State statute grants full authority for providers to make decisions based on their best clinical judgment. While the Maine CDC states that facilities may implement different policies that are stricter regarding acceptance of medical exemption, employees whose medical exemptions are denied are encouraged to push back on employers to provide evidence of claims of following state guidance on medical exemptions. Any claim such as this is FALSE. From the statute:

A. *(TEXT EFFECTIVE 9/1/21) A medical exemption is available to an employee who provides a written statement from a licensed physician, nurse practitioner or physician assistant that, in the physician's, nurse practitioner's or physician assistant's professional judgment, immunization against one or more diseases may be medically inadvisable. [PL 2019, c. 154, §8 (AMD); PL 2019, c. 154, §12 (AFF).]*

- Proof of immunity is not allowed for COVID vaccine, despite being an option for measles, mumps, rubella, chicken pox and hepatitis B. While it is logical that this is not allowed for influenza, which has multiple strains and the vaccine changes yearly, that is NOT the case with the current COVID-19 vaccines currently available. Based on studies around the world, natural immunity is superior to vaccine induced immunity. This policy is NOT science based.
- The number of required doses is a constantly moving target as stated in the rules, and is NOT based on decision making by Maine's own health officials, for Maine people, but based on the immunization manufacturer's EAU or label. There is no room for leeway in terms of spacing of initial vaccination. A year from now, it is plausible that there will be 4-5 recommended doses. A new employee, who might choose to wait to start their first vaccines at time of employment, will have the same requirements as a healthcare worker vaccinated in January 2021.

This situation that healthcare workers face is a prime example of why our **votes matter**. We are in this position because the Democratic majority in the Maine House, Senate, and the Governor's office put us there with LD 798. We are in this position because the minority of Maine people who voted No on 1 in March of 2020, and the majority who didn't bother to vote, thought the slippery slope didn't matter. We hope it is now crystal clear to the people of Maine why a YES vote mattered.

Please get involved in your state elections this year so that we can reverse the damage that has been done to our state.