



# Fiscal Note

## Legislative Council Staff

Nonpartisan Services for Colorado’s Legislature

### SB 26-032: PROMOTING IMMUNIZATION ACCESS

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**Prime Sponsors:**

Sen. Daugherty; Mullica  
Rep. Feret; Brown

**Fiscal Analyst:**

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**Bill Outcome:** Signed into Law

**Drafting Number:** LLS 26-0554

**Version:** Final Fiscal Note

**Date:** June 25, 2026

**Fiscal note status:** This final fiscal note reflects the enacted bill.

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### Summary Information

**Overview.** The bill expands access to vaccines by broadening who may administer and prescribe vaccines, authorizing state agencies to rely on guidance from specified medical professional organizations, updating immunization program funding flexibility, and revising liability protections related to vaccine administration and distribution, among other changes.

**Types of impacts.** The bill is projected to affect the following areas on an ongoing basis:

- Minimal State Workload
- School District

**Appropriations.** No appropriation is required.

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**Table 1  
State Fiscal Impacts**

Type of Impact	Budget Year FY 2026-27	Out Year FY 2027-28
State Revenue	\$0	\$0
State Expenditures	\$0	\$0
Transferred Funds	\$0	\$0
Change in TABOR Refunds	\$0	\$0
Change in State FTE	0.0 FTE	0.0 FTE

## Summary of Legislation

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This bill updates existing law and adds new provisions concerning vaccines as follows:

- Authorizes the Colorado Department of Public Health and Environment (CDPHE) to rely on immunization guidance from specified national medical professional organizations in addition to federal Advisory Committee on Immunization Practices (ACIP) guidance when establishing and administering immunization requirements and to negotiate for and purchase board-approved vaccines.
- Changes references to the cervical cancer vaccine to the human papilloma virus vaccine, recognizes males in addition to females when referring to its administration to acknowledge that both sexes can receive the vaccine, and permits the Commissioner of Insurance to adopt coverage rules if the federal ACIP no longer recommends them.
- Directs naturopathic medicine practice to use the vaccine schedule established by the State Board of Health.
- Codifies in statute that pharmacists can independently prescribe vaccines, and requires the State Board of Pharmacy to review related record-keeping rules.
- Updates liability provisions related to vaccines required for school entry by allowing compliance with either immunization schedule published by the Centers for Disease Control and Prevention or the schedule established by the State Board of Health.
- Authorizes the State Board of Health to adopt and amend rules governing the infant immunization program, including which vaccines are required, after considering recommendations from the ACIP and specified national medical professional organizations.
- Authorizes the State Board of Health to adopt rules establishing a schedule of recommended adult immunization, taking into consideration the recommendations of the ACIP and specified national medical professional organizations, and the manner and frequency of administration.
- Specifies that if federal funds are not received by CDPHE to implement and operate its infant immunization programs, then any additional General Fund moneys required must be addressed through the annual budget process or the emergency supplemental process.
- For claims brought before January 31, 2029, extends the limitation on liability related to the handling, storage, or distribution of infant vaccines to pharmacies and wholesalers, and limits liability to cases involving negligent failure to meet recognized standards of practice. Wholesaler liability limitation provisions are removed from the law for claims brought on or after January 31, 2029.
- Creates the "Adult Immunization Act" to mirror the Infant Immunization Act in establishing limitations on liability for vaccine administration to adults.
- Authorizes the Department of Health Care Policy and Financing (HCPF) to purchase vaccines recommended by the ACIP and specified national medical professional organizations.

## **State Expenditures**

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The bill is expected to minimally affect workload and practices across multiple state agencies. Any potential future state expenditures are contingent on changes in federal requirements and are not anticipated under current law; therefore, no immediate or quantifiable fiscal impact is assumed at this time. Impacts to state agencies are summarized below.

### **Department of Public Health and Environment**

The State Board of Health within CDPHE will have increased workload to consider the recommendations of the ACIP and national medical professional organizations when adopting rules addressing which vaccines are administered to infants and which vaccines are recommended for adults, as well as when recommending the purchase of vaccines, sending notifications concerning overdue vaccines and vaccine-preventable disease outbreaks, and when considering equivalent vaccines. This work can be accomplished within existing appropriations.

If federal vaccine funding is curtailed for infant immunization programs, CDPHE may request state funding through the annual budget process or the emergency supplemental process.

### **Department of Health Care Policy and Financing**

If future federal changes affect the availability of federal matching funds for certain vaccines, HCPF may be required to create or modify a state-only benefit plan to ensure appropriate billing, reporting, and cost allocation for vaccines funded entirely with state dollars. Creation of a new state-only benefit would require extensive information technology systems changes. If this occurs, it will be addressed through the annual budget process.

### **Department of Regulatory Agencies**

The Division of Insurance will have a minimal workload increase to the extent coverage rules are adopted for HPV vaccinations. DORA will perform outreach to Naturopathic Medicine practitioners regarding immunization schedules and guidelines. The State Board of Pharmacy will have workload to review its rules related to vaccine record-keeping. All impacts in DORA can be accomplished within existing resources.

### **State Employee Health Insurance**

State employee health insurance is offered through two carriers, one of which (Kaiser Permanente) is subject to state regulation and would be required to comply with the vaccine requirements in the bill. Any impacts related to vaccine costs are expected to be minimal.

## **Judicial Department**

The bill modifies liability standards related to vaccine administration, but does not create new causes of actions or court procedures. Any impact on trial court caseloads is expected to be minimal and absorbable within existing resources.

## **Department of Education**

The CDE may perform outreach under the bill related to any changes to school immunization requirements. This work can be accomplished within existing appropriations.

## **School District**

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School districts may be required to update their policies and procedures should there be changes to school immunization requirements. This work can be accomplished within existing resources.

## **Effective Date**

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This bill was signed into law by the Governor and took effect on March 27, 2026.

## **State and Local Government Contacts**

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Corrections	Human Services
Counties	Judicial
Early Childhood	Personnel
Education	Public Health and Environment
Health Care Policy and Financing	Regulatory Agencies
Higher Education	

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The revenue and expenditure impacts in this fiscal note represent changes from current law under the bill for each fiscal year. For additional information about fiscal notes, please visit the [General Assembly website](#).