

## Information for CHCs whose providers are being asked to write medical exemptions from COVID vaccines for reasons not indicated by the CDC.

### **BOTTOM LINE:**

- There are no hard-&-fast rules that explicitly prevent a provider from writing a medical exemption for a COVID vaccine for reasons other than the three contraindications listed by CDC.
- However, there are several reasons to think that writing exemptions for reasons not approved by the CDC – particularly if a provider/ CHC writes a lot of them – would put both the provider’s medical license and the CHC’s 330 grant at risk.
- Therefore, a CHC cannot state that Federal/ state rules explicitly prohibit them from writing non-CDC-approved exemptions. However, a CHC can reasonably say that writing such exemptions put their providers’ licensee and their Federal funding at risk.
- There is suggested language below that CHCs can post if their providers are getting pressured to write medical exemptions for reasons not approved by the CDC.

### **BACKGROUND:**

The [CDC has identified three conditions that merit a medical exemption](#) from receiving a COVID-19 vaccine.

- Severe immediate allergic reaction to a previous dose of the COVID-19 vaccine
- Previous allergic reaction to Polyethylene Glycol (PEG)
- Previous allergic reaction to Polysorbate

**BPHC rules** – specifically [Chapter 5 of the Compliance Manual](#) – require that all employees, individual contractors, and volunteers who provide health care services on behalf of the CHC be granted privileges by the CHC. (See *Demonstrating Compliance, section d.*) Privileging procedures require verifying the clinical staff person’s “current clinical competence.” It is reasonable to assume that not following CDC guidelines on vaccine exemptions would raise issues around a provider’s “current clinical competence” - which in turn could place their 330 funding/status at risk.

**Licensing rules** – While there are no cut-&-dry prohibitions, there are many reasons to expect that providers who write medical exemptions for COVID vaccines for reasons not approved by the CDC place their licenses at risk – particularly if they write a lot of them. For example:

- There are examples of [doctors losing their license due to writing medical exemptions for non-COVID vaccines](#) that were not consistent with medical guidelines.
- The California Medical Board has stated that [“a physician who grants a mask or other exemption without... finding of a legitimate medical reason supporting such an exemption within the standard of care may be subjecting their license to disciplinary action”](#)
- The Federation of State Medicaid Boards has stated that that [physicians and other healthcare professionals could risk losing their medical licenses if they spread COVID-19 vaccine misinformation](#) on social media, online and in the media. While posting misinformation publicly isn’t quite the same as writing a medical exemption, it is certainly similar.

**RECOMMENDATION:** CHCs whose providers are getting pressured to write medical exemptions for non-CDC-approved reasons should consider posting the following in their clinical rooms, etc.

To protect our federal funding and our doctors' medical licenses, this CHC's providers are permitted to write medical exemptions for the COVID-19 vaccine only to patients with a documented history of one of the three contra-indications approved by the Centers for Disease Control and Prevention:

- Severe immediate allergic reaction to a previous dose of the COVID-19 vaccine
- Previous allergic reaction to Polyethylene Glycol (PEG)
- Previous allergic reaction to Polysorbate.

Patients who are seeking medical exemptions from receiving a COVID-19 vaccine for any other reason will not be able to receive an exemption from this CHC.

CHCs might also create a standard Medical Exemption form that lists the three CDC-approved contraindications (listed above) and instructs the provider to check off which one applies and provide history info, such as:

CONTRA-INDICATION	CHECK IF APPLICABLE	HISTORY/ DATE
Severe immediate allergic reaction to a previous dose of the COVID-19 vaccine		
Previous allergic reaction to Polyethylene Glycol (PEG)		
Previous allergic reaction to Polysorbate		

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