

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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