The Network for Public Health Law

Ideas. Experience. Practical answers.

JUDICIAL TRENDS IN PUBLIC HEALTH – CASE ABSTRACTS, 2026

The Network for Public Health Law monitors key court cases and relevant judicial trends in public health. The Network's quarterly reporter, ***Judicial Trends in Public Health*** (JTPH), highlights select, recently published cases in public health law and policy from the prior 3 months. Case abstracts are organized within 10 key topics, including hyperlinks to the full decisions (where available). Contact the Network for more information, questions, or comments.

JTPH TOPIC DIGEST

1. **SCOPE OF PUBLIC HEALTH AUTHORITY (1 Case)**
2. **PREVENTING AND TREATING COMMUNICABLE DISEASE (1 Case)**
3. **INJURY PREVENTION AND SAFETY (2 Cases)**
4. **INFORMATION SYSTEMS, DATA SHARING, AND PRIVACY (0 Cases)**
5. **HOUSING, PROPERTY, AND BUILT ENVIRONMENT (0 Cases)**
6. **PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE (0 Cases)**
7. **ACCESS TO REPRODUCTIVE AND MATERNAL HEALTH CARE (3 Cases)**
8. **ALCOHOL. TOBACCO, AND SUBSTANCE USE (0 Cases)**
9. **ENVIRONMENTAL AND CLIMATE HEALTH (1 Case)**
10. **HEALTH EQUITY (2 Cases)**

1. SCOPE OF PUBLIC HEALTH AUTHORITY

Commonwealth of Mass., et al. v. National Institutes of Health, et al. (1st Cir., January 5, 2026): The U.S. Court of Appeals for the First Circuit barred the Trump administration from enforcing February 2025 guidance that purported to cap reimbursement of indirect costs, including facilities and administration costs, of National Institute of Health (NIH)-funded research at 15%. This guidance was part of a series of Trump administration orders terminating funding for so-called DEI initiatives. The court reasoned that the cap on indirect costs violates an appropriations rider that was enacted by Congress in 2018 and has been reenacted in each subsequent appropriations cycle. This appropriations rider limits the ability of NIH to alter indirect cost reimbursement rates. Any deviations in reimbursement amounts, in relationship to the total budget, must be proportional to the deviations made in the third quarter of 2017. It also prohibits NIH from modifying, or taking a modified approach to, regulations relating to indirect cost reimbursement rates. A uniform 15% indirect cost reimbursement rate would lead NIH to withhold $4 billion that would have been paid out under the negotiated rates. Accordingly, NIH is required to follow Department of Health and Human Services regulations limiting the ability of NIH to deviate from negotiated rates. Read the full opinion here.

2. PREVENTING AND TREATING COMMUNICABLE DISEASE

Netzer v. State (Montana Supreme Court, November 11, 2025): The Montana Supreme Court determined that a law that prohibits requiring vaccines undergoing safety trials or approved via emergency use authorization is appropriately titled under an antidiscrimination act. The court found that the state's 2021 "Act Prohibiting Discrimination based on a Person's Vaccination Status or Possession of an Immunity Passport; Providing an Exception and an Exemption; Providing an Appropriation; and Providing Effective Dates" was adequately named so as to provide sufficient notice to the public and the Legislature of the contents of the legislation. The Act prohibits requiring an individual to "receive any vaccine whose use is allowed under an emergency use authorization or any vaccine undergoing safety trials." The court reasoned that the title indicates that there is a broad prohibition against adverse treatment of a person based on their vaccination status; it does not limit the type of vaccines to which this antidiscrimination title applies. Further, considering that this law was passed in 2021 during the height of the COVID-19 pandemic and the controversy surrounding the COVID-19 vaccine, the court found it was reasonable to assume that a law relating to vaccination status and immunity passports would also discuss emergency use authorization vaccines and vaccines undergoing safety trials. Read the full opinion here.

3. INJURY PREVENTION AND SAFETY

Kipke et al. v. Moore et al. (4th Cir., January 20, 2026): The U.S. Court of Appeals for the Fourth Circuit upheld the constitutionality of Maryland laws and regulations banning guns from school grounds, government buildings, mass transit facilities and vehicles, public demonstrations, state parks, healthcare facilities, locations that sell alcohol, and places of amusement such as museums, stadiums, amusement parks, and casinos. However, the court also found that a Maryland law banning guns from private property held open to the public was unconstitutional. Gun rights groups argued that these bans in specified locations violated their Second Amendment rights. The court disagreed, reasoning that all but one of the bans were constitutional because they were regulating historically protected "sensitive places." Historically protected sensitive places include places that serve children or educational purposes, places of social gathering or public assembly, and places where the possession of guns would be inherently dangerous. Additionally, some of these places are subject to state government ownership and are not held open to the public, giving the government the power to regulate their own property—similar to the power given to private property owners. Read the full opinion here.

Stone v. Witt (Oregon Supreme Court, December 11, 2025): The Oregon Supreme Court found that medical professionals can be found liable for negligence in the death of a nonpatient when their negligent conduct caused foreseeable risk of harm to a third party. The group of medical professionals in this case negligently prescribed and provided substances to a patient with a history of a substance use disorder. The patient then drove while impaired by these substances and struck a third-party cyclist. Following a claim on behalf of the deceased cyclist, the court reasoned that Oregon has never limited ordinary negligence liability to patients with whom medical professionals have a pre-existing relationship and declined to create this exception. This opinion established that when a medical professional in Oregon does not meet the applicable standard of care, they can be negligent for harm to a third party under a theory of ordinary negligence. Read the full opinion here.

4. INFORMATION SYSTEMS, DATA SHARING, AND PRIVACY

5. HOUSING, PROPERTY, AND BUILT ENVIRONMENT

6. PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE

7. ACCESS TO REPRODUCTIVE AND MATERNAL HEALTH CARE

Access Independent Health Services, Inc., d/b/a Red River Women's Clinic v. Drew H. Wrigley (North Dakota Supreme Court, November 21, 2025): The North Dakota Supreme Court allowed a new near total abortion ban to go into effect despite finding a similar "trigger" abortion ban unconstitutional in 2023. A lower state court initially struck down the new ban, declaring the law impermissibly vague and a violation of women's fundamental right to procreative autonomy. On appeal, the North Dakota Supreme Court largely agreed with the lower court, voting 3-2 in favor of striking down the new ban. The court found that women have a constitutional right to life and health-preserving medical care, and that right cannot be restricted without adequate notice. The new ban's "health-risk exception" allowing abortions that have been "deemed necessary based on reasonable medical judgment" is unconstitutionally vague because it fails to give adequate and specific notice of what conduct is prohibited, potentially leading to arbitrary and discriminatory enforcement of the ban. North Dakota law, however, requires a supermajority of four votes to declare a state law unconstitutional. Because the 3-2 vote was not a supermajority, the ban is permitted to go into effect. Read the full opinion here.

State v. Johnson (Wyoming Supreme Court, January 8, 2026): The Wyoming Supreme Court declared two restrictive Wyoming abortion laws unconstitutional, unanimously finding that the decision to keep or terminate a pregnancy is a fundamental right protected by Article 1, Section 38 of the Wyoming Constitution. The court reasoned that statutes restricting the right for every competent adult to make their own healthcare decisions must pass a strict scrutiny analysis. In other words, there is a strong presumption against finding the laws to be constitutional. While the state's abortion laws did protect the state's interest in prenatal life, they were overly restrictive and were accordingly deemed unconstitutional. This decision sets an important precedent in Wyoming, requiring any future restrictive abortion laws to meet a high burden of proof to be considered constitutional. Read the full opinion here.

Nat'l Inst. of Fam. and Life Advocs. v. James (2nd Cir., December 1, 2025): The U.S. Court of Appeals for the Second Circuit barred the New York State Attorney General from enforcing false advertising and consumer protection laws against faith-based organizations sharing information

about abortion pill reversals (APR) due to the likelihood the State's actions would violate Plaintiffs' First Amendment right to freedom of speech and religion. The APR procedure claims to reverse the effects of the first dose of mifepristone, the medical abortion pill. New York previously brought a case against a different organization, Heartbeat International (HBI), for sharing misleading information about the safety and efficacy of APR and for providing APR resources. Faith-based organizations feared that they may face similar treatment in the future and asked the court to preemptively prohibit the state from enforcing its false advertising and consumer protection laws. The court found that it was acceptable for a federal court to interfere with potential state court proceedings, as HBI's commercial interests were wholly separate from Plaintiffs' faith-based and moral interests. Plaintiffs' actions were religiously and morally motivated and thus subject to First Amendment protections, while HBI's actions were economically motivated commercial speech, not subject to First Amendment protections. Read the full opinion here.

8. ALCOHOL, TOBACCO, AND SUBSTANCE USE

9. ENVIRONMENTAL AND CLIMATE HEALTH

Sierra Club v. EPA (6th Cir., December 5, 2025): The U.S. Court of Appeals for the Sixth Circuit found that the EPA improperly allowed for the state of Michigan to label the Detroit area as an "attainment" zone meeting applicable air quality standards in 2023. Moving an area from "nonattainment" to "attainment" allows a state to benefit from relaxed air quality regulations and permitting requirements. The Detroit area has historically been impacted by high ozone pollution, which is known to create numerous public health harms including asthma. While the court allowed for an exception for air quality data impacted by wildfire smoke in Detroit because of Canadian wildfires, it did not allow for Michigan to redesignate Detroit to an attainment area before all the appropriate pollution control technology was in place. Because Michigan had submitted its request to move Detroit to "attainment" before implementing all the necessary technology, the court found that EPA's actions were impermissible. Read the full opinion here.

10. HEALTH EQUITY

Chianne D. et al. v. Harris (M.D. FL, January 6, 2026): A federal district court in Florida paused the termination of Medicaid coverage in the state, finding that termination notices failed to adequately explain to enrollees why their benefits were being terminated. The court determined that the notice language was vague and confusing, preventing enrollees from understanding whether the termination was wrongful. This is a violation of the Medicaid enrollees' Fourteenth Amendment procedural due process rights, which require reasonable notice before deprivation of property interests such as Medicaid benefits. The court ordered that Florida must provide corrected notices with enough individual information for enrollees to understand why benefits have been terminated and determine whether they should pursue a hearing. The defective notices impact nearly 500,000 people in Florida who lost coverage between 2023 and 2024. Read the full opinion here.

E.N v. Kehoe (Missouri Supreme Court, January 13, 2026): The Missouri Supreme Court upheld the constitutionality of two Missouri laws prohibiting health care professionals from providing, and Medicaid from covering, gender-affirming care for minors used for the purpose of transitioning genders. Medical professionals, organizations, and minors argued that Missouri's laws discriminated against transgender individuals and violated their right to autonomy when making healthcare decisions. Following the Supreme Court reasoning in *Skrmetti*, the court determined that the challenged laws do not discriminate against a protected class or infringe on any protected rights. The challenged laws do not classify individuals based on transgender status or sex. The laws only classify individuals based on age and medical use, neither of which are protected classes. The court ultimately found the challenged laws are a rational method for preserving the state's legitimate interest in protecting the well-being of minors and do not violate minors' healthcare autonomy. Neither minors nor their parents have the right to obtain a particular medical treatment once that treatment has been deemed inappropriate by state legislators. Read the full opinion here.

Judicial Trends in Public Health is published quarterly by the Network for Public Health Law. If you have questions about any of the covered cases, please contact the Network here.

Legal information or guidance provided in this transmission or website does not constitute legal advice or representation. For legal advice, please consult specific legal counsel in your state.