

Ohio Chapter

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Testimony of Melissa Wervey Arnold, CEO Opponent – House Bill 435

Chairman Stein, Vice Chair Johnson, Ranking Member Lepore-Hagan, and members of the House Commerce and Labor Committee, thank you for the opportunity to offer testimony on House Bill 435. My name is Melissa Wervey Arnold and I am here today on behalf of the 3,000 members of the Ohio Chapter of the American Academy of Pediatrics (Ohio AAP). My members are trusted by nearly all Ohioans to provide care to their children, and they desperately need your support right now.

Over the past few months, the Ohio House of Representatives has held several hearings on legislation related to COVID-19 and other immunizations. While testimony has been colorful at times, these hearings and the conduct of anti-vaccine activists have created significant doubt in the safety and effectiveness of vaccination. As the voice of Ohio's pediatric healthcare providers, Ohio AAP strongly supports and recommends immunization as a critical tool in preventing disease and protecting children. The continued attention being given to anti-vaccine legislation is sending a very negative message to Ohio pediatricians, many of whom are already demoralized and exhausted.

Despite these recent hearings, Ohio has historically been a leader in immunization policy and rates. As recently as 2005, Ohio was one of the top states in the nation for childhood vaccination. More recently, we enacted legislation restoring the vaccination entry requirement for childcare centers (HB 394, 130th) and adding the meningitis vaccine to the list of required vaccines for school entry (SB 121, 131st). Interestingly, when the Ohio General Assembly passed these bills, the vote was nearly unanimous. It seems contradictory that only a few years later, we are considering multiple bills to erode our immunization rates.

It is important to note that between 2005 and 2014, Ohio's immunization rates dropped significantly. This is largely attributable to the addition of the 'philosophical' exemption in 2005, being only one of 16 states to allow for this exemption. Prior to then, Ohio only accepted religious and physician-certified medical exemptions for children entering childcare centers or schools. The result was a sharp drop in Ohio's pediatric vaccination rates and outbreaks of vaccine preventable diseases. While legislation passed in the 130th and 131st General Assemblies has helped, our rates remain lower than most other states. I believe this historical context is important as we discuss House Bill 435 and other bills that chip away at our ability to control infectious disease by vaccination.

HB 435 is focused on the COVID-19 vaccine, but it includes many provisions that will impact our ability to emerge from this pandemic. As you are well aware, this is a particularly challenging time for pediatric providers and children's hospitals. Not only are we seeing rates of COVID-19 in children higher than any other point in the pandemic, but we are also seeing unseasonably high rates of RSV, a looming flu season, and occurrences of MIS-C for children who previously contracted COVID-19. Now is not the time to be considering any legislation that could tie the hands of public and private entities when we need to be taking every step

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possible to stop the spread of these diseases. While we appreciate the provision in the bill that recognized the unique needs of Ohio's children in this pandemic, and while we do believe Ohio Children's Hospitals should be exempt from the provisions of the bill prohibiting mandates, we also very strongly believe children in ALL pediatric health care settings should be protected by making all pediatric providers, including family physicians, should be exempt.

Further, we have seen a drop in childhood vaccination rates due in part to the idling of non-essential procedures last year at the onset of the COVID-19 pandemic and also due to some of the aggressive and false rhetoric of anti-vaccine activists. We need our children coming to their primary care physician's office, receiving vaccines and other preventive medical care, and ensuring that data regarding vaccination is reporting to the school. We are in a very precarious position and will likely see outbreaks of vaccine-preventable diseases in the coming months.

HB 435 and other bills send the wrong message regarding immunization. We should want as many Ohioans as possible vaccinated against COVID-19 and other diseases and should not be tying the hands of our local communities, schools, and businesses to promote immunization. With the imminent approval of a COVID-19 vaccine for children under 12, we should encourage vaccination as much as possible. Passing legislation that creates broad exemptions to immunization mandates only seeks to diminish confidence in vaccination. We know from our own experience as a state that the 'philosophical' exemption will result in dramatically lower vaccination rates. Even if applied specifically to COVID-19, as is the case in HB 435, this exemption alone will ensure that we will fail to achieve herd immunity and beat this pandemic once and for all.

Ohio AAP is strongly opposed to the 'reasons of conscience' language from HB 435 as well as current exemptions for school and childcare entry. Medical and religious exemptions are more than adequate to ensure individuals rights are protected. Further, we are very concerned regarding the COVID-19 natural immunity exemption as there is not a scientific consensus around the protection given antibodies derived from contracting COVID-19. The mere presence of COVID-19 antibodies in an unvaccinated individual does not guarantee the same level of immunity as the COVID-19 vaccine.

We are also concerned over the use of the term 'primary care provider' in language regarding medical exemptions. In current language regarding medical exemptions for school entry (R.C. 3313.671) and childcare entry (R.C. 5104.014), only a physician may authorize a medical exemption. This is important considering children with complex health needs who may be immunocompromised often receive care from a specialist in addition to their primary care provider. Also, we fear that some anti-vaccine activists may argue that a 'primary care provider' could include a naturopath, chiropractor, or other nonphysician. These individuals are not trained to diagnose a medical contraindication.

While these concerns may be able to be addressed through amendments, we remain concerned over the message HB 435 sends to our frontline healthcare providers. Under Senate Bill 22, enacted earlier this year over objects from Ohio AAP and other organizations, the General Assembly now has expanded authority related to pandemic response and public health emergencies. Ultimately, the best course of action would be to leave HB 435 and other anti-vaccine in committee and instead promote vaccination against COVID-19 and other diseases. Whether you pursue mandates or simply use social media and your prominence in Ohio communities, members of this body can help Ohio's frontline healthcare providers by simply encouraging Ohioans to do their part.

In closing, it is my hope that you will hold off on passing any anti-vaccine legislation and instead focus your efforts on ensuring Ohioans get vaccinated against COVID-19, wear their masks in public, and take every other step possible. Thank you for your time and consideration.