

December 7<sup>th</sup>, 2021

**Opponent Testimony – House Bill 218 (COVID-19 Immunization)**

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*Ohio Chapter, American College of Surgeons*

Ohio Senate General Government Budget Committee

Chairman Peterson, Vice Chair Wilson, Ranking Member Craig, and members of the Senate General Government Budget Committee, thank you for the opportunity to submit testimony on behalf of the Fellows of the Ohio Chapter of the American College of Surgeons. We are concerned that this legislation will limit the ability of healthcare providers and businesses to combat COVID-19 and negatively impact the care of surgical patients in Ohio.

For almost two years, our state and our nation have faced extraordinary hardships due to the COVID-19 pandemic. Physicians/surgeons and other healthcare providers across the state have worked tirelessly to support our healthcare system and protect patients during the pandemic. I am very proud of all our Fellows and the work they have done. I believe that we are all in this together and remain committed to working with you to meet the needs of our state.

Early in the pandemic, Governor DeWine ordered a pause on all non-urgent medical procedures to preserve the fragile supply of personal protective equipment and ensure our hospitals had capacity to respond to a caseload surge. As one can imagine, this posed a significant challenge to surgical practice in the State of Ohio and it resulted delays in patient care for necessary, but not deemed urgent surgical services. Once this order was lifted, surgeons worked hard to provide medical services and keep patients safe. Many of my colleagues were and still are exhausted. The development of the COVID-19 vaccines gave us all great hope. While we do not anticipate a return to statewide orders, some hospitals have had to pause non-urgent services and procedures in response to the latest Delta variant surge.

We are continuing to add to our understanding of how COVID-19 impacts surgical patients. Operations performed on patients with COVID-19 infection require additional safeguards to protect healthcare workers and other patients. There is

accumulating evidence that individuals undergoing surgery who have current or even recent (within 1 to 3 months) COVID-19 infection are at higher risk for major complications and death than patients without a recent history of COVID-19 infection. Idling of non-urgent medical procedures (which some hospitals have already been forced to undertake) and those post-operative major complications including death in patients with active or recent COVID-19 infection impact the timeliness and quality of patient care. It is imperative that elected officials take this pandemic seriously and encourage their constituents to follow all recommendations issued by public health experts including the CDC and Ohio Department of Health.

Given this reality I, and many Ohio surgeons, are concerned over how House Bill 218 will impact our ability to respond to COVID-19. While I recognize that House Bill 218 does not prohibit hospitals and employers from requiring workers and clinicians to be immunized against COVID-19, the bill's mandated exemptions will result in many workers opting out of receiving the COVID-19 vaccine. HB 218 does protect children's hospitals and intensive care units from these exemptions; however, there are many more settings and facilities where vulnerable patients receive care. Further, the bill will limit the ability of communities to prevent the spread of COVID-19 by allowing broad exemptions. This will create a chilling effect for employers who want to proactively protect their customers and workers.

While vaccination is, and will remain a personal choice, the decision not to vaccinate can have an adverse impact on others. Further, healthcare providers and facilities must have all tools available to protect patients. With cases again on the rise, now is not the time to pass legislation that will limit the impact of vaccination to address the ongoing global pandemic.

Like many states, Ohio is dealing with a small but vocal group of advocates who are casting doubt on vaccination, masks, and other public health interventions. These individuals have flooded the statehouse with erroneous claims and toxic rhetoric. I hope that we can rise above this and take all steps possible to beat COVID-19. Ohio's surgeons need to know that their state representatives are on their side and committed to doing their part to protect Ohioans.

I appreciate your thoughtful review of these comments. Please consider myself and the Ohio Chapter of the American College of Surgeons a resource for you and your colleagues. Thank you.