

March 30, 2021

Committee on Health and Human Services Texas Senate Post Office Box 12068 Austin, TX 78711

## Testimony by Allison N. Winnike, J.D., President & CEO of The Immunization Partnership, Against SB 1310

Good morning, Chair Kolkhorst, Vice Chair Perry, and members of the Committee. My name is Allison Winnike and I am President and CEO of The Immunization Partnership. Our non-profit mission is to eradicate vaccine-preventable diseases by educating the community, advocating for evidence-based public policy, and supporting immunization best practices. Thank you for the opportunity to testify in opposition to SB 1310, which would create an undue burden and unfunded mandate for physicians and serves to discourage childhood immunizations...

Federal law already requires health care providers to give the CDC Vaccine Information Statement for each vaccine that includes an explanation of the risks and benefits in easy to understand language at a 10<sup>th</sup> grade reading level. This bill would require providers to distribute, at their own considerable expense, lengthy technical paperwork on all the inactive and residual ingredients in a vaccine, such as the infinitesimal amounts of preservatives to prevent contamination, inactivating ingredients, and antibiotics to prevent bacterial contamination. Many of these ingredients are used in the vaccine

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manufacturing process and are removed in the final processing; even those in the vaccine are in such trace amounts that they are not harmful.

This technical information, which is intended for scientists and medical professionals, does not conform with the plain language informed consent standards where a reasonably prudent physician, in the exercise of reasonable care, explains to the patient in plain language about the probable benefits balanced against the probable risks. The inclusion of superfluous information is meant to be a scare and delay tactic so that an individual will be overwhelmed with technical jargon and fearful of consenting to something that appears extremely complicated.

Forcing providers to deliver to their patients confusing, complicated, and extraneous technical material comes at a high cost, both financially and in the forecasted decline in vaccine access and drop in immunization rates.

According to the fiscal note on a similar bill from Missouri, 1 the printing costs alone would be many millions of dollars if we implemented this bill in Texas. At a bare minimum we would force providers to distribute at least 34 million additional pieces of paper per year for each of the 8.5 million childhood vaccines given in Texas.<sup>2</sup>

Physicians will not absorb those expensive printing costs and will be forced to increase fees, causing a rise in health care costs and insurance premiums.

Most Texans would agree that health care costs are already too high and we cannot afford to waste our precious funds on bureaucratic paperwork. In

<sup>&</sup>lt;sup>1</sup> Missouri General Assembly Committee on Legislative Research, Oversight Division, *Fiscal Note on HB* 1164 (April 5, 2019), <a href="https://www.house.mo.gov/billtracking/bills191/fiscal/fispdf/2179-02N.ORG.pdf">https://www.house.mo.gov/billtracking/bills191/fiscal/fispdf/2179-02N.ORG.pdf</a>.

<sup>&</sup>lt;sup>2</sup> Texas Department of State Health Services, Vaccinations Administered, Texas Immunization Registry, ImmTrac2, Year-To-Date Summary: 2019 (March 29, 2021),

https://tabexternal.dshs.texas.gov/t/THD/views/ImmTrac2DosesAdministered/Story?:showAppBanner=false&:display\_count=n&:showVizHome=n&:origin=viz\_share\_link&:isGuestRedirectFromVizportal=y&:embed=y.

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addition, the state should expect that the high costs incurred from this unfunded mandate will cause some providers to no longer administer vaccines or move their practice to another state.<sup>3</sup>

Vaccines are one of the safest and most effective public health measures to prevent disease. This bill not only goes against national and international patient information standards, it attempts to put immunizations into a high-risk informed consent category, higher than what is required for surgeries, cancer therapies, or other high-risk care.

Thank you for the opportunity to testify in opposition to SB 1310. As the only organization in Texas solely devoted to creating a community free of vaccine-preventable diseases, we are here to work with the Department of State Health Services, providers, stakeholders, and the Texas Legislature to improve our immunization systems which serve as a key component of a robust and efficient public health infrastructure. I welcome any questions or requests for additional information.

Respectfully,

Allison N. Winnike, J.D.

President & Chief Executive Officer

The Immunization Partnership

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<sup>&</sup>lt;sup>3</sup> Missouri General Assembly Committee on Legislative Research, Oversight Division, *Fiscal Note on HB* 1164 (April 5, 2019), https://www.house.mo.gov/billtracking/bills191/fiscal/fispdf/2179-02N.ORG.pdf.