

Adrienne Fahey
303-421-1594
OPPOSED!

Madam chair and members of this committee, my name is Adrienne Fahey, and I am here to oppose this bill. One of the stated objectives of HB19-1312 is "to improve vaccination rates" in the state of Colorado, since Colorado ranks 49th among the 50 states for kindergarten vaccination rates. One could assume that this is due to ignorance on the part of those parents who choose not to vaccinate. I would propose that there is another explanation for this.

I would suggest that these parents have done their due diligence – just as I did many years ago – and discovered that vaccines are not as safe as doctors, health care providers and the CDC would have the public believe they are. As anyone who watches television on a regular basis knows, we are constantly bombarded by advertisements about prescription drugs that include a litany of side effects and risks associated with them. Therefore, for the CDC or any health care professional to tell the public or their patients that vaccines, a man-made pharmaceutical, are completely safe with no risks is an outright lie. No drug is without risks, and yet such claims are made all the time with regard to vaccines.

A parent should have the right to informed consent with regard to their children and vaccines. Under normal circumstances, a patient receiving medical treatment must sign an informed consent form prior to a medical procedure, and yet no such consent form is given to parents with regard to vaccines. This bill would require the Department of Health and Environment to develop educational materials to distribute to health care providers and facilities. Unless these "educational materials" include the full truth about the risks associated with vaccines, then parents cannot give their informed consent.

How many of you on this committee are familiar with the Vaccine Adverse Events Reporting System, otherwise known as VAERS? How many of you have ever heard of the National Vaccine Injury Compensation Program, more popularly known as Vaccine Court? Do you know that this court has paid out close to \$4 billion? The pharmaceutical companies that manufacture the vaccines on the CDC schedule did not pay these settlements – taxpayers did – because the pharmaceutical companies are exempt from all liability by virtue of the Vaccine Act of 1986. Did you know that the CDC itself holds over 50 vaccine patents? Have you ever heard of William Thompson, a whistleblower at the CDC, who confirmed that the MMR vaccine is directly linked to autism?

Every parent and health care provider should be informed about such things before making the decision on whether or not to vaccinate. We should have informed consent here in America – not forced consent, which is what many people are advocating today – with the right of refusal. Please do your due diligence and vote no on HB19-1312. Thank you.

#3 VACCINE EXCIPIENTS & ADJUVANT MEDIA NOT DOUBLE BLIND PLACEBO STUDIES.

24 VACCINES REQUIRED BY 12 MOS

BY WEIGHT FOR THE YEAR THAT IS 5.67

TEASPOONS OF VACCINE & ADJUVANT MEDIA

EXPOSURE. THAT IS EQUAL TO 58.1 TEASPOONS

FOR A 180 LB PERSON (ADULT). KNOWING

THE CENTRAL NERVOUS SYSTEM DAMAGE (COMA / DEATH)

ASSOCIATED WITH 2-AMINOETHANOL, ALUMINIUM,

AND FORMALDEHYDE, ARE THE SPONSORS AND *

* LAWMAKERS WILLING TO RECEIVE 58.1 TEASPOONS OF VACCINES OVER THE NEXT YEAR?

ARE YOU WILLING TO TEST VACCINE REACTIONS FOR US?

#4 MY FAMILY, MY CLIENTS AND THEIR PHYSICIANS ARE MOST QUALIFIED TO DETERMINE IF VACCINES ARE APPROPRIATE.

#5 I OPPOSE ~~THE~~ HB 1312 AND I OPPOSE LAWMAKERS INTERFERENCE WITH MY FAMILY'S HEALTH PRACTICES.

#6 AS A CHILD, I WAS FULLY VACCINATED AND CONTRACTED MUMPS 3 TIMES, MEASLES 2 TIMES. VACCINES ARE NOT 100% EFFECTIVE.

LeAnne

Thank-you ^{Madam} Mr./Mrs. Chair Lonting, and Committee Members:

My name is Tommie Sue Johnson and I've been a registered nurse for 29 years and I am here representing myself.

I am the mother of three grown **unvaccinated** children and I am **very** proud of the fact that our family has not been burdened with the many autoimmune diseases such as; Guillain-Barre Syndrome, type 1 diabetes, inflammatory bowel disease, life threatening peanut allergies, juvenile arthritis, cancer, or autism, just to name a few, all of which seem to be associated with or have direct relationships to vaccinations.

I strongly urge that you reconsider the unconstitutional implications of this bill and vote NO. This is about freedom of healthcare choice and our unalienable human right to decide what medical treatments we want for ourselves and our children, whom we are responsible for, not the state or the government.

Creating large government healthcare databases that reflect individual's decisions in healthcare choices will have a negative contagion effect in future decisions for our healthcare. Harassing, intimidating, or forcing American citizens to get medical treatment is what is known as Medical Tyranny which is a violation of property rights because our body is our property.

If you want parents to trust their health care providers, then start by abolishing the 1986 Vaccine Protection Act, and hold

the pharmaceutical companies responsible for the drugs they are so fervently pushing on us.

Where there is forced medicine, there is no liberty.

Please vote NO on HB-19-1312

House Bill

Thank-you for your time

I oppose HB 1312

I'm Casey Docksey, representing myself
my family
states

The current personal belief/religious exemption
form has verbiage that forces a parent
to sign they are knowingly putting their
child's health at risk by not vaccinating
I fully disagree with the statement & U

see comments
over

believe strongly in the opposite in fact
that if I did vaccinate my children I
believe I would be putting their health
at risk - this is why I currently write
my own personal belief exemption as I'm
allowed to now by CO law. If this
bill passes I would no longer be able
to & forced to sign a standardized form
I have no idea what it says since its
not yet written & could have incriminating
verbiage I disagree with. ~~this is not~~ U

~~I will never vaccinate my children~~
I will never vaccinate ~~my~~ my
children. Because my personal belief is
so strong. if my ^{current} exemption's rights are
taken away I will ^{still} never vaccinate - I
will be forced to remove my children
from school ~~and home school~~ even
goes as far as moving & Parents do
not "NOT" vaccinate out of convenience
they don't & vaccinate because the
risks to us outweigh the benefits.
please vote NO on HB 1312.

Casey Dochow

There has been talk that ~~the~~ parents fill out an exemption, writing it free hand out of convenience - it's not convenience at all. It's because we do not want to use the states current vaccine exemption form as it forces us to sign something we disagree with. We ~~do~~ want our own exemptions after countless time researching vaccine pros & cons & deciding as parents not to vaccinate. - which is our RIGHT

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4/15/19
BILL #: HB19-1312
PRIME SPONSORS: Mullica

NAME: Susan Michael
PHONE #: 619-519-7046
FOR: _____ AGAINST: X

WRITTEN TESTIMONY:

Under this bill, the BOH must require all vaccines recommended by the ACP/CDC. (Page 9, Lines 8-16) This would include the Flu + HPV vaccines. By adding these to the required schedule for school, exemptions rates will go up and NOT down. This bill will only allow medical exemptions based on the contraindications as described by the ACP/CDC. (Page 8, Lines 9-15) This takes family history and doctor/patient relationship out of the decision. This bill will create a database which is a violation of privacy under the FERPA + HIPAA laws. (Page 10, Lines 6-10)

Please vote NO on HB19-1312

Thank you for allowing me give ~~me~~ this written testimony.

PRINT NAME: SUSAN MICHAEL

SIGNATURE: Susan Michael

HOUSE WRITTEN TESTIMONY SHEET

DATE: April 15, 2019
BILL #: HB 19-1312
PRIME SPONSORS: _____

NAME: Becky Otteni
PHONE #: 720-290-4378
FOR: _____ AGAINST:

WRITTEN TESTIMONY:

I represent myself & my family. I absolutely OPPOSE HB19-1312 and ANY medical intervention that threatens serious injury or possible death to my loved ones. My family and I are prepared to re-locate to Texas if the state of Colorado revokes my ^{RIGHTS to} medical freedom. The politicians of Texas who are actually EDUCATED on this topic, are protecting their citizens by taking measures to ensure vaccines will not be FORCED until they are PROVEN non-harmful to humans. Until vaccine companies can be held accountable for the products they profit from, while damaging their consumers with zero consequences for negligence, I DO NOT and WILL NOT consent. When the Colorado market crashes due to this absolutely disgusting and criminal mandate, you can blame yourselves for not protecting personal medical freedom for families who support the Colorado economy. The law of Cause and Effect will not work out well if this bill is passed.

PRINT NAME: Becky D. Otteni

SIGNATURE: Becky D. Otteni

HB19-1312

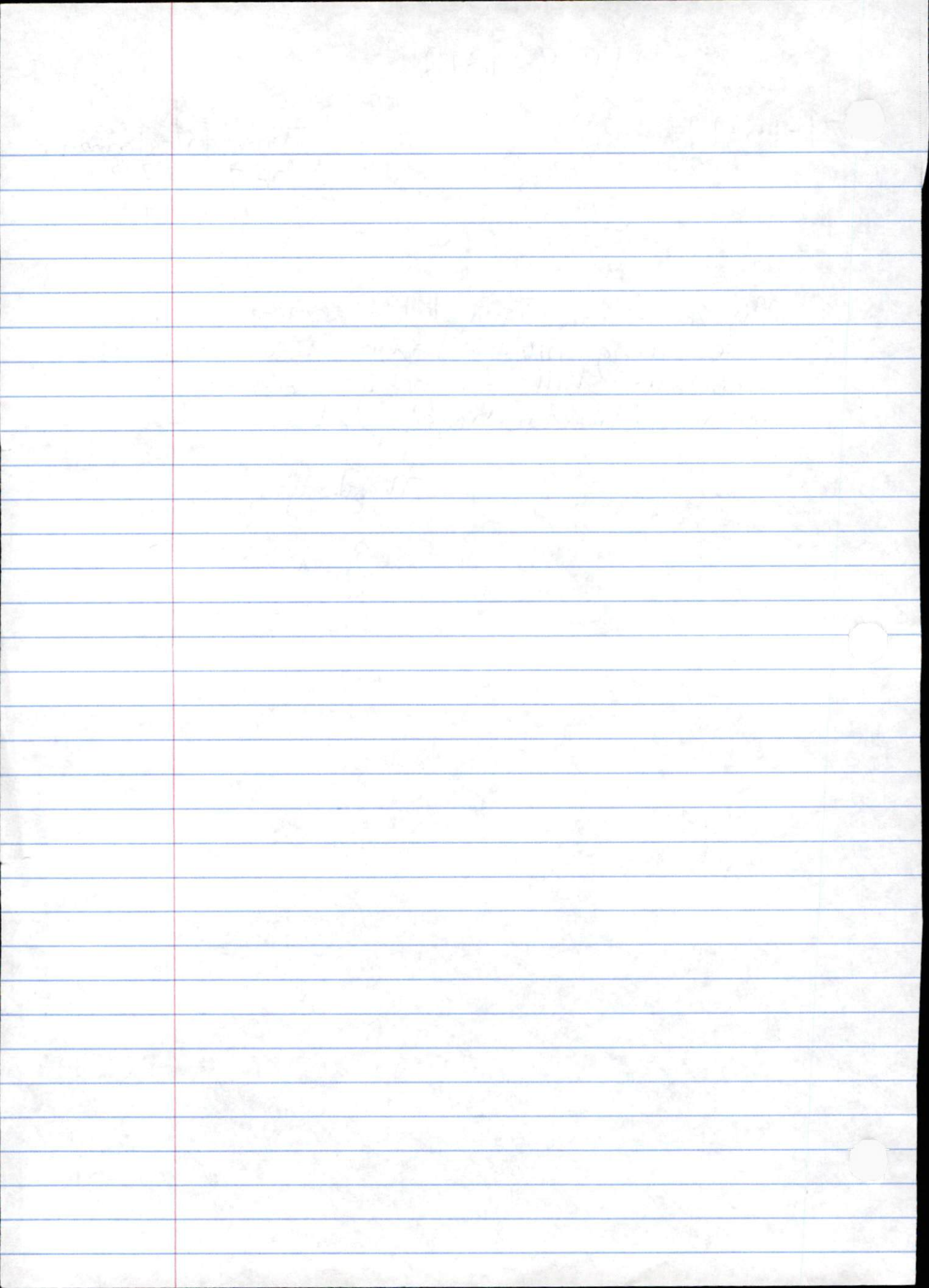
4-15-19

Jana Klostermann
307-277-3906
Against,

My name is Jana Klostermann, I'm representing myself, and I wholeheartedly oppose this bill for many reasons you've already heard today.

Thank you,

Jana Klostermann



HOUSE WRITTEN TESTIMONY SHEET

DATE: 15 Apr 2019
BILL #: 1312
PRIME SPONSORS: Mullica

NAME: Nicholas Downing
PHONE #: 303 346 4098
FOR: _____ AGAINST:

WRITTEN TESTIMONY:

My name is Nicholas Downing and I am a parent of a vaccine-injured child, an Autism warrior named Brecken. Brecken has a medical exemption that she would no longer qualify for if HB 1312 ~~passes~~ passes.

For those of you who don't believe that vaccine injury is possible, I understand your perspective - I used to think it was preposterous myself. But you didn't see the blood in Brecken's stool the same day she was immunized. You didn't endure the piercing, inhuman shriek of encephalitis. You didn't experience the confusion we felt when she lost her vocabulary and fine motor skills. You weren't with us any of the times we've had to follow Flight for Life helicopters carrying our daughter to Children's Hospital. If Brecken could share her story, she would warn you that a small but significant segment of the population is at risk of injury. And that segment will continue to grow each time we add uncontrolled variables to the dangerous game of Russian Roulette we are playing with our children's lives. I urge you to vote against HB 1312 not just to protect children like Brecken, but because it represents ~~an~~ an egregious assault on the principles which make America the greatest nation of free people in the world.

PRINT NAME: Nicholas Downing

SIGNATURE: Nicholas Downing

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4/15/18
BILL #: HB 1312
PRIME SPONSORS: Mulica

NAME: Rowan Downing
PHONE #: 303-396-4079
FOR: _____ AGAINST: X

WRITTEN TESTIMONY:

Hi, My name is Rowan Downing. I am here to say why I think this bill shouldn't pass. The first thing I want to say is that vaccines are not ok for everyone to have. But, some people can handle them. Let's say someone was allergic to milk. It is their decision if they want to have milk or not. This is the same for vaccines.

My sister Brecken, got autism ~~from~~ from vaccines. She can't even have a real conversation with ~~someone~~ ^{anyone} because of what was put inside of her.

I was fully vaccinated, and nothing went wrong. That is because I can handle vaccines. Because of Brecken's injury, I will never again be vaccinated, neither will she. But because all people are different, I think we should get to decide if we want to be vaccinated or not. But for my family, we won't have any more vaccines because of the injuries that vaccines have caused or family to have.

PRINT NAME: Rowan Downing

SIGNATURE: Rowan Downing

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4/15/19
BILL #: HB 1312
PRIME SPONSORS: _____

NAME: Taylor Downing
PHONE #: 303-396-4879
FOR: _____ AGAINST: X

WRITTEN TESTIMONY:

I am a mother of 4 from Parker. When my husband & I first had kids we strongly believed in the power of vaccines to protect our kids. Our oldest had multiple negative reactions but we felt the benefits still outweighed the risks. Our second child had minor reactions. Our third had a host of negative reactions including difficulty breathing, blood in stool, eczema, & encephalitis. She eventually lost words & skills & was later diagnosed w/ autism & epilepsy. That's when I began to research vaccines & learned about the lack of testing for safety, the neurotoxic ingredients, & the 1986 NCVIA removing liability from pharm. companies. Vaccines can & do injure people & they can even fail to protect from the diseases they are designed to prevent. The recent mumps outbreak on a US Naval ship of 100% vaccinated individuals is proof of their failure. Vaccination does not guarantee immunity. It is not safe for every person, as witnessed in our own family. All children deserve safe & healthy schools. However, limiting medical exemptions & forcing parents to sign a document they don't agree with for religious/personal reasons is not the way to improve health. Please vote no on HB 1312.

PRINT NAME: Taylor Downing

SIGNATURE: Taylor Downing

HOUSE WRITTEN TESTIMONY SHEET

DATE: April 15, 2019

BILL #:

PRIME SPONSORS:

NAME: Laurel Jameson

PHONE #:

FOR: _____ AGAINST: _____

WRITTEN TESTIMONY:

Dear Committee Members,

For those who testified saying that we need to vaccinate for the herd... "Herd immunity," as the CDC recognizes it, is unattainable with vaccines. Antibodies do not last and people become unprotected and vulnerable again. That's why there are outbreaks of measles every year in the US and why the CDC + HHS have claimed we need a higher and higher percentage of the population vaccinated in order to attain herd immunity as time goes on. They used to claim all we needed was 60%... Now they claim we need 95%... But if even 100% of people were vaccinated, it wouldn't be enough, because 10% don't respond to vaccines and antibodies wane within 5-20 years, depending on the individual.

On top of that, the MMR vaccine can cause autoimmune disease. With more vaccinations, this just makes more and more people in our population immunocompromised and susceptible to vaccine injury... And the number of people who cannot be vaccinated rises.

The HHS, via Harvard, estimate only 1% of vaccine injuries are reported to VAERS - taking that into account, about 10% of population vaccinated experience severe harm from vaccines. About 50% more are moderately harmed with repeated vaccinations. There is a genetic component and this →

PRINT NAME: Laurel JamesonSIGNATURE: 

is wiping out the health of many to force them to vaccinate
(By the way, if you don't like percentages, just know these
numbers represent estimates. Until the CDC consents to
do a vaccinated vs. unvaccinated - which they have refused
to do! But'll then, there IS no science on this issue.)

If herd immunity is the argument, it doesn't hold any water.
This must be taken into account, since herd immunity is
the single largest reason for any mandate thus far and
any bill constraining exemptions in any way.

Thank for your time!

Please vote NO ON HB19-1312.

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4-15-19
BILL #: 1312
PRIME SPONSORS: _____NAME: TALU KENTOF
PHONE #: 904-393-5621
FOR: _____ AGAINST: X

WRITTEN TESTIMONY:

My name is Tali Kentof and I represent myself. I am a former pharmaceutical sales representative. I used to believe that vaccines save lives, but now I know the evidence-based truth. With no true placebo-controlled studies / with no vaccinated vs unvaccinated studies - with 54% of our children currently possessing a life-long chronic illness - these statistics have increased astronomically with the ever-increasing vaccine schedule. The autism rates have gone from 1 in 10K to 1 in 36. Where there is risk, there must be choice. This choice needs to be a discussion parents can openly have with their chosen healthcare provider. These providers should not be penalized or bonused regarding how many patients are vaccinated or not. This bill makes exemptions difficult for parents and sounds to be the beginning of a Nazi Germany-like registry. As the daughter of a Holocaust survivor, a registry of exemptions and such government/state intervention is against fundamental personal rights one has over their bodies + those of their children. Big Pharma should not be protected - the people should! "Unavoidably unsafe" means there must be choice - and this choice should be made easily and without such red tape. Doctors receive their "knowledge" on vaccines from Pharma reps. This is not the education one should have when injecting known poisons into children's bodies. I say no!

PRINT NAME: TALU KENTOF

SIGNATURE: 

Concerned Citizen
Weld County
April 15, 2019

representing self

Expressing Opposition of HB19- 1312 - School Immunization Requirements

While I oppose HB19-1312, I understand the concern of reemerging diseases and the fear of possible contraction of these, especially by our children. My concern and opposition therefore lies in our response to these fears. My children are the most important thing to me and I believe my role and responsibility as a parent is to do everything in my power to maintain their safety and well-being. I would imagine that the motivation and intention of those of you supporting this bill is similar in nature.

Supported by almost a decade of research, there are so many points I want to share with you, but in trying to keep this brief, let me make a few crucial points:

- Addressing the root cause or desired outcome of successful marketing ventures has to do with behavior change. As an example, maybe what we want is for the consumer to buy our product, but really what we want is for them to take the necessary actions in order to purchase or receive the product. In order to address the barriers and benefits to this behavior, we must look at the steps necessary for the consumer to carry them out. A good starting question here would be: Why are people choosing not to vaccinate or a delayed vaccine schedule?
- If vaccines are truly so effective and safe, why is it that those who prescribe to the full recommended schedule are so threatened and concerned with exposure to contractible diseases? Shouldn't they and their loved ones be protected?
- The response of the vaccine industry and our government to the consumer's concern of vaccine safety is frightening. Instead of asking why faith is being lost and what information is needed in order to rebuild their consumers trust, the response is requirements and mandates. In what situation does this make logical sense? Definitely not in the case of medical procedures, where there is an inevitable and reported level of risk.

Here is a relatable scenario: Two Boeing Max 8 planes crash, killing 346 people, yet thousands more fly safely since the planes hit the market. Percentage wise, more people flew safely than not, yet we are not accepting the lives of those lost as collateral damage. The airline industry's response has been to ground the planes, address the concerns and make changes.

There are over **2,400 reports** already this year on the Vaccine Adverse Event Reporting System (VAERS) site and the **Department Of Justice reports paying out over \$1 million** to individuals negatively impacted by vaccines this first quarter of 2019. Most people don't know about the VAERS site or that there are significant risks associated with vaccinations until they

suffer from them, start asking questions and doing research, so there are likely many more. I won't be the one to say to these mothers that their baby is the statistical 1 out of a million negatively affected by vaccines and thus a sacrifice to the herd immunity of the community. Not when the multi-billion dollar industry has protected itself from lawsuits and liability and makes comprehensive safety information difficult to find.

Those who are passionate about this topic are not misinformed and driven only by emotion. Our emotion is our love for our children and doing everything we can to make the best choices in regards to their health and well-being, however difficult or controversial it may be. We are **educated, logical consumers** who are asking questions, have done countless hours of research and are **skeptically awaiting a response** that addresses our concerns. In the language of science and one we should respect, this is the basis of the scientific method - thinking critically and being willing to change our minds when presented with new justifiable information.

- **There are risks associated with our current recommended vaccine schedule.**
- **Biased, incomplete and inadequate information created under the vice of “education” is criminal.** If we are misinformed, it is likely intentional and we are doing our best to find accurate information.
- **There is reputable research that tells the non-for-profit side of the vaccine story.**
- **There has been an increase in chronic illness, allergies and overall lack of public health nation-wide.**
- **Restricting access to education should not be used as a fear-inducing motivator for private profit.**

From CDPHE: For the 2017-2018 school year, the Colorado Department of Public Health and Environment collected de-identified immunization and exemption data from 1,860 K-12 schools (↑ 59) representing more than 880,000 students (↑ 30,000). **92.9 percent of students were in compliance with school immunization rules.**

Statewide school fully immunized and exemption rates by vaccine

Vaccine	Fully immunized rate	Exemption rate
DTaP	94.35% (↓ .43)	2.64% (↑ .26)
Hep B	94.68% (↑ .47)	2.88% (↑ .24)
MMR	94.53% (↑ .25)	2.87% (↑ .25)
Polio	94.32% (↑ .31)	2.83% (↑ .25)
Varicella	92.89% (↑ 1.27)	3.53% (↑ .25)

Tdap (6th grade and up)	90.50% (↑ .65)	2.80% (↑ .33)
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Source: [CDPHE School and Child Care Immunization Data 2017-2018 Information for Parents](#).
 Additional note: The CDC states low vaccination rates only as a possible contributor to present cases, more so international travel.

There is not reference in this bill, by its supporters, references or by state departments that say the recent cases of preventable diseases were contracted solely by individuals who were unvaccinated.

We have legitimate questions and concerns that need to be addressed and you, as our representatives, need to hear them and help find answers. Every single one of us has the right to choose the health and medical path that is right for us and we are all different and our decisions, thus our options, should reflect this.

Again, our response to a changing world does not need to be require and mandate, to develop information that only focuses on the benefits and not address concerns. We need to **adapt** and the **whole story** needs to be told in order to **provide honest** education and real public health.

Thank you for opposing HB -1312 in its current form and protecting all of our right to choose what's best for our families. **In a state that supports life pre and post birth, quality of life, improved overall public health, fundamental access to education, and the right to die if and when appropriate, the protection of our right to choose to what extent we vaccinate aligns with our state's core values.**

Regarding the bill specifically, I have highlighted the areas of concern and questions in regards to them on the attached copy of HB-1312.

Thank you and I'm happy to answer questions.

*Yarrow
 yarrow.spitzfaden@yahoo.com*

“There is no shame in admitting that you were previously speaking from a less informed place. There's a lot of information in the world. No one has all of it. We do our best, and at our best, we help each other learn.” - Kelly Hayes

Resources

Statement on Federal Vaccine Mandates by the Association of American Physicians and Surgeons “AAPS believes that liberty rights are unalienable. Patients and parents have the right to refuse vaccination...Unvaccinated persons with no exposure to a disease and no evidence of a disease are not a clear or present danger.”

Children’s Hospital report referenced by HB-1312 **does not that state** unvaccinated kids are those contracting preventable diseases. New Report Shows High Risk of Vaccine-Preventable Disease for Colorado Children and Highlights Opportunities to Improve Rates

31 vaccinations by 12 months (DTap and MMR include 3 doses each) 2019 Recommended Vaccinations for Infants and Children (CDC)

While stated as “very remote chance,” severe side effects include serious injury and death Possible Side-effects from Vaccines (CDC)

Infant mortality rates regressed against number of vaccine doses routinely given: Is there a biochemical or synergistic toxicity? (US National Library of Medicine, National Institutes of Health)

“For children with a prior history of allergic reactions to any of these substances in vaccines, parents should consult their child’s healthcare provider before vaccination.” Ingredients of Vaccines (CDC) **How would we know our infant might be allergic to heavy metals, certain food derivatives or chemicals as an infant?**

2019 DOJ Report on Vaccine Court Reveals Vaccines Continue to Injure and Kill People: \$110 MILLION in Damages Paid Out First Quarter

Includes Adjudicated Settlements, Reporting Period: 5/16/18 – 8/15/18 of alleged vaccine injury(ies) Report from the Department of Justice, September 6, 2018

Definition “Shoulder injury related to vaccine administration (SIRVA) is believed to be caused by an immune response following inadvertent, direct injection of a vaccine into the deltoid bursa or joint space.

The presentation of SIRVA typically includes rapid onset of severe, long-lasting shoulder pain following vaccination in the deltoid muscle, resultant limited range of motion and absence of infection. Data from the Vaccine Adverse Event Reporting System suggest SIRVA is being reported with increasing frequency.”

While not all SIDS stories are proven to be linked to vaccine injury, there is **growing concern regarding the safety of the current recommended schedule.** There are pages of Google search results of families sharing stories of losing their babies after receiving vaccinations . I don’t believe people would make these stories up.

Another personal story <http://www.nickcatone.com/>

Over 2,400 vaccine injury and death reports filed this year [Vaccine Adverse Event Reporting Systems \(VARES\)](#) (**data sheet attached as well**)

CDC says safety protocol and [research](#). My understanding is that this is **inadequate** and there are reports that agree. Current **concern includes chronic and long term health impact** vs immediate. **Allergies and autoimmune** disorders, as well as **vaccine ingredients like fetal cells** among the concerns.

[Testimony on Conscience Rights related to biologic drug disclosure and alternative drugs.](#) (Dr. Theresa Deisher, Ph.D.)

“...the federal government has been neglecting safety obligation for decades...” [RFK Jr. Wins Case Against Government For Vaccine Safety Violations](#) (World Health.net)

[U.S. Govt Loses Landmark Vaccine Lawsuit](#) (Cairns News)

There is disagreeing information; [some state safety reports have been made, just not the reporting requirements of paragraph \(c\) of section 2127 of the National Childhood Vaccine Injury Act of 1986](#) and not from what I would consider a credible site.

Big Pharma and the vaccine industry are a multi-billion dollar business, supported greatly by the CDC and are **immune to liability or lawsuits**.

[Big Pharma and Big Profits: The Multibillion Dollar Vaccine Market](#)

42 U.S. Code § 300aa–22. Standards of responsibility ([protections of vaccine manufacturers](#))

[A discussion of public safety, private profit and internal safety reviews and certification.](#)

[CDC AFIX Program](#) supports providers and **offers incentives with a goal to increase vaccination** by reducing missed opportunities to vaccinate.

Be Informed. Protect Our Right to Choose. We Do Not Consent.

First Regular Session
Seventy-second General Assembly
STATE OF COLORADO

INTRODUCED

LLS NO. 19-0699.04 Jacob Baus x2173

HOUSE BILL 19-1312

HOUSE SPONSORSHIP

Mullica, Arndt, Benavidez, Bird, Buckner, Buentello, Caraveo, Coleman, Duran, Esgar, Froelich, Gray, Hansen, Jaquez Lewis, Kennedy, Kipp, McCluskie, Melton, Michaelson Jenet, Roberts, Sirota, Snyder, Tipper, Valdez A.

SENATE SPONSORSHIP

Gonzales and Priola,

House Committees
Health & Insurance

Senate Committees

A BILL FOR AN ACT

101 CONCERNING MODERNIZING IMMUNIZATION REQUIREMENTS [FOR
102 SCHOOL ENTRY] TO IMPROVE VACCINATION RATES.

Why tied to access to education?

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov>.)

The bill requires the department of public health and environment (department) to:

- ! Develop a standardized form and submission process to claim a medical exemption to an immunization; and
- ! Develop a standardized form and submission process to claim a religious or personal belief exemption to an

Forms have previously been made and are not required.

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment. Capital letters or bold & italic numbers indicate new material to be added to existing statute. Dashes through the words indicate deletions from existing statute.

immunization.

and unbiased

The department is:

- ! Required to develop educational materials regarding immunizations to distribute to health care providers and facilities;
- ! Required to present immunization exemption information during its annual SMART Act hearing; and
- ! Required to use the existing immunization tracking system.

*Accountable
Transparent* ←

The state board of health is:

- ! Required to promulgate rules adopting the medical exemption recommendations from the advisory committee on immunization practices of the centers for disease control and prevention in the federal department of health and human services, or any successor entity (ACIP);
- ! Required to promulgate rules adopting the immunization recommendations from the ACIP;
- ! Allowed to promulgate rules adopting additional immunizations not recommended by ACIP; and
- ! Allowed to promulgate rules establishing the timing by which schools, parents, legal guardians, and students must demonstrate compliance with immunization requirements.

seems like overextending the ability to come up with rules beyond medical recommendation.

Concerning the immunization tracking system, the bill:

- ! Requires a licensed physician, physician assistant, or advanced practice nurse to inform a parent or legal guardian who is claiming a medical exemption that he or she may choose to exclude the student's immunization information from the immunization tracking system before the student's immunization data is sent to the immunization tracking system;
- ! Requires the department or local or county, district, or municipal public health agency to inform a parent, legal guardian, or student who is claiming a religious or personal belief exemption that he or she may choose to exclude the student's immunization information from the immunization tracking system before the student's immunization data is sent to the immunization tracking system; and
- ! Requires a practitioner who is a licensed physician, physician assistant, or advanced practice nurse to submit immunization and medical exemption data to the immunization tracking system. However, the practitioner is not subject to a regulatory sanction for noncompliance.

*Add:
if parent or legal guardian agrees* ←

1 *Be it enacted by the General Assembly of the State of Colorado:*

1 **SECTION 1. Legislative declaration.** (1) The general assembly
2 hereby finds and declares that:

3 (a) Each year in the United States, immunizations save 33,000
4 lives, prevent 14 million disease cases, and save \$9.9 billion in direct
5 health care costs;

6 (b) State immunization requirements for child care facilities and
7 schools are important tools for maintaining high immunization coverage
8 rates and low dangerous and costly disease rates;

9 (c) Colorado is one of only 17 states that allow parents to exempt
10 their children from immunizations required for child care facilities and
11 schools for personal belief reasons;

12 (d) Evidence shows that states with lenient exemption policies
13 experience higher rates of vaccine-preventable diseases;

14 (e) Compared to other states, Colorado has a relatively lenient
15 vaccine exemption process and one of the highest exemption rates for
16 nonmedical reasons;

17 (f) In 2017, Colorado ranked last among 49 states that reported
18 kindergarten immunization rates;

19 (g) In 2017, 23,228 children attended Colorado schools without
20 protection from one or more immunizations;

21 (h) In 2017, 9,424 Colorado children, a majority of them under the
22 age of four, were hospitalized or went to an emergency department to be
23 treated for disease that was preventable by an immunization, resulting in
24 \$55.5 million in charges;

25 (i) In 2016, the cost to investigate and prevent the spread of
26 disease from just two Colorado measles cases totaled \$68,192 in public
27 funding; and

and is a pioneer and innovator in many other areas

where did this data come from?

this is from teamvaccine.com and a report from children's hospital. Neither side were sick unvaccinated

The Department of Public Health and Environment reported a 92.99% compliance with school immunization requirements in the 2017-2018 school year.

1 ← (j) Because diseases such as measles can spread rapidly, adequate
2 immunization coverage in schools helps to protect the health of students,
3 staff, and others in the community, including people who cannot be
4 vaccinated for medical reasons or because they are too young to have
5 received all recommended vaccines.

6 ← (2) Therefore, the general assembly declares that all children
7 deserve to attend healthy and safe child care facilities and schools that
8 support their well-being and build strong foundations for learning and
9 thriving.

10 **SECTION 2.** In Colorado Revised Statutes, 25-4-902, **amend** (1);
11 and **add** (6) as follows:

12 **25-4-902. Immunization prior to attending school -**
13 **standardized immunization information.** (1) ~~Except as provided in~~
14 ~~section 25-4-903,~~ A student shall not attend any school in the state of
15 Colorado on or after the dates specified in section 25-4-906 (4) unless he
16 or she has presented the following to the appropriate school official:

17 (a) An up-to-date certificate of immunization from a licensed
18 physician, a licensed advanced practice nurse, or authorized
19 representative of the department of public health and environment or
20 county, district, or municipal public health agency stating that the student
21 has received immunization against communicable diseases as specified
22 by the state board of health, based on recommendations of the advisory
23 committee on immunization practices of the United States department of
24 health and human services or the American academy of pediatrics; ~~or~~

25 (b) A written authorization signed by one parent or guardian or an
26 authorization signed by the emancipated student requesting that local
27 health officials administer the immunizations; OR

1 (c) A CERTIFICATE OF A MEDICAL EXEMPTION OR A CERTIFICATE OF
2 A RELIGIOUS OR PERSONAL BELIEF EXEMPTION, IN COMPLIANCE WITH
3 SECTION 25-4-903 (2).

4 ← (6) ON OR BEFORE JANUARY 1, 2020, THE DEPARTMENT OF PUBLIC
5 HEALTH AND ENVIRONMENT SHALL DEVELOP AND MAKE AVAILABLE TO
6 HEALTH CARE PROVIDERS AND FACILITIES EDUCATIONAL MATERIALS
7 REGARDING THE BENEFITS ^{and risks} OF IMMUNIZATIONS. THE DEPARTMENT OF
8 PUBLIC HEALTH AND ENVIRONMENT SHALL UPDATE THE EDUCATIONAL
9 MATERIALS ANNUALLY.

10 **SECTION 3.** In Colorado Revised Statutes, 25-4-903, **amend** (2)
11 and (3); and **add** (6) as follows:

12 **25-4-903. Exemptions from immunization - rules.** (2) It is the
13 responsibility of the parent or legal guardian to have his or her child
14 immunized unless the child is exempted pursuant to this section. A
15 student ~~shall be~~ IS exempted from receiving the required immunizations
16 in the following manner:

17 (a) (I) By ~~COMPLETING AND~~ submitting to the student's school
18 ~~certification~~ A CERTIFICATE OF A MEDICAL EXEMPTION from a licensed
19 physician, physician assistant authorized ~~under~~ PURSUANT TO section
20 12-36-106 (5), ~~C.R.S.~~, or advanced practice nurse that the physical
21 condition of the student is such that one or more specified immunizations
22 would endanger his or her life or health or is medically contraindicated
23 due to other medical conditions. ~~or~~

24 (II) TO CLAIM THE EXEMPTION DESCRIBED IN SUBSECTION (2)(a)(I)
25 OF THIS SECTION, A LICENSED PHYSICIAN, PHYSICIAN ASSISTANT
26 AUTHORIZED PURSUANT TO SECTION 12-36-106 (5), OR ADVANCED
27 PRACTICE NURSE MUST COMPLETE THE CERTIFICATE OF A MEDICAL

using
verbiage
that does
not conform
for parents
and in
alignment
with
accuracy
and
transparency

where can
we reference
this?

1 EXEMPTION ON A STANDARDIZED FORM DEVELOPED BY THE DEPARTMENT
2 OF PUBLIC HEALTH AND ENVIRONMENT AND PROVIDE A COPY OF THE
3 COMPLETED CERTIFICATE OF A MEDICAL EXEMPTION TO THE STUDENT'S
4 PARENT OR LEGAL GUARDIAN TO SUBMIT TO THE STUDENT'S SCHOOL,
5 PURSUANT TO SECTION 25-4-902 (1)(c).

6 (III) A LICENSED PHYSICIAN, PHYSICIAN ASSISTANT AUTHORIZED
7 PURSUANT TO SECTION 12-36-106 (5), OR ADVANCED PRACTICE NURSE
8 SHALL INFORM THE PARENT OR LEGAL GUARDIAN OF THE OPTION TO
9 EXCLUDE THE STUDENT'S IMMUNIZATION INFORMATION FROM THE
10 IMMUNIZATION TRACKING SYSTEM CREATED IN SECTION 25-4-2403 [A
11 LICENSED PHYSICIAN, PHYSICIAN ASSISTANT AUTHORIZED PURSUANT TO
12 SECTION 12-36-106 (5), OR ADVANCED PRACTICE NURSE MUST SUBMIT THE
13 MEDICAL EXEMPTION DATA TO THE IMMUNIZATION TRACKING SYSTEM. →

*separate
item - if
parent or
legal
guardian
agrees.*

14 (b) (I) By COMPLETING AND submitting to the student's school a
15 **statement** CERTIFICATE OF A RELIGIOUS OR PERSONAL BELIEF exemption
16 signed by one parent or LEGAL guardian, ~~or the~~ AN emancipated student,
17 or A student eighteen years of age or older that the parent, guardian, or
18 student is an adherent to a religious belief whose teachings are opposed
19 to immunizations or that the parent or guardian or the emancipated
20 student or student eighteen years of age or older has a personal belief that
21 is opposed to immunizations.

22 (II) (A) TO CLAIM THE EXEMPTION DESCRIBED IN SUBSECTION
23 (2)(b)(I) OF THIS SECTION, A PARENT, LEGAL GUARDIAN, OR STUDENT, AS
24 DESCRIBED IN SUBSECTION (2)(b)(I) OF THIS SECTION, MUST COMPLETE
25 THE CERTIFICATE OF A RELIGIOUS OR PERSONAL BELIEF EXEMPTION ON A
26 STANDARDIZED FORM DEVELOPED BY THE DEPARTMENT OF PUBLIC HEALTH
27 AND ENVIRONMENT AND SUBMIT THE CERTIFICATE OF A RELIGIOUS OR

*with
marriage
that does
not condemn
parent's
choice.*

why?

1 PERSONAL BELIEF EXEMPTION [IN PERSON] TO THE DEPARTMENT OF PUBLIC
 2 HEALTH AND ENVIRONMENT OR THE APPLICABLE COUNTY, DISTRICT, OR
 3 MUNICIPAL HEALTH AGENCY, WHICH MUST PROVIDE A COPY OF THE
 4 COMPLETED CERTIFICATE OF A RELIGIOUS OR PERSONAL BELIEF EXEMPTION
 5 THAT HAS BEEN SIGNED BY A REPRESENTATIVE OF THE DEPARTMENT OF
 6 PUBLIC HEALTH AND ENVIRONMENT, OR THE APPLICABLE COUNTY,
 7 DISTRICT, OR MUNICIPAL HEALTH AGENCY, TO THE STUDENT'S PARENT,
 8 LEGAL GUARDIAN, OR THE STUDENT, AS DESCRIBED IN SUBSECTION
 9 (2)(b)(I) OF THIS SECTION, TO SUBMIT TO THE STUDENT'S SCHOOL,
 10 PURSUANT TO SECTION 25-4-902 (1)(c). FOR SUBSEQUENT RENEWALS OF
 11 AN EXEMPTION DESCRIBED IN SUBSECTION (2)(b)(I) OF THIS SECTION, A
 12 PARENT, LEGAL GUARDIAN, OR STUDENT, AS DESCRIBED IN SUBSECTION
 13 (2)(b)(I) OF THIS SECTION, MUST COMPLETE THE CERTIFICATE OF A
 14 RELIGIOUS OR PERSONAL BELIEF EXEMPTION ON A STANDARDIZED FORM
 15 DEVELOPED BY THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
 16 AND SUBMIT THE CERTIFICATE OF A RELIGIOUS OR PERSONAL BELIEF
 17 EXEMPTION ONLINE OR [IN PERSON] TO THE DEPARTMENT OF PUBLIC HEALTH
 18 AND ENVIRONMENT OR THE APPLICABLE COUNTY, DISTRICT, OR MUNICIPAL
 19 HEALTH AGENCY.

20 (B) ON OR BEFORE JANUARY 1, 2020, THE DEPARTMENT OF PUBLIC
 21 HEALTH AND ENVIRONMENT SHALL POST THE STANDARDIZED FORM FOR A
 22 CERTIFICATE OF A RELIGIOUS OR PERSONAL BELIEF EXEMPTION ON ITS
 23 WEBSITE. THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT SHALL
 24 POST ANY UPDATED STANDARDIZED FORM FOR A CERTIFICATE OF A
 25 RELIGIOUS OR PERSONAL BELIEF EXEMPTION ON ITS WEBSITE.

26 (III) THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT OR
 27 THE APPLICABLE COUNTY, DISTRICT, OR MUNICIPAL HEALTH AGENCY

statistical tracking is one thing, a database of personal identifying information is another and is a violation of our privacy rights.

1 SHALL INFORM THE PARENT, LEGAL GUARDIAN, OR STUDENT, AS
2 DESCRIBED IN SUBSECTION (2)(b)(I) OF THIS SECTION, OF THE OPTION TO
3 EXCLUDE THE STUDENT'S IMMUNIZATION INFORMATION FROM THE
4 IMMUNIZATION TRACKING SYSTEM CREATED IN SECTION 25-4-2403. [THE
5 DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT OR THE APPLICABLE
6 COUNTY, DISTRICT, OR MUNICIPAL HEALTH AGENCY MUST SUBMIT THE
7 RELIGIOUS OR PERSONAL BELIEF EXEMPTION DATA TO THE IMMUNIZATION
8 TRACKING SYSTEM.

9 (3) The state board of health ~~may provide, by regulation, for~~
10 ~~further exemptions to immunization based upon sound medical practice~~
11 SHALL ADOPT BY RULE THE MEDICAL EXEMPTION RECOMMENDATIONS
12 BASED ON CONTRAINDICATIONS FOR VACCINATIONS AS DESCRIBED BY THE
13 ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES OF THE CENTERS FOR
14 DISEASE CONTROL AND PREVENTION IN THE FEDERAL DEPARTMENT OF
15 HEALTH AND HUMAN SERVICES, OR ANY SUCCESSOR ENTITY.

16 (6) THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
17 SHALL INCLUDE IMMUNIZATION EXEMPTION INFORMATION AS PART OF ITS
18 ANNUAL PRESENTATION TO THE GENERAL ASSEMBLY PURSUANT TO THE
19 "STATE MEASUREMENT FOR ACCOUNTABLE, RESPONSIVE, AND
20 TRANSPARENT (SMART) GOVERNMENT ACT", PART 2 OF ARTICLE 7 OF
21 TITLE 2. THE IMMUNIZATION EXEMPTION INFORMATION PRESENTATION
22 MUST INCLUDE, BUT IS NOT LIMITED TO:

23 (a) STATISTICS DEMONSTRATING RATES OF IMMUNIZATION,
24 MEDICAL EXEMPTIONS, AND RELIGIOUS OR PERSONAL BELIEF EXEMPTIONS
25 COMPARED TO PREVIOUS YEARS;

26 (b) STATISTICS DEMONSTRATING RATES OF IMMUNIZATION,
27 MEDICAL EXEMPTIONS, AND RELIGIOUS OR PERSONAL BELIEF EXEMPTIONS

*It seems
this should
be separate
since the
information
might be
excluded.*

*why is
this being
removed?*

a, b, and c
show no
reason for
personal
identifying
information

1 FOR EACH COUNTY WITHIN COLORADO; AND
2 (c) STATISTICS DEMONSTRATING RATES OF IMMUNIZATION,
3 MEDICAL EXEMPTIONS, AND RELIGIOUS OR PERSONAL BELIEF EXEMPTIONS
4 OF COLORADO COMPARED TO OTHER STATES.

5 **SECTION 4.** In Colorado Revised Statutes, 25-4-904, **amend** (1)
6 as follows:

7 **25-4-904. Rules - immunization rules - rule-making authority**
8 **of state board of health.** (1) The state board of health shall establish
9 rules ~~and regulations~~ for administering this part 9. Such rules ~~and~~
10 ~~regulations shall~~ MUST ADOPT THE IMMUNIZATION RECOMMENDATIONS
11 FROM THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES OF THE
12 CENTERS FOR DISEASE CONTROL AND PREVENTION IN THE FEDERAL
13 DEPARTMENT OF HEALTH AND HUMAN SERVICES, OR ANY SUCCESSOR
14 ENTITY, TO establish which immunizations ~~shall be~~ ARE required and the
15 manner and frequency of their administration, and ~~shall~~ MUST conform to
16 recognized standard ^{and ethical} medical practices. THE STATE BOARD OF HEALTH
17 MAY PROMULGATE RULES TO ESTABLISH IMMUNIZATIONS THAT ARE
18 REQUIRED IN ADDITION TO THE IMMUNIZATION RECOMMENDATIONS FROM
19 THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES OF THE CENTERS
20 FOR DISEASE CONTROL AND PREVENTION IN THE FEDERAL DEPARTMENT OF
21 HEALTH AND HUMAN SERVICES, OR ANY SUCCESSOR ENTITY. THE STATE
22 BOARD OF HEALTH MAY PROMULGATE RULES TO ESTABLISH THE TIMING BY
23 WHICH SCHOOLS, PARENTS, LEGAL GUARDIANS, OR STUDENTS MUST
24 DEMONSTRATE COMPLIANCE WITH IMMUNIZATION REQUIREMENTS FOR
25 SCHOOL ENTRY OR GRADE-LEVEL ENTRY. Such rules ~~and regulations~~ may
26 also require the reporting of statistical information ~~and names of~~
27 ~~noncompliers by the schools. The department of public health and~~

these are too
general and
broad for
rules
regarding
personal
medical
procedures

✓
not
okay

1 ~~environment shall administer and enforce the immunization requirements.~~

*overreach
and
inappropriate*

2 **SECTION 5.** In Colorado Revised Statutes, 25-4-2403, amend
3 (2) introductory portion; and add (2.5) as follows:

4 **25-4-2403. Department of public health and environment -**
5 **powers and duties - immunization tracking system - definitions.**

6 (2) To enable the gathering of epidemiological information and
7 investigation and control of communicable diseases, the department of
8 public health and environment ~~may~~ SHALL establish a comprehensive
9 immunization tracking system with immunization information gathered
10 by state and local health officials from the following sources:

11 (2.5) (a) A PRACTITIONER WHO IS A LICENSED PHYSICIAN,
12 PHYSICIAN ASSISTANT AUTHORIZED UNDER SECTION 12-36-106 (5), OR
13 ADVANCED PRACTICE NURSE SHALL SUBMIT IMMUNIZATION AND MEDICAL
14 EXEMPTION DATA TO THE TRACKING SYSTEM.

*if agreed
to by
parent or
legal
guardian*

15 (b) NOTWITHSTANDING SUBSECTION (2.5)(a) OF THIS SECTION, A
16 PRACTITIONER WHO IS A LICENSED PHYSICIAN, PHYSICIAN ASSISTANT
17 AUTHORIZED UNDER SECTION 12-36-106 (5), OR ADVANCED PRACTICE
18 NURSE IS NOT SUBJECT TO A REGULATORY SANCTION FOR NONCOMPLIANCE
19 WITH SUBSECTION (2.5)(a) OF THIS SECTION.

20 **SECTION 6. Safety clause⁷:** The general assembly hereby finds,
21 determines, and declares that this act is necessary for the immediate
22 preservation of the public peace, health, and safety.

whose safety?

*because the Department
of Public Health and
Environment reports
92.9% immunization
coverage in Colorado*

*Thank you for
supporting informed
consent and not
undermining the wishes
of your skeptical constituents.*

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4.15.19
 BILL #: HB19-1312
 PRIME SPONSORS: _____

NAME: Jennifer Lozano
 PHONE #: 720-413-9948
 FOR: _____ AGAINST: X

WRITTEN TESTIMONY:

I am a mother to 5 children. When pregnant with my first children (twins) I spent hours researching vaccines. Ultimately, my husband and I decided that we would not vaccinate our children. While pregnant, I was told that vaccines were safe and effective and that I would be the reason for my children's deaths if I did not vaccinate. Two months after their birth, we brought these babies to a well check visit. We told the nurse + doctor that we would not be vaccinating. A third person, a nurse, brought all doses of vaccines due that day in the room on a tray and told us that we would need to vaccinate because they already got them ready. We changed doctors. A few years later, 4 of my 5 children got the measles - a rash for 3-5 days and a low-grade fever. To insure that I was doing everything I could to protect my kids, I called our new doctor and told them about the measles - they told me to come in and make sure to get my children vaccinated even though they already had the measles. My point is that parents are already being bullied by their doctors to vaccinate. We are being shunned + told we are not welcome in their practices. If you allow our freedoms to be taken through this bill, the bullying will only get worse. We already have a distrust toward most doctors, this will cause more of a distrust and discourage parents ~~to~~ in regards to taking our children into the doctors offices. We as parents ^{and have the right} ~~deserve~~ to choose what goes into our children. Looking at ingredients alone, vaccines can't be safe. Heavy metals, aborted fetal cells, animal DNA ^{and} formaldehyde, are just some ingredients among many that are incredibly toxic. Injecting them straight into their bloodstream carries much risk. We have the right and responsibility to choose for our families.

PRINT NAME: Jennifer Lozano

SIGNATURE: Jennifer Lozano

Hello, my name is Kim Burton and I'm here to speak out against HB19-1312.

I am a mom of two girls. We homeschool our children. This will affect homeschoolers as we are required to keep vaccination records as well.

I am not against vaccinations. We get some of them. Some of them we don't. If a child is enrolled in public school or homeschool, those records ARE kept by that school or parent as part of the students record. That's enough. There does not have to be a centralized database of the children of Colorado and what their parents decide and why.

As far as creating educational materials for parents, when my children were younger, my doctor did quite a speech on children who didn't get shots and got sick. I'm sure that was meant to sway us in one direction, but it didn't. We went and did our research and then found a different doctor. There are fact sheets at the doctor's office. That's enough. Additional "education" proposed in this bill would not change my mind.

I am not against vaccinations if they are safe and proven. But I believe there are enough questions out there to put doubt in my mind as to whether vaccines are good for all children. There are heavy metals and unknown other ingredients. There are no guarantees that my child will not have an adverse reaction. There are also no guarantees that this will protect my child from contracting a disease. I hear stories about people getting the flu. They got the latest and greatest flu shot. Then the powers that be come out and say - well, that vaccine did not cover that strain. Then why get the shot? Drug companies cannot keep up with the little virulent viruses. You can't protect everyone against everything. And doctor's offices are called practices and drug companies are for profit.

My children are very healthy. Why must I as a parent have to choose to compromise their immune system by giving them shots that may harm them or at the very least are not proven to do anything? I am willing to take the risk of doing what we are doing. If I am scared for their safety, I will evaluate whether they should or should not have the shot. I will protect my children. I do not need the government to do that for me.

Kimberly A Burton
AGAINST HB19-1312

To: Colorado House Health and Insurance Committee Members

Subject: Written Testimony Regarding HB19-1312

Date: 4/15/2019

Madam Chair Lontine, members of the committee, thank you for the opportunity to present to you today. My name is Jonathan Lundquist, representing myself and my family, and I am here to oppose bill HB19-1312 based on **concerns around freedom of choice, privacy, and presentation of balanced information.**

As a parent, I believe I have an important responsibility to lovingly and thoughtfully make informed decisions about how to best raise, educate, and care for my son (and hopefully more children in the future). I appreciate that **Colorado statute protects this responsibility, affirming parental choice on how to approach vaccinations for my children.** *This is a natural right recognized, not, granted by Colorado statute.*

I surmise the exercise of this choice among Colorado parents may fall not into two simple camps but along a continuum. Specifically, those that claim medical, religious, or personal belief exemptions to vaccines may include not only parents who choose not to vaccinate their children at all, but also some who choose a timing for vaccinations different than the ACIP/CDC schedule or some who use a subset of the recommended vaccines but have particular concerns about other vaccines. As a side note, I'd be interested – though I do not have data for this – if this bill's requirements to adopt the full ACIP/CDC vaccine schedule, which adds annual or biannual flu shots and at least four additional vaccines (perhaps multiple doses) for school-age children compared to Colorado's current requirements, might prompt any Colorado parents who currently follow state school requirements to consider filing for some vaccine exemptions, while the purpose of the bill is to increase vaccination rates.)

Some of my specific concerns about this bill are:

1. **The bill makes it more difficult to claim religious or personal belief exemptions**, for example, by requiring a standardized form (P. 6, L. 26) and an in-person CDPHE or local health agency visit (P. 7, L. 1-8). The Colorado Sun, reporting on this bill, states¹:

The state's policy for vaccine exemptions currently is classified as the easiest in the country, said Dr. Sean O'Leary, an associate professor in pediatrics and infectious diseases at the University of Colorado School of Medicine who consulted on the legislation.

If the new rules are approved, he believes the state's policy would become difficult, which he supports. "We know the more difficult the process, the lower the rate of exemptions, the higher the rates of vaccinations," O'Leary said. "So I do think it could help."

2. The bill **requires the CDPHE to develop a standardized form** for claiming religious or personal belief exemptions. **I'm a bit leery of a modified or new form they may introduce**, given the arguable unconstitutionality of the 2016 mandated form temporarily in place that required

¹ <https://coloradosun.com/2019/04/05/colorado-vaccine-exemption-rules/>

parents to affirm certain statements while claiming exemption(s) that could have been compelled speech violating First Amendment rights.

3. My understanding of the bill is that **vaccine exemption data** (in contrast to student immunization information) **would be required to be put into Colorado Immunization Information System (CIIS) without option for opt-out or any guarantee of storing the data in only anonymized or aggregated form** (P. 8, L. 2-8). I'm generally not in favor of a centralized, mandated government-managed database containing this personal information that is accessible to schools, doctors, hospitals, and other Colorado-contracted entities². If I'm misunderstanding the bill on this point, I would respectfully request an amendment to clarify its language and definitions. Note that existing Colorado statute (P. 9, L. 21-27) already authorizes the Board of Health to require school "reporting of statistical information and names of noncompliers."
4. The **bill only requires CDPHE-developed educational materials for health care providers and facilities to cover the benefits of vaccines**, not their documented potential side effects or risks (P. 5, L. 7), even those documented on the CDC website. The bill does not require a balanced or objective presentation of information.

Thank you for your time and consideration of my request to vote "No" on this bill!

Sincerely,

Jonathan Lundquist

² <https://www.colorado.gov/pacific/cdphe/ciis-confidentiality-policy>

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4/15/19
BILL #: HB19-1312
PRIME SPONSORS: _____

NAME: Keith Wood
PHONE #: 256-289-0488
FOR: _____ AGAINST:

WRITTEN TESTIMONY:

There are two issues present with this bill: vaccinations and the elimination or infringement upon the freedoms of Coloradans. Regardless of my stance surrounding the former, I am adamantly opposed to the latter. This bill is simply the latest in a series of bills that all have the common theme of eroding freedom. I urge you to prevent passage of this bill and allow citizens to decide for themselves and their children whether vaccinations are right for them. That is not to suggest that all citizens are opposed to all vaccinations, but if even one vaccine on the list of ^{those} required is determined by a parent to be unnecessary, that should be their determination, not the state's. We sit upon a position much more significant than a single issue, but rather upon the principles that this country was founded for.

PRINT NAME: _____

SIGNATURE: _____

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4/15/19
BILL #: HB19-1312
PRIME SPONSORS: MullicaNAME: Amy Ewton
PHONE #: 720-335-9272
FOR: _____ AGAINST: X

WRITTEN TESTIMONY:

Hello, my name is Amy Ewton and I am a mother of 3 representing myself. Today I want to speak about the current immunization schedule recommended by the ACIP.

Take SIDS for example. Japan used to have a high SIDS rate until they did something about it. The Japanese Government banned a number of vaccines that are currently mandatory in the US & they have strict regulations for other Big Pharma drugs & vaccines in general. They are opposed to multi-shot vaccinations such as the MMR. And wouldn't you know, the ban on the MMR has not caused an increase in deaths from measles, according to a member of the ministry of health and welfare. They have also delayed vaccines until the age of 3. Their SIDS rate has now dropped to 0.02% per 1,000 live births and is nearly non-existent. Japan is doing something right!

In another study published by the NCIB, or the National Center for Biotechnology Information, they found that the US ranked last among 34 other nations for infant mortality rate. Last! They also noted that the US administered the most vaccine doses before the age of 1, 26 doses to be exact. More doses than any of the other 33 countries!

PRINT NAME: Amy EwtonSIGNATURE: 

And their conclusion was "nations that require more vaccine doses tend to have higher infant mortality rates."

This bill needs to reevaluate the immunization recommendations from the ACIP. The immunization schedule in the US differs greatly from other countries. Our current schedule is too aggressive and as I just referenced, not effective. I feel we should take advice from other countries who are successfully improving public health in a much different approach than America. Why wouldn't we follow their example?

This bill needs to also present unbiased educational materials for parents instead of only presenting the benefits of vaccines, as Rep. Mullica mentioned.

Please vote no. Thank you for your time.

①

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4-15-19
 BILL #: HB 19-1312
 PRIME SPONSORS: Kyle Mullica

NAME: Gretchen MacLachlan
 PHONE #: 720-841-6015
 FOR: _____ AGAINST:

WRITTEN TESTIMONY:

My name is Gretchen MacLachlan, I am an ex-vaxxer, and I oppose HB 19-1312. I am representing myself and am a mother of 3 vaccine injured children as well as a former Public Health Educator in Maternal & Child Health, former Special Educator, current substitute teacher in K-12 classrooms, and current student at the Institute for Integrative Nutrition.

Taking away personal exemptions will make medical exemptions even more difficult to obtain in this current climate as many doctors are already hesitant to write medical exemptions for children. Two years ago I received a medical exemption for one of my children from my son's allergist for the Dtap booster prior to middle school. The reason was past history of peanut allergy. However, when I asked this same doctor for a few medical exemptions for my oldest son who has more severe life-threatening food allergies we were dropped from the doctor's practice by the CEO of the medical center without any explanation. Our doctor of 10 years was never even copied on a certified letter that was mailed to us and in a phone

PRINT NAME: Gretchen MacLachlan

SIGNATURE: GMacLach

→ over

②
conversation I had with the doctor prior to receiving this letter she stated to me that she could put her license in jeopardy if she writes any more medical exemptions. This is an example of something gone seriously wrong in mainstream medicine.

In 2002, my son almost died in the ambulance en route to the hospital after accidentally ingesting a small amount of peanut. My daughter was born in 2002, and shortly after this, she began experiencing severe ear infections and eventually developed asthma following a Dtap booster prior to middle school.

As a former special education teacher and now a current substitute teacher I can tell you that our children are not well. So many have one or more chronic illnesses, us children are not healthier today and according to the CDC there is a stark decline in our children's health.

The numbers for 2019 are as follows:

- 1 in 2.5 children has an allergy
- 1 in 6 has a developmental disability
- 1 in 9 has ADHD
- 1 in 11 has asthma
- 1 in 13 has severe food allergies
- 1 in 36 has autism.

Mandating vaccines, especially when they are known to cause injury and death is unconstitutional. A one-size-fits all pharmaceutical product will never work for the entire population. Many live virus vaccines, like the MMR, chickenpox and flu can off shed viral & bacterial antigens onto others.

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4-15-19
BILL #: HB19-1312
PRIME SPONSORS: Kyle Mullica

NAME: Gretchen MacLachlan
PHONE #: 720-841-6015
FOR: _____ AGAINST:

WRITTEN TESTIMONY:

With 72 vaccines currently on the childhood schedule, and more on the way, it is entirely possible that vaccines are triggering chronic autoimmune conditions in many of our most vulnerable citizens, our children. The government should not have the right to forcibly inject its citizens with dangerous poisons and toxins. This is simply wrong & will only create more distrust in the eyes of the people toward their government. The pharmaceutical industry is one of the most powerful industries on the planet and it has been able to have an enormous influence over many sectors in our society. Current vaccine revenue for the year 1982 was \$170 Million. Projected vaccine revenue for 2020 is \$60 Billion.

The Supreme Court has ruled that, "Vaccines are unavoidably unsafe." Vaers only captures 1% of all vaccine injuries and is a passive surveillance system. Pharma and doctors cannot be sued if you are injured by a vaccine. Vaccines are not tested against true placebos, & many

PRINT NAME: Gretchen MacLachlan

SIGNATURE: [Signature]

over

Vaccines are only tested for ⁽⁴⁾ a few days. Serious side effects are listed on package inserts.

Mandating vaccines is unscientific, unconstitutional, and unsuccessful for children's health. I urge you not to pass this bill.

Thank you.

Good afternoon, Madam Chair + Committee,

My name is Cristine Pitzer and I will be addressing:

HB19-1312

p. 5
p. 6

~~Section 2. (6)~~, lines 6-7

~~Section 3. (b) (II) (A)~~, lines 24-26

And ~~Section 2. (1)~~, lines 14-15 combined with Section 4

p. 4

I gained an interest in the vaccine issue in a microbiology course right here on the Auraria campus. My textbook wasn't pro- or anti-vax; it presented factual information, which raised concerns in my mind. Later my sister told me about her research and decision to avoid vaccines for her children. The more I've investigated the evidence, the greater my concerns. I have a precious little one-year-old girl, and like all the parents here, I want her and her friends to thrive. I don't take decisions for her health lightly.

Informed consent requires presenting both benefits and risks, but the language of the bill proposes educating on only the benefits of vaccines. Parents desiring exemptions are already well-informed and well-researched, so this is a waste of resources.

The language of the bill gives a blank check for writing a standardized form, which may contain false or self-incriminating language. I'm concerned about being required to sign something I don't agree with. This affects my family and the community in several ways; people may sign under duress, or leave the state to protect their family.

Finally, Section 2 states: "A student shall not attend any school in the state of Colorado...unless" etc. and in Section 4: "must adopt the immunization recommendations from the advisory committee" including "which immunizations are required," and that the rules "may also require the reporting of statistical information and names of noncompliers." This policing and disclosure of medical choices is an overreach that threatens basic human rights: namely, the right to bodily autonomy, and the right of access to education, and the right to privacy.

I oppose this bill and I urge you to vote "no."

HB19-1312

Good afternoon Madam Chair and Committee,

Thank you for the opportunity to speak to you here today.

My name is Sarah Nichols and I am a mother of three. I come to you today to urge you to vote no on HB19-1312.

A children with genetic variants that make them susceptible to vaccine injury

I think this bill has a lot of concerning things to it, many of which have been and will be covered today. I would specifically like to address concerns over Page 6 Line 22.

Because of the fact that this bill is giving the authority over to the health department with no guidelines or checks and balances to create this form, then it is a very good likelihood based on their past drafts of forms, that they will create forms that include self-incriminating language for the parents to sign, and then those parents have to choose between signing something they do not agree with or allowing their children their right to education.

I also am concerned with Page 9 Line 16. In allowing the state board to add requirements for additional immunizations above the ACIP guidelines as well as establish requirements for timing of immunizations in order to allow the child their education, this imbues them with too much authority and not enough oversight, and I am afraid that this will lead to a bloated and even more excessive schedule that parents must navigate.

We all have the same goal of healthy kids and healthy communities motivating us today. But I firmly believe that this bill is unnecessary, will not affect the already low exemption rates, and only adds a great deal of expense to the state and a great deal of unneeded extra steps to thoughtful and conscientious parents, including many of whom choose to vaccinate but prefer to choose the timing of certain vaccines or which vaccines are best for their children and families. Therefore, I respectfully ask you to vote no on HB19-1312.

you to vote no on HB10-1315.

certain aspects of which aspects are best for their children and families. Therefore, I respectfully ask conscientious voters, including many of whom choose to vacate the ballot to choose the timing of their visit of expense to the state and a great deal of unneeded extra steps to prohibit and repeal that this bill is unnecessary, will not effect the already low exemption rates, and only adds a

We all have the same goal of healthy kids and healthy communities moving us today. But I simply

agree that parents must navigate and not spend overabundant, and I am afraid that this will lead to a rushed and even more excessive implementation in order to allow the child their education, this hurts them with too much authority. Implementations above the ACA guidelines as well as earlier requirements for timing of

I also am concerned with Page 8 Line 10, in allowing the state board to add requirements for additional

children their right to education.

then those parents have to choose between giving something they do not agree with or allowing their child to be in a state that will create costs that include self-insuring against for the parents to visit and of costs and expenses to create this form, then it is a very good prescription based on their best interests of because of the fact that this bill is giving the authority over to the health department with no guidelines

I would respectfully like to address concerns over Page 8 Line 33.

I think this bill has a lot of concerning things to it, many of which have been and will be covered today.

HB10-1315.

My name is Sarah Nichols and I am a mother of three. I come to you today to urge you to vote no on

the bill, and the opportunity to speak to you here today.

Thank you to the State and Committee.

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4-15
BILL #: HB 1312
PRIME SPONSORS: Mullica

NAME: Sean Burke
PHONE #: 626 590 7297
FOR: _____ AGAINST: X

WRITTEN TESTIMONY:

I oppose this legislation. I hear a lot of confident health providers supporting this bill but following the American Pediatric academy has given us a population of kids ~~that~~ (54%) that have a chronic illness. I appreciate the medical community but I don't need to follow them off a cliff.


Before we issue coercive legislation lets first get some oversight

If this is about measles why isn't there a measles only vaccine.

This bill now uses the ACP schedule that is a huge jump in vaccines given

I was born in 1967 and got a total of 7 vaccines. We are up to 52 now by the start of ~~the~~ kindergarten. I oppose

PRINT NAME: Sean Burke

SIGNATURE: 

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4/15/19
BILL #: ~~33~~ HB19-1312
PRIME SPONSORS: _____NAME: Monica Casario
PHONE #: 720-383-4171
FOR: _____ AGAINST:

WRITTEN TESTIMONY:

Unvaccinated children pose no higher threat than the unvaccinated. IPV (inactivated polio virus) cannot prevent transmission. Wild polio eradication is attributed to a different vaccine (OPV), which was phased out due to safety concerns.

Tetanus ~~is~~ is not contagious. Vaccinating for it cannot alter the safety of public spaces.

Acellular pertussis is not capable of preventing colonization and transmission of *B. pertussis*. The ~~previous~~ whole cell pertussis, which was previously used, caused a severe reaction in my husband as a child. They called it "the screams." It was a known side-effect of vaccination. Today, it is often called an encephalitic cough. The FDA has issued a warning that the current vaccine is no better since it does not prevent transmission. In addition, the pertussis variants currently circulating in the US more easily infect those who are up-to-date on their DTaP boosters.

Hib vaccines have shifted strain dominance towards other types of *H. Influenzae* (types A through F), causing invasive disease of high severity and increasing incidents in adults. Discriminating against the un-vaxed does not make scientific sense. Vote No!

PRINT NAME: Monica CasarioSIGNATURE: M. Casario

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4/15/2019

BILL #: HB19-1312

PRIME SPONSORS: Rep Mulliken

NAME: Mrs. Mary Bedel

PHONE #: 720-840-1451

FOR: _____ AGAINST:

WRITTEN TESTIMONY:

Thank you for listening to citizens like me. I speak on behalf of myself, my family, and many friends who could not come with me today, and their families.

Those in favor of this bill spoke extensively regarding the spread of disease, while those against have focused on vaccine injury, medical privacy, and individual freedom. What those who are in favor of this bill failed to mention was that while measles is a very contagious disease, it is also extremely treatable. In the past 15 years, there has been only ONE death caused by the measles in the United States of America. Even in supposed outbreaks, the measles cannot truly be considered a threat.

On the other hand, vaccine injury, which is far more common than the medical community is willing to admit, is very often completely untreatable, devastating, and life-altering for the vaccine injured individual, and his or her family.

Even if the good representatives of this state have had no reason to hold any medical practice in suspicion, I appeal to your good sense to not ~~at~~ interfere with families, ~~and~~ and to keep privacy of children and individuals.

Thank you.

PRINT NAME: Mary B. Bedel

SIGNATURE: 

HOUSE WRITTEN TESTIMONY SHEET

DATE: 4-15
BILL #: HB 1312

PRIME SPONSORS: Mullica

NAME: Athena Mills
PHONE #: 720-371-3457
FOR: _____ AGAINST: X

WRITTEN TESTIMONY:

I have included my personal testimony and I wanted to add I came from many generations of unvaccinated or slightly vaccinated people. We are all healthy with no Autism or cancer. In people who are vaccinated, the rates of Autism are climbing rapidly and they are now 1 in 36. In unvaccinated children, the rates of Autism are 1 in 10,000. The unvaccinated are extremely healthy, very low rates of disease, they tend to be very intelligent + they excel in academics and athletics. I am 51 years old and like my unvaccinated siblings + parents, we have enjoyed excellent health and we have only had the Chicken pox. We are not disease carriers as the media portrays.

I am 100% against this bill!!! I feel it would be a huge mistake to pass a bill to violate privacy laws, make exemptions more difficult to obtain and to increase vaccination rates. I have included a copy of a bill which was just released in Texas and it supports prohibiting vaccines until they are proven safe and effective. I would love to see similar "progressive" legislation in Colorado.

PRINT NAME: Athena Mills

SIGNATURE: Athena Mills

My Personal Testimony for Bill HB 1312

My name is Athena Mills and I am a Registered Nurse with a current license in the state of Colorado. I am here to testify against bill HB 1312. Here are the reasons why I do not support this bill:

Currently in Colorado, we have a reasonable vaccination exemption policy. The majority of the population is fully vaccinated and the exemption rate hovers between 2.6% and 3.5%. We have personal, religious and medical exemptions which are exercised by a small portion of the population. We have very limited outbreaks of disease, or mild childhood illnesses and our population is considered healthier than other states. The current system is working, I do not see a reason to change it.

This bill requires CDPHE to adopt rules for medical exemptions based on the contraindications described by ACIP which are very limited. Children would need to suffer a severe reaction such as anaphylactic shock to a vaccine before they could be considered for a medical exemption for the one vaccine that was administered which caused the reaction. It is normal to administer multiple doses of vaccines in one visit and it would be really difficult to determine which vaccine was the trigger for the adverse reaction.

My son currently has a medical exemption after having a severe reaction to an MMR and a DTaP vaccination. Under the proposed ACIP guidelines, he would not qualify for an exemption and he would risk being injured repeatedly with this proposed bill.

Physicians and PA's who write medical exemptions would need to submit that medical exemption to the tracking system for CDPHE where protected health information which is currently private would become property of the health department, subject to scrutiny and violation of confidentiality. With the proposed bill, our children's private medical information and the exemption would be reviewed and possibly rejected by the CDPHE. This interferes with the doctor patient relationship and questions the professional judgement of the physician who has actually seen the child and who knows the patient's medical history. I believe the physician who has seen the child is fully qualified to grant a medical exemption based on their professional judgement. I do not think their judgement should be questioned by someone who has not seen the child, and someone who does not have a medical degree.

This bill requires the CDPHE to adopt the immunization recommendations from ACIP which means the health department would be forced to implement the full ACIP schedule and mandate those vaccines in Colorado even though many of those vaccines have contributed to vaccine injury, they have never been tested as they are currently given, and many are considered unnecessary. Given the choice, I feel many parents would refuse to give their children immunizations on this schedule if they are properly informed of the risks which can outweigh the perceived benefit. In addition, this bill would allow the CDPHE to add additional ACIP recommendations giving them the authority to mandate vaccines in addition to those on the current schedule.

I would like to share a personal story, I was not aware of vaccine injury until I started working at a healthcare facility as an RN. The facility where I worked wanted 100% compliance with recommended vaccines, including the flu shot. My friend, an RN agreed to have the flu shot, I declined repeatedly. The very next day after my friend had the shot, she was on ICU with complete paralysis from the neck down, known as Guillian Barre. This vaccine reaction is more common than

we have been led to believe and it is listed on the vaccine insert of every vaccine. Most MD's will not inform you Guillian Barre is one of the many possible adverse reactions you might end up with every time you agree to get another vaccine.

My friend spent several weeks on ICU and finally, she was released and she spent several months in rehab, trying to regain the ability to walk and function normally. After considerable effort, she was able to walk with a walker, a humiliating experience for someone who had previously been healthy and fully functional. After continuing therapy for a few years, she was able to walk with a cane and finally, she is able to walk again on her own without assistance. Although it has been 11 years since she was injured by the flu vaccine, she is still suffering from nerve pain and damage from one vaccine.

During this experience which my friend suffered, the medical bills were astronomical, she lost considerable pay and she had to endure years of therapy to regain what she had lost in order to be compliant with the demands of the facility where she worked. As a nurse, we are faced with this continual challenge of compromising our health to satisfy requirements of health care facilities where we are employed, just to keep our jobs. We are informed we need to inject ourselves with vaccines which have not been proved safe and effective regardless of our wishes or possible vaccine reactions. I know many nurses who are currently trying to get a religious or a medical exemption to protect their health. This bill HB 1312 would eliminate the possibility of many nurses being able to get a medical exemption even though they have had a severe vaccine reaction.

This was not my first experience with vaccine injury. Another co-worker had a very healthy little girl who became Autistic after her second MMR vaccine. She is now in a wheelchair and her mother was trying to win her case with the Vaccine Injury Compensation Program during the time I knew her. The board has paid out over 4 billion dollars in compensation for vaccine injury and death and those numbers continue to climb. In addition, I have known other children who were injured by routine vaccinations which were recommended by their physician.

I have witnessed co-workers, friends, children of friends and family members injured unnecessarily by vaccines that would be added to the vaccine schedule for Colorado, based on ACIP recommendations. In addition, I do not believe this bill supports the Hippocratic Oath where all health care providers promise to protect confidentiality and we agree to do no harm. I believe this bill does not promote and health and well being for the general population here in Colorado so I am 100% opposed to this bill.

Texas Bill Would Increase Vaccine Safety, Reject Federal Narrative

By: Davis Taylor|Published on: Apr 8, 2019|Categories: State Bills, Vaccines|

AUSTIN, Texas (April 8, 2019) – A bill introduced in the Texas Senate would prohibit vaccines from being administered unless certain safety criteria are met. Passage of the bill would significantly strengthen vaccine safety testing requirements and push back against any future federal vaccine mandates.

Sen. Bob Hall (R) introduced Senate Bill 2350 (SB2350) on March 8. The legislation would only permit a health care provider to administer a vaccine if all of the following criteria are met.

- The study the U.S. Food and Drug Administration (FDA) relied upon for approval of the vaccine evaluated the vaccine against a placebo control group or against another vaccine or substance that the FDA approved based upon a placebo-controlled study;
- The study relied upon by the FDA for approval of the vaccine evaluated the safety of the vaccine for a sufficient time to identify potential autoimmune, neurological, or chronic health conditions that may arise on or after a year from the vaccine being administered;
- The vaccine has been evaluated for its potential to cause cancer, mutate genes, affect fertility, cause infertility and cause autism spectrum disorder;
- The Texas Department of State Health Service has posted on its website disclosure of any known injuries or diseases caused by the vaccine and the rate at which the injuries or diseases have occurred; and
- The chemical, pharmacological, therapeutic, and adverse effects of the vaccine and the rate of injury of the vaccine when administered with other vaccines, have been studied and verified.

Effect on Federal Policy

After recent comments by former FDA Commissioner Dr. Scott Gottlieb in February of 2019 just prior to his resignation, some believe that federal vaccine mandates are imminent. According to CNN, Gottlieb said, “[I]f states don’t require more schoolchildren to get vaccinated, the federal government might have to step in.” Gottlieb also reportedly said, “You could mandate certain rules about what is and isn’t permissible when it comes to allowing people to have exemptions.” [1] As discussed below, current vaccine safety testing requirements are far less stringent than most would assume. Passage of SB 2350 would bolster these requirements and make enforcement of any federal vaccine mandates more difficult.

Number of Recommended Vaccines Steadily Rise Since Removal of Liability

Vaccine mandates are generally based upon the vaccine schedules recommended by the Centers for Disease Control and Prevention (CDC). Because vaccines pose a risk of injury or death, liability is associated with them. Many Americans are unaware that the pharmaceutical industry is shielded from liability for harm caused by most vaccines.

This unique legal protection was put into place as a result of legislation passed in 1986, after extensive lobbying by the pharmaceutical industry. Manufacturers of other products don't enjoy this freedom from liability. Due to lack of liability, vaccines are the pharmaceutical industry's most lucrative product.

The 1986 law also created the National Vaccine Injury Compensation Program (NVICP), which is essentially a special system outside of the normal litigation process to hear claims of harm caused by vaccines. Any compensation granted by the NVICP is paid by *the public*, through a surcharge on vaccines, and not by vaccine manufacturers. To date, over four billion dollars has been paid under this system to compensate for harm caused by vaccines. [2]

Further, although discovery is a right afforded to litigants in most other legal forums, discovery is not permitted in the NVICP process. This protects vaccine manufacturers from having to search for, and produce, relevant information, including damaging information. In cases involving prescription medication, which are heard in other legal forums, information unfavorable to the pharmaceutical industry has come to light through discovery, such as the damaging e-mails which were required to be produced in the Vioxx litigation. [3]

In the absence of pharmaceutical industry liability for most vaccines, the number of vaccines recommended by the industry and the CDC is steadily rising. For example, in 1983, the CDC recommended that children receive 23 doses of seven vaccines. By 2017, the number of vaccines it was recommending rose to 69 doses of 16 vaccines starting on the day of birth to age 18, with 50 doses of 14 vaccines given before age 6. [4] Since 2002, a CDC adult vaccine schedule has also existed. [5] Like with the childhood schedule, the number of recommended vaccines and doses on the adult schedule has continued to rise. Furthermore, there are hundreds of new vaccines in the developmental process and the number of CDC recommended vaccines is expected to continue to rise.

Inadequate Vaccine Safety Testing

Lack of adequate safety testing is a common concern of opponents of mandatory vaccines and SB 2350 addresses this critical issue.

Many Americans believe that vaccines undergo the same safety testing as drugs prior to their approval. However, this is incorrect. In fact, vaccines and drugs are subject to different rules because the FDA has chosen to classify vaccines as "biologics" rather than "drugs." Drugs are required to undergo multi-year, double-blind inert placebo studies, widely known as the gold standard of safety science, prior to licensing. Vaccines, on the other hand, are not required to undergo inert placebo-controlled studies for approval. [6] Furthermore, unlike the lengthy periods required for drug safety studies, vaccine safety studies monitor for adverse reactions for very short periods of time, often of fourteen days or less. [7] Additionally, although children frequently receive multiple vaccines at the same time in accordance with the CDC's recommended schedule, vaccine manufacturers are not required to test the safety of the vaccines in these combinations. [8]

In fact, there is a multitude of reasons, in addition to inadequate safety testing, to question the mandating of vaccines. For example, the ingredients in them are often cited as a source of concern. The ingredients in each type of vaccine differ but, generally, vaccines contain a myriad of toxic or concerning substances such as aluminum, antibiotics, formaldehyde, Polysorbate 80, bovine extract, egg protein, monosodium glutamate (MSG), squalene, and aborted human fetal tissue. [9], [10]. Additionally, several recently published books set forth scientific information which raises concerns about vaccines, including the book *Miller's Review of Critical Vaccine Studies: 400 Important Scientific Papers Summarized for Parents and Researchers* by Neil Z. Miller, which contains over 400 peer-reviewed scientific studies. [11] In another book, *Vaccines – A Reappraisal*, Dr. Richard Moskowitz, a family physician with over fifty years of experience, discusses a wide range of troubling information concerning vaccines, such as: epidemiological research which indicates that vaccines may interfere with the normal development of a healthy immune system; information concerning the role that vaccines can play in causing infectious disease outbreaks; and evidence of the surprisingly low effectiveness levels of many vaccines. [12] J.B. Handley's book *How to End the Autism Epidemic* also contains a wealth of information concerning potential harm caused by vaccines, particularly focusing on aluminum, a toxic metal used as an adjuvant in many vaccines, and on evidence of a causal link between vaccines and autism. [13] As these works clearly indicate, the science is not settled with regard to whether vaccines are safe or necessary.

State Action Needed

Federal regulation becomes ineffective when states enact contradictory policies. If multiple states ban mandatory vaccinations or pass laws which conflict with the CDC's recommended schedules, it will become extremely difficult for the federal government to enforce future federal mandates. Such state laws will also undermine the federal narrative and make it harder for the feds to generate support for nationwide mandatory vaccine policies. By passing SB 2350, Texas has the opportunity to lead on this important issue and to become the potential standard bearer for resisting federal vaccine policy at the state level.

WHAT'S NEXT

NOTES

[1] Cohen, Elizabeth and Bonifield, John, "FDA chief: Federal government might step in if states don't change lax vaccine laws." CNN.com. Cable News Network. Web. 20 Feb 2019, <https://www.cnn.com/2019/02/20/health/vaccine-exemptions-fda-gottlieb/index.html>. Accessed 7 April 2019.

[2] Children's Health Defense. "\$4 Billion and Growing: U.S. Payouts for Vaccine Injury and Deaths Keep Climbing." *www.ChildrensHealthDefense.org*. Web. 19 Nov. 2018, <https://childrenshealthdefense.org/news/4-billion-and-growing-u-s-payouts-for-vaccine-injuries-and-deaths-keep-climbing/>. Accessed 7 April 2019.

[3] Berensen, Alex, "Jury Finds Merck Liable in Vioxx Death and Awards \$253 Million." *nytimes.com*. Web. 19 Aug. 2005, <https://www.nytimes.com/2005/08/19/business/jury-finds-merck-liable-in-vioxx-death-and-awards-253-million.html>. Accessed 7 April 2019.

[4] National Vaccine Information Center. "A Guide to Reforming Vaccine Policy and Law." *www.nvic.org*. Web. 26 Sept. 2018, <https://www.nvic.org/Vaccine-Laws/state->

vaccine-requirements/Reforming-Vaccine-Policy—Law-Guide.aspx. Accessed 7 April 2019.

[5] Centers for Disease Control and Prevention, Immunization Schedules, Table 1. Recommended Adult Immunization Schedule for ages 19 years or older, United States, 2019. Web. 5 Feb. 2019, <https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html>. Accessed 7 April 2019.

[6] Robert F. Kennedy, Jr. "Vaccines and the Liberal Mind." Children's Health Defense. *www.ChildrensHealthDefense.org*. Web. 14 June 2018, <https://childrenshealthdefense.org/news/vaccines-and-the-liberal-mind/>. Accessed 7 April 2019.

[7] Moskowitz, Richard, *Vaccines – A Reappraisal*. New York, New York: Skyhorse Publishing, 2017. 31-42. Print.

[8] Imus, Deirdre. "Toxic Vaccine Ingredients: The Devil is in the Details." *www.ChildrensHealthDefense.org*. Web. 6 March 2018, <https://childrenshealthdefense.org/news/toxic-vaccine-ingredients-the-devils-in-the-details/>. Accessed 7 April 2019.

[9] Ibid

[10] National Vaccine Information Center. "New Human Fetal Cell Lines Available for Vaccine Production." *www.nvic.org*. Web. 15 Jan. 2018, <https://www.nvic.org/nvic-vaccine-news/january-2018/new-human-fetal-cell-lines-for-vaccine-production.aspx>. Accessed 7 April 2019.

[11] Miller, Neil Z., *Miller's Review of Critical Vaccine Studies: 400 Important Scientific Papers Summarized for Parents and Researchers*, Santa Fe, New Mexico: New Altantean Press, 2016. Print.

[12] Moskowitz, Richard, *Vaccines – A Reappraisal*. New York, New York: Skyhorse Publishing, 2017. Print.

[13] Handley, J.B., *How to End the Autism Epidemic*. White River Junction, Vermont: Chelsea Green Publishing, 2018. Print.

Tags: SB2350, Texas, Vaccines

DO YOU KNOW WHAT'S IN A VACCINE?

NONE OF THESE SHOULD BE INJECTED INTO YOUR BODY

Aluminum

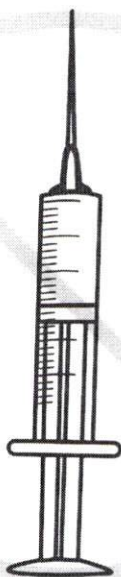
Causes brain damage even at tiny doses. Linked to ALZHEIMER'S DISEASE, seizures, autoimmune issues and cancer. Accumulates in the body causing more health damage with each shot.

Mercury [thimerosal]

One of the most toxic substances known. Even tiny doses damage the brain, gut, liver, nervous system and kidneys. In most flu shots.

Human and Animal Cells

Human DNA from aborted BABIES. Cow blood, monkey & dog kidneys, etc. Linked to childhood cancer, DNA mutation and diabetes.



Genetically Modified Yeast, Bacterial and Viral DNA

Can be incorporated into the recipient's DNA and cause GENETIC MUTATIONS.

Monosodium Glutamate [MSG]

Toxic to the brain, linked to birth defects, developmental delays and infertility.

Polysorbate 80 & 20

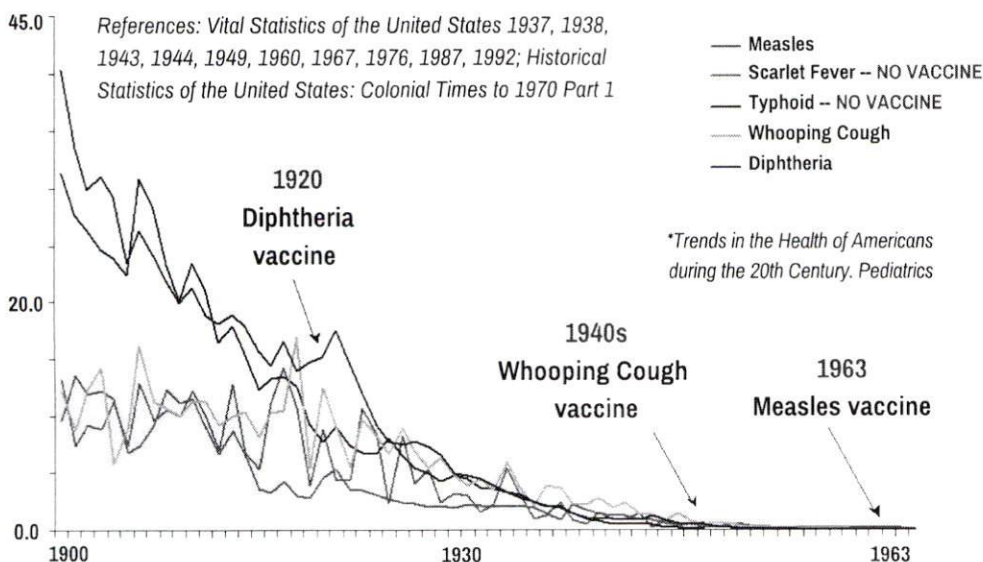
Known to cause CANCER in animals and linked to infertility. Opens up the brain-blood barrier allowing the other toxins into the brain.

Formaldehyde [formalin]

Known to cause CANCER in humans. Probable liver, respiratory, immune and nervous system POISON.

United States Disease Mortality Rates

Despite common belief, infectious disease deaths DECREASED 85-90%* BEFORE VACCINES were introduced in the US. Diseases WITHOUT VACCINES -- including Scarlet Fever, Tuberculosis, Cholera and Typhoid -- followed the SAME trend.



DO YOU KNOW WHAT'S IN A VACCINE?

NONE OF THESE SHOULD BE INJECTED INTO YOUR BODY

Aluminum

Known to cause brain damage at all doses, linked to ALZHEIMER'S DISEASE, dementia, seizures, autoimmune issues, SIDs and cancer. This toxin accumulates in the brain and causes more damage with each dose.

Beta-Propiolactone

Known to cause CANCER. Suspected gastrointestinal, liver, nerve and respiratory, skin and sense organ POISON.

Gentamicin Sulphate & Polymyxin B [antibiotics]

ALLERGIC reactions can range from mild to life-threatening.

Genetically Modified Yeast, Animal, Bacterial and Viral DNA

Can be incorporated into the recipient's DNA and cause unknown GENETIC MUTATIONS.

Glutaraldehyde

Poisonous if ingested. Causes BIRTH DEFECTS in animals.

Formaldehyde [formalin]

Known to cause CANCER in humans. Probable gastrointestinal, liver, respiratory, immune, nerve and reproductive system POISON. Banned from injectables in most European countries.

Latex Rubber

Can cause life-threatening allergic reactions.

Human and Animal Cells

Human DNA from aborted BABIES. Pig blood, horse blood, rabbit brains, dog kidneys, cow hearts, monkey kidneys, chick embryos, calf serum, sheep blood & more. Linked to childhood leukemia and diabetes.

Mercury [thimerosal]

One of the most toxic substances known. Even if a thermometer breaks, the building is cleared and HAZMAT is called. Tiny doses cause damage to the brain, gut, liver, bone marrow, nervous system and/or kidneys. Linked to autoimmune disorders, and neurological disorders like AUTISM.

Monosodium Glutamate [MSG]

A toxic chemical that is linked to birth defects, developmental delays and infertility. Banned in Europe.

Neomycin Sulphate [antibiotic]

Interferes with vitamin B6 absorption which can lead to epilepsy and brain damage. Allergic reactions can range from mild to life-threatening.

Phenol/Phenoxyethanol [2-PE]

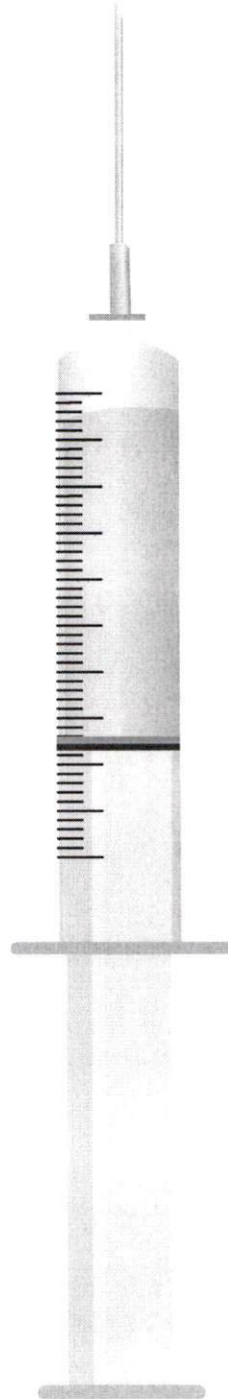
Used as anti-freeze. TOXIC to all cells and capable of destroying the immune system.

Polysorbate 80 & 20

Known to cause CANCER in animals and linked to numerous autoimmune issues and infertility.

Tri(n) Butylphosphate

Potentially toxic to the kidney and nervous system.



VACCINE DOSES for U.S. CHILDREN

1962

5

Doses

Polio
Smallpox
DTP

1983

24

Doses

DTP (2 months)
OPV (2 months)
DTP (4 months)
OPV (4 months)
DTP (6 months)
MMR (15 months)
DTP (18 months)
OPV (18 months)
DTP (4 years)
OPV (4 years)
Td (15 years)

2018

72

Doses

Influenza (pregnancy)
DTaP (pregnancy)
Hep B (birth)
Hep B (2 months)
Rotavirus (2 months)
DTaP (2 months)
HIB (2 months)
PCV (2 months)
IPV (2 months)
Rotavirus (4 months)
DTaP (4 months)
HIB (4 months)
PCV (4 months)
IPV (4 months)
Hep B (6 months)
Rotavirus (6 months)
DTaP (6 months)
HIB (6 months)
PCV (6 months)
IPV (6 months)
Influenza (6 months)
Influenza (7 months)
HIB (12 months)
PCV (12 months)
MMR (12 months)
Varicella (12 months)
Hep A (12 months)
DTaP (18 months)

Influenza (18 months)
Hep A (18 months)
Influenza (30 months)
Influenza (42 months)
DTaP (4 years)
IPV (4 years)
MMR (4 years)
Varicella (4 years)
Influenza (5 years)
Influenza (6 years)
Influenza (7 years)
Influenza (8 years)
Influenza (9 years)
HPV (9 years)
Influenza (10 years)
HPV (10 years)
Influenza (11 years)
HPV (11 years)
DTaP (12 years)
Influenza (12 years)
Meningococcal (12 years)
Influenza (13 years)
Influenza (14 years)
Influenza (15 years)
Influenza (16 years)
Meningococcal (16 years)
Influenza (17 years)
Influenza (18 years)

**In 1986, pharmaceutical companies producing vaccines were given full federal protection from lawsuits resulting from vaccine injury or death via the Childhood Vaccine Act passed by Congress. If vaccines are so safe, why did they need a law to protect from liability?*

*After this law, vaccines became **HIGHLY** profitable. There are almost 300 vaccines in development, and mandatory vaccine laws for children – and **ADULTS** – being pushed in most states.*

*The US gives 2-3x more vaccines to children than most developed countries, yet we have skyrocketing rates of childhood issues that are **NOT** seen in other countries. Things like asthma, childhood diabetes, food allergies, childhood leukemia, developmental delays, tics, ADHD, autism, lupus, arthritis, eczema, epilepsy, Alzheimers, brain damage, etc... **It's NOT a coincidence***

*Vaccines contain toxic chemicals that do **NOT** belong in our bodies, such as aluminum, (known to cause brain and developmental damage even in small doses), polysorbate 80, MSG and formaldehyde (known to cause cancer in humans).*

RESEARCH, don't REGRET

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