

Colorado Public School Children Enrolled 2018/19 = 911,536

This bill would Add 4 additional Vaccines totaling 3,646,144 additional vaccines given to Colorado public school children. Many will opt out of these additional vaccine because they are unnecessary and controversial. This will actually increase the number of exemptions.

Vaccine	Manufacturer	Cost/Dose	Additional Vaccine Sales for the 911,536 students required to receive these vaccines
Hep A (Havrix)	GlaxoSmithKline	32.89	\$29,980,419
Men B	GlaxoSmithKline	170.75	\$155,644,772
Men Conjugate	GlaxoSmithKline	130.75	\$119,183,332
Rotavirus	GlaxoSmithkline	120.95	\$110,250,279
TOTAL SALES			\$415,058,802

Prices are according to the CDC website Vaccine Price list.

www.cdc.gov/vaccines/programs/vfc/awardees/vaccine-management/price-list/index.html

Thank you Committee Members,

My name is Gina DeRosa, I represent myself and my family. I stand as a tax payer in opposition to HB 1312. I ask the committee to oppose this bill in full.

Legislation that aims to increase vaccination rates in the name of public health should focus on mechanisms for improving public health services for Colorado families who want to vaccinate, but face barriers to accessing services. The February 2019 Vaccine-Preventable Diseases Report identifies that for these Coloradans, low immunization rates reflect challenges in insurance coverage and proximity to facilities that participate in the Vaccines for Children (VFC) program (federal free vaccine program), among other barriers.

For example, fewer than 600 Colorado healthcare sites participate in the Vaccines for Children (VFC) program. One Colorado county lacks a single healthcare provider site that participates in the VFC program. Another seven rural, offer only a single location where VFC vaccine is available. Transportation challenges, inability to take time off of work, childcare issues and other barriers result in missed opportunities to vaccinate and support immunization rates.

This bill does nothing to address these well-defined community needs. Our tax dollars should not be wasted on legislation to upend our present functioning system that is already in place and working. HB-1312 is the wrong legislation. Period.

Vaccination data is already being collected at the school level and can be accessed in the event of an emergency. We do not need an expensive redundant state-run system that circumvents the protections offered by FERPA.

As a research scientist, I take exception to the data used as the premise for this bill. Every single statistic listed draws false conclusions and is being misrepresented.

Lastly, including a Safety Clause in this bill is not justified. Nothing in this bill addresses an IMMEDIATE preservation of the public peace, health, and safety. Infringing on the rights of citizens is not warranted.

Data being misused:

*Page 3, Lines 17-18: The statement "In 2017, Colorado ranked last among 49 states that reported kindergarten immunization rates" is a false conclusion.

The data set is labeled "Estimated vaccine coverage" with 14 footnotes and, "The findings in this report are subject to at least five limitations." One such limitation is the inclusion of kindergartners provisionally enrolled (attending school while completing a catch-up vaccination schedule) or in a grace period. The CDC does not rank this data because "comparability is limited because of variation in states' requirements, data collection methods, and definitions of

grace period and provisional enrollment". Line 17 as written is a blatant misuse of statistics.

<https://www.cdc.gov/mmwr/volumes/67/wr/mm6740a3.htm>

* Page 3 line 19: "23,228 children attended Colorado schools without one or more immunizations."

This does not reference which immunizations and why. This number could include children not immunized against chicken pox because of a previous chicken pox illness, or students enrolled during a grace period with a plan in place to get caught up on vaccines. There is not enough information here to be an actionable statistic. According to the Colorado Department of Education, there were 910,280 pupils enrolled in 2017-2018. Another way to look at this data is 23,288 represents 2.6% of Colorado school children, meaning 97.4% of children went to school fully immunized.

*Page 3 Lines 21-24: "In 2017, 9,424 Colorado children, a majority of them under the age of four, were hospitalized or went to an emergency department to be treated for disease that was preventable by an immunization, resulting in \$55.5 million in charges;"

9,116 of the 9,424 were influenza cases (97% of the cases). \$43M (or 77%) of the \$55.5M charges were for influenza. This was a season where the vaccine efficacy rate was only 40%. Most importantly, ***the report does not identify how many patients were immunized for any illness***. It is possible that all of the patients were actually immunized. Using this data to suggest that these hospitalizations could have been avoided by immunization is not a valid conclusion. It is socially irresponsible and deceptive to present the data in this way.

<https://www.childreimmunization.org/uploads/VPD-2019-vol1-2.1.19-final.pdf>

<https://www.cdc.gov/flu/about/season/flu-season-2017-2018.htm>