



ALEX CUYLER

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DATE: February 15, 2019
TO: Senate Committee on Health Care
RE: SB 649, relating to ingredients in vaccines

Chair Monnes Anderson and Members of the Committee:

Lane County cannot support SB 649 and requests the Committee NOT take any further action on this measure.

Lane County's Public Health Division has noted improvements to the overall percentage of young people who are vaccinated in our region since the Legislature tightened the exemption process. Our staff regularly encounters high school aged youth who differ in opinion from their parents on the topic of immunization and under current law are able to make their own choice with respect to this issue. This measure will serve to increase doubts regarding evidence based treatments and may reverse the gains Oregon has made with respect to minimizing the spread of communicable and preventable diseases in our state.

In light of recent local and region-wide outbreaks of preventable diseases, Oregon should work to continue to increase vaccination rates, not create install the additional barriers that are indicated by SB 649.

These barriers include:

- Section 1 of this bill changes current law in a significant manner by establishing a parental or legal guardianship notification when a person is immunized. Current law allows for a young person at age 15 to act under their own consent when receiving an immunization. This change will lead to potentially un-helpful parent child conflict, and in addition establishes a very real equity conflict by making this process more burdensome for homeless or other youth at risk that often seek services from the local health authority.
- Section 1 adds new tasks and related maintenance of those tasks to the Oregon Health Authority that are outside of its existing duties. These tasks are not without costs, and since this information is accessible elsewhere our concern is that resources otherwise dedicated to the health and wellness of Oregonians will be diverted to this mandate.

The additional requirements that would be borne by those who now provide immunizations may be enough to cause those professionals to simply stop offering these services. If that dynamic were to play out it could be the case that the local public health authority would have to expand immunization services, diverting resources from other public health programs.

SUBMITTED ELECTRONICALLY