DAVID Y. IGE GOVERNOR OF HAWAII



VIRGINIA PRESSLER, M.D. DIRECTOR OF HEALTH

STATE OF HAWAII DEPARTMENT OF HEALTH P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

Testimony in SUPPORT of SB 2394 Relating to Influenza Immunization

HOUSE COMMITTEE ON HEALTH REPRESENTATIVE DELLA AU BELATTI, CHAIR Hearing Date: March 18, 2016 Room Number: 329

1 **Fiscal Implications:** None for the Department of Health.

Department Testimony: The Department supports and applauds the efforts of our hospital 2 partners to improve and sustain high health care worker influenza vaccination rates at their 3 4 facilities via vaccination-related policy endeavors such as SB 2394. The findings of a 2013 5 Centers for Disease Control and Prevention review of related published literature indicated that influenza vaccination of health care workers can enhance patient safety and reduce morbidity 6 and mortality in hospital patient populations. The mission of the Department of Health is to 7 8 protect and improve the health and environment for all people in Hawaii, and measures such as 9 SB 2394 clearly align with this mission.

10

11 Thank you for the opportunity to testify.



Written Testimony Presented Before the House Committee on Health March 18, 2016 9:00 a.m. by Laura Reichhardt, NP-C, APRN, Director Hawai'i State Center for Nursing University of Hawai'i at Mānoa

SB 2394 RELATING TO INFLUENZA IMMUNIZATION.

Chair Belatti, Vice Chair Creagan, and members of the House Committee on Health, thank you for this opportunity to provide testimony in support for SB 2394 Relating to Influenza Immunization.

Research indicates that health care providers unvaccinated for influenza contribute to health care facility-related influenza outbreaks. Further, these outbreaks lead to increased patient morbidity and mortality, worker illness and absenteeism, and increased economic cost to the health care system.¹

With regard to the nursing workforce, the Hawai'i State Center for Nursing (HSCN) is in support of this measure as a means to reduce exposure and potential illness from influenza through effective vaccination programs. Such programs will increase the safety of the health care system for its patients by its health care workers.

Therefore, the HSCN respectfully requests that the House Committee on Health consider SB 2394 favorably at this time. Thank you for your continued support of nursing in Hawai'i and for the time and consideration of this bill.

¹ Stewart, A. M., & Cox, M. A. (2013). State law and influenza vaccination of health care personnel. Vaccine, 31(5), 827-832. doi:10.1016/j.vaccine.2012.11.063



Testimony to the House Committee on Health Friday, March 18, 2016 at 9:00 A.M. Conference Room 329, State Capitol

RE: SENATE BILL 2394 RELATING TO INFLUENZA IMMUNIZATION

Chair Belatti, Vice Chair Creagan, and Members of the Committee:

The Chamber of Commerce Hawaii ("The Chamber") **supports** SB 2394, which requires annual influenza vaccinations for health care workers and establishes exemptions for influenza vaccination requirement under certain conditions.

The Chamber is Hawaii's leading statewide business advocacy organization, representing about 1,000 businesses. Approximately 80% of our members are small businesses with less than 20 employees. As the "Voice of Business" in Hawaii, the organization works on behalf of members and the entire business community to improve the state's economic climate and to foster positive action on issues of common concern.

Pre-exposure influenza vaccinations help to prevent millions of cases of seasonal flurelated complications and illness every year. In order to protect the public, SB 2394 works to fulfill the expectation that health centers and institutions will take necessary precautions to prevent harm and remain places of healing. Ensuring hospital healthcare workers receive an annual influenza vaccination will allow them to continue to care for all patients and not fear transmission. To protect the health of the public and healthcare workers, the Chamber supports the passing of SB 2394.

Thank you for the opportunity to testify.



HOUSE OF REPRESENTATIVES COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair Representative Richard P. Creagan, Vice Chair

NOTICE OF HEARING

DATE: Friday, March 18, 2016 TIME: 9:00 am PLACE: Conference Room 329 State Capitol 415 South Beretania Street

Testimony in Support of SB 2394, Relating to Influenza Immunization

Linda Rosen, M.D., M.P.H. Chief Executive Officer Hawaii Health Systems Corporation

The Hawaii Health Systems Corporation **supports** SB2394, which seeks to assure high rates of yearly vaccination against influenza among health care workers in Hawaii hospitals. This measure has the potential to protect vulnerable patients in hospitals from potentially being infected by ill workers and can help the problem of employee absenteeism that is associated with influenza outbreaks. Because influenza season is associated with high census in our hospitals, it is especially important for our workers to stay healthy during those periods.

As a healthcare provider, our philosophy at HHSC is that hospitals should set a good example for the public and other organizations to follow. Our facilities have conducted campaigns to raise influenza vaccination rates by various means but voluntary participation has been less than hoped for. The proportion of the workforce vaccinated against influenza will surely increase if this measure is passed.

Thank you for the opportunity to testify.



Government Relations

Testimony of John M. Kirimitsu Legal and Government Relations Consultant

Before: House Committee on Health The Honorable Della Au Belatti, Chair The Honorable Richard P. Creagan, Vice Chair

> March 18, 2016 9:00 am Conference Room 329

Re: SB 2394 Relating to Influenza Vaccination

Chair, Vice Chair and committee members, thank you for this opportunity to provide testimony on SB 2394 relating to annual influenza vaccinations for health care workers.

Kaiser Permanente supports the intent of this measure.

The Centers for Disease Control and Prevention (CDC) has recommended influenza vaccination for all health care workers since 1981. According to the CDCl, every year in the United States:

- Up to 20 percent of Americans (1 in 5 people) get the seasonal flu.
- More than 200,000 people are hospitalized from seasonal flu complications, including 20,000 children.
- Up to 36,000 people die from the flu every year.

Kaiser Permanente continues to support preventative health to improve the health of its members and the communities it serves through its promotion of the flu vaccine. Kaiser Permanente's integrated care model helps care teams track and promote flu vaccinations, especially for those at high risk for flu complications, and supports this bill's promotion of the flu vaccination for all health care workers.

Thank you for your consideration.

711 Kapiolani Blvd Honolulu, Hawaii 96813 Telephone: 808-432-5224 Facsimile: 808-432-5906 Mobile: 808-282-6642 E-mail: john.m.kirimitsu@kp.org 1319 Punahou Street Honolulu, Hawaiʻi 96826-1001



808-983-6053 www.kapiolani.org

March 18, 2016 at 9:00 AM Conference Room 329

House Committee on Health

- To: Chair Della Au Belatti Vice Chair Richard P. Creagan
- From: Kenneth Nakamura, MD Chief Medical Officer Kapi'olani Medical Specialists Chair, Department of Pediatrics

Re: Testimony in Support SB 2394, Relating to Influenza Immunization

My name is Kenneth Nakamura, MD. I am a Pediatrician and Chief Medical Officer of Kapi'olani Medical Specialists (KMS) and Chair of the Department of Pediatrics. Kapi'olani Medical Specialists is a specialty physician group committed to providing health care needs for Hawai'i's women and children. Kapi'olani Medical Specialists partners with Kapi'olani Medical Center for Women & Children to provide pediatric and women's specialty care. The group also partners with the University of Hawai'i John A. Burns School of Medicine in research, education and training.

KMS is writing in **strong support** of SB 2394 which would require annual influenza vaccinations for health care workers in hospitals who have contact with patients.

Every year in the United States, anywhere from 5% to 20% of the population contracts influenza every year and more than 200,000 people are hospitalized from seasonal flu-related complications. The most efficient method of preventing exposure to influenza is through pre-exposure vaccination.

The Association for Professionals in Infection Control and Epidemiology (APIC), the Centers for Disease Control and Prevention (CDC) and other national healthcare organizations have all recommended the efficacy of mandatory health care worker vaccination to reduce the incidence of influenza exposure. Mandatory vaccination programs help health care personnel carry out their professional duty to provide care to all patients and circumvent the risk of inadvertent influenza transmission to patients. For pregnant mothers and babies, the exposure to influenza is additionally concerning.

It is sound public policy to require all health care workers who have direct or indirect contact with patients – especially in birthing centers - take all necessary and reasonable precautions to keep them safe and minimize harm.

Thank you for the opportunity to testify. We ask that you pass SB 2394 as is.

HAWAI'I PACIFIC HEALTH

55 Merchant Street Honolulu, Hawaiʻi 96813-4333

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www.hawaiipacifichealth.org

March 18, 2016 at 9:00 am Conference Room 329

House Committee on Health

- To: Representative Della Au Belatti, Chair Representative Richard Creagan, Vice Chair
- From: Michael Robinson Vice President -- Government Relations and Community Affairs

Re: Testimony in Support, SB 2394, Relating to Influenza Vaccination

My name is Michael Robinson, and I am the Vice President of Government Relations and Community Affairs for Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-governmental employer. Hawai'i Pacific Health is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

HPH is writing in **strong support** of SB 2394 which would require mandatory influenza vaccinations for health care workers. In the United States, anywhere from 5% to 20% of the population contracts influenza every year and more than 200,000 people are hospitalized from seasonal flu-related complications. Annual influenza-associated deaths range from 3,000 to 49,000. However, many of these illnesses and deaths are preventable. The most efficient method of preventing annual influenza epidemics is through pre-exposure vaccination. The CDC estimates that influenza vaccination prevented approximately 7.2 million illnesses, 3.1 million medically attended illnesses, and 90,000 hospitalizations associated with influenza in the 2013-14 influenza season.

Despite long standing recommendations by the Association for Professionals in Infection Control and Epidemiology (APIC), the Centers for Disease Control and Prevention (CDC) and other national healthcare organizations, the response to voluntary programs has failed to increase immunization rates to acceptable levels required to substantially reduce healthcare-acquired influenza. In Hawai'i, the health care worker vaccination level is in the bottom 10% for the entire nation. That is why it is so critical that the legislature take action by passing SB 2394.

Ensuring that all of our hospital health care workers receive the annual influenza vaccination is the right thing to do. Mandatory vaccination programs help health care personnel carry out their professional duty to provide care to all patients without the threat of undue harm caused by influenza transmission. The public has a right to expect that health care workers and the institutions in which they work will take all necessary and reasonable precautions to keep them safe and minimize harm. We urge this committee to pass SB 2394 unamended.

Thank you for the opportunity to testify.





808-245-1500 www.wilcoxhealth.org

March 18, 2016 at 9:00 AM Conference Room 329

House Committee on Health

- To: Chair Della Au Belatti Vice Chair Richard P. Creagan
- From: Geri Young, MD Chief Medical Officer Kaua'i Medical Clinic

Re: Testimony in Support - SB 2394, Relating to Infuenza Immunization

My name is Geri Young, MD a Pediatrician and Chief Medical Officer at Kaua'i Medical Clinic. Wilcox Memorial Hospital is a not-for-profit hospital located in Lihue, Kaua'i, and is dedicated to the health and well-being of all Hawai'i residents. The hospital is an affiliate of Hawai'i Pacific Health, the state's largest health care provider.

Wilcox is writing in **strong support** of SB 2394 which would require mandatory influenza vaccinations for health care workers. In the United States, anywhere from 5% to 20% of the population contracts influenza every year and more than 200,000 people are hospitalized from seasonal flu-related complications. Influenza-associated deaths have been estimated to be as many as 49,000 per year. The CDC estimates that influenza vaccination prevented approximately 7.2 million illnesses, 3.1 million medically attended illnesses, and 90,000 hospitalizations associated with influenza in the 2013-14 influenza season. The most efficient method of preventing annual influenza epidemics is through pre-exposure vaccination

The public has a right to expect that health care workers and the institutions in which they work will take all necessary and reasonable precautions to keep them safe and minimize harm. Mandatory vaccination programs help health care personnel carry out their professional duty to provide care to all patients without the threat of undue harm caused by influenza transmission. Ensuring that all of our hospital health care workers receive the annual influenza vaccination is the right thing to do.

We ask that you pass SB2394.



The Honorable Della Au Belatti, Chair House Committee on Health

Friday, March 18, 2016 Conference Room 329; 9:00AM **RE: SB 2394 – Relating to Influenza Immunization – IN SUPPORT**

Aloha Chair Belatti, Vice Chair Creagan, and members of the Committee:

The Hawai'i Chapter of the Association for Professionals in Infection Control and Epidemiology (APIC) appreciate the opportunity to submit testimony in <u>SUPPORT</u> of SB 2394. Our Chapter was established in 1976 and we currently have more than 60 members across the State with representation of Infection Preventionists from healthcare organizations on O'ahu, Maui, Lana'i, Kaua'i, and Hawai'i. Infection Preventionists are nurses, physicians, public health professionals, epidemiologists, microbiologists, or medical technologists dedicated to creating a safer world through the prevention of infection.

Influenza is a serious disease that is associated with high rates of morbidity and mortality. In the United States, an estimated 5% - 20% of the population is affected by the virus each year.¹ Influenza infections result in approximately 150,000 hospital admissions and 24,000 deaths annually.² A recent study estimated that annual influenza epidemics account for 610,660 life-years lost, 3.1 million days of hospitalization and 31.4 million outpatient visits.³

The most efficient method of preventing annual influenza epidemics and their associated morbidity and mortality, is through pre-exposure vaccination.⁴ In addition to their risk for exposure to influenza from community sources, healthcare personnel (HCP) are at an increased risk for acquiring influenza due to their exposure to ill patients. Conversely, those patients who are at greatest risk of developing severe complications of influenza themselves are more likely to be exposed to potentially infectious HCP. Therefore, <u>one of the most important strategies to decrease influenza transmission to or from high-risk persons is to immunize HCP.⁵</u>

For the 2014 – 2015 influenza season, the overall State average vaccination coverage of HCPs was only 73%.⁶ Multifaceted mandatory vaccination programs have been tried and tested and have been found to be the single most effective strategy to increase HCP vaccination rates.⁷ As professionals dedicated to the <u>prevention of infection</u>, we have an ethical responsibility to protect those individuals entrusted to our care. We must do a better job of immunization in HCP every year to ensure patient safety and protect those individuals at high risk for developing complications of influenza. On behalf of the Hawai'i APIC Chapter, we would like to thank you for your consideration of our comments and for the opportunity to testify. We urge this Committee to **pass SB 2394 unamended**.

Respectfully,

Deema Singh

Seema Singh President, APIC Hawai'i Chapter (Chapter #39)

References:

¹ World Health Organization. Influenza (Seasonal). Available from: <u>http://www.who.int/mediacentre/factsheets/fs211/en/</u>. Accessed December 10, 2010.

² Estimates of Deaths Associated with Seasonal influenza—United States, 1976-2007. JAMA 2010; 304(16): 1778-1780.

³ Molinari NA, Ortega-Sanchez IR, Messonnier ML, Thompson WW, Wortley PM, Weintraub E, et al. The annual impact of seasonal influenza in the US: Measuring disease burden and cost. Vaccine 2007; 25:5086-5096.

⁴ Poland, GA, Tosh P, Jacobson RM. Requiring influenza vaccination for health care workers: seven truths we must accept. Vaccine 2005; 23:2251-2255.

⁵ Ibid.

⁶ State of Hawai'i, Department of Health – 2014 HAI Report. Available from: <u>http://health.hawaii.gov/docd/files/2015/08/Hawaii2014HAIReport.pdf</u>. Accessed March 11, 2016.

⁷ Talbot TR, Dellit TH, Hebden J, Sama D, Cuny J. Factors associated with increased healthcare worker influenza vaccination rates: results from a national survey of university hospitals and medical centers. Infect Control HospEpidemiol 2010; 31(5):456–462.



Eric P. Douglas Senior Director, Government Affairs

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Eric.Douglas@CVSHealth.com

The Honorable Della Au Belatti, Chair House Committee on Health

Friday, March 18, 2016 Conference Room 329; 9:00 AM

RE: SB 2394 - Relating to Influenza Immunization-IN SUPPORT

Aloha Chair Belatti, Vice Chair Creagan and members of the Committee:

CVS Health appreciates the opportunity to submit testimony in support of SB 2394. As you may be aware, CVS Health proudly operates as the largest pharmacy chain in Hawaii, under our Longs Drugs banner with some 70 locations employing approximately 2900 colleagues here in the Aloha State. We offer our patients and clients a wide range of comprehensive, integrated pharmacy and health operations statewide including: Pharmacy Benefit Management (PBM) services (CVS/caremark), Specialty Pharmacy (CVS/specialty), Mail-Order and Retail Pharmacy (CVS/pharmacy/Longs Drugs), Retail Health Clinics (CVS/minute clinic) as well as a distribution center.

SB 2394, as written, would require annual influenza vaccinations for health care workers (as defined). CVS Health supports this goal. CVS Health/Longs Drugs is deeply committed to Hawaii, including the health and safety of patients and healthcare workers alike. Therefore we believe that expanding the utilization of the influenza vaccine among Hawaii's health care workers will help promote overall community health as well as raise awareness around the influenza virus and vaccine. In the United States alone, more than 200,000 persons are hospitalized and from 3,000 to 49,000 of those individuals die (Prevention, 2013-2014). Sadly, many of these illnesses and deaths are preventable as the CDC estimates that the influenza vaccine prevented slightly over 7 million illnesses and over 3 million illnesses requiring medical attention and some 90,000 hospitalizations during the 2013-2014 influenza season alone.

On behalf of CVS Health/Long Drugs Hawaii, we would like to thank you for your consideration of our comments in support of this measure and ask that the Committee pass SB 2394.

Respectfully,

Ew P. Doyla

Eric P. Douglas

Hilo Medical Center

MY COMMUNITY





Veterans Home

HAWAII HEALTH SYSTEMS CORPORATION

HOUSE OF REPRESENTATIVES THE TWENTY-EIGHTH LEGISLATURE REGULAR SESSION OF 2016

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice ChairRep. Mark J. HashemRep. Marcus R. OshiroRep. Jo JordanRep. Beth Fukumoto ChangRep. Bertrand KobayashiRep. Andria P.L. TupolaRep. Dee MorikawaRep. Marcus R. Oshiro

NOTICE OF HEARING

DATE: Friday, March 18, 2016 TIME: 9:00 am PLACE: Conference Room 329 State Capitol 415 South Beretania Street

TESTIMONY IN <u>SUPPORT</u> OF SB 2394 RELATING TO INFLUENZA IMMUNIZATION.

I, Dan Brinkman, East Hawaii Regional CEO for Hawaii Health Systems Corporation, consisting of Hilo Medical Center, Hale Ho`ola Hamakua and Ka`u Hospital, <u>support SB 2394</u>, which requires annual influenza vaccinations for health care workers and establishes exemptions for influenza vaccination requirement under certain conditions.

I stand with CDC, the Advisory Committee on Immunization Practices (ACIP), and the Healthcare Infection Control Practices Advisory Committee (HICPAC) and their recommendation that all U.S. health care workers get vaccinated annually against influenza.

I support a requirement for health care workers to receive the influenza vaccination because:

- Influenza (the flu) can be a serious disease that can lead to hospitalization and sometimes even death. Anyone can get very sick from the flu, including people who are otherwise healthy.
- You can get the flu from patients and coworkers who are sick with the flu.
- If you get the flu, you can spread it to others even if you don't feel sick.
- By getting vaccinated, you help protect yourself, your family at home, and your patients.

According to the CDC, flu vaccination coverage across the nation was highest among health care personnel working in hospitals at 78.7%. Our latest figures for Hilo Medical Center, the largest hospital on Hawaii Island, show that our overall vaccination rate for all employees is 75% and the rate for our clinical staff stands at 81%. While our hospital rates are above the national average, I believe we have room for improvement for the sake of patient safety.

I thank members of this committee for hearing this bill. Please support SB 2394 to require health care workers to receive an annual influenza vaccine.

Testimony of Gary M. Slovin / Mihoko E. Ito on behalf of Walgreen Company

DATE: March 17, 2016

Representative Della Au Belatti
 Chair, Committee on Health
 Submitted Via <u>HLTtestimony@capitol.hawaii.gov</u>

RE: S.B. 2394– Relating to Influenza Immunization Hearing Date: Friday, March 18 at 9:00 a.m. Conference Room: 329

Dear Chair Au Belatti and Members of the Committee on Health:

We submit this testimony on behalf of Walgreen Co. ("Walgreens"). Walgreens operates stores at more than 8,200 locations in all 50 states, the District of Columbia and Puerto Rico. In Hawaii, Walgreens now has 20 stores on the islands of Oahu, Maui and Hawaii.

Walgreens **supports** S.B. 2394, which requires annual influenza vaccinations for health care workers.

Walgreens is committed to promoting public health by improving the accessibility of vaccines, including the influenza vaccine. We believe that expanding the use of the influenza vaccine in the hospital setting will serve as a valuable preventative tool. It will also promote overall health and awareness, both within in the health care industry and our community.

Thank you very much for the opportunity to submit testimony on this measure.

Gary M. Slovin Mihoko E. Ito C. Mike Kido Tiffany N. Yajima 999 Bishop Street, Suite 1400 Honolulu, HI 96813 (808) 539-0840



March 18, 2016 at 9:00 AM Conference Room 329

House Committee on Health

- To: Chair Della Au Belatti Vice Chair Richard P. Creagan
- From: George Greene President and CEO Healthcare Association of Hawaii

Re: Testimony in Support SB 2394, Relating to Influenza Immunization

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 180 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 20,000 people statewide.

We would like to thank the committee for the opportunity to testify in **support** of SB 2394. We support efforts to increase influenza vaccination rates at acute care facilities in Hawaii as a way to help protect patients receiving care in a hospital setting.

The Centers for Disease Control and Prevention (CDC), the Advisory Committee on Immunization Practices, the Healthcare Infection Control Practices Advisory Committee, and the American Hospital Association all recommend that health care workers in hospitals get a flu vaccine every year. There are three main benefits to yearly flu vaccines for healthcare workers in acute care facilities. First, healthcare workers reduce their chances of contracting the flu and subsequently passing it on to patients in those settings. Second, the workforce is better protected during a flu outbreak, helping to avert critical personnel shortages. Lastly, it provides an example to the general public that flu vaccines benefit public health.

According to the CDC, the flu can be a serious and potentially lethal disease. Young children, pregnant women, the elderly, and individuals with certain medical conditions such as asthma, diabetes, or heart disease are particularly at-risk for developing serious complications from the flu. Because these vulnerable populations are often treated in hospitals, the CDC finds that it is especially important for the health care workers in acute care facilities who directly care for these high-risk patients to get vaccinated annually.

Studies have shown that requiring hospital employees to get inoculated against the flu every year will increase vaccination coverage. A policy statement issued by the American Academy of Pediatrics (AAP) in support of mandatory annual vaccinations for healthcare workers aggregated a number of studies and reports to substantiate their position. The AAP reiterates that influenza poses serious risks for patients, and that immunization is the single most effective way to prevent contraction of the virus.¹

The statement also provides evidence that voluntary immunization programs, unlike mandatory programs, do not significantly increase immunization rates among healthcare workers. The CDC also has telling numbers compiled on flu vaccine coverage. According to the agency, "[e]arly season flu vaccination coverage was higher among health care personnel whose employers required (85.8%) or recommended (68.4%) that they be vaccinated, compared to those whose employer did not have a policy or recommendation regarding flu vaccination (43.4%)."ⁱⁱ

Therefore, according to the AAP, state-based vaccination requirements are more reliable and efficient in increasing coverage rates for healthcare workers in hospitals. Having a state-based requirement could also make it easier for individual acute care facilities to follow because it would set uniform standards.

Because of the benefits of inoculation and state-based requirements, we would ask for your support of this proposal. This legislation will help to promote patient safety and avert personnel shortages during an outbreak in hospitals and will set a positive example showing the public health benefits of vaccinations. Thank you for your time and consideration of this measure.

ⁱ http://pediatrics.aappublications.org/content/136/4/809

ⁱⁱ http://www.cdc.gov/flu/healthcareworkers.htm

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March 18, 2016 at 9:00am Conference Room 329

House Committee on Health

- To: Representative Della Au Belatti, Chair Representative Richard P. Creagan, Vice Chair
- From: Melinda Ashton, MD Senior Vice President – Chief Quality Officer

Re: Testimony in Support, SB 2394, Relating to Influenza Vaccination

My name is Melinda Ashton, MD, Senior Vice President & Chief Quality Officer at Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-governmental employer. Hawai'i Pacific Health is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

HPH is writing in **strong support** of SB 2394 which would require mandatory influenza vaccinations for health care workers. In the United States, anywhere from 5% to 20% of the population contracts influenza every year and more than 200,000 people are hospitalized from seasonal flu-related complications. Influenza-associated deaths have been estimated to be as many as 49,000 per year. However, many of these illnesses and deaths are preventable. The most efficient method of preventing annual influenza epidemics is through pre-exposure vaccination. The CDC estimates that influenza vaccination prevented approximately 7.2 million illnesses, 3.1 million medically attended illnesses, and 90,000 hospitalizations associated with influenza in the 2013-14 influenza season.

Despite long standing recommendations by the Association for Professionals in Infection Control and Epidemiology (APIC), the Centers for Disease Control and Prevention (CDC) and other national healthcare organizations, the response to voluntary programs has failed to increase immunization rates to acceptable levels required to substantially reduce healthcare-acquired influenza. In Hawai'i, the health care worker vaccination level is in the bottom 10% for the entire nation. That is why it is so critical that the legislature take action by passing SB 2394.

Ensuring that all of our hospital health care workers receive the annual influenza vaccination is the right thing to do. Mandatory vaccination programs help health care personnel carry out their professional duty to provide care to all patients without the threat of undue harm caused by influenza transmission. The public has a right to expect that health care workers and the institutions in which they work will take all necessary and reasonable precautions to keep them safe and minimize harm.

Thank you for the opportunity to testify.





March 18, 2016 at 9:00 AM Conference Room 329

House Committee on Health

- To: Representative Della Au Belatti, Chair Representative, Richard P. Creagan, Vice Chair
- From: Marian Melish, MD

Re: Testimony in Support SB 2394, Relating to Influenza Immunization

My name is Marian Melish, MD. I am an infectious disease specialist at Kapi'olani Medical Center and fellow of the American Academy of Pediatrics (AAP). Kapi'olani Medical Center is the state's only maternity, newborn and pediatric specialty hospital with 207 beds and 66 bassinets. Kapi'olani is also a tertiary care, medical teaching and research facility. The not-for-profit hospital is an affiliate of Hawai'i Pacific Health.

I am writing in **strong support** of SB 2394 which would require annual influenza vaccinations for health care workers in hospitals who have contact with patients.

In Hawai'i, according to the CDC, the health care worker vaccination level ranks among the bottom 10% for the entire nation. In spite of recommendations by national organization such as the Association for Professionals in Infection Control and Epidemiology (APIC), the Centers for Disease Control and Prevention (CDC) the response to voluntary programs has failed to increase immunization rates to acceptable levels required to substantially reduce healthcare-acquired influenza.

In the United States, anywhere from 5% to 20% of the population contracts influenza every year and more than 200,000 people are hospitalized from seasonal flu-related complications. The most efficient method of preventing exposure to influenza is through pre-exposure vaccination. The CDC estimates that influenza vaccination prevented approximately 7.2 million illnesses, 3.1 million medically attended illnesses, and 90,000 hospitalizations associated with influenza in the 2013-14 influenza season.

It is widely accepted that mandatory vaccination programs are effective in reducing the risk of inadvertent transmission of influenza. Requiring that all health care professionals be required to take this precaution would be good public policy.

Thank you for the opportunity to testify.



808-486-6000 www.palimomi.org

March 18, 2016 at 9:00 AM Conference Room 329

House Committee on Health

- To: Chair Della Au Belatti Vice Chair Richard P. Creagan
- From: James Kakuda, MD Chief Medical Officer Pali Momi Medical Center

Re: Testimony in Support SB 2394, Relating to Influenza Immunization

My name is James Kakuda and I am the Chief Medical Officer at Pali Momi Medical Center. Pali Momi is a not-for-profit hospital located in West O'ahu, and is dedicated to the health and wellbeing of all Hawai'i residents. With 128 beds and more than 400 physicians on its medical staff, Pali Momi offers a full range of services. The hospital is an affiliate of Hawai'i Pacific Health, the state's largest health care provider.

Pali Momi is writing in **strong support** of SB 2394 which would require mandatory influenza vaccinations for health care workers. According the Centers for Disease Control (CDC) - influenza-associated deaths have been estimated to be as much as 49,000 per year. Additionally, the CDC estimates that influenza vaccination prevented approximately 7.2 million illnesses, 3.1 million medically attended illnesses, and 90,000 hospitalizations associated with influenza in the 2013-14 influenza season.

The most efficient method of preventing annual influenza epidemics is through pre-exposure vaccination and many of these illnesses and deaths are preventable. The medical community has nearly unanimously embraced the recommendation by the Association for Professionals in Infection Control and Epidemiology (APIC) and the Centers for Disease Control and Prevention (CDC) on the safety and efficacy of immunization in reducing influenza rates.

The influenza vaccination is safe. According to the World Health Organization Information Sheet on the Influenza Vaccine (July 2012) the most common side-effect is a local reaction of soreness at the vaccination site affecting 10% - 64% of vaccines and usually resolves in two days or less.

Despite making this available and easily accessible to health care workers, Hawai'i continues to have a low reported rate of vaccinated health care workers. Given the contact health care workers have with the most physically compromised – our patients – it would be good public policy to require this for all individuals with indirect or direct patient contact.

In an influenza A outbreak in a neonatal intensive care unit in 1998, 19 of the 54 patients on the ward tested positive for influenza A. Of these 19, six were symptomatic and one died. In a

survey of the 150 medical staff involved during the outbreak, only 15% had received the influenza vaccination including 67% of physicians and 9% of nurses. Only 29% of staff with symptomatic influenza took time off from work. (Cunney, Bialachowski, Thornley, Smaill, & Pennie, 2000).

Another outbreak the same year in another bone marrow transplant unit illustrates the devastation that a hospital outbreak can have on its most vulnerable patients. Of the 25 confirmed cases of nosocomial pneumonia in the hospital, 40% were in the BMT ward, 2 of which died [21]. Surveys during this outbreak revealed a 12% vaccination rate among health care workers on the unit. The following influenza season, despite of an aggressive eight-pronged, but voluntary education program, 42% of health care workers on the bone marrow transplant unit still failed to receive influenza vaccine. (Weinstock, et al., 2000)

A Scottish study compared mortality rates between long-term care hospitals that offered influenza vaccination to health care workers, where 51% were vaccinated, and hospitals that did not, where only5% were vaccinated [7]. The result was nearly a 40% reduction in all-cause mortality among the patients cared for by the health care workers in the hospitals with higher levels of health care worker influenza vaccination. (Carman, et al., 2000)

"Nichol et al. reported that healthy working adults who receive influenza vaccination have 25% fewer upper respiratory infections, 44% fewer doctor visits, and 43% fewer sick days off, saving an average of \$47 per person annually. A previous study by Nichol et al. revealed that among three different cohorts of 25,000 adults each studied over 3 years, influenza vaccination reduced pneumonia and influenza hospitalizations by 48–57%, all acute and chronic respiratory conditions by 27–39%, and all-cause mortality by 39–54%. This resulted in a direct savings per year averaging \$117 per person immunized." (Poland, Tosh, & Jacobson, 2005)

Mandatory vaccination programs help health care personnel carry out their professional duty to provide care to all patients without the threat of undue harm caused by influenza transmission.

We ask that you pass SB 2394.

Thank you for the opportunity to testify.

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American Academy of Pediatrics



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Hawaii Chapter

March 18, 2016

AAP - Hawaii Chapter P.O. Box 25817 Honolulu, HI 96825

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Conference Rm 329

House of Representatives, Committee on Health

To: Representative Della Au Belatti, Chair Representative Richard P. Creagan, Vice Chair Members, HR Committee on Health

From: R. Michael Hamilton, MD, MS, FAAP President, Hawaii Chapter of the American Academy of Pediatrics

RE: Testimony in support of SB 2394, relating to Influenza Vaccination

As President of the Hawaii Chapter of American Academy of Pediatrics (HAAP), I represent pediatricians throughout our beautiful state of Hawaii.

I am writing this testimony in strong support of SB 2394 which would require mandatory influenza vaccinations for health care workers. In the U.S. somewhere between 5 to 20% of the population contracts influenza each year and more than 200,000 people are hospitalized from seasonal flu-related complications. Annual influenza-associated deaths have reached as high as 49,000 persons in recent history. Many of these may have been preventable.

The most efficient method of preventing annual flu epidemics is through pre-exposure vaccination. The CDC estimates that influenza vaccination has prevented approximately 7.2 million illnesses, 3.1 million medically attended illness and 90,000 hospitalizations associated with influenza in the 2013-14 influenza season.

In Hawaii, the health care worker vaccination level is in the bottom 10% for the entire nation. This is why it is critical that we pass SB 2394.

Ensuring that all of our hospital heath care workers receive the annual influenza vaccination is the right thing to do. The public has a right to expect that health care workers and the institutions in which they work will take all necessary and reasonable precautions to keep the people of Hawaii safe and minimize harm.

Thank you.

Respectfully submitted,

Michael Hamilton, MD, MS, FAAP President, HAAP



March 17, 2016

Committee on Health Rep. Della Au Belatti, Chair Rep. Richard Creagan, Vice Chair

Friday, March 18, 2016. 9:00AM Conference Room 329 State Capitol 415 South Beretania Street

Senate Bill 2394 Testimony in Support

We, the Board of Directors of the Hawaii Academy of Family Physicians representing 316 active family physicians in our state strongly support SB2394, requiring annual influenza vaccinations for health care workers. Influenza vaccination is one of the most effective ways to prevent influenza infection and dissemination. As healthcare professionals our primary concern should be the care of our patients and preventing the spread of community acquired infections into our hospitals should be an important goal. No argument based on science can dispute the benefits of vaccination in preventing and decreasing rates of infectious diseases. This is such an important issue it is a national quality initiative. The facility rate of influenza vaccination is a national quality measure for both acute care hospitals and critical access hospitals.

The Board of Directors of the Hawaii Academy of Family Physicians urges you to pass SB2394.

Respectfully submitted,

Nicole Apoliona, M.D. Legislative chair

Kelley Withy, M.D., Ph.D. President Hawaii Academy of Family Physicians

P.O. BOX 894440 • MILILANI, HI • 96789 PHONE: 808-397-3596



AONE Hawaii c/o PO Box 2774 Honolulu, Hawaii 96803

THE AMERICAN ORGANIZATION OF NURSE EXECUTIVES, HAWAII CHAPTER

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WWW.AONEHAWAII.ORG

Written Testimony Presented Before the **House Committee on Health** March 18, 2016 9:00 a.m.

By

Kate Woodard, RN, MPH Secretary, AONE Hawai'i Board

SB 2394 RELATING TO INFLUENZA IMMUNIZATION.

Chair Belatti, Vice Chair Creagan, and members of the House Committee on Health, thank you for this opportunity to provide testimony in support for SB 2394 Relating to Influenza Immunization.

Research indicates that health care providers unvaccinated for influenza contribute to health care facility-related influenza outbreaks. Further, these outbreaks lead to increased patient morbidity and mortality, worker illness and absenteeism, and increased economic cost to the health care system.¹

With regard to the nursing workforce, AONE Hawai'i is in support of this measure as a means to reduce exposure and potential illness from influenza through effective vaccination programs. Such programs will increase the safety of the health care system for its patients by its health care workers.

Therefore, AONE Hawai'i respectfully requests that the House Committee on Health consider SB2394 favorably at this time. Thank you for your continued support of nursing in Hawai'i and for the time and consideration of this bill.

¹ Stewart, A. M., & Cox, M. A. (2013). State law and influenza vaccination of health care personnel. Vaccine, 31(5), 827-832. doi:10.1016/j.vaccine.2012.11.063

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 2:53 PM
То:	HLTtestimony
Cc:	jdonovan@hhsc.org
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Judy Donovan	Kona Community Hospital, West Hawaii Region, HHSC	Support	No

Comments: The West Hawaii Region for Hawaii Health Systems Corporation, consisting of Kona Community Hospital and Kohala Hospital, support SB 2394, which requires annual influenza vaccinations for health care workers and establishes exemptions for influenza vaccination requirement under certain conditions. We stand with CDC, the Advisory Committee on Immunization Practices (ACIP), and the Healthcare Infection Control Practices Advisory Committee (HICPAC) and their recommendation that all U.S. health care workers get vaccinated annually against influenza. We support a requirement for health care workers to receive the influenza vaccination because: • Influenza (the flu) can be a serious disease that can lead to hospitalization and sometimes even death. Anyone can get very sick from the flu, including people who are otherwise healthy. • You can get the flu from patients and coworkers who are sick with the flu. • If you get the flu, you can spread it to others even if you don't feel sick. • By getting vaccinated, you help protect yourself, your family at home, and your patients. We would like to thank members of this committee for hearing this bill. Please support SB 2394 to require health care workers to receive an annual influenza vaccine.

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Birth Sovereignty We stand strongly opposed to SB2394 and HB1945

This vaccine can be dangerous to pregnant mothers and all of us and has never been tested. It is shameful that our legislatures would be pushing vaccination bills, we encourage you to do your research and oppose this bill.

We support cultural practitioners, respecting that Hawaiian cultural practitioners and Traditional Midwives are those who practice midwifery as it has been handed down to them from generation to generation. We also respect the diversity of cultural practitioners, midwives, obstetricians, naturopaths, medical doctors and healthcare practitioners working together to create a working model for continuity of care in our island communities. We are a broad collaboration of practitioners and families working to create the bridge between high technology obstetric care and the excellent outcomes provided by the low technology, hands on midwifery model of care.

We are committed to reducing maternal and infant mortality and morbidity rates by creating healthy birth, realizing that each woman has a central role in all aspects of her ceremony of birth. We work alongside traditional midwives to create best practices that work toward our goals of access to comprehensive maternal health care, education and the facilitation of positive childbirth experiences. We believe that holistic and restorative reproductive care is essential to a future of peace and development. The collection of our data provides inspiration for women birthing at home.

Birth Sovereignty supports basic public health measures and projects that create sovereignty in all ways, a vital component of broader cultural, social, economic and environmental sovereignty and justice issues.

Medrakanoeonāpua Traditional Midwife	0'ahu
Ilikea Kam Kumu, Cultural Practitioner	Hi
Clare Loprinzi Traditional Midwife,	HI
Lori Kimata ND, Midwife	0'ahu
Jade McGaff MD, OB/GYN	HI
Misha Kassel MD, ER	0'ahu
Pa'ahana Kincaid, Makua Culltural Practitioner	0'ahu
Luna Kekoa, Makua, Cultural Practitioner	0'ahu
Laulani Teale Cultural Practitioner,	0'ahu
Joe Kassel , ND, LAc.	Hi
Yolande Luyendyk RN(L&D) LMT	Hi
Marghee Maupin APRN	Kaua'i
Tara Mattes LAc.	0'ahu
Leilani Navas-Loa Cultural P	Hi
Ki'inaniokalani Kaho'ohanohano	Maui
Pua Case Cultural Practitioner	Hi

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 8:48 AM
То:	HLTtestimony
Cc:	joankutz@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Joan Kutzer	Hawaii Nurses Association, OPEIU local 50	Oppose	Yes

Comments: March 18, 2016 at 9:00 am Conference Room 329 Committee on Health To: Representative Della Au Belatti, Chair Representative Richard P. Creagan, Vice Chair and members of the Committee on Health From: Joan Kutzer, RN, BSN Hawai'i Nurses Association, OPEIU Local 50 Board of Directors Testimony OPPOSING SB2394 Relating to Influenza Vaccination Thank you for the opportunity to provide testimony opposing SB 2394 I am on the Hawai'i Nurses Association/ OPEIU Local 50 Board of Directors and an active member of the OPEIU Nurse Council. HNA represents more than 4500 nurses in the state of Hawaii. I am speaking to you to oppose SB2394, which would mandate Hawai'i healthcare workers receive a yearly flu vaccine. There are several reasons I oppose SB2394: I feel there is an ethical conflict in coercing health care workers to receive a vaccine they believe is either harmful or ineffective. There is also the concern that it is a violation of their own personal medical privacy, by identifying them with their mask. Masks are ineffective in preventing the spread of the influenza virus. At a facility here in Hawai'i that did attempt to mandate influenza vaccines, the nurses wore masks, while working side by side with unvaccinated physicians who did not wear masks. Finally, there is the matter of Reimbursement to Health Care facilities being tied to Influenza immunization rates needing to be greater than 90%. This I believe is what is truly driving this bill. The following is our OPEIU Nurse Council's position statement regarding the Mandatory Influenza Immunization Initiative: FLU VACCINES FOR HEALTHCARE WORKERS WHEREAS, OPEIU Nurse Council supports flu prevention for patients and the general public; and WHEREAS, nurses and other healthcare workers have a duty and a right to protect patients. Recent evidence shows mandatory flu vaccinations and masking policies fail these tests; and WHEREAS, flu vaccination policies requiring healthcare workers to be vaccinated have proliferated since the Virginia Mason case in 2004; and WHEREAS, such policies vary greatly from locale to locale; and WHEREAS, mandatory flu vaccinations as a condition of employment is unfair to healthcare workers; and WHEREAS, many employers have implemented religious exemptions to mandatory flu vaccination for their healthcare workers; and WHEREAS, many of those religious exemptions are vague and

inconsistent with federal discrimination laws; and WHEREAS, the billion dollar pharmaceutical companies who provide flu vaccinations are lobbying Congress for a national policy requiring flu vaccination for healthcare workers; and WHEREAS, Medicare reimbursement rates may be effected by the number of healthcare workers who are vaccinated at that healthcare facility; and THEREFORE BE IT RESOLVED that the OPEIU 26th Convention commit itself to lobby for legislation requiring employers to educate their healthcare workers as to the benefits and limitations of flu vaccination and for healthcare employers to implement effective infection control to prevent the spread of flu without mandatory flu vaccination for employees. Sincerely, Joan Kutzer, RN, BSN

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National Vaccine Information Center

March 17, 2016

Dear Honorable Members of the House Health Committee,

The National Vaccine Information Center (NVIC) is a nonprofit charity founded in 1982 to prevent vaccine injuries and deaths through public education. With more than 160,000 supporters living in Hawaii and other states and close to 400 active subscribers in Hawaii to our advocacy services through http://NVICAdvocacy.org. NVIC advocates for protection of the human right to informed consent to medical risk taking and inclusion of flexible medical, religious and conscientious belief vaccine exemptions in U.S. public health policies and laws.

We urge you to OPPOSE <u>SB 2394</u> which would mandate health care workers receive a yearly flu vaccine. "Health care worker" means all persons, whether paid or unpaid, working or delivering services in a health care facility, including contractors and their employees whose occupational activities involve direct or indirect contact with patients or contaminated material in a health care, hospital, or clinical laboratory setting. SB 2394 is scheduled for a hearing March 18, 2016 at 9:00 AM in the House Health Committee in conference room 329.

- The <u>flu shot is the most compensated vaccine</u> for vaccine injuries and deaths in the National Vaccine Injury Compensation Program.
- According to the CDC, the 2014-15 <u>flu shot was only approximately</u> <u>19% effective</u>.
- <u>Multi-dose influenza vaccines contain thimerosal</u>, a mercury derivative and known neurotoxin.
- Flu shots are invasive medical procedures and <u>can induce a range</u> of <u>symptoms</u> including Guillain-Barre Syndrome and anaphylactic reactions.
- <u>Many labor unions opposed mandatory flu vaccination for health</u> <u>care workers</u>.
- The <u>Cochrane Collaboration concluded</u>, "There is no evidence that only vaccinating healthcare workers prevents laboratory-proven influenza or its complications (lower respiratory tract infection, hospitalisation or death due to lower respiratory tract infection) in individuals aged 60 or over in LTCIs and thus no evidence to mandate compulsory vaccination of healthcare workers".

- Physicians, in the <u>American Medical Association Code of Ethics</u>, affirm philosophical and religious exemptions for themselves. Employees should not be discriminated against for choosing not to take a flu vaccine.
- Nobody should be forced to have to choose between a flu shot and their job. There is no philosophical exemption in this bill, just limited medical and religious exemptions.
- The masking requirement for those using the limited exemptions is punitive and ineffective at preventing illness. By only requiring those using an exemption to wear a mask, it singles out and discriminates against these health care workers. If masking is required, it should be required of all health care workers because it is estimated that 80% of flu-like illness reported during the "flu season" is not caused by influenza. The vaccine only contains three strains of influenza, and health care workers who took the FluMist live viral vaccine can shed and can spread the influenza virus.
- Studies reveal that <u>60% of health care professionals do not want to</u> <u>get influenza shots and are concerned about the vaccine's</u> <u>ineffectiveness and side effects</u>.

Please OPPOSE SB 2394.

Sincerely,

Dawn Richardson Director of Advocacy, National Vaccine Information Center HAWAII GOVERNMENT EMPLOYEES ASSOCIATION AFSCME Local 152, AFL-CIO



RANDY PERREIRA, Executive Director • Tel: 808.543.0011 • Fax: 808.528.0922

The Twenty-Eighth Legislature, State of Hawaii House of Representatives Committee on Health

Testimony by Hawaii Government Employees Association

March 18, 2016

S.B. 2394 – RELATING TO INFLUENZA IMMUNIZATION

The Hawaii Government Employees Association, AFSCME Local 152, AFL-CIO, would like to provide comments on S.B. 2394, which requires annual influenza vaccinations for health care workers.

While it's acknowledged that health care professionals are looked to for guidance on good health practices, mandating annual influenza vaccinations infringes upon one's personal and philosophical beliefs. The exemptions presented in this bill only allow for a medical condition, religious belief or if there is an insufficient supply of vaccinations. Policies of best health practices within facilities and sick leave already exist to minimize employees from infecting patients and fellow employees should they be ill or contagious. Further, requiring the vaccination as a condition of employment could impact the employer's ability to recruit should a potential applicant believe their beliefs are compromised.

Thank you for the opportunity to provide comments for S.B. 2394.

Respectfully s ubmitted.

Randy Perreira Executive Director

KEITH MATSUMOTO, M.D.

Pediatrics Kapi'olani Medical Center For Women and Children 1319 Punahou Street, Suite 900 Honolulu, Hawai'i 96826 Telephone: (808) 949-0011 Physician's Exchange: 524-2575

March 18, 2016 at 9:00 AM Conference Room 329

House Committee on Health

To: Chair Della Au Belatti Vice Chair Richard P. Creagan

From: Keith Matsumoto, MD

Re: Testimony in Support SB 2394, Relating to Influenza Immunization

My name is Keith Matsumoto and I'm a pediatrician in private practice. I am writing in strong support of SB 2394 which would require mandatory influenza vaccinations for health care workers. The Centers for Disease Control and Prevention (CDC) estimate that annual influenza-associated deaths range from 3,000 to 49,000. Influenza is a highly contagious, deadly disease, but it's preventable. Patients should expect the highest level of protection from their doctors and nurses. Many of our patients are medically vulnerable. We have an ethical and professional obligation to act in the best interest of our patients' health, so we should do everything we can to reduce the transmission of preventable diseases like the flu. This is our ethical and moral duty, and we need to lead by example. If we, get vaccinated, there is a good chance that patients will emulate our example.

The influenza vaccine is the single most effective way to prevent the spread of the flu virus. However, despite the vaccine's effectiveness and the staggering effect of influenza on our population every year, the community has been slow to adopt the practice. Less than 74% of Hawai'i's health care workers get the vaccine. Voluntary programs are not effective because healthcare workers still have misconceptions about the risks and benefits of the vaccine. It's true that there is sometimes mismatch between the vaccine and circulating flu strain, but when there is a match, the effectiveness can be as high as 90%. The CDC estimates that influenza vaccination prevented approximately 7.2 million illnesses, 3.1 million medically attended illnesses, and 90,000 hospitalizations associated with influenza in the 2013-14 influenza season

I think health care professionals have an obligation to get vaccinated — not just to ourselves, not just to our families, but to the patients we care for. Many people have conditions such as asthma, heart disease and diabetes that make getting the flu particularly dangerous. But, influenza can be prevented by a vaccine. We need to require influenza vaccine to get our immunization rates as close to 100% as we can.

Please vote yes on SB 2394.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 2:51 PM
То:	HLTtestimony
Cc:	zchisty@hotmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Zeshan Chisty	Individual	Support	No

Comments: This bill will help keep patients and healthcare workers safe and healthy.

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To whom it may concern,

After reading the testimony presented by groups opposing this law, I have identified several incorrect statements that I would like to address. Some statements are made in previous testimony, which are not supported by research. I have included links when available to the electronic sources of data.

Flu vaccine effectiveness for the current season is 59%. From 2011-2014, the
effectiveness was 47, 49 and 51. Last year there was a decrease in effectiveness at
23% but this may also be due to a manufacturing problem with the efficacy of one of the
newer companies producing the vaccine. This data is readily available on the CDC
website:

http://www.cdc.gov/flu/professionals/vaccination/effectiveness-studies.htm http://www.cdc.gov/media/releases/2016/flu-vaccine-60-percent.html

Here are some other important statistics in support of this bill, also from the CDC website:

- A recent study<u>*</u> showed that flu vaccine reduced children's risk of flu-related pediatric intensive care unit (PICU) admission by 74% during flu seasons from 2010-2012.
- One study showed that flu vaccination was associated with a 71% reduction in flu-related hospitalizations among adults of all ages and a 77% reduction among adults 50 years of age and older during the 2011-2012 flu season.
- Flu vaccination is an important preventive tool for people with chronic health conditions. Vaccination was associated with lower rates of some cardiac events among people with heart disease, especially among those who had had a cardiac event in the past year. Flu vaccination also has been shown to be associated with reduced hospitalizations among people with diabetes (79%) and chronic lung disease (52%).
- Vaccination helps protect women during pregnancy and their babies for up to 6 months after they are born. One study showed that giving flu vaccine to pregnant women was 92% effective in preventing hospitalization of infants for flu.
- Other studies have shown that vaccination can reduce the risk of flu-related hospitalizations in older adults. A study that looked at flu vaccine effectiveness over the course of three flu seasons estimated that flu vaccination lowered the risk of hospitalizations by 61% in people 50 years of age and older.
 - 2. The incidence of Guillain Barre is 1: 1,000,000. A study published in Lancet, showed that the risk of getting Guillain Barre after actually getting the influenza virus was much higher than in a comparison population of those who received the vaccine. http://www.thelancet.com/journals/laninf/article/PIIS1473-3099(13)70104-X/abstract This supported a previous study in 2012, by Souayah et al., where it was found that the incidence of Guillain Barre in the general (normalized) population was no higher than in the population that received the influenza vaccination.
 - The multi-dose vial may have a very small amount of thimerosal, but with one vaccine is much lower than the amount acceptable by the FDA (<u>http://www.fda.gov/BiologicsBloodVaccines/SafetyAvailability/VaccineSafety/UCM0962</u> <u>28#guid</u>). Additionally, if this is a concern, an employee can choose to get the vaccine from the single dose vials which do not have thimerosal.
 - 4. There was a concern about religious rights. Those who are opposed according to this law may have a religious exemption. Therefore, this should not be an issue in how the measure is written currently.

5. Provision 6 of the nursing code of ethics states (from the American Nurses Association website): "The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care..." By receiving the influenza vaccine, the nurse aids in providing quality health care. Is it ethical for a nurse to go to work with the influenza virus, and spread it to patients who already have other health care problems? Again I'd like to point out that there is a provision in the measure that if the healthcare worker does not get the vaccine and is not a religious exemption, the healthcare worker can also choose to wear a mask instead while at work, to prevent the spread of disease to patients.

Thank you for listening to my concerns!
From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 7:46 AM
То:	HLTtestimony
Cc:	Stella.Laroza@straub.net
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Stella Laroza, MS, RN, CIC	Individual	Support	Yes

Comments: As professionals dedicated to promoting good health and the prevention of infection, we have an ethical responsibility to protect those individuals entrusted to our care. The overall state average of healthcare workers who were vaccinated for the 2014-2015 influenza season was only 73%. We must do a better job of immunization in healthcare workers every year to ensure patient safety and protect those individuals at high risk for developing complications of influenza.

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From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 6:31 PM
То:	HLTtestimony
Cc:	tediousmonkey@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Thaddeus Pham	Individual	Support	No

Comments: I am a public health professional, and I work with many people who are medically fragile. Oftentimes, we try very hard to get them into care in hospitals or other healthcare settings. After all these efforts, it would be a shame if these community members were then exposed to the flu (or other vaccine preventable diseases) by the very people committed to care for them. Regardless of personal or religious belief, there is no reason for a medical professional in a healthcare setting to be so negligent as to expose their patients to a preventable disease. I fully support SB 2394 UNAMENDED to increase the health and well being of not only individuals but communities in Hawaii.

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From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 10:14 AM
То:	HLTtestimony
Cc:	ltakeuch48@gmail.com
Subject:	*Submitted testimony for SB2394 on Mar 18, 2016 09:00AM*

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Lisa Takeuchi	Individual	Support	No

Comments:

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March 18, 2016 at 9:00 AM Conference Room 329 House Committee on Health

To: Chair Della Au Belatti

Vice Chair Richard P. Creagan

From: Amy Thomas, RN

Re: SB 2394 Testimony in Support - Relating to Influenza Immunization

My name is Amy Thomas and I am submitting testimony in strong support of SB 2394 not only as a registered nurse from Hawaii Pacific Health, but even more so as a family member who lost a loved one to this deadly illness. I, today, share my story; as someone who has witnessed the needless tragedy of this preventable infectious disease on both a personal and professional level.

Two years ago, my healthy 43 year old sister in law, Paige Thomas, fell victim to the H1N1 influenza virus. In December 2014, she was a young and vibrant soul who was so happy to share the Christmas holiday with her family who had travelled from all over the country to be together. As a devoted COO for the American Red Cross, she was eager for the holiday time to celebrate with loved ones. Somewhere along her travels to get to the midwest, she unknowingly came in contact with a seemingly insignificant, invisible, infectious agent.

The events that followed that ill-fated contact remain crystal clear in my mind. The Christmas celebration had just wrapped up when she began to feel ill. She went to bed early that night. Not wanting to miss a thing, she joined the family in an outing the next morning. It was during this time that she quipped the most ominous phrase that still haunts us all today. She said, "I am coming down with something and I sure hope it isn't the flu. I am such a huge proponent of the flu shot but this year I haven't gotten it yet".

One day later, she slept the entire day. The next day, she just wanted to get home "to sleep in her own bed" so caught a flight back to her home State. By the time the plane landed, this previously healthy young woman needed a wheelchair to get off the plane, she drove her car home and parked it at the front step as she was too weak to walk into the house from the driveway. She got inside, called her family, and then called an ambulance. Her mother called her immediately upon arrival to the Emergency Department, but she was so rapidly intubated there was no chance to talk. Paige's organs began to fail one day later as those who loved her rushed to get to her side..... within the week, she was gone.

It was unfathomable and unbelievable to us that we had, in an instant, lost Paige. There are so many aspects of her situation that still feel unbelievable to me as both a family member and a healthcare provider. Paige wasn't immunocompromised, or under age two, or over age 65, or a victim of chronic illness. She was healthy. In my grief and denial, I told myself this just doesn't happen.

Well, we, like so many others who lose loved ones every year to influenza, found out the hard way that it does happen, and the worst part of it happening is that it doesn't need to. Within the days following Paige's death, we found out from the healthcare team that the flu shot would have offered her protection against the virulent strain of influenza that she had succumbed to. The heartbreaking situation only got worse......this tragedy, and the life-long anguish and sorrow that follows could have been prevented with a simple and single vaccination.

I urge you all to consider Paige's story as you decide on this bill. You have seen the statistics and you know that vaccinations prevent deaths. Infectious diseases know no boundaries and as a result of this, none of us are immune. We as community stewards have an obligation to protect those in our communities, we as family members have an obligation to advocate for the health of our loved ones and we as health care providers have an obligation to keep our patients safe. Not taking steps to protect ourselves and protect our patients from these types of preventable deaths is not acceptable. We can't change what happened to Paige and the resulting situation, but we can change this outcome for so many others by requiring that those who provide patient care to the most vulnerable populations are protecting themselves and those they care for. Thank you for your consideration of this testimony. Dear Representative Belatti, Representative Creagan, Representative Hashem, Representative Jordan, Representative Kobayashi, Representative Morikawa, Representative Oshiro, Representative Chang, and Representative Tupola::

Thank you for the opportunity to testify. My name is Gwen Navarrete Klapperich, and as a private citizen, non-clinician, workplace training manager, and a step-parent of a young man with autism, my intent is to detail the reasons why my family and I **strongly support SB 2394** regarding influenza immunization for healthcare workers.

As a manager and educator, I recognize the importance of evidence that is backed by strong scientific data. But as a parent, I know all too well the power of a compelling story can have in captivating human interest and emotion. So while I will cover some facts today, I thought I would tell you my family's story.

Like many of the people who testified, I consider myself to be an educated person but **having an education does not necessarily mean that someone is informed**. If you were to ask me five years ago what I thought of the flu vaccine, I would have scoffed and said "Why would I want to get the flu shot when all it does is give me the flu?" I vaguely remember that I had been vaccinated as a child but I also got caught up in the fervor surrounding autism and vaccines after seeing Jenny McCarthy on the Oprah Winfrey show. Eager to share my newfound "knowledge", I broached the subject with two autism parents – a good friend with a non-verbal autistic son and my then fiancé, the father of a boy with Asperger's Syndrome. Both of them vehemently denied this information as bunk, my friend because her son was diagnosed with autism well before vaccines ever entered his body and my husband because he recognized the symptoms within other family members and he has a bachelor's degree in environmental science. He explained how vaccines worked, and how they use a dead or weakened form of the illness to build immunity within a person's system. While my understanding increased, I was too busy to really listen to him and still resisted the idea of a flu shot even after the 1998 study retracted due to fraudulent data.

That changed when I was hired as a contract trainer for a public health agency in Nevada. I naively thought I would only be teaching a software program that logged immunization records for children; I was not expecting to be confronted with my immunization beliefs as an adult. I also didn't equate the flu shot as a vaccine or immunization – why would I? I was uninformed. With each meeting that advocated receiving the flu vaccine, I kept silent hoping that they would never ask me outright if I was immunized and feeling like an internal fraud for not following the prescribed protocol. In truth, I was scared. I'm not a big fan of medicine, I never have been. There are enough addictive personalities in my family that I feared becoming dependent of prescription meds if I over used them. So I kept up a farce of quiet resistance until our agency received word that a four-month old baby had just died from influenza.

I didn't even know people could die from the flu, much less an innocent baby who was too young to be immunized and probably contracted influenza from an unvaccinated individual in their environment. For the first time, I decided to learn – really learn – all I could about immunizations and influenza. It was the first time I learned about vaccine safety and how it is stringently monitored by local, state, and federal authorities. I also learned about community or "herd" community, which protects the most vulnerable people in our population by making sure the majority of people around them are also vaccinated. In essence, if we are able to fight the illness without getting sick than those people who CAN'T be vaccinated have a much better chance of not contracting a disease that might kill them. That ability comes from immunization. This shook me to the core, because my job at the time required me to visit pediatricians' offices and hospitals. I knew that if I remained unvaccinated and then unknowingly passed on influenza or another disease to a baby and that baby eventually died or was hospitalized, I would never be able to forgive myself. I received my first flu vaccine that year, and I have never had a negative reaction (not even an aggravation to my eczema or asthma). The best part is that I have yet to contract the flu since receiving it.

I want to acknowledge the opposition's statement that they should get to choose what is put into their body. That may be true to an extent, but sometimes that is not always possible. Washing your hands and using hand sanitizer may be a preferred choice, but we cannot actively choose to NOT breath in the flu virus when someone sneezes in our presence. Only immunization can do that. Also, while I wholeheartedly believe in individuals' rights to choose, the health and safety of the community at large supersedes that individual choice. When I visit a healthcare facility, the last thing I need to worry about is whether or not my caretakers have protected themselves and their patients against vaccine preventable disease. This is particularly true for the most vulnerable of populations in acute or intensive care. My son had his tonsils taken out through surgery – the fact that the hospital carried a flu mandate for their employees actually increased my confidence in the care that would be provided for him. It also eased my son's concerns as well – his autism makes him hyper aware of germs and he views vaccines as a shield that protects him against disease or like putting on a seatbelt when you get into a car. It's not a 100% guarantee that you won't get into an accident or that you won't get sick, but what vaccines do is give you a better chance to fight them. My husband and I have always encouraged him to form his own opinions and to advocate to speak for himself. When he learned of this bill, my son was horrified to learn that the influenza vaccine rate for hospital workers in Hawaii is less than 40%, particularly because he learned in his Hawaiian Studies class that infectious diseases like influenza, whooping cough, and measles killed the majority of the Native Hawaiian population from 1804 to 1937, including members of the royal family. He said, "Why would anyone be anti-vaccine in this state considering the history of Hawaii? Using just hand sanitizer is worse than not being vaccinated!"

I will end my testimony by addressing the belief that there are systems in place to prevent people from coming to work who are sick without a vaccination mandate. As much as I would like to believe that, we can probably all tell stories of at least one day when we forced ourselves to go to work despite feeling ill because we just couldn't afford to take the time off. And even if we did call in, by then the virus had probably already been in our system for several days during which time we were contagious. Vaccination doesn't just enhance patient safety; it also serves to protect the healthcare worker from the financial burden of caring for their illness in addition to missing precious work days. That's why my husband calls immunization a form of PPE – personal protective equipment, and why he cited OSHA's strong recommendation that ALL employees receive the influenza vaccine in his online testimony.

One of my favorite things about living in Hawaii is the strong sense of community, and I urge you to enhance community immunity by passing this bill. Mahalo lui noa.

Sincerely,

Gwen Movarate Alamonick

Gwen Navarrete Klapperich, CPLP

HLTtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 9:35 PM
То:	HLTtestimony
Cc:	ogawag@hawaii.rr.com
Subject:	*Submitted testimony for SB2394 on Mar 18, 2016 09:00AM*

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Gail Ogawa	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

HLTtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 9:40 PM
To:	HLTtestimony
Cc:	nicoleapoliona@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing	
Nicole Apoliona, M.D.	Individual	Support	No	I

Comments: As the medical director of a Critical Access Hospital with over 100 LTC beds, I strongly support this measure. Vaccination and hand washing are basic infection control measures and our most effective tools for keeping influenza out of our health care facilities. Influenza vaccination of hospital workers is such an important and effective measure that it is a required quality measure for reporting at the national level for Critical Access, LTC, and Acute Care Hospitals. Our hospital worker vaccination rates will be compared to other hospitals in the state and nationally as a benchmark of the quality of care we deliver. Thank you for your consideration, Nicole Apoliona, M.D.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

HLTtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Friday, March 18, 2016 12:28 AM
To:	HLTtestimony
Cc:	southernbobs@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/18/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Robert J. Nerger	Individual	Support	No

Comments: I am in favor of passing SB2394.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Representative Della Au Belatti, Chair Representative Richard P. Creagan, Vice-Chair Committee on Health

Roderick Olivas Medical Student 94-568 Palai Street Waipahu, Hawaii 96797

Friday, March 18, 2016

Support for S.B. No. 2394, Relating to Influenza Immunization

My name is Roderick Olivas, and I am currently a first-year medical student. I strongly support S.B. No. 2394, Relating to Influenza Immunization, which would require annual influenza vaccinations for health care workers, while establishing exemptions under certain conditions.

Because of constant patient contact, healthcare workers should be required to be up-to-date with major immunizations, including influenza. Even we as medical students are required by our school to have annual influenza immunizations, as we also have patient interactions. Being immunized decreases the risk of acquiring and dispersing the virus to the public, especially those in populations who are at a greater risk of death – children under the age of five, and adults 65 years and older.

I am pleased to know that our legislature is considering the well-being of our public, notably our health and safety. As a future physician, I urge the committee to pass S.B. No. 2394. Thank you for this opportunity to testify.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 1:13 PM
То:	HLTtestimony
Cc:	mkassel 137@yahoo.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Misha kassel MD	Individual	Oppose	No

Comments: Dear Legislatures, I am writing to state opposition for bills SB2394 and HB1945, mandatory influenza vaccines for health care workers. My name is Misha Kassel, I'm a board certified practicing emergency medicine physician on Oahu at both Pali Momi and Kapiolani hospitals. I learned of this bill and honestly was quite shocked by it. In my practice one of the critical things I do is discuss risk/benefits of procedures and medications and alternatives for patients. I lay out risks of doing and not doing things and benefits of also doing same things. Then it is that person's health and I allow them to make an educated decision about their own health. Myself and other health care providers deserve that same choice. If a health car provider researches the influenza vaccine and after doing so decides that it is not what they think is best for them, that should be their choice and I support that. On the other side if a health care provider wants to get the influenza vaccine, that is also perfectly fine with me. Health care providers spend years studying science and then years practicing health care, with that experience they see many things. Influenza vaccine is one of the least effective vaccines we have in medicine and if a health care worker decides that they would prefer to protect themselves (and thus their patients, family and friends) by eating healthy, making sure to stay rested, getting vitamin c and d, nasal rinses or other ways of decreasing the odds of getting influenza and other illnesses we are consistently exposed to, they should have this right. I would not make rules on how legislatures do their job and I would expect the same level of professional courtesy and respect for my training and education. Thank you for taking the time to hear my argument and if you would like to discuss further or have any questions, please contact me. Sincerely with aloha, Misha Kassel Emergency Medicine Physician mkassel137@gmail.com

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 12:43 PM
То:	HLTtestimony
Cc:	clareloprinzi@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
clare loprinzi	Individual	Oppose	No

Comments: Aloha Representatives, I am Clare Loprinzi, a long time Cultural Healthcare Practitioner that specializes Traditional Midwifery with a degree in MCH (maternal child healthcare) from JABSOM. I strongly opposed SB2394 and your HB1945 companion bill. All other vaccine bills have died and this one needs to also. This bill is not only wrong because it forces our medical community practitioners to be forced to take an influenza vaccine and be " good examples" for their community patients as written in the bill. Too much already and thankfully so many do not believe in the poisons that are in vaccines, the GMO in the vaccines, the virus injected, the adjuvents and the effects that they have on our babies, children a pau. I am glad that health care practitioners are finally taking care of themselves and loving themselves to not inject this influenza vaccine into their bodies. I am glad that we have always had strong laau lapaau, ai pono and rest to heal ourselves if we got the flu and to avoid us to have the flu in the first place. We have our ways, our medicines and our protocols. Do not force your medicines or vaccines that are not effective. Take them yourself as many times as you want if they are so safe. Many of us have seen how ineffective they are. I am also a kumu and substituted for another kumu three months following the influenza vaccine given to her keiki at school. How wrong is that inoculating the whole school as you bring in medical folks to give this vaccination during school hours, and many of the keiki that are snorting it up their noses; sneezing it in the air and rubbing their noses and than touching toys, books, door nobs. The bill instead of pushing vaccinations should be about stopping this pharmaceutical exposure to our kiek at our schoolsi. I have also helped a pregnant mom literally fight for her life and keep her child growing recover related to taking this vaccine during pregnancy. We do not force you to believe in our medicinal ways, do not do that to any of us with your pharmaceutical medicines. Respect us as practitioners, all of us and our ohana, we demand it. Clare Loprinzi,

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From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 3:50 PM
То:	HLTtestimony
Cc:	laulani@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

SB2394

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Laulani Teale, MPH	Individual	Oppose	No

Comments: I strongly oppose this measure. Vaccines can be helpful in some situations, but mandatory vaccination is a violation of body sovereignty, particularly when there are serious risks of complications and yet-undiscovered side effects. Alternatives need to be fully explored first. Mahalo nui, Laulani

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 3:20 PM
То:	HLTtestimony
Cc:	drlorikimata@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Lori kimata	Individual	Oppose	Yes

Comments: Aloha, I am strongly opposing this bill because it is unconstitutional to require people to have chemical substances injected into their bodies if they have a strong religious or spiritual belief against doing it. People have a right to choose what they inject into their bodies.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 3:01 PM
То:	HLTtestimony
Cc:	kalikoamona@gmail.com
Subject:	*Submitted testimony for SB2394 on Mar 18, 2016 09:00AM*

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Kaliko Amona	Individual	Oppose	No

Comments:

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 4:05 PM
То:	HLTtestimony
Cc:	crystal_leilani@yahoo.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Crystal Leilani Dudoit	Individual	Oppose	No

Comments: I oppose bill SB2394. We should have the right to choose what we put in our body.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

My name is Maly Nakoa and I STRONGLY OPPOSE SB 2394, I represent 1 of 4,500 healthcare workers who are members of the Hawaii Nurses Association that also takes the stance of strong opposition against this bill AND Any bill supporting mandatory vaccines.

As a registered nurse of 19 years, one of the most important aspects of my job is patient safety and I know this is true for every healthcare professional who enters this field for the right reasons. That being said, protecting our patients begins with taking care of ourselves and many feel the flu vaccine is one such way. I know I believed this for many, many, years. That was until a series of personal events in my daughter's health forced me to look outside of conventional medicine after it miserably failed her for 21/2 years. Much personal learning was obtained through that time and through it I learned and continue to learn ways to improve my own health. I also learned at this time about the flu vaccine and how unpredictable it is from year to year. Directly from the CDC's own website, a table covering annual flu vaccine effectiveness from 2005-2015 showed a range from 10%-60% effective. Based on this information, their own data proves that on any given year the flu vaccine has a 40-90% failure rate. The reason being, again directly from the CDC, "recent studies show vaccines can reduce the risk of flu illness by about 50-60% among the overall population during seasons when most circulating flu viruses are like the viruses the flu vaccine is designed to protect". Even with their own data supporting otherwise, the vaccine is promoted as being highly effective. A prime example of this failure is last years abysmal 18% effectiveness rate. Despite its very low effectiveness rate the CDC continued to push this vaccine to the bitter end of flu season. Of course when you produce close to 200 million vaccines there is a lot of money to be lost if they go unused. the CDC also admits that "determining how well a flu vaccine works is challenging" and that "during years when the flu vaccine is not well matched to circulating viruses, it's possible that *no* benefit from flu vaccination may be observed." Flu vaccines target three to four flu viruses that are predicted to be the most common types for the upcoming flu season. However, there are over 300 kinds of flu viruses, and it takes your body from two weeks to three months to produce a full viral response to the vaccine. Three months after vaccination, the vaccine is essentially useless to your body's immune system, although the damaging, long-term side effects may last a lifetime. Flu vaccines also affect the unborn. Tragically, the rate of miscarriages among pregnant women who received flu vaccines during the 2009-2010 season increased 4,250 percent, a frightening statistic which was carefully hidden from the public by the CDC, until a CDC doctor was confronted and admitted that the CDC was aware of the spike in fetal deaths.

Another important fact is that our law says that you must do a double blind field study to prove *efficacy and long-term safety* yet when it comes to the flu vaccine the law for some reason is not followed! These studies cannot be done because every year a new flu vaccine must be produced based on the educated guesses of the scientist on what flu strains may be most prevalent for the upcoming flu season, hence the unpredictability. The law also states that you must tell people it is an experimental vaccine if there is no safety and efficacy testing. I had never been told, that the flu vaccines I had received in the past were experimental, have you? Where is the informed consent?

I also learned of the serious, if not life threatening side effects. 330 deaths have been reportedly caused by the flu vaccine, and over 103,000 adverse events have been reported, numbers that could realistically be increased significantly due to underreporting. One study of flu vaccine statistics shows that thirty percent of flu vaccines result in unwanted side effects, with up to six percent including serious effects such as hospitalization, permanent disabilities, paralysis, brain damage, increased risk of contracting swine flu, allergic reactions, narcolepsy, Guillain-Barre syndrome, increased risk of Alzheimer's disease, and death. It is we, the healthcare workers who care for these vaccine injured patients. I was even told by a hospital administrator that this is the reason they have one of the lowest flu vaccine compliance rates in the ICU, because they are the ones who care for the vaccine injured, i.e. the Guillain-Barre sydrome patients. It is the reason one of my co-workers refuses the flu shot. If you have to force educated healthcare workers to take a flu shot maybe it is time to pause and ask why?

I must also ask you why this bill was introduced and who introduced it.? Are you aware that the reason this bill is being so heavily pushed is because medicare reimbursement is directly tied to meeting a quota of vaccinated healthcare workers? While this has been presented under the guise of patient safety, that is clearly not the truth.

Healthcare workers must be permitted to refuse the annual seasonal influenza vaccination without fear of reprisal for medical, religious, or personal reasons. NOBODY should be forced to have to choose between a flu shot and their job. Although nurses and other healthcare workers have a duty and a right to protect patients, recent evidence shows mandatory flu vaccinations fail to provide any benefit. On its own website, Physicians, in the American Medical Association Code of Ethics, affirm philosophical and religious exemptions for themselves. Employees should not be discriminated against for choosing not to take a flu vaccine. The exemption clause for all these reasons should be extended to the healthcare worker and the masking policy for those exempted be removed. I have not found one study that proves masking healthy individuals reduces the spread of the flu vaccine. The only purpose it does serve is to make a healthcare worker so uncomfortable that they give in and take the flu shot. It is a manipulative and coercive tactic, nothing more, nothing less. Another concern that has been expressed by nurses I work with is, how would a psychiatric patient, one with possibly paranoia, or schizophrenia, or even pediatric patients, perceive a masked healthcare worker. Can you imagine a toddler having a masked nurse caring for him or her for 8-12 hours? Or have you ever tried to effectively communicate with a mask on, especially with someone who may have hearing impairment and may need to read lips. If a study does exist on the benefits of masking then based on the unreliability of the flu vaccine I propose that ALL Healthcare workers, vaccinated and unvaccinated mask for the entire flu season because isn't this what this policy is about preventing the spread of the flu virus?

Sincerely, Maly Nakoa, RN

March 16, 2016

To: Representative Della Belatti, Chair of the House Health Committee Representative Richard Creagan, Vice Chair of the House Health Committee
From: Cheryl Toyofuku
Re: Strong Opposition to SB 2394 relating to influenza vaccination
Hearing: Friday, March 18, 2016 at 9:00 am., Hawaii State Capitol, Room 329

I am a mother, grandmother, R.N., health advocate and I strongly oppose SB 2394. The required influenza vaccination of healthcare workers violates a basic ethical principle and human right to be able to make voluntary and informed decisions when considering invasive medical treatments (such as vaccines) which carry risks of injury and death. Here are other reasons why the State must not mandate vaccinations:

- VACCINE MANDATE Forced influenza vaccine mandates of health care workers is a trend sweeping our country. Although SB 2394 provides for medical and religious belief exemptions, another bill HB 1722 was introduced this session to remove vaccine exemptions for bona fide religious tenets and practices. The intent to mandate vaccines is evident, not only for health care workers, but eventually for the general public. Requiring vaccination as a condition of employment and/or including firing health care workers who refuse the influenza vaccine erodes the public trust in health and government officials.
- VACCINE INEFFECTIVENESS There is compelling evidence from independent reviews of many studies that the annual influenza vaccines are ineffective and offer little benefit to health care workers, patients or the public at large and cannot be used to justify forced influenza vaccination. The majority of influenza-like illnesses are caused by over 200 viruses and the vaccine at best might be effective against only influenza A and B. Influenza viruses constantly evolve and depending on the year, the vaccine may or may not match the strains associated with reported influenza cases.
- VACCINE RISKS Thousands of adverse reactions to vaccines are reported to the Vaccine Adverse Events Reporting System. For the influenza vaccine, there are more than 104,465 adverse reactions, 9037 hospitalizations, 2003 injuries & disabilities and 1,115 deaths. Adverse reactions include syncope, muscle aches & weakness, headache, arthralgia, gastrointestinal symptoms, lymphadenopathy, optic neuritis, allergic reactions including anaphylaxis, angioedema, rhinitis, laryngitis, cellulitis, nervous system disorders such as dizziness, paresthesia, hypoesthesia, hypokinesia, tremor, somnolence, Guillain Barre syndrome, convulsions/seizures, facial or cranial nerve paralysis, encephalopathy, limb paralysis, insomnia, dyspnea, bronchospasm, throat tightness, rash.
- VACCINE INGREDIENTS Influenza vaccines contain egg protein and avian contaminant viruses, formaldehyde (carcinogen), resin (known allergen), mercury in multi-dose vials (neurotoxic), triton X-100 (detergent), gentamycin (antibiotic), polysorbate 80 (allergen, infertility in mice), sucrose (table sugar), gelatin (known allergen), aluminum (neurotoxin), ethylene glycol (antifreeze used as a disinfectant)
- VACCINE POLICIES & PROFITS Public confidence in national vaccine policy makers, medical bureaucrats and health government agencies are at an all time low due to conflicts of interest, along with manipulation and misrepresentation of influenza vaccine science. The tax dollars spent to promote, purchase, distribute and enforce influenza vaccines guarantees huge profits for drug companies, but will not guarantee a healthier population. Industry profits should not be prioritized over public health safety.

As our lawmakers, you are encouraged to invest time, energy, research and resources into other health programs that promote healthy lifestyles and health care, instead of adopting policies that mandate toxic vaccinations.

Aloha,

I am writing to state opposition for bills SB 2394 and HB1945, mandatory immunizations for all health care workers. I am opposed any type of vaccinations. I see this as a measure for the pharmaceutical companies to make more money. The bill will force health care workers to take vaccines and be "good examples" for the community. I totally disagree to any type of mandating of immunization/vaccines. The pharmaceutical companies want the doctors to advertise their vaccinations so that their patients will buy in. I believe that my doctor should continue to be able to a make the decision about vaccination.

Please kill this bill.

Aloha, ALAPA'I

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 8:11 PM
То:	HLTtestimony
Cc:	dbwoodsluv@hotmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
denise woods	Individual	Oppose	No

Comments: Aloha, Please do not FORCE your healthcare workers to take a medication every year that is not even marginally effective. The flu vaccine does NOT prevent the flu, and mandating that people take a medication that is ineffective (at best) is not only insulting, it is a violation of our civil rights. There is no evidence that proves that the flu vaccine reduces the severity or incidence of influenza, it states this clearly right on the package insert that comes with the vaccination. Denise Woods, RN

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 7:29 PM
То:	HLTtestimony
Cc:	lanarobbins@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Lana Ululani Robbins	Individual	Oppose	No

Comments: Mahalo for this opportunity to testify in opposition to SB 2394. While wellmeaning forcing healthcare workers to obtain influenza vaccinations as a precondition to employment and on an annual basis in accordance with the latest recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention no later than the start of the influenza season would violate their right to privacy. According to the CDC the Seasonal Influenza Vaccine Effectiveness rates were as follows: 2012 to 2013: 49% 2013 to 2014 51% 2014 to 2015 23% http://www.cdc.gov/flu/professionals/vaccination/effectivenessstudies.htm/qa/vaccineeffect.htm The influenza vaccination is clearly not 100% effective especially from 2014 to 2015 which shows a 23% influenza vaccine effectiveness rate. Healthcare workers in Hawai'i should not be forced to be vaccinated. They should continue to have a choice if they want the influenza vaccine. They should not be forced to be vaccinated with a vaccination that will destroy their white blood cells which is integral for one's immunity. Mahalo for the opportunity to testify in opposition to SB2394.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 7:23 PM
То:	HLTtestimony
Cc:	clareloprinzi@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
dr jade mcgaff	Individual	Oppose	No

Comments: NO on SB 2394, HB 1945 I am a doctor for 34 years- Hawaii is desperate for doctors- don't make us leave by forcing us to put poisons in our bodies: so called 'vaccines', which contain aluminum, viral particles, formaldehyde, etc. There are NO double-blind, placebo-controlled studies proving that vaccines work. There is MUCH research all over the globe showing the harms.(Dr Suzanne Humphries; Dr Sherri Tenpenny). DO NOT force anything on any on our citizens without absolute proof that you do no harm. DO not make us lose Doctors in this state. Jade P McGaff, MD 808-640-1558 96743 Jade P McGaff

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 8:59 AM
То:	HLTtestimony
Cc:	jessica@stammnutrition.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Jessica Stamm	Individual	Oppose	No

Comments: This bill infringes on the individual's right to choose. The flu vaccine has the highest incidence of side effects and is not guaranteed to work. Mandating a yearly vaccine is a gross violation of personal freedoms.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 9:49 AM
То:	HLTtestimony
Cc:	tabraham08@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Troy Abraham	Individual	Oppose	No

Comments: Nobody deserves to forced to do anything against their free will. This steals their right to choice.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 10:10 AM
То:	HLTtestimony
Cc:	seeknfind@hawaii.rr.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Rita Kama-Kimura	Individual	Oppose	No

Comments: Representative Della Belatti, Chair of the House Health Committee Representative Richard Creagan, V.C. of the House Health Committee March 17th, 2016 Re: SB 2394 relating to influenza vaccination I am writing this in opposition to the passage of SB 2394 Each person has the right to decide what medical treatment they choose to have or not to have. With extreme limited exceptions, every person's body is considered sacred and every competent adult has the right to be free from unwanted forced medical treatment, especially when there is no guarantee that such treatment is free of any of adverse effects. Respectfully Submitted, Rita Kama-Kimura Mililani, HI

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

March 18th, 2016 at 9am Conference room 329

House of Representatives Committee on Health

To: Chair Della Au Belatti Vice Chair Richard P. Creagan and honorable committee members

From: Dr. Kimberly Haine of Healthcare Freedom Hawaii

Re: Testimony in Opposition to SB 2394; relating to Mandatory Influenza Vaccines

Aloha Honorable Representatives,

Thank you for your time and consideration in this very important matter regarding the basic human right to choose what medicine is put into ones bodies. I completely understand the desire to want to lessen the burden of influenza like illnesses in all public settings. The problem is that this is entirely and scientifically impossible! My clear reasons for strong opposition to this bill are as follows:

1.THE INFLUENZA VACCINE BY THE CDC'S OWN ADMISSION CANNOT STOP THE SPREAD OF INFLUENZA LIKE ILLNESSES: Last years strain was only 18% and 45% effective against the two strains A and B. There are over 200 strains of influenza-like viruses, that present with just as much morbidity and mortality to immunocompromised patients in a hospital setting. The vaccine does not cover them all.

"On February 26, 2015, updated interim influenza (flu) vaccine effectiveness (VE) estimates for the current 2014-2015 season were presented to the Advisory Committee on Immunization Practices (ACIP). The updated VE estimate against influenza A H3N2 viruses was 18% (95% confidence interval (CI): 6%-29%). This result is similar to the VE point estimate of 23%, which was reported in a January 16 Morbidity and Mortality Weekly Report (MMWR) and confirms reduced protection against H3N2 viruses this season. The VE estimate against influenza B viruses this season was 45% (95% CI: 14% – 65%)."

2. THIS IS AN "EXPERIMENTAL VACCINE" MADE NEW EVERY YEAR / IT IS NEVER PROVEN SAFE:

The annual vaccine is an educated guess by scientists the year prior, as to which 2-4 strains might be circulating the following year. Again from the CDC's own website:

" Determining how well a flu vaccine works is challenging. During the years when the flu vaccine is not well matched to circulating viruses, it's possible that no benefit from the influenza vaccine may be observed."

To prove *efficacy and long term safety* for the FDA, pharmaceutical companies usually have to perform placebo-controlled, double blind field studies that take years. Why are these procedures

and laws bypassed with the flu vaccine? See highlight from actual vaccine package insert below.

There is no scientific evidence showing that flu shots work.



3. IF HEALTHCARE WORKERS OPT FOR THE LIVE ATTENUATED INFLUENZA VIRAL (LAIV) VACCINE, THEY CAN ACTUALLY ASYMPTOMATICALLY SHED THE VIRUS FOR UP TO 4 DAYS....INFECTING THEIR PATIENTS.

4. THE INFLUENZA VACCINE IS THE MOST INJURIOUS VACCINE REPORTED:

From the National Vaccine Information Center (NVIC) and The Federal Vaccine Adverse Events Reporting System (VAERS):

"Using the MedAlerts search engine, as of September 30, 2015, there have been more than 104,465 reports of reactions, hospitalizations, injuries and deaths following influenza vaccinations made to the federal Vaccine Adverse Events Reporting System (VAERS), including 1,115 related deaths, 9,037 hospitalizations, and 2,003 related disabilities. In 2013 the Federal Advisory Commission on Childhood Vaccines (ACCV) voted to add GBS to the Vaccine Injury Table within the federal Vaccine Injury Compensation Program (VICP)." (GBS is Guillian Barre Syndrome a severe neurological disorder causing paralysis and death)

5. THE LANGUAGE OF SB 2394 IS IN CLEAR VIOLATION OF THE AMERICAN MEDICAL ASSOCIATIONS OWN CODE OF ETHICS:

"

Provide all health care workers with education about

the benefits of influenza vaccine and potential

consequences of influenza illness and maintain a

written policy regarding the annual influenza

vaccinations of its health care workers that, at a

minimum:

NO WHERE DOES SB 2394 REQUIRE HOSPITALS TO INFORM HEALTHCARE WORKERS OF THE RISKS INVOLVED OR THE ACTUAL AND TRUE EFFICACY OF THE ANNUAL INFLUENZA VACCINES.

A mandatory vaccination policy -- forced vaccination of unwilling recipients -- is, by definition, a medical intervention carried out **without the consent of the patient or the patient's parents**. This directly violates the very clear language in the *Informed Consent* section of the *AMA Code of Medical Ethics* which states:

"The patient should make his or her own determination about treatment... Informed consent is a basic policy in both ethics and law that physicians must honor, unless the patient is unconscious or otherwise incapable of consenting and harm from failure to treat is imminent."

6. THE MONETARY INCENTIVE BEHIND THIS VACCINE IS HIDDEN IN PLAIN SIGHT IN THE OBAMACARE DOCTRINE:

Hospitals are reimbursed at a 2% higher rate from Medicare and Medicaid if they reach a 90% vaccination rate of HCW.

IN CONCLUSION:

THE ANNUAL INFLUENZA VACCINE CANNOT STOP THE SPREAD OF THE MAJORITY OF INFLUENZA LIKE ILLNESSES IN A HOSPITAL OR ANY PUBLIC SETTING. SINCE WE ARE NOT GENETIC CLONES YOU HAVE NO IDEA WHO IS GOING TO SUCCUMB TO GUILLIAN BARRE SYNDROME OR ANY OF THE OTHER POTENTIALLY HORRIFIC SIDE EFFECTS, INCLUDING DEATH, FROM THIS VACCINE BEING FORCED ANNUALLY. SB 2394 IS IN DIRECT VIOLATION OF THE AMA'S CODE OF MEDICAL ETHICS RE INFORMED CONSENT.

Thank you again for your time and sincere consideration, Dr. Kimberly Haine

"

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 10:50 AM
То:	HLTtestimony
Cc:	tia.pearson@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
tia pearson	Individual	Oppose	No

Comments: I have friends who have received the flu shot & have gotten sick with the flu for weeks. One became paralyzed. So, no forcing people to take poison.

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I STRONGLY OPPOSE SB 2394 which would mandate health care workers receive a yearly flu vaccine.

As you know, vaccine manufacturers are not liable for vaccine injuries and vaccines are a medical procedure given to HEALTHY people so this risk needs to be extremely low compared to the benefit.

The flu shot is the most compensated vaccine for vaccine injuries and deaths in the National Vaccine Injury Compensation Program. According to the CDC, the 2014-15 flu shot was only approximately 19% effective.

Flu shots are invasive medical procedures and can induce a range of symptoms including Guillain-Barre Syndrome and anaphylactic reactions.

Many labor unions opposed mandatory flu vaccination for health care workers.

The Cochrane Collaboration concluded, "There is no evidence that only vaccinating healthcare workers prevents laboratory-proven influenza or its complications (lower respiratory tract infection, hospitalisation or death due to lower respiratory tract infection) in individuals aged 60 or over in LTCIs and thus no evidence to mandate compulsory vaccination of healthcare workers".

Nobody should be forced to have to choose between a flu shot and their job.

While this bill allows for a religious exemption it does not allow for a philosophical exemption and other current bills are already trying to eliminate the religious exemption. There should be a philosophical exemption in Hawaii for all vaccinations, otherwise we are just forcing a medical procedure with undisputed risks on healthy people.

The very reason for the bill is stated;

"Because health care professionals are looked to for guidance on good health practices, increasing the number of health care personnel in hospitals that receive the influenza vaccine sets a positive example that will encourage the community to proactively protect themselves from the flu. The purpose of this Act is to require annual influenza vaccinations for health care workers in hospitals who have contact with patients."

I find this statement very telling. If some health care workers choose not to be vaccinated because in their educated opinion they have decided the overall benefit is not worth the risk, then they will be forced anyway because it looks bad???

Furthermore, there is no science to show it will decrease the spread of flu to their patients. Being made to wear a mask is not only an act of trying to "shame them" it violates their medical privacy and there is NO medical evidence that wearing masks works. In fact, since the vaccine has such a low efficacy rate, it is just as likely that vaccinated workers can also come down with the flu, but would not be wearing a mask. Pregnant healthcare workers would be forced to choose between their jobs or what they may decide to be too big a risk to their baby's health, as has already happened in hospitals in other states.

In addition, the In addition, according to the CDC the nasal spray vaccine (Live Attenuated Influenza Vaccine [LAIV])

is NOT even reccomended for people who care for immunocompromised persons unless

they avoid contact with those persons for at least 7 days after getting the nasal spray vaccine.

Healthcare workers can become guinea pigs to new vaccines as this is an annual vaccine and new types are coming to the market. If someone is allegic to eggs they will be made to get the newest vaccine which is a recombinant vaccine which is approved for ages 18 and older however according the manufacturer it's value is not known because data demonstrating a decrease in influenza disease in persons 50 years and older after vaccination with Flublok are not available.

If the state is going to force vaccinations on health people without informed consent it better be for something that has a HUGE benefit and a very tiny risk and has been scientifically proven to be effective.

Lastly, this bill is not really meant to protect anybody. It is being lobbied for nationally because hospitals are required meet the guidelines set forth to reach 90% vaccination of all health care workers to get their medicare and medicaid reimbursement.

Hospitals already provide the vaccine for free and on site but are not convincing 90% of health care workers take them. Health care workers are not stupid, and this is not informed consent for a medical procedure, it is coercion. If they want more health care workers to get flu shots they will need to make better vaccines and show real scientific proof that the benefit outweighs any risk, especially when being used on an already healthy person where the risk needs to be tiny, the benefits very big and real liability for injury is available.

Please oppose this bill.

Thank you.

Marcy Koltun-Crilley R.N. Kihei, Hi 96753 <u>808-874-5644</u>

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 12:09 PM
То:	HLTtestimony
Cc:	andiandlen@Gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Andi Pawasarat-Losalio	Individual	Oppose	No

Comments: I oppose SB2394 forcing workers to take an influenza vaccination. First, influenza vaccinations do not work like HepB or chicken pox, it is actually one of the least effective vaccines available. Employees, people, need to have a right to choose how they will care for themselves, and there are alternatives to lessen the probability of getting influenza. Please note that even if a bill like this allows for exemptions there is no guarantee that an employee will be granted an exemption and therefore may be fired for not complying. There are many such cases as examples across the U.S. A personal example of the danger of mandatory vaccination is within the past 4 years our family was directed by a health care provder to never take the influenza vaccine because of learning of a reaction our mother had to a completely different vaccination where she had been temporarily paralyzed. Had either my sister or I taken an influenza vaccination before we found this out we too could have been at risk to such a reaction. Please do not force vaccinations, please give us choice. Thank you

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From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 12:07 PM
То:	HLTtestimony
Cc:	jmichthus@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Jessica McCormick	Individual	Oppose	No

Comments: Dear Representatives, I urge you to strongly OPPOSE SB2394. First, whenever there is a risk there should be a choice. The influenza vaccine has the highest number of reported injuries, so there is obviously a risk when getting this vaccine. The biggest reason you should oppose this bill is that it takes away healthcare workers' right to choose what is injected into their bodies at the risk of losing their job and livelihood. There are several other reasons you should oppose this bill: 1. Directly from the CDCs own website: the 2014-2015 flu vaccine was only 18%-45% effective depending on the two strains. "On February 26, 2015, updated interim influenza (flu) vaccine effectiveness (VE) estimates for the current 2014-2015 season were presented to the Advisory Committee on Immunization Practices (ACIP). The updated VE estimate against influenza A H3N2 viruses was 18% (95% confidence interval (CI): 6%-29%). This result is similar to the VE point estimate of 23%, which was reported in a January 16 Morbidity and Mortality Weekly Report (MMWR) and confirms reduced protection against H3N2 viruses this season. The VE estimate against influenza B viruses this season was 45% (95% CI: 14% - 65%)." 2. It's the most injurious vaccine reported: from (NVIC) National Vaccine Information Center "Using the MedAlerts search engine, as of September 30, 2015, there have been more than 104,465 reports of reactions, hospitalizations, injuries and deaths following influenza vaccinations made to the federal Vaccine Adverse Events Reporting System (VAERS), including 1,115 related deaths, 9,037 hospitalizations, and 2,003 related disabilities. In 2013 the Federal Advisory Commission on Childhood Vaccines (ACCV) voted to add GBS to the Vaccine Injury Table within the federal Vaccine Injury Compensation Program (VICP)." (GBS is Guillian Barre Syndrome a severe neurological disorder causing paralysis and death) 3. If healthcare workers opt for the Live Virus Nasal Spray vaccine, it will actually ENDANGER PATIENTS because they can shed the virus for up to 7 days post vaccination!! 4. According to OBAMACARE, hospitals will get reimbursed more for Medicare and Medicaid if they have a 90% vaccination rate. http://healthimpactnews.com/2013/are-mandatory-flu-vaccines-for-healthcare-workers-

part-of-obamacare-and-linked-to-financial-reimbursement-to-healthcare-facilities/ BOTTOM LINE: This vaccine should not be forced on healthcare workers at the risk of losing their job This vaccine does not work This vaccine has a terrible track record for
side effects This vaccine can actually transmit the virus to hospital patients/ not protect them This vaccine is simply about profit...not health Please oppose SB2394. Thank you, Jessica McCormick

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From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 2:35 PM
То:	HLTtestimony
Cc:	kona3gurl@yahoo.com
Subject:	*Submitted testimony for SB2394 on Mar 18, 2016 09:00AM*

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Reyes	Individual	Oppose	Yes

Comments:

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From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 2:30 PM
То:	HLTtestimony
Cc:	elenahanashiro@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Elena Hanashiro	Individual	Oppose	No

Comments: Please consider OPPOSING this bill for the following reasons: A co-worker did not get the flu shot but did get the flu and was told that even if she had gotten the flu shot it would not have covered her anyway. Her boyfriend also got the same flu as she did and he DID get the flu shot - so the flu shot did not help him anyway. Another co-workers husband got the flu shot and ended up getting Guillian Barre and had to be shipped over to a Honolulu Hospital. Another co-worker use to get the flu shot every year he worked here and every year he would get the flu after getting the shot. Until they can improve the flu shot from having all these side effects, I feel that I should not have to be forced to take the flu shot on the chance that I may be that person who suffers the side effects.

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March 17, 2016

RE: OPPOSE SB 2394

[as well as HB 1946 and SB 2393, HB 1910 and SB 2316, HB 1945, HB 1722—"Forced Vaccination Bills"]

Aloha Senators/Representatives/Committee Members/Hawaii Citizens,

It would be an understatement to say that it is disturbing that our **RIGHT TO INFORMED CONSENT** to medical care—the cornerstone of a freedom-loving society is being **THREATENED** by several current House and Senate bills pertaining to forced vaccination.

As a citizen who values my right to accept or reject medical intervention, and as the protector of my children's health and well-being, and as a registered nurse/advocate for my patients, I stand against what I deem to be impending medical tyranny.

The mainstream media, funded in large part by the pharmaceutical industry, has unfairly blacked out and distorted information that Americans and politicians desperately need to fairly assess vaccine safety and efficacy. Rational people would oppose such legislation in greater numbers if they were aware of the real cases of vaccine injury that are occurring at a rate that rivals the incidence of the vaccine-preventable diseases.

HPV, Influenza and other vaccines' destructiveness to health has received much attention in alternative media. If vaccines truly are safe enough to mandate for all, **HOW** does one explain the fact that the Federal Government has been forced to pay out **BILLIONS** of dollars in recent years to families of injured victims due to "Vaccine Court" settlements? What a great **SCAM** by the manufacturers—**they** cause, [and thereby acknowledge causation through their settlements] bodily harm and the **public** pays the bill!

I strongly urge you to watch the documentary "<u>The Greater Good</u>" to see a small sampling of the many lives that have been forever damaged and destroyed by adverse reactions to Gardasil. Please also watch another film entitled "<u>Bought</u>", which has helped to raise awareness of the grave problem of corruption of the health care system.

If you mandate Gardasil or any vaccine and do not allow for exemptions, you will put already vaccine-injured or immunocompromised individuals at risk for further injury. This undermines the principle of informed consent, which is unacceptable. Making people's employment and education contingent on their submitting against their own judgment to a vaccine with such questionable efficacy and safety is unacceptable. If vaccines work as well as we are told they do, it ought to suffice that one is protected as long as one gets the vaccine himself/herself. The fact that we are told that we need boosters and more boosters of various vaccines indicates that they do NOT necessarily work so well.

There ARE some very brave physicians and many health care practitioners who have been vocal and spreading the word to their colleagues and lay people not yet too brainwashed by corporate propaganda-masquerading-as-science about the potentially life-endangering or potentially life-threatening dangers of vaccines. Don't miss lectures [available for free on YouTube] by Dr. Sherry Tenpenny [<u>"Vaccination: What CDC</u> <u>Documents and Science Reveal"</u>], Dr. Russell Blaylock [neurosurgeon] [<u>"The Central</u> <u>Mechanism By Which Vaccines Induce Autism"</u>], Dr. Boyd Haley [researcher] on <u>Autism</u>, <u>Mercury and Thimerosal</u>, and Dr. Suzanne Humphries [<u>"Smoke, Mirrors and the</u> <u>(Disappearance' of Polio"</u>; Humphries' book entitled <u>Dissolving Illusions</u>] on the checkered history of vaccination with regard to both safety and efficacy.

BEWARE the physician [and politician!] who wants to push or mandate vaccines WITHOUT EVEN KNOWING THE INGREDIENTS AND THEIR KNOWN HAZARDS! Did you know that neurotoxic ALUMINUM is in vaccines including Gardasil, among other potentially toxic ingredients? Do you know what the potential adverse effects of aluminum are? Polysorbate 80? Sodium borate? Yeast protein? Fetal tissue? Monkey kidney cells? Don't miss the section in Dr. Blaylock's lecture [linked above] pertaining to SV-40—a virus that was transmitted to recipients of early polio vaccine; SV-40 was reportedly detected encapsulated in the brains of Alzheimer's patients on autopsy. Dr. Andrew Wakefield's professional reputation was publicly besmirched by mainstream media and his medical license in Great Britain was revoked after he reported a finding of measles virus particles genetically similar to those in MMR vaccine being detected in the gut linings of autistic children suffering severe gastrointestinal distress. [See him on YouTube speaking about his case before the Association of American Physicians and Surgeons at https://youtu.be/I67fWVrw8xU, among many other interviews with him.] It's hard to believe, and contrary to the principle of informed consent, but there are some PHYSICIANS who advocate strongly in favor of vaccines, yet seem oblivious to or ignorant of the presence of such toxins. I challenge you who would seek to mandate vaccines to look at vaccine ingredient lists and publicly certify their safety prior to voting in favor of these horrendous bills which potentially will result in injury to some people.

We ought not count on the manufacturers to be responsible for their own safety and efficacy testing, as we currently do by today's procedures. In her lecture, Dr. Tenpenny raised a warning flag about the use of unconventional control groups being tested in vaccine safety studies. Rather than giving sterile water or saline to a placebo/control group, **OTHER VACCINES HAVE BEEN GIVEN TO THE CONTROL GROUP**, **INSTEAD**! Health care workers should be taken aback to learn this most disturbing data point. This is NOT acceptable scientific practice, representative of the so-called "Gold Standard" of scientific inquiry—randomized, **placebo controlled**, double blind studies. This revelation would be a cause of concern to many, including healthcare workers, if they were aware of it.

Have you heard about and/or read about the CDC WHISTLEBLOWER, William Thompson, who revealed that he and fellow researchers simply threw in the trashcan what they deemed to be unfavorable data on MMR vaccine? He admitted they manipulated their study to hide a higher incidence of autism in African-American boys taking MMR. If your news sources haven't covered this story, you ought to consider changing to one or more that does; there are increasingly more people doing so and abandoning the propaganda-saturated corporate media that hides this information from us all. Although MMR vaccine is different from the influenza and HPV vaccines of focus here, the credibility of our regulatory agents and all their mandates is called into question by this alleged act of fraud. Why did this not yet result in a major congressional or criminal investigation, two years after the story broke? And why did only one member of Congress-Rep. Bill Posey of Florida-twice call for a wider investigation, to no avail? This neglect by regulatory officials and representatives foments distrust among the public. Media periodically hypes impending "global pandemics" which thankfully don't come to fruition, but which adds to the waning trust of regulatory agents and their blanket mandates.

We must not sacrifice ourselves nor our children to pseudo-science and propaganda.

I am writing to you to ask you to oppose 7 bills that combined could turn Hawaii into America's only FORCED vaccination state: HB 1946, SB 2393, HB 1910, SB 2316, HB 1945, SB 2394, and HB 1722.

FLU SHOT MANDATES FOR HEALTH CARE WORKERS

I urge you to also OPPOSE <u>HB 1945</u> and <u>SB 2394</u> which would mandate health care workers receive a yearly flu vaccine. "Health care worker" means all persons, whether paid or unpaid, working or delivering services in a health care facility, including contractors and their employees whose occupational activities involve direct or indirect contact with patients or contaminated material in a health care, hospital, or clinical laboratory setting.

The <u>flu shot is the most compensated vaccine</u> for vaccine injuries and deaths in the National Vaccine Injury Compensation Program.

According to the CDC, the 2014-15 flu shot was only approximately 19% effective.

<u>Multi-dose influenza vaccines contain thimerosal</u>, a mercury derivative and known neurotoxin. I and others have allergies to thimerosal. Would individuals with such allergies be forced to take a thimerosal-containing vaccine?

Flu shots are invasive medical procedures and <u>can induce a range of</u> <u>symptoms</u> including Guillain-Barre Syndrome and anaphylactic reactions.

Many labor unions opposed mandatory flu vaccination for health care workers.

The <u>Cochrane Collaboration concluded</u>, "There is no evidence that only vaccinating healthcare workers prevents laboratory-proven influenza or its complications (lower respiratory tract infection, hospitalization or death due to lower respiratory tract infection) in individuals aged 60 or over in LTCIs and thus no evidence to mandate compulsory vaccination of healthcare workers".

Physicians, in the <u>American Medical Association Code of Ethics</u>, affirm philosophical and religious exemptions for themselves. Employees should not be discriminated against for choosing not to take a flu vaccine.

Nobody should be forced to choose between a flu shot and their job.

HPV VACCINE MANDATES FOR KIDS

I urge you to OPPOSE <u>HB 1910</u> and <u>SB 2316</u> which would mandate that all students entering 7th grade in Hawaii receive at least one dose of HPV (human papillomavirus vaccine). These bills would also allow pharmacists to administer HPV Vaccines to children between the ages of 11 and 17 and require all insurance policies to cover 3 visits for HPV Vaccine.

HPV is a sexually transmitted virus and not contagious in a school setting so a school vaccine mandate is unnecessary. The vaccine is already available to anyone who wants it so legislative requirements are not necessary;

HPV infection is experienced by the majority of sexually active women and men and is naturally cleared from the body within two years by more than 90 percent of those who become infected;

Merck studied Gardasil for less than 3 years in about 1200 healthy girls and 1400 healthy boys under age 16; it was not tested in children with health problems or in combination with all the other vaccines routinely given to American adolescents;

Thousands of reports of unexplained collapse, seizures, muscle pain and weakness; disabling fatigue, paralysis, brain inflammation, rheumatoid arthritis, lupus, blood clots, multiple sclerosis, strokes, heart and other serious health problems, including death, <u>have been reported</u> after GARDASIL shots;

CERVARIX was studied for less than 6 years in fewer than 1200 healthy girls under age 15; it was not tested in children with health problems or when given simultaneously with other childhood vaccines;

Unexplained collapse, muscle and joint pain and weakness; fatigue; brain inflammation, reactive and rheumatoid arthritis, lupus, scleroderma, hypothyroidism; multiple sclerosis, optic neuritis, spontaneous abortions, heart and other serious health problems, including death, <u>have been reported</u> after CERVARIX shots;

It is not known whether <u>GARDASIL</u> or <u>CERVARIX</u> can cause infertility, cancer or damage genes.

REQUIRED VACCINATION FOR ALL

I urge you to OPPOSE <u>HB 1946</u> and <u>SB 2393</u> which, by replacing the word "may" with "shall", would require that the state director of health implement rules for vaccine requirements for the state of Hawaii that codify federal recommendations by the ACIP (Advisory Committee on Immunization Practices) within 90 days of the recommendation. These apply to everyone, not just school children.

I urge you to also OPPOSE <u>HB 1722</u>, which would eliminate the religious belief exemption to vaccination for public school students. This bill prohibits a parent from exercising their freedom of conscience that applies to their religious beliefs and obtaining a religious exemption for their child for one or more state required vaccinations.

There is No Compelling State Interest. There is no public health emergency or compelling state interest that justifies forcing vaccination by violating the right to freedom of conscience and personally held sincere religious beliefs.

High Vaccination Rates, Low Vaccine Exemption Rates. In the 2013-2014 school year, the <u>CDC reported</u> that an estimated 99% of kindergarten children in Hawaii had received five DTaP shots; 98.7% had received two MMR shots and 99.2% had received two varicella zoster shots, (The <u>CDC excluded Hawaii's rates in the 2014-2015 report</u>) The <u>CDC also reported</u> only 754 students had religious vaccine exemptions in the whole state, giving Hawaii the distinction of having one of the highest vaccination rates in the country along with low vaccine exemption rates.

Low Infectious Disease Rates. According to the CDC, in 2014 Hawaii had a pertussis incidence rate of <u>2.7 per 100,000 persons (38 pertussis cases)</u>, one of the lowest in the nation. Also according to the CDC, during the past year, Hawaii has had <u>zero cases of measles</u> reported.

No Other State Requires Everyone to Be Vaccinated. Exemptions Should be Expanded, not Restricted.

Vaccines Carry a Risk of Harm. Vaccines are pharmaceutical products that carry a risk of injury or death, a fact that was acknowledged by the U.S. Congress in 1986 when it passed the <u>National Childhood Vaccine Injury Act</u>. Since 1988, the federal vaccine injury compensation program created under that law has awarded <u>more than \$3 billion</u> to children and adults injured by vaccines or to families whose loved ones died from vaccine reactions, although two out of three who apply are <u>denied compensation</u>. The Institute of Medicine in a series of reports on vaccine safety spanning 25 years has acknowledged there is <u>individual susceptibility to vaccine reactions</u> for genetic, biological and environmental reasons that have not been fully defined by science, and

doctors often cannot predict ahead of time who will be harmed. Long standing gaps in vaccine safety research and emerging evidence that certain vaccines do not prevent infection or transmission of disease, urgently require legal protection of physician's rights and parental rights regarding medical and religious exemptions to vaccination for minor children.

Vaccine Manufacturers Have No Civil Liability. The 1986 law partially shielded drug companies selling vaccines in the U.S. from civil liability and, in 2011, the <u>US Supreme</u> <u>Court completely shielded vaccine manufacturers from liability</u> for FDA licensed and CDC recommended vaccines. There is no product liability or accountability for pharmaceutical companies marketing federally recommended and state mandated vaccines that injure Americans or cause their death, which makes <u>flexible medical and</u> <u>non-medical vaccine exemptions in vaccine policies and laws</u> the only way Americans can protect themselves and their children from vaccine risks and failures.

Many New Vaccines are Coming. The CDC's <u>childhood vaccine schedule in 1983</u> was 23 doses of seven vaccines (DPT, MMR, polio) given before age six, and the cost of vaccinating a child with all federally recommended vaccines was \$80 per child in a pediatric private practice. That cost has increased to about <u>\$2800 per child in</u> 2015 because the numbers of federally recommended vaccines for children has increased to <u>69 doses of 16 vaccines between day of birth and age 18.</u> There are <u>several thousand vaccine clinical trials</u> being conducted, including for infectious and non-infectious diseases such as gonorrhea, syphilis, chlamydia, HIV/AIDS, genital herpes, RSV, strep B, cytomegalovirus, hepatitis C, tuberculosis, e-coli, salmonella, asthma, diabetes, obesity, anti-cocaine and heroin use. Many of these <u>new vaccines in development</u> will be federally recommended for children.

Hawaii's Medical Exemptions are Too Strict to Use. The <u>CDC Reports</u> that 0 kindergarten students in Hawaii used a medical exemption in the 2014-2015 school year. Current law <u>\$325-34</u> only allows medical exemptions for 3 months after a duly licensed physician, physician assistant, or an authorized representative of the department of health has signed two copies of a certificate stating the name and address of the person and that because of a stated cause the health of the person would be endangered by the vaccination or immunization. This is too short a period of time for the medical exemption to apply for children with long term health problems or with a history of vaccine reactions. If the religious exemption is removed, this medical exemption is the only exemption that is available for school children. Physicians should not be time restricted by the legislature in exercising their professional judgement about medical exemptions for vaccination.

When there is risk of harm from a pharmaceutical product, especially a product that is marketed by companies completely shielded from civil liability, the parent's or individual's right to exercise conscience, religious belief and informed consent on behalf of a minor child or themselves must be legally protected. In light of the fact that vaccine risks are not borne equally by all due to known and unknown individual genetic and other biological or environmental susceptibilities, parental rights, individual informed consent rights, as well as those of a state licensed physician or designated vaccine provider to exercise professional judgment in protecting a child from vaccine injury and death, must be preserved in health policies and laws.

The least restrictive means for ensuring the public health and safety should be employed by the legislature to protect public trust in the wisdom and fairness of government policy and law. There is no public health emergency in Hawaii or compelling state interest that justifies the passage of these bills which would violate human, civil and parental rights.

Sincerely, Laurie West, RN BSN (Mother of a child previously diagnosed with autism)

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 1:41 PM
То:	HLTtestimony
Cc:	hlbpalmer@gmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Hillary Palmer	Individual	Oppose	No

Comments: Unless it's a public health crisis I don't support mandatory vaccinations.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

HLTtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 6:38 PM
To:	HLTtestimony
Cc:	wahine96779@yahoo.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Amy	Individual	Oppose	No

Comments: Dear Senators, I urge you to oppose Senate Bill 2394. The influenza vaccine is an ineffective means of preventing the flu. The influenza virus mutates in such a manner that no vaccine will ever offer immunity to the recipient. In addition, there are risks and adverse reactions associated with the influenza vaccine. I urge you to please veto this bill. Thank you.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.



Leonard G. Horowitz

13-3775 Kalapana Highway Pahoa, HI 96778 USA Phone: 808-965-2112 Email: len15@mac.com Website: DrLenHorowitz.com

March 18, 2016

RE: OPPOSITION TO HB 2394, MANDITORY INFLUENZA VACCINES FOR HEALTHCARE WORKERS PURSUANT TO REGULATORY CAPTURE AT THE U.S. DEPT. OF HEALTH AND HUMAN SERVICES, THE CDC, AND THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES.

TO: Honorable House Health Committee: Representatives Belatti, Creagan, Hashem, Jordan, Kobayashi, Morikawa, Oshiro, Fukumoto-Chang, Tupola

Hello, my name is Dr. Leonard Horowitz, I am a Big Island resident, Harvardtrain public health and emerging disease expert, and the first investigator worldwide to expose the scientific fraud underlying the 2009 H1N1 swine flu pandemic. I vetted the source of the "emergency" online very early in the matter, when the fright was still called the "Mexican Swine Flu." I discovered and republished material evidence of a commercial crime and mass mediated consumer fraud committed by certain drug industrialists; profiting Novartis and Astra Zeneca (among other companies) as I detailed on <u>FluScam.com</u>. I restate my opposition to the ongoing scientific and consumer fraud in the widely publicized claims of safety and efficacy of flu vaccines. I object as an expert in this field, and the author of eighteen books and six documentary films dealing with fraudulent concealments of drug industry secrets, related commercial crimes, bioterrorism risks, genetic engineering disasters, and damaging vaccination policies that are killing and maiming many more people than they are helping and saving.

The reason for this disparity between what you and your constituents may believe about vaccines versus what actual science evidences is called "regulatory capture" --our federal agencies including the CDC have been damagingly "captured" by agents of multi-national corporations profiting from humanity's suffering.

As you know, even Republican Presidential candidate Donald Trump has expressed concerns about children given too many vaccines; and Democratic contender, Bernie Sanders has expressed concerns about corporatism destroying America and our capacity to secure government operations for *We The People*. These matters relate directly to HB 2394, that would be best titled, "MANDATORY INFLUENZA VACCINES SERVING GENOCIDAL OBJECTIVES OF SPECIAL INTERESTS."

Reckless, irresponsible, seditious, and treasonous, best describes this railroading of health professionals into risky and damaging mandatory intoxications.

Think about the fact that flu vaccine makers require many months of research for development, manufacture, and distribution of flu vaccines that purportedly protect against strains that hadn't emerged yet when manufacturing decisions were made. So common sense compounds scientific evidence of flu vaccine industry *fraud* and vaccine inefficacy that has been consistently below placebos. Yet, everyone injected suffers risk and immunological challenges that are commonly damaging, un-studied in

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the long-term, and even deadly.

Furthermore, alternatives to risky vaccines and deadly antibiotics have been criminally neglected and maliciously discredited as a sure sign of unfair competition and deceptive trade. The wonderful world of natural medicine, and especially "advanced silver hydrosols" as an alternative to flu vaccines, has been generally overlooked by vaccine pushers and their disciples in organized medicine. These agents of deception have done a marvelous job disparaging alternatives.

Accordingly, please don't trash civility, democracy, scientific evidence, and common sense, in favor of corporatism advancing mandatory vaccinations. Legislative indifference to corporate influence is unconscionable, as is covert complicity, and potentially lethal administrative processes determining what shall be injected into citizens' bodies.

Big Pharma/Big Biotech is intolerant of citizens' religious beliefs, cross cultural philosophies, conflicting science, and natural medicine. Clearly, profiteers have sponsored this bill, and provided campaign financing to advance this ilk of legislation. The CDC and members of ACIP that sets the vaccination schedule are infamous for concealing and leveraging conflicting interests, and wildly libeling honorable scientists and whistleblowers like a finely tuned protection racket.

Special interests that have similarly corrupted the National Conference of State Legislatures that has spurred this legislation and advancing vaccine mandates. NCSL Foundation supporters in 2013 included Bill Gates, whose foundation contributed

more than a half million dollars to advance related laws after the Microsoft and the MSNBC king pin lectured on the capacity of vaccines to depopulate fifteen percent of humanity. And now the push for mandatory vaccination intoxications for depopulation has come to Hawaii where the Chairwoman of the Senate Commerce and Consumer Protection Committee, Rosalyn Baker, sponsored this bill as the recipient of bribes from Pfizer and Monsanto-special interests who contributed to Senator Baker's campaign far beyond the "aggregate contributions" limit, to get the Chairwoman to push this risky bill forward to you in the House. The lobbyists guilty of the felony of bribery in Senator Baker's case include the lobbyists for Capitol Consultants and gambling in Honolulu, George A. Morris and John H. Radcliffe, whose fraudulent concealments with Senator Baker include Blackrock, Inc.—the world's largest money management group that holds major interests in not only Pfizer, the parent company of Monsanto, but also a major institutional investor in Intrexon, the owner of Oxitec that manufactures the genetically modified mosquitoes, originally developed to have mosquitoes transmit vaccines. But due to public outrage, the company has now solicited Dr. Sarah Park of the Hawaii Health Department to collaborate in proposed releases on the Big Island, or in collaboration with the University of Hawaii, to allegedly fight dengue fever, that Asian researchers correctly predicted would cause genetic recombinations and mutations associated with cross infections in mosquito, humans, and animals that could cause what we are now looking at-Zika.

In essence, I close by stating emphatically, you do not know what you are doing if you vote for this bill; your intelligence has been skewed by either bribed agents or academically-indoctrinated, effectively mind-controlled, health officials that simply

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regurgitate the propaganda. Wake up, or otherwise be complicit in genocide and watching your family, friends, children, and community increasingly become ill, mentally retarded, and immunologically compromised, damning every Hawaiian and people worldwide to suffer physically, mentally and economically to the ravages of institutionalized bioterrorism and "iatrogenocide"—physician-induced mass murder.

Thank you, in advance, for acting in good faith and good conscience by rejecting HB 2394.

Sincerely yours in accordance with public duty,

Some Contract

LEONARD G. HOROWITZ, DMD, MA, MPH, DNM (hon.), DMM (hon.)

Hawaii Senator Roz Baker Caught in Bribery Scandal with Pfizer/Monsanto Lobbyists

Mandatory Vaccination Opponents Charge Hawaii Senator Roz Baker and Capitol Consultants Lobbyists with Bribery and Campaign Financing Fraud

by

Sherri Kane, Leonard G. Horowitz, and Anonymous Attorneys

HONOLULU, HI—Political activists opposed to forced vaccinations for children and healthcare workers have unearthed evidence indicting State Senator Rosalyn Baker and Capitol Consultants lobbyists for multiple counts of campaign financing fraud and bribery, according to the group's spokesperson Dr. Leonard G. Horowitz, a Big Island resident, consumer protection advocate, and public health expert.

The ad hoc group's investigation into Senator Baker's campaign financing records revealed that the Chairwoman of the Senate Commerce and Consumer Protection Committee sponsored a series of mandatory vaccination bills after concealing three investments in Blackrock Inc.—a company heavily invested in Pfizer/Monsanto that produces genetically-engineered vaccines. The conflicting stocks, valued at more than a quarter million dollars, compound large campaign contributions exceeding the senator's "aggregate contributions" limit.

The State financial records linked below evidence Sen. Baker misrepresented her valuable "iShares" of stock, concealing Blackrock, Inc, whose name she was to have disclosed on her campaign finance forms.

Investigators learned by examining State records that during Sen. Baker's last election cycle, 2012-2014, more than \$6,000 was given to her by the Capitol Consultants "aggregate." That is at least \$2,000 beyond the senator's legal limit.

Even if a \$1750 Pfizer donation was eliminated, the senator still exceeded the limit by at least \$500.

"That may not seem like much," explained investigative journalist Sherri Kane, "but if you speed only 6 miles beyond the limit and get caught, you still get a ticket and have to pay the penalty. Then, if you tell the officer a bunch of lies, while hiding drugs in your trunk, you may have to go to jail."

Sen. Baker's troubles are metaphorically similar. Her leading campaign donors are linked to three lies-misrepresentations on her financing statements submitted to the political oversight committee. These three *misdemeanors* conceal Blackrock, Inc., heavily invested in Big Pharma and Big Biotech that is trafficking "genetopharmaceuticals"-geneticallymodified microbes, vaccines, and even mutant mosquitoes to fight dengue.

Blackrock-the world's largest money management group holds major interests in Pfizer drug company, the parent of Monsanto, that, through Capitol Consultants (i.e., Honolulu lobbyists George A. Morris and John H Radcliffe) the vaccine industrialists influence elections and push new legislation. Unfortunately for Senator Baker, these money-managers purposely concealed their association, and the "drugs" in Baker's "trunk," in violation of several rules and laws.

Lobbyists, Political Payoffs and Bribes

The political payoff scheme shows Senator Baker withholding the name of Blackrock, Inc. to conceal her knowledge that her more than a quarter million dollars in "iShares"—Blackrock securities—conflicted with her duty to protect consumers from drug industry special interests and Morris/Radcliffe's powerful political influence. Under their scheme, bribery moved Baker to sponsor laws requiring mandatory vaccinations.

Morris and Radcliffe are Hawaii's leading lobbyists. They work as principals in two presumably *separate companies* using the same phone, same fax number, and same office address at 222 South Vineyard Street, Suite 401, Honolulu, HI 96813-2453, according to campaign financing records unearthed by the investigators. Radcliffe, who pushed for <u>gambling casinos in Honolulu</u>, works for three closely connected lobbying firms: <u>Radcliffe and Associates</u> — "specializing in legislative and executive branch advocacy at all levels of government;" <u>Capitol Consultants of Hawaii</u>; and <u>G.A. Morris</u>, the latter run by Radcliffe's partner, George "Red" Morris.

The revealing documents evidencing Senator Baker's misrepresentations and the Radcliffe/Morris bribes are downloadable below (online at JudicialCorruptionNews.com).

According to <u>Hawaii Revised Statutes §11-412(b)</u> any scheme to conceal such information in efforts to secret excessive aggregate campaign contributions for any election cycle would be a *Class C felony*.[1] That's far worse than a traffic ticket.

Per Hawaii Advisory Opinion 05-01, State Election Officials must consider Federal Election Commission Rules (CFR 110.3) for adjudicating conflicts of interest; in this case, as to whether Morris's and Radcliffe's contributions were financed, maintained or controlled by the same entity--Capitol Consultants-on behalf of Blackrock/Pfizer/Monsanto.

The records show that the set of specious contributions were issued for the same amount, on the same day, by the two men, Morris and Radcliffe, concealing their complicity in the crime. This is *key* evidence to prove a campaign finance fraud conspiracy requiring FEC investigators to consider bribery.

According to the investigators' lead counsel, who asked to remain anonymous after discussing these matters with other lawyers and officials at the State of Hawaii Ethics Commission and Campaign Spending Commission, Sen. Baker's incomplete, inaccurate, and potentially misleading filings should, by law, compel the Campaign Spending Commission to investigate the Senator for violations of <u>Hawaii Revised</u> <u>Statute § 11-204 (f)[2]</u>. This law covers Campaign Contribution Limits, with section 11-361 restricting aggregate contributions to no more than \$4,000.

It would appear that Senator Baker's campaign filings also violated <u>HRS §</u> <u>11-333 (2)</u>. At minimum, the lawmaker failed to exercise due diligence in ensuring contribution amounts were added correctly and source disclosures were not missing or, like Morris and Radcliffe, not compliant.[3] The purpose in these important laws is to stop lawmakers from concealing their aggregate contributions, expenditures, and financiers with common interests that might sway elections, statutes, and the administration of government. Otherwise, voters could easily be duped, and citizens' groups prejudiced by their inability to compete financially with lobbyists to gain political influence.

Fraud and Crime Headed for the Governor's Signature

Senator Baker defrauded Hawaii voters and fellow legislators into believing that she served consumers' best interests; when, in fact, the pending new laws restrict parents and health care workers from making decisions about vaccinations. As many as seven new vaccination laws have advanced during the past several months to prevent religious people and philosophical objectors from opting out of vaccination programs targeting children and hospital workers. These actions sharply conflict with civil rights and Constitutional doctrines first raised in *Jacobson v. Massachusetts*, which Dr. Horowitz insists must now be revisited in lieu of this emerging evidence of political corruption, consumer fraud, and "regulatory capture" at the CDC undermining vaccine safety and efficacy and the rationale behind "herd immunity."

The pending legislation contractually compels vaccinations, but it is now void due to fraud, since fraud voids all contracts.

Many California voters are similarly <u>calling for recission of SB 277</u> that Governor Brown signed before considering matters of consumer fraud by officials, such as <u>Dr. Paul Offit</u>, whose conflicting interests appear to influence the American Academy of Pediatrics that sets the childhood vaccination schedule. The increasing number of shots being increasingly opposed by doctors and educators have become a presidential election issue after Donald Trump objected to the now 49 injections of 14 <u>vaccines</u> recommended by age 6; 69 by age 18.

Governor Ige will be ethically-challenged to sign the bills sponsored in "bad faith" and passed largely through Senator Baker's fraud and crime. Under the circumstances, the Governor's duty is to block the legislation, or otherwise be complicit in the crime. The governor must now lawfully direct Attorney General <u>Douglas Chin</u> to investigate and prosecute the violators on behalf of the <u>State of Hawaii</u> <u>Office of Elections and Campaign Spending Commission</u>, based on the clear and convincing evidence of fraud and crime confirmed by officials who conferred with investigators after examining the State's records reprinted herein.

"Health scientists are required to openly divulge their conflicting interests," Dr. Horowitz commented. "Fair play requires lawmakers to do the same. Citizens should not have to search through stacks of records and hire lawyers to discern conflicting interests and campaign financing violations. Legislators' conflicts of interest should be made known, right up-front, especially concerning bills impacting public health and safety."

The series of pro vaccination bills spurred by Sen. Baker's financiers include SB 2316 and SB 2394, paired with House Bills 1722, 1910, 1945 and 1946. These were pushed by the Maui senator along with others who received Pfizer/Monsanto "graft" including: Josh Green, Michelle Kadani, Sylvia Luke, Suzanne Chun Oakland, Matthew Lopresti, Gil Keith-Agaran, Della Au Belatti and John Mizuno. Baker and Green received the lion's share.

Nearly everyone expected the bills to pass both branches of government, and then gain Gov. Ige's signature to become law. Now the legislation, by law, must be delayed by litigation(s) and criminal investigation(s).

Bribery is a Class B felony under <u>Hawaii Revised Statute § 710-1040 (2011)</u> [4] This means that lobbyists Morris and Radcliffe, Senator Baker, and possibly others, may go to jail for the damage they have done to good government and the public's trust.

-End-

Editor's Note: This matter of Blackrock, Inc.'s involvement raises related concerns unfolding on the Big Island of Hawaii where the release of genetically-modified mosquitoes is being considered in the wake of the dengue fever outbreak. See footnote [5].

STATE OF HAWAI

	Leiopapa 2358, Beretar Honninh Phone:	NDING COMMISSIC A Kamehameha 55 Street, Roem 30(- 568) 586-9285 508) 586-9285 508) 586-9285	N.		
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LEONARD G. HORO Nume (Cempi 13-3775 Pahoa-Kalapa	WITZ alnaar;	AINT FORM ROSALYN H. BAI HAWAII; RADCLI NEER OF COLLINGE 600 415 S Beretania Honolulu, HI 96	FFE and ASS ay or Individual opain mulain (Respondent) St # 231,	OC.; G.A. M(JLTANTS OF DRRIS.
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Pahoa, HI 96778	е. 	222 South Viney Honolulu, HI 96	ard Street, Su 813-2453	ite 401,	
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(808;965-2112	310 877- 3002	1808 [531 -455]	(808)	586-6070	
Residence Phone	Business Phine	Residence Plann	Dusiness	Phone	

The complaint must be completed by including the following items. Attach the information to this complaint form.

- L. Cite the law(s) or rule(s) that you believe has been violated. HRS §11-412(b); Federal Election Commission Rules (CFR 110.3); HRS § 11-204 (f)[2]; HRS § 11-333 (2); HRS §11-361; HRS § 710-1040 (2011)
- Provide a specific and detailed statement of the complaint, and the reasons why the law(s) or П. rule(s) has been violated. Aggregate campaign financing exceeded \$4,000 limit for present cycle. Corporte name of Blackrock concealed from financial disclosures. Election rigged by fraud, fraudulent concealments, in favor of special interest groups and vaccination legislation in violation of \$710-1040 Provide a complete description of the incident or evidence to support the claim that a specific law or rule has been violated, including all dates and parties involved. ΤΠ.
 - See attached investigation report.

 \mathbf{W} Attach all documents or other data that you believe supports the complaint, heritaliag the originals whenever available. If the djourneries or other data on which you rely is not in your possession, please provide specific information regarding their location and accessibility.

Provide a statement of the addion requested of the remerly you desire. ۲.

Violators must be prosecuted to the fullest extent of the rules and laws cited. Criminal investigation must follow referral to Attorney General's office for prosecution. Gov. Ige must be alerted pursuant to the fraudulently derived legislation. Complaints made on behalf of another individual or organization must have the express autoprization to represent such individual for organization.

FLERSENCES COMENTICLES STATE NO

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HLTtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 5:52 PM
To:	HLTtestimony
Cc:	edward.l.kekoa@hawaii.gov
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Edward Kekoa Jr	Individual	Oppose	No

Comments: Strongly Oppose this Bill!!

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

HLTtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 4:32 PM
To:	HLTtestimony
Cc:	jadesky7@hotmail.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing	
natasha sky	Individual	Oppose	No	

Comments: I oppose this bill. It violates our personal freedoms. It violates our human rights. Vaccines must be A choice not a mandate. When there is risk and when vaccines are classified as unavoidably unsafe and pharmaceutical companies are not held liable for any damages, it is highly unethical to force an individual to inject these foreign substances into their body. Instead, please provide Hawaii's health care workers with additional education to prevent spreading illness. Lets not allow big Pharma to influence political decisions. The push for Mandatory vaccine laws is by big Pharma- not the people of America and most definitely not the people of Hawaii. Thank you for making the right decision and what's right for the people . Please help us keep our rights and our freedoms .

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Dear Legislatures,

I am writing to state opposition for bills SB 2394 and HB1945, mandatory immunizations for all health care workers. My name is Shantel Kimi and I was born and raised in Hawaii and chose to further my education in Grand Junction, Colorado as an Intensive Care Unit (ICU) Registered Nurse (RN).

I recently left a state that mandated all health care workers to be immunized and returned to a state that does not. I was disappointed when I learned that the State of Hawaii would consider taking away my individual rights to make educated decisions about my health and my body once again. In Colorado, I was forced to receive a three shot series of Hepatitis B vaccinations in order to be employed due to my blood titer not being high enough for immunity. I received this vaccination as a young child and have gone my entire life without immunity, only to find out that after receiving a second dose at 22 years old that I still am not immune to the virus. With that being said, I do not believe that the effectiveness of vaccinations is true or necessarily works for all people who receive them. Bills SB2394 and HB1945 would place myself and many other healthcare providers in a situation where we feel that our jobs and our livelihood is threatened due to mandates of vaccinations that may not ever work. And I for one do not want to be in that same situation where I question if I should seek out a career in a different field, especially because of the shortage of health care workers in the State of Hawaii.

As a RN, I was taught to always respect each patient's right and decision to refuse any medication after thorough education was provided, including immunizations. I feel that it is unjust and unfair to dismiss my individual decision to refuse immunizations in this situation where I would be no different than a patient.

One of the critical things I do as a RN is discuss the risks/benefits of medications and procedures, and empower patients and families to make educated decisions in the best interest of their families and their own personal values. We give our patients the dignity to decide for themselves. Myself and other health care providers deserve that same dignity and respect.

I feel that to dictate what medication and vaccine we are to put in our bodies is unconstitutional and takes away our freedom to choose what is in the best interest of our health. Many measures may be implemented to prevent the spread of influenza that does not require a mandated annual flu vaccine which is constantly being altered because it is not proven to be 100 percent effective. What we as health care providers, patient advocates and community members should focus more on is educating and empowering individuals rather than requiring and taking away individual freedoms.

I simply ask for your confidence that myself and other health care providers will always act in the best interest of our patients, but remember that we must do what we feel is the right thing to do for our own bodies whether it be making our own choice to refuse vaccinations or accept them.

Thank you and I appreciate you taking the time to see and understand my perspective on this issue.

Sincerely with aloha,

Shantel Kimi Registerd Nurse

shantel.kc91@gmail.com

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 16, 2016 11:27 AM
То:	HLTtestimony
Cc:	littlelongon@yahoo.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/16/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Miles Greenberg	Individual	Comments Only	No

Comments: Dear Honorable committee members, Please OPPOSE this draconian measure until long term studies unequivocally demonstrate efficacy. The Cochrane Collaboration's Tom Jefferson, MD and Peter Doshi, PhD's report in the British Medical Journal casting legitimate doubts on this dubious policy and the flu vaccine. The Atlantic magazine's review in November 2009 corroborates the foregoing researchers' more recent findings. If you require health care workers to be required to receive up to date flu vaccine shouldn't you require this of all visitors to the hospital? Please OPPOSE this bill

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

HLTtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 17, 2016 9:49 PM
To:	HLTtestimony
Cc:	unclegerald2004@yahoo.com
Subject:	Submitted testimony for SB2394 on Mar 18, 2016 09:00AM

<u>SB2394</u>

Submitted on: 3/17/2016 Testimony for HLT on Mar 18, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Gerald Nakata	Individual	Comments Only	No

Comments: Forced Influenza Vaccination is about money, not welfare. The marketing behind Force Vaccinations is intentionally misleading. Forced Vaccinations of Healthcare Workers will NOT benefit patients or Healthcare Workers. When a 'potential patient' comes to the hospital, they would be hospitalized only if their symptoms meet hospital guidelines, and these guidelines are pre- determined by the insurance companies; likewise, even the length of hospital stay is pre- determined by insurance companies - Today's Healthcare is money driven; thus patients is discharged as soon as possible, so Forced Vaccinations would only benefit pharmaceutical companies that are vigorously lobbying Forced Vaccinations internationally. "Patient welfare" is not their "intent", it's their "sales pitch," and their motivation is not "patient welfare", their motivation is money. The government wasting money on "feel-good-do-nothing" laws usually don't bother me anymore, but vaccines have real and severe health risks. I've been a nurse for over twenty years, and I've cared for flu vaccinated patients who experienced severe permanent nerve damage, requiring them to be placed on breathing machines for months; even if it's a low risk, because of its severity, this risk should be determined by the individual, not the government pandering. I've noticed that pharmaceutical companies have encouraged respected doctors and medical facilities to support Force Vaccinations, but it's expected, pharmaceutical companies stand to make a lot of money, so they are spending a lot of money to hopefully make more money. Currently hospitals are getting kickbacks for the percentage of employees they get vaccinated, but corporate pandering aside, even the smartest doctors, with the highest of degrees, from the most prestigious of universities cannot change the nature of vaccines or viruses: Just because someone is vaccinated doesn't mean that person would be immune to infection, they can still become infected, sometimes by the vaccine, and they can still pass on the virus to others. Last year's flu vaccine was only 23% effective; however, the pharmaceutical company got 100% paid, and since they weren't held accountable for the vaccine's poor performance, they were able to compensate the hospitals for their help in those sales. As explained earlier, in today's money-driven healthcare structure, forced vaccination of could only benefit pharmaceutical companies and the medical facilities who are currently getting kickbacks. Which brings to mind another question, and that is; Senator Baker, Senator Tokuda, Senator English, Senator Gabbard, and Senator Keith-Agaram - how much kick-backs are you getting? Never mind, don't answer because no one will believe you. Attention all senators of Hawaii: Forced Flu Vaccinations is not about patient's health or anyone's health, it's about money. Hawaii Healthcare Workers have been targeted by multimillion dollar pharmaceutical corporations, and you're suppose to protect us from them, not pander to them. OPPOSE Forced Influenza Vaccination: SB 2394 & HB 1945.

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