



**2022 SESSION
POSITION PAPER**

BILL: HB 819 – Public Health – COVID-19 and Other Influenza-Like Illnesses – Antibody Tests
COMMITTEE: House – Health and Government Operations

POSITION: Letter of Information

BILL ANALYSIS: HB 819 would allow an individual to use a positive antibody test to satisfy a vaccination for COVID-19 or other influenza-like illnesses.

POSITION RATIONALE: HB 819 would allow the use of positive antibody tests to satisfy COVID-19 vaccination requirements. The FDA recommends antibody tests as a means of calculating the percentage of a population who have been previously infected with COVID-19, but antibody testing should not be used to confirm prior infection in a specific person. People can falsely test as “antibody positive” even though they have never been infected with COVID-19. Even in those who can be confirmed to have had COVID-19 through PCR testing at the time of illness, antibody levels months later do not predict ongoing protection against COVID-19.¹ Vaccination status remains the most reliable indicator of protection against COVID-19 and other influenza-like viruses.

While previous infection does confer some degree of immunity, it does not necessarily protect from reinfection. RNA viruses such as SARS-CoV2, the virus that causes COVID-19, are prone to mutating during replication, giving rise to alternate strains that can result in reinfection. A November 2021 study showed that infection rates in unvaccinated adults who had a prior COVID-19 infection were 5.49 times higher than in vaccinated adults with no prior COVID-19 infection.² In addition, even in previously infected individuals, receiving the COVID-19 vaccine offers a substantial benefit. An August 2021 study showed that in people with a history of COVID-19 infection, those who were not vaccinated were more than twice as likely to be reinfected compared with those who were fully vaccinated.³

Studies have shown that immunity wanes over time and that there are no FDA-authorized or approved tests to reliably determine the degree of protection from a previous infection. Allowing antibody testing to serve as a substitute for vaccination not only leaves those individuals at greater risk, it places others, particularly immune-compromised individuals, at increased risk of contracting the virus from those with false-positive antibody testing.

The Maryland Association of County Health Officers submits this letter of information for HB 819. For more information, please contact Ruth Maiorana, MACHO Executive Director at rmaiora1@jhu.edu or 410-937-1433. *This communication reflects the position of MACHO.*

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¹Center for Devices and Radiological Health. (n.d.). Antibody testing not recommended to assess immunity after vaccination. U.S. Food and Drug Administration. Retrieved March 6, 2022, from <https://www.fda.gov/medical-devices/safety-communications/antibody-testing-not-currently-recommended-assess-immunity-after-covid-19-vaccination-fda-safety>

²Bozio, Catherine H., et al. "Laboratory-confirmed COVID-19 among adults hospitalized with COVID-19-like illness with infection-induced or mRNA vaccine-induced SARS-CoV-2 immunity—nine states, January–September 2021." *Morbidity and Mortality Weekly Report* 70.44 (2021): 1539.

³Cavanaugh, Alyson M., et al. "Reduced risk of reinfection with SARS-CoV-2 after COVID-19 vaccination—Kentucky, May–June 2021." *Morbidity and Mortality Weekly Report* 70.32 (2021): 1081.

⁴Zhong, Diana, et al. "Durability of Antibody Levels After Vaccination With mRNA SARS-CoV-2 Vaccine in Individuals With or Without Prior Infection." *Jama* 326.24 (2021): 2524-2526.