Testimony in favor of Maryland HB 0699 with Proposed Amendment State and Local Government And Public Institutions of Higher Education – Proof of Vaccination – Prohibition (Vaccination by Choice Act)

Nicole M. Johnson, MD Cleveland, OH 44119

Honorable members of the Maryland General Assembly Health and Government Operations Committee

I am a board-certified pediatric intensive care physician in support of the Vaccination by Choice Act.

The COVID vaccine and bivalent booster provide limited <u>protection against viral transmission</u>, and instead benefit recipients in potential risk reduction of hospitalization and/or death. The degree of protection varies based on various factors, including age, underlying health conditions, and infection-acquired immunity. It is well established that <u>COVID risks have a steep age</u> <u>gradient</u> with the highest risk of severe illness and death being to those over the age of 65. The risk of severe illness and death from COVID-19 for an individual is best assessed by that individual in consultation with their health professional.

Case, hospitalization, and death rates have all significantly declined from pandemic levels. Numerous states and the President of the United States have ended or plan to soon end emergency declarations for the COVID-19 pandemic.

Though data hasn't been updated since the spring of 2022, CDC data shows that population immunity is <u>widespread</u> with current vaccination rates and naturally acquired immunity. <u>Multiple studies demonstrate</u> evidence that infection-acquired immunity is equal to or superior to vaccine-acquired immunity. Since the primary vaccine series utilizes the ancestral strain of COVID-19 to induce immunity, it is unlikely that vaccinating a person who recovered from a newer strain will provide a measurable immunological benefit.

Additionally, the CDC has not demonstrated any evidence that booster doses of COVID-19 vaccines benefit individuals younger than 50. Booster efficacy rapidly declines weeks after dosing, and there is no evidence of long-term effects of serial booster doses. Dr. Paul Offit, a well-respected authority on vaccination recommends against using boosters to prevent infection in those who are least at risk for severe illness and death.

Adverse events of the available vaccines, though rare, have been documented and their prevalence and potential long-term effects continue to be studied. Multiple countries, including

<u>Denmark</u>, <u>Finland</u>, <u>Norway</u>, <u>Sweden</u>, and the <u>United Kingdom</u> recommend a risk-directed approach to COVID-19 vaccination

Children and young adults especially have been deeply impacted by restrictive COVID policies, and it is crucial that barriers are removed to enable their participation in educational and enriching social and physical activities. Given the limited community benefits COVID vaccines have in preventing transmission, the low-risk COVID presents to healthy individuals, the high seroprevalence rate, and the potential risks of the available vaccines, I strongly urge the removal of all COVID vaccine mandates. I urge you to allow this healthcare decision to be made privately between patients and their primary-care physicians.

Please vote in favor of H.B. 0699 FWA with the proposed amendment and support the Vaccination by Choice Act.