

## **Support with Amendment SB 431**

**Before the Senate Finance Committee**

**of the**

**Maryland General Assembly**

**Hearing on SB 431**

**March 5, 2024**

**Written Testimony in Support with Amendment to Senate Bill 431**

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I support Senate Bill 431 with an amendment that persons injured by Covid-19 vaccines be included in the bill. They are equally deserving of compensation as those with Long-Covid included in the bill. They also should be presumed to have an occupational injury that is compensable under workers' compensation law after being diagnosed as injured from a Covid-19 vaccine.

A January 2021 article (see: <https://www.nejm.org/doi/full/10.1056/NEJMp2034438>) published by the *New England Journal of Medicine* stated that “All potential vaccine recipients, and especially people in high-risk communities... face a dilemma” about whether to take the COVID-19 vaccine: “... Should they risk becoming infected or risk having a vaccine injury without sufficient access to compensation?”

This dilemma was especially difficult because the Covid-19 vaccine was rolled out in a matter of months rather than the usual ten years it takes for vaccine testing and approval. The article noted that such a short timeline does not provide opportunity to see long-term effects until a vaccine is distributed to a large population. It further noted that adverse vaccine effects are particularly hard on low-income persons who do not have insurance or financial means to deal with vaccine injuries.

Unfortunately, the article's concerns about the potential **risks** of adverse effects from Covid-19 vaccines and the lack of adequate **compensation** for those who might be injured have proven to be – to say the least – well-founded.

In regard to risks, adverse effects (injuries) from Covid-19 vaccines are not rare, not merely anecdotal. They can – without qualification – be described as disastrous. In recent Congressional testimony, Federal Drug Administration, Director, Dr. Peter Marks said the federal program that tracks adverse effects from vaccines (the “Vaccine Adverse Events Reporting System”) was faced with an

*avalanche* of reported adverse reactions to Covid-19 vaccines. There were more adverse events reported for Covid-19 vaccines than for all other vaccines since the reporting system began in 1990.

As of January 2024, there were more than 37,000 reported deaths from the vaccine, 214,000 hospitalizations, thousands of reports of myocarditis, pericarditis, anaphylaxis, Bell's palsy and other serious injuries. It is important to note that these numbers reflect only a fraction of the actual injuries because of under-reporting. A recent conservative analysis estimates the official estimates could be increased by thirty times.

Further evidence of widespread injuries is a recent study of ninety-million vaccinated persons. It showed the persons were: (1) two to six times more likely (depending on which vaccine they took and which dose) to experience Myocarditis; (2) two to seven times more like to experience pericarditis (depending on which vaccine they took and which dose); (4) four times more likely to experience "swelling of the brain and spinal cord" (Moderna, first does); and (5) three times more likely to have "blood clots" (AstraZeneca).

The elevated risks of injury from Covid-19 vaccines are likely far worse than this CDC and FDA funded study found. It only focused on thirteen of hundreds of possible adverse effects after vaccinations, and – glaringly – excluded "deaths". It tracked people for only 47 days after vaccinations and did not include many adverse reactions considered worse than the 13 it studied. (For a critique of the study's limited analysis see: <https://kirschsubstack.com/p/99-million-patient-records-and-they>).

In addition, a well-documented study by the [Society of Actuaries](#) is consistent with the large number of reported Covid-19 vaccine injuries. In the second quarter of 2023, deaths were 26 percent higher than normal among insured 35-to-44-year-olds, and 19 percent higher among 25-to-34-year-olds. These high rates continued a death spike that peaked in the third quarter of 2021 at a staggering 101 percent and 79 percent above normal, respectively. (See: <https://thehill.com/opinion/healthcare/4354004-this-is-bigger-than-covid-why-are-so-many-americans-dying-early/>).

In regard to adequate compensation, the concern expressed in the NEJM's article was, again, well founded. Persons injured by Covid-19 vaccines cannot sue pharmaceutical companies that produced the vaccines. Instead, they have to go through a long and difficult process – with no "rebuttal presumption" provision like that proposed in SB 431.

They have to file claims with the federal "Countermeasures Injury Compensation Program" (CICP). Their chances of success are slim, and if successful, the amount of compensation paltry.

As of January 1, 2024, there were 12,854 Covid-19 injury claims of which only 11 have been approved and paid an average of just \$3,700. Twenty-nine (29) have been approved and are awaiting payment determination. Over half of the 2,174 denied claims were dismissed because the claimants missed the one-year deadline for filing.

Over 10,000 cases are pending. It is reported that only 35 employees are working on the backlogged cases at a rate of 2.7 per month per employee. At this rate it will take about ten years to process pending claims. (See: <https://thehighwire.com/ark-videos/world-leader-forced-to-face-failure-to-vaccine-injured/>)

The tens of thousands of person injured by Covid-19 vaccines face hurdles equal to or even greater – in regard to compensation for injury– than those with Long Covid. It is clear from the number of people compensated by the CICP and the amount of compensation paid that the Covid-19 vaccine-injured have been abandoned. They are people who did what they were advised and urged to do by public health officials, and in many cases mandated to do by public agencies or lose their jobs.