

Leading Healthcare

Memo

To:

Members, House Committee on Oversight

From:

Adam Carlson, Vice President, Government and Political Affairs

Date:

May. 6, 2021

Re:

HB 4667

Position: Opposed

The Michigan Health & Hospital Association (MHA) opposes House Bill 4667, which as written would prohibit hospitals and others from recording and accessing State of Michigan data on the COVID-19 vaccination status of Michigan residents.

The Michigan Care Improvement Registry (MCIR) serves as an electronic database of vaccine information that is maintained by the state of Michigan. Providers are required to upload vaccination administration information into this database after providing vaccinations to Michigan residents, or otherwise verifying vaccination information from other states for Michigan residents. MCIR is the database by which the state tracks the vaccination status of residents and calculates statewide immunity data by which economic reopening decisions are now based.

The information in MCIR is important in the provision and delivery of healthcare services as Michigan hospitals continue to respond to the COVID-19 pandemic. Hospitals use this information when providing vaccines to determine if an individual has been vaccinated against COVID-19, and if they received a first does of a vaccine from a different provider and need a second dose. It is also used to verify which brand of vaccine they received and when, both of which are important patient safety guidelines. If hospitals are unable to verify the brand and timing of vaccine provided in a first dose, they will be incapable of administering the second dose of COVID vaccines to countless Michigan citizens, further hampering our ability to respond to the pandemic.

The Centers for Disease Control and Prevention (CDC) recommends that individuals receive their COVID-19 vaccinations at least two weeks after or before receiving any other vaccinations to ensure maximum safety and effectiveness of all vaccines. This would be impossible to verify under this legislation and could lead to negative patient safety and health outcomes as hospitals would not be able to access an individual's full vaccination information.

Furthermore, tracking patient safety data as a result of receiving vaccines will be made impossible under this legislation. If an individual presents to a hospital and is experiencing severe side effects of a COVID-19 vaccination, a hospital would be prohibited from verifying that the side effects are related to a COVID-19 vaccine since it would not have a means of performing that verification. This legislation, therefore, would prohibit hospitals from sharing important information regarding any potential vaccine side effects with relevant federal authorities in those rare instances, which will further complicate federal safety data tracking.

Finally, this legislation would put Michigan hospitals in conflict with government requirements that mandate providing a governmental card for proof of vaccination after providing a COVID-19 vaccine. If the state is prohibited from providing CDC vaccination cards, it is not clear how individuals would be able to track their vaccination status. This card contains information that is important for detailing COVID-19 vaccination status, as well as tracking the specific dose received in the rare event that side effects from the vaccine are tied to specific production runs. Vaccination records have been in place for decades for parents, families and healthcare providers – as well as certain government agencies – to track what vaccines have been given to children and adults alike. The CDC's required COVID-19 vaccination card is simply an extension of this long history of immunization patient safety best practice.

Please contact Adam Carlson (<u>acarlson@mha.org</u>) at the MHA if you have further questions regarding the MHA's position on HB 4667.