

November 9, 2021

Joint Technical Committee
Sixty-seventh Legislative Assembly of North Dakota
Bismarck, North Dakota

RE: TESTIMONY REGARDING HOUSE BILL 1511

Chairpersons Lee and Weisz:

My name is John Hagan. I am a physician with the ND DOCR and I serve as the State Correctional Health Authority. I stand today to offer testimony regarding HOUSE BILL 1511. I offer this information for your consideration.

- The DOCR accepts 120 admissions monthly from county jails and from the community. Prior COVID test results and current vaccination information are essential in determining whether these individuals need to be quarantined or isolated upon arrival, particularly during a COVID outbreak.
- Testing prior to transferring these individuals to contract facilities and other correctional facilities informs our community partners about appropriate precautions they may need to take for our residents upon arrival at their facilities.
- Our COVID mitigation program is designed in accordance with CDC guidelines for correctional facilities and have been reviewed and approved by CDC and State Department of Health.
- We currently test our residents and staff on a frequent basis. We DO NOT require vaccination of our residents or staff, and we do not charge residents or staff for testing. Our current aggressive program of frequent testing, rapid isolation, contact tracing, and quarantine has allowed us to mitigate COVID infections in our system. As a result, we have not admitted any residents to local hospitals despite more than 150 COVID Infections in the past 6 weeks alone. Limiting our ability to test and to request testing and vaccination status information will dismantle this effective program and will almost certainly lead to inmates needing to utilize hospital beds and resources out in the community.
- Transporting residents to hospitals in the community not only uses up community resources but also can present public safety risks.
- DOCR requests your consideration of the addition of language in section 1 to exempt DOCR facilities, contracted facilities, and county correctional facilities that transfer resident into our care. This will allow us to continue to gather and use important health information to keep our residents, staff, and the community safe.
- The DOCR would support a language change in Section 2b to keep the cap on testing frequency at 2 per week if an employee is required to pay for those tests.



John J. Hagan, M.D.
State Correctional Health Authority