
Good morning, Chairwoman Lee and members of the Senate Human Services Committee. My name is Molly Howell and I am the Immunization Director for the North Dakota Department of Health and Human Services (Department). I am here to provide testimony in opposition to Senate Bill 2384.

If SB2384 passes, North Dakota healthcare providers would not be able to administer any mRNA (messenger RNA) vaccines for fear of penalty, which would prevent North Dakotans from having the choice to be vaccinated against diseases prevented by mRNA vaccine technology. There are several mRNA vaccines in development, including vaccines to prevent influenza, respiratory syncytial virus (RSV), Epstein-Barr virus and certain cancers.ⁱ

Currently, there are two mRNA vaccines available in the United States, both are for the virus that causes COVID-19, one manufactured by Pfizer and the other by Moderna. Over one million doses of COVID-19 mRNA vaccine have already been administered in North Dakota. After February of 2023, mRNA COVID-19 vaccines will be the only ones available through the federal government. Supplies of other COVID-19 vaccines (Novavax, Janssen) are expiring and the federal government is not purchasing additional doses. If SB2384 passes, North Dakota healthcare providers will be unable to provide any COVID-19 vaccine to those who would like to have it, because mRNA vaccines will be the only option.

Once COVID-19 vaccines are commercialized (moved to the private market), pediatric COVID-19 mRNA vaccines will be included in the Vaccines For Children (VFC) Program. The VFC Program is a federal entitlement program that provides vaccines to children 18 years or younger and those who are Medicaid-eligible, uninsured, underinsured, or American Indian/Alaskan Native. Children eligible for VFC vaccines are entitled to receive vaccines recommended by the Advisory Committee on Immunization Practices (ACIP), including mRNA COVID-19 vaccines.ⁱⁱ

Healthcare providers enrolled in the VFC Program are required to carry all ACIP-recommended vaccines. In North Dakota, 52% of children are eligible for the VFC Program.

An mRNA vaccine for RSV is expected to be submitted to the U.S. Food and Drug Administration for regulatory approval in 2023. Up to 120,000 older adults are hospitalized annually due to RSV and up to 10,000 die.ⁱⁱⁱ An mRNA melanoma vaccine recently completed phase II clinical trials and along with other treatments, reduced the risk of recurrence and death by 44% compared to just treatment alone.^{iv}

In summary and conclusion, if SB2384 passes, healthcare providers would no longer be able to administer current or future mRNA vaccines for fear of penalty. Future use of mRNA vaccines may include vaccines for cancers, RSV, and other diseases. Passing this bill would limit the ability of North Dakotans now and in the future, to choose if they would like to protect themselves from infectious diseases and cancers by using mRNA vaccines.

Thank you for the opportunity to appear before you today. I would be happy to respond to any questions you may have.

ⁱ [What's in the pipeline for mRNA technology and vaccines? \(contemporarypediatrics.com\)](https://www.contemporarypediatrics.com/news/2021/05/12/whats-in-the-pipeline-for-mrna-technology-and-vaccines/)

ⁱⁱ [VFC: Vaccines for Children Program | CDC](https://www.cdc.gov/vaccines/imz/ihs/0213/vfc-program.html)

ⁱⁱⁱ [Moderna Granted FDA Breakthrough Therapy Designation for mRNA-1345, An Investigational Respiratory Syncytial Virus \(RSV\) Vaccine Candidate \(modernatx.com\)](https://www.modernatx.com/news/moderna-granted-fda-breakthrough-therapy-designation-for-mrna-1345-an-investigational-respiratory-syncytial-virus-rsv-vaccine-candidate)

^{iv} [Moderna and Merck Announce mRNA-4157/V940, an Investigational Personalized mRNA Cancer Vaccine, in Combination with KEYTRUDA\(R\) \(pembrolizumab\), Met Primary Efficacy Endpoint in Phase 2b KEYNOTE-942 Trial \(modernatx.com\)](https://www.modernatx.com/news/moderna-and-merck-announce-mrna-4157/v940-an-investigational-personalized-mrna-cancer-vaccine-in-combination-with-keytruda-r-pembrolizumab-met-primary-efficacy-endpoint-in-phase-2b-keynote-942-trial)