

Testimony
House Bill No. 1519
House Human Services Committee
Representative Ruby, Chairman
February 4th, 2025

Chairman Ruby, and members of the House Human Services Committee, I am Molly Howell, Immunization Director with the Department of Health and Human Services (Department). I appear before you in opposition to House Bill No. 1519.

The core concern with HB1519 is that the data produced, linking deaths and vaccines, will allow conclusions to be made about vaccines causing deaths based on correlation rather than true causation. The integrity of public health data is critical to maintaining trust in our healthcare system, and it is essential that any statistical analysis distinguishes between correlation and causation. Additionally, HB1519 would publicly display an individual's health data that could be identifiable, which is a violation of the Health Insurance Portability and Accountability Act (HIPAA). The Department also requires an appropriation be included should HB1519 pass.

HB1519 seeks to link deaths, regardless of cause, in North Dakota with vaccination. However, the methodology described in Section 1, subsection 3 does not account for other contributing factors or causes of mortality, including suicide, overdoses, injuries, Alzheimer's disease, etc. For example, if someone received their influenza vaccine in October and died in a car accident in January, then they would be included in this report. Similarly, if someone with stage 4 cancer received their COVID-19

vaccine and ultimately passed due to their stage 4 cancer, they would be on this report.

It is important to clarify that correlation does not imply causation. A well-known example illustrates this concept: ice cream sales and drowning tend to rise simultaneously in the summer, but ice cream consumption does not cause drowning. Likewise, simply having received a vaccine before passing away does not mean that the vaccine was the cause of death.

The data and analysis requested in this report is biased towards showing vaccines cause deaths, because the report does not include unvaccinated individuals (control group) or individuals who survive. Most North Dakotans ages 65 and older choose to receive vaccines, so naturally, most North Dakotans ages 65 and older who pass in the next two years will be included in this report. North Dakota death certificates already include the cause and manner of death, determined by medical professionals. Notably, after review of death certificate data going back to 2008, no North Dakota residents were reported to have died due to vaccination.

In Section 1, 3b, “vaccine marker” should be changed to “vaccine manufacturer,” if that is the intention of the requested field.

A significant privacy concern arises from the data elements outlined in Section 1, 3b. If, for example, only one female child born in 2017 in North Dakota passed away within a given quarter and had received vaccines, then she could be identified, and her immunization history would effectively be disclosed in the public report. The Department cannot

publish an individual's health data that due to small numbers could potentially be identifiable. Section 1, 3d states "A redaction may not be made for a low count unless the department of health and human services is expressly notified of a privacy issue regarding the count." This statement is not in compliance with federal HIPAA privacy rules or Department data release policies.

Fiscal Impact:

HB1519 does not currently include an appropriation. Based on the requirements in Section 1, subsection 2, information technology changes, including the addition of fields and system linkages, would need to be made to both the North Dakota Immunization Information System and the electronic death registration system. The Department would also need an FTE and supporting costs for analysis and reporting outlined in Section 1, subsection 3. The estimated financial impact of this bill for the 2025-2027 biennium is \$503,278.

This concludes my testimony. I would be happy to try to answer any questions the committee may have. Thank you.