

HB 1454

House Industry, Business, and Labor
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Katie Fitzsimmons, Director of Student Affairs, NDUS
701-328-4109 | katie.fitzsimmons@ndus.edu

Good morning Chair Warrey and members of the House Industry, Business, and Labor Committee. My name is Katie Fitzsimmons and I serve as the Director of Student Affairs for the North Dakota University System. I am here today on behalf of the North Dakota University System and its eleven institutions to provide **neutral** testimony related to HB 1454 and enlighten the committee about the current process used throughout the North Dakota University System.

Currently, with respect to vaccination data, the eleven campuses engage in a process to obtain sufficient records to ensure the safety of all students on campus in the event of an outbreak. Providing proof of vaccination is not required for the general student population. Students are given two options: 1) Provide MMR and meningitis vaccination record to the campus, or, 2) Complete the immunization exemption form and decline to provide records to the campus.

The second option is for students who prefer not to disclose their vaccination history. We do not ask why a student is requesting an exemption; we simply ask for a documented waiver so we know the possible impact of an outbreak should one occur on our campus or community. If an outbreak were to occur, the students who waived supplying records to us would be considered at risk. As such, those students might not be allowed to attend classes in person or live on campus until the threat of disease is no longer present; that would be dependent on the assessment and recommendations of the local public health unit and/or the State Health Officer.

Generally speaking, we do not require any vaccination information from faculty, staff, or visitors to our campuses. However, if a faculty or staff member chooses to enroll in a course and attend it in person, they must also provide records or complete the exemption form, just as an enrolled student. Further, some programs of study require students to provide proof of vaccination from certain preventable diseases to provide patient care, receive seamless placement into a clinical setting, or participate in an internship. Those are very specific to programs and not the entire campus population.

The current language in the bill states, "notwithstanding any other provision of law, a state agency, political subdivision, or any other government entity, may not require an individual



to take, receive, or disclose where the individual has taken or received a medical product unless the manufacturer of the medical product is liable for any death or serious injury caused by the medical product." Under our current process, students are not required to disclose their information; they are able to complete a waiver, thus the process we have in place for the vast majority of our students would remain acceptable practice. We would have questions regarding the students that are required to provide documentation because of their specific programs of study. Those requirements are established best practices and are the requirements set by private health care entities. Our ability to collect that student information enables us to work with our partners to ensure timely placements and on-time graduation for our students.

Our vaccination exemption form is completed online; I attached a copy of the content that we use on that form for your reference. This concludes my testimony related to HB 1454. I stand for questions from Committee members.



(Campus logo here)

IMMUNIZATION EXEMPTION REQUEST FORM

The North Dakota State Board of Higher Education requires proof of immunity against measles, mumps, rubella (MMR) and meningococcal disease (meningitis) prior to enrollment at any North Dakota state college or university.

Students enrolled solely in distance learning courses; immunization is contraindicated by a medical condition; or the student's belief precludes participation in an immunization program may request this exemption.

A request for exemption requires the completion and submission of this form.

STUDENT INFORMATION

Name			
	(First name, middle initial	, last name – please print)	Former name
Birthdate_		Student ID #	Phone #
	Month/Day/Year		
EXEMPTION (check all that apply):			
□MMR	□Meningitis		
In the event of an outbreak of a communicable disease in which immunization is required, it may be determined that exclusion from college and college activities may be recommended/required by the campus in coordination with the local Public Health Officer until the public health risk is over. By clicking "submit" on this form, you are accepting the conditions of this exemption.			
(clickable "submit" box here)			