



Jeffrey S. Barkin, MD, President | Erik N. Steele, DO, President-Elect | Paul R. Cain, MD, Chair, Board of Directors
Andrew B. MacLean, JD, CEO | Dan Morin, Director of Communications & Government Affairs

TO: The Honorable Ned Claxton, Chair
The Honorable Michelle Meyer, Chair
Members, Joint Standing Committee On Health and Human Services

FM: Dan Morin, Director of Communications and Government Affairs

DATE: January 11, 2022

RE: **Oppose**

LD 867, An Act To Prohibit Mandatory COVID-19 Vaccinations for 5 Years To Allow for Safety Testing and Investigations into Reproductive Harm

The [Maine Medical Association](#) is the state's largest professional physician organization representing more than 4300 physicians, residents, and [medical students](#) across all clinical specialties, organizations, and practice settings is submitting testimony in **opposition** to [LD 867, An Act To Prohibit Mandatory COVID-19 Vaccinations for 5 Years To Allow for Safety Testing and Investigations into Reproductive Harm.](#)

The legislative summary attached to the bill states the intent is to prohibit mandatory vaccinations for coronavirus disease 2019 for 5 years from the date of a vaccine's first emergency use authorization by the United States Department of Health and Human Services, Food and Drug Administration to allow for safety testing and investigations into reproductive harm.

Over 99 Percent of Maine Physicians are Fully Vaccinated

An August Maine Medical Association survey of members revealed that over 99 percent are fully vaccinated. Despite rampant misinformation about the COVID-19 vaccines and the hyper-political environment around the science behind vaccines and guidance from national and local public health experts, the vaccines are safe, effective, and save lives.

Our thousands of practicing physician members see their success and safety every day in their medical clinics. They also see the negative impact of not vaccinating, as evidenced by more than 1,500 deaths with COVID-19, part of the over 839,500 total U.S. coronavirus deaths reported over the pandemic. Among women who are pregnant, there have been [155,587 cases and 257 deaths reported](#).

COVID-19 vaccination is safe and highly effective at preventing infection and severe outcomes of COVID-19 infection, including death. Vaccination continues to be highly recommended by ASRM, ACOG, SMFM, and CDC for all persons who are pregnant or considering pregnancy.

Health Care Workers Mandates Are Necessary

Health care workers are at increased risk of contracting infectious diseases and transmitting to vulnerable populations. Consequently, health care institutions must institute infection control protocols, and many require health care workers to receive the influenza vaccination.

These institutions owe both legal and ethical duties to staff and patients to ensure a safe environment. Additionally, because vaccines prevent hospitalizations, their wide use in health care settings may reduce worker shortages.

Unfortunately, a [survey released](#) by the Kaiser Family Foundation in April 2020 showed that 30 percent of health care workers were vaccine hesitant, and 18 percent were opposed to getting the vaccines. Low nationwide vaccination rates in nursing homes have contributed to preventable resident deaths. Many were traced to unvaccinated workers who then infect co-workers and vulnerable residents who cannot develop necessary immunity.

Some hospitals in Maine had lower than needed vaccination rates and many home health workers have avoided vaccination. Unvaccinated, asymptomatic health care workers who may have unknowingly experienced a high-risk exposure pose a great a risk to potentially vulnerable patient populations when working amongst them.

Maine Physicians Supported Independent Physician Practice Mandates

In October, the Maine Medical Association [formally requested an amendment](#) to Immunization Requirements for Healthcare Workers, 10-144 CMR chapter 264 to include independent, non-hospital-based physician offices and urgent care clinics to be included in the rule. The August emergency rule added COVID-19 to the list of vaccine-preventable diseases for which employees of a licensed nursing facility, residential care facility, intermediate care facilities, multi-level healthcare facilities, hospitals, or home health agencies subject to licensure by the State of Maine. The initial rule also includes emergency medical services organizations and dental health practices.

Reproductive Concerns Related to the COVID-19 Disease and Fertility

The American College of Obstetricians and Gynecologists (ACOG) and the Society for Maternal-Fetal Medicine (SMFM), the two leading organizations representing specialists in obstetric care, [recommend that all pregnant individuals be vaccinated against COVID-19](#). According to the organizations, pregnant individuals who have decided to wait until after delivery to be vaccinated may be inadvertently exposing themselves to an increased risk of severe illness or death.

“COVID-19 vaccination is the best method to reduce maternal and fetal complications of COVID-19 infection among pregnant people,” said William Grobman, MD, MBA, president of SMFM. Maternal-fetal medicine subspecialists—experts in high-risk pregnancy—strongly recommend that pregnant people get vaccinated. Vaccination is safe before, during, or after pregnancy.

A complete list of regularly updated COVID-19 Vaccination Considerations for Obstetric–Gynecologic Care from the American College of Obstetricians and Gynecologists (ACOG) can be found [here](#).

Physician clinical leaders also highly recommend COVID vaccines for men concerned about their fertility because of the possible effects that COVID-19 disease could have on their reproductive system.

The [American Society for Reproductive Medicine states](#) there is no current credible evidence to support that COVID-19 vaccines may impact fertility, however, there may be a negative impact of COVID-19

disease on male fertility and the *New England Journal of Medicine* published a study ([mRNA COVID-19 Vaccines and Male Fertility: Facts and Myths](#)), which concludes, “Despite its small size and lack of a control group, this study provides evidence that the EUA mRNA COVID-19 vaccines have no negative effects on sperm parameters in young men. These findings can serve as a tool to fight misinformation. However, the fact that baseless claims have the potential to set a research agenda is troubling.”

The [Centers for Disease Control and Prevention](#) along with the abovementioned medical organizations have stated there is “no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men.”

Long-Term Effects of Vaccines

According to the [medical director at Houston Methodist Hospital in Texas](#), “In the entire history of vaccines, there’s never been a side effect that occurred more than two months after a vaccine was administered.” Dr. Wesley Long is also an associate professor of pathology and genomic medicine and added, “People are worried that some unknown side effect will occur 10 to 15 years down the line, but the truth is, that’s never happened.” The Pfizer and Moderna vaccines do not contain live virus. Instead, they comprise mRNA, a molecule naturally found in our bodies that teaches our immune system to produce antibodies.

In June, 2021, Houston Methodist was the nation's first hospital system to [require its private health care providers](#) to get vaccinated for COVID. Only days later, a federal District Court in Texas [soundly rejected](#) an attempt by Houston medical workers to challenge the legality of the hospital policy.

[Over 207 million people](#) in the United States have been fully vaccinated and there are several robust safety monitoring systems in place for these vaccines that can detect very rare adverse events, including:

- Thrombosis with thrombocytopenia syndrome (TTS) – the [CDC estimated](#) the rate of this rare effect at approximately three cases per million doses.
- Guillain-Barre syndrome –the [CDC estimated](#) the rate of this rare effect at approximately 7.8 cases per million doses.

- Myocarditis – the [CDC estimated](#) the rate of this rare effect at approximately 3.5 cases per million complete vaccine series. A [study from Case Western Reserve University](#) found that young men were up to six times more likely to develop myocarditis after COVID-19 infection compared to those who received the vaccine.

Current safety monitoring systems have been able to detect very rare adverse effects — all of which occurred within days or weeks following vaccination. This is what gives scientists and public health officials confidence in COVID-19 vaccines' long-term safety — if there were significant side effects, they very likely would have been discovered by now.

mRNA vaccines had been studied for decades before COVID-19 emerged. The vaccine technology had been studied in vaccines against other viruses, such as influenza, rabies and Zika, as well as in treatments for cancer.

Thank you for reviewing our comments and references in opposition to LD 867. We urge a vote of Ought Not to Pass from the Committee.