

**Testimony on Senate Bill 295
Senate Public Health and Welfare Committee
Dr. Lee Norman, Secretary
Kansas Department of Health and Environment
March 15, 2021**

Chair Hildebrand and members of the Senate Public Health and Welfare Committee, thank you for the opportunity to provide testimony in opposition to Senate Bill 295 which would authorize counties to adopt prioritized vaccination plans and prohibit the state from reducing vaccination allotments based on adherence to state guidelines. As the State's Public Health agency, we have concerns about the impact this bill will have on the vaccine prioritization schedule and the states effort to quickly and equitably vaccinate citizens.

In January of 2021, Kansas Department of Health and Environment (KDHE) created a list of populations, spread across 5 phases, to prioritize for vaccination. The purpose of the phased allocation provides guidance for local jurisdictions while vaccine supply is limited. To develop this phasing, KDHE segmented and prioritized Kansas' population based on public health risk and criticality to state infrastructure. Throughout the process, KDHE has used an equity lens to ensure inclusion of socially and medically vulnerable communities in our prioritization. The Governor and KDHE engaged an independent advisory committee to review and co-develop these phases, ensuring input broad input. KDHE has also relied on the expert opinion of the Centers for Disease Control (CDC) and the Advisory Committee on Immunization Practices (ACIP) recommendations.

Each week, the Kansas Department of Health and Environment (KDHE) determines the amount of incoming COVID-19 vaccine that will be given to each county and enrolled provider. Beginning in Phase 2 of the vaccine roll-out, KDHE began using an automated algorithm to equitably distribute vaccine. The algorithm assigns doses to each county, then allocates to providers within each county based on how many vaccines they can administer (their "throughput" capacity). In addition, it takes into account the population that each county serves, and the operational constraints associated with the administration of the two COVID-19 vaccines currently available.

The vaccine prioritization guidelines take into consideration the scientific evidence regarding COVID-19 epidemiology, ethical principles, and vaccination program implementation considerations. If SB 295 were passed, it would not be productive in efforts to coordinate an effective and organized campaign to vaccinate Kansans against COVID-19.