

2300 Main Street, Suite 304 Kansas City, MO 64108 (816) 241-7006 healthforward.org

February 7th, 2025

Senate Committee on Public Health and Welfare State Capitol 300 SW 10<sup>th</sup> Street Topeka, KS 66612

Re: Health Forward Foundation opposition to Senate Bill 29 – which revokes the authority of the Secretary of Kansas Department of Health and Environment to impose quarantines and other protective measures.

Chair Gossage and Members of the Committee:

On behalf of Health Forward Foundation (Health Forward), I submit this written-only testimony in opposition to Senate Bill 29. Health Forward works to support and build inclusive, powerful, and healthy communities characterized by racial equity and economically just systems. We oppose this legislation as it would jeopardize community health and the health of first responders and is resource inefficient.

SB 29 would harm communities and their first responders. It would eliminate the authority of state public health officials to issue quarantines, which could prevent the spread of infectious disease. Quarantine is the most effective tool available to public health officials to achieve that goal. Moreover, this legislation would expose not just the broader public but first responders – police, paramedics, and firefighters, and hospital and clinic staff – to potentially deadly outbreaks of infectious diseases. This would lead to an even greater loss of on-duty lives than in COVID where, according to the Center for Infectious Disease Research and Policy, that disease was the leading reason for police deaths in 2020.

Furthermore, SB 29 would exacerbate disparities in health outcomes, especially during an infectious disease outbreak. For example, COVID deaths were disproportionately high amongst Hispanic/Latino, Black, and Native Americans, relative to their white counterparts, according to the Kaiser Family Foundation. Similarly, COVID death rates were higher in rural versus urban counties, according to a 2022 study in the Journal of Public Health Management Practice. Without the ability to stanch an infectious disease outbreak, these disparities would likely become more pronounced.

Last, SB 29 would drastically increase the economic and other associated costs of an infectious disease outbreak as public health officials will not have the authority to contain the spread. A recent study published in the National Institutes of Health *National Library of Medicine* shows that prevention measures cost an estimated 1/20<sup>th</sup> of the overall cost of life lost and other expenses from emerging infectious diseases.

Health Forward asks legislators on this committee to vote <u>no</u> on SB 29. Not only does it hamper public health professionals' ability to take reasonable, appropriate actions to limit the spread of dangerous disease, but it would also lead to real harm to people, especially Kansans of color and people living in

OUR Purpose Every day we work to support and build inclusive, powerful, and healthy communities characterized by racial equity and economically just systems.

rural areas. This sort of legislation would have negative effects on the Kansas economy and our ability to keep our communities safe and healthy during an infectious disease outbreak. Please feel free to reach out to me at <a href="mailto:nmadden@healthforward.org">nmadden@healthforward.org</a> if you have any questions or requests for additional information.

Respectfully,

Nathan J. Madden, Ph.D. Impact Strategist - Policy Health Forward Foundation



Testimony: SB 29
Senate Committee on Public Health and Welfare
Feb. 5, 2025
By: Keith Ratzlaff, MD, FAAFP
(Opponent—Written only)

Chair Gossage and Members of the Committee:

Thank you for the opportunity to submit written testimony opposing SB 29, on behalf of the Kansas Academy of Family Physicians (KAFP). In addition to having served as President of the KAFP, I am a practicing family physician in Olathe. The KAFP represents nearly 2,000 family physicians, resident physicians and medical students across our state. Providing quality health care and resulting in good health outcomes for our patients guide our public policy work.

The Academy believes the Kansas Department of Health and Environment (KDHE) and our local health departments are the most qualified state entities to make determinations about public health safety concerns. Unintentionally, this bill undermines KDHE's mission, which is *to protect and improve the health and environment of all Kansans*.

Public health officers are not political, elected officials; they are professionals--physicians and nurses with the education and experience to make decisions based on science and not anecdote or public opinion. KAFP believes SB 29 presents potential public health implications if adopted into law. Prohibiting the Secretary of Health and Environment and local public health experts from issuing scientifically supported orders to safely manage the spread of disease removes a critical intervention during outbreaks.

Restricting our local health officers' abilities to protect our communities places the health, wellness and livelihood of our patients, families, and communities at risk. Local health officers help decrease the spread of disease through many methods, including educating the public, provided testing, performing contact tracing, temporarily quarantining and isolating those at risk of spreading deadly diseases to others, and administering vaccinations.

The passage of this bill would not only apply to a pandemic similar to COVID-19 but also infectious diseases like Measles, Ebola, and Tuberculosis. These diseases are deadly and highly communicable and require preventative action within hours, not days or weeks to prevent the spread. The importance of quarantine and isolation is that these deadly diseases can be spread so easily to any of us if not contained properly in settings like the grocery store, church, school, or work.

Our local health departments are run by hard-working community members who know their communities well and are trusted by those they serve. Many local health officers throughout the state are family physicians who do public health work in addition to caring for patients in clinics and hospitals every single day. Our members who are appointed to be local health officers are already overseen by their county boards of health and communicate with them and the local health departments constantly. They work closely with elected officials and the health department team to protect the communities in which they live. Their contributions are invaluable to the health of our communities across Kansas.

The KAFP opposes SB 29 because it would restrict the authority of the secretary of health and environment and local health officers to prevent the introduction and spread of infectious or contagious diseases and repeals the authority of the secretary to guarantine individuals.

Thank you again for this opportunity to submit comments on behalf of the KAFP. We appreciate your thoughtful examination of all matters regarding the health and safety of Kansans.

### **About Kansas Academy of Family Physicians:**

KAFP represents nearly 2,000 active, resident, student and life members across the state. Our member physicians are vibrant and trusted members of their communities and are dedicated to creating a healthier Kansas. Quality health care and health outcomes for our patients guide our public policy work. As family physicians, we see people of all ages, both men and women, and we work with almost every type of ailment and illness that afflict our patients.



February 7, 2025

Heather Braum, Senior Policy Advisor
Kansas Action for Children
Written-only Testimony in Opposition to SB 29
Senate Committee on Public Health and Welfare

Chairwoman Gossage and members of the Committee:

Thank you for the opportunity to provide testimony in opposition to SB 29, which would weaken laws at the local and state levels for responding to infectious disease outbreaks, including eliminating several laws related to public health quarantines.

Kansas Action for Children is a nonprofit advocacy organization working to make Kansas a place where every child has the opportunity to grow up healthy and thrive. We work across the political spectrum to improve the lives of Kansas children through bipartisan advocacy, partnership, and information-sharing on key issues, including early learning and education, health, and economic security for families.

SB 29 weakens a core function of public health, which is to prevent the spread of diseases. This bill would prevent state and local officials from fully utilizing one of the most basic tools to stop the spread of diseases – requiring quarantines during an infectious disease outbreak. These include highly infectious and dangerous childhood diseases like measles, polio, and whooping cough.

We oppose SB 29 because allowing disease to freely spread quickly gets costly – and harms our children, particularly Kansas' youngest.

During a 2018 and 2019 measles outbreak in Washington state resulting in 72 infections, the public health response to the outbreak cost approximately \$2.3 million. The investigators estimated that if no isolation or quarantine measures had been required (which could happen under SB 29), the outbreak would have resulted in an additional 1,296 cases and 72,198 contacts, thus increasing the cost of the public health response to over \$120 million.

A more recent outbreak of measles in Ohio found that out of 85 known cases (almost all of whom were young, unvaccinated children – some of whom were too young to be vaccinated), 44 experienced complications like ear infections, diarrhea, and pneumonia. Of those 44 individuals, 36 were

<sup>&</sup>lt;sup>1</sup> Pike, J., Melnick, A., Gastañaduy, P. A., Kay, M., Harbison, J., Leidner, A.J., Rice, S., Asato, K., Schwartz, Ł., and DeBolt, C. (2021). "Societal Costs of a Measles Outbreak." *Pediatrics*. 147(4). https://doi.org/10.1542/peds.2020-027037



hospitalized, mainly due to dehydration.<sup>2</sup> Other complications from measles were not reported from this outbreak, but the disease is known to cause blindness, irreparable brain damage, immune amnesia,<sup>3</sup> and even death.<sup>4</sup>

Finally, when last year's version of this bill had a hearing, there were 20 reported cases of measles in 11 states as of February 15, 2024. As of December 31, 2024, the United States saw 284 reported cases of measles in 2024 in 30 states and the District of Columbia. <sup>5</sup>

# 20 Cases of Measles



# 284 Cases of Measles

11 States (February 15, 2024)

30 States + D.C. (December 31, 2024)

#### Of these cases:

- 89% cases were unvaccinated for measles or unknown vaccination status
- 120 cases under the age of 5 (42%)
- 62 of the 120 cases under the age of 5 were hospitalized (more than 50%).6

While most of the population is already vaccinated against diseases like measles, some children are too young to receive standard immunizations and are particularly vulnerable to these diseases. Outbreaks must be quickly stopped through infectious disease outbreak response tools (like those that SB 29 removes) before children become hospitalized, end up with life-long health complications, or die from these diseases.

With increased reports of certain infectious disease (like measles and whooping cough), we are concerned Kansas could see infectious disease outbreaks in the near future. If SB 29 were to become law, it would allow these diseases to run rampant through the state, costing countless dollars, taking parents away from work, and overrunning our health care system by causing life-long complications and even killing children.

For all these reasons, we respectfully request the Committee oppose SB 29 and instead work to maintain the health and safety of our state's children.

Thank you again for the opportunity to offer testimony in opposition to SB 29. If I can be of further assistance, please contact me at <a href="mailto:heather@kac.org">heather@kac.org</a>.

<sup>&</sup>lt;sup>5</sup> CDC. (2025). Measles Cases and Outbreaks. https://www.cdc.gov/measles/data-research/?CDC\_AAref\_Val=https://www.cdc.gov/measles/cases-outbreaks.html



<sup>&</sup>lt;sup>2</sup> Tiller, E. C., et al. (August 4, 2023). "Notes from the Field: Measles Outbreak — Central Ohio, 2022–2023." *Morbidity and Mortality Weekly Report (MMWR)* 72:31: 847-849. https://www.cdc.gov/mmwr/volumes/72/wr/mm7231a3.htm

<sup>&</sup>lt;sup>3</sup> Frederick, E. (2019). "How measles causes the body to 'forget' past infections by other microbes." *Science* <a href="https://www.science.org/content/article/how-measles-causes-body-forget-past-infections-other-microbes">https://www.science.org/content/article/how-measles-causes-body-forget-past-infections-other-microbes</a>

<sup>&</sup>lt;sup>4</sup> CDC. (2020). Complications of Measles. https://www.cdc.gov/measles/symptoms/complications.html



Senate Transportation Committee February 7, 2025 SB 29

Kansas Association of Counties Opponent Testimony – Written Only

Chairwoman Gossage and members of the Committee:

Thank you for allowing the Kansas Association of Counties to offer written only opponent testimony on SB 29, which would reduce the ability of the secretary of health and environment to prevent the spread of infectious disease, as well as reduce the secretary of health and environment's rule and regulation authority. It also allows local health officers to merely recommend isolation and quarantine to prevent or reduce the spread of infectious disease.

Traffic laws exist not only to protect individuals, but everyone on the road. Whether you consider yourself a safe driver or not, you are legally bound to obey traffic laws, including the posted signs. This limits personal freedoms, but helps make the roads safer for everyone to use. Speed limits exist to make us safer. Speed limits can be enforced. While it may be inconvenient for me to drive a block further because of a one-way street, simply driving the wrong way endangers others. There is no guarantee that I will have a car accident if I continuously drive the wrong way, but law enforcement may do much more than simply recommend that I not drive that way.

Public health functions in much the same way. While health orders, quarantines and isolations may not be popular, they are necessary for public health. Reducing them to just recommendations is the equivalent of making road signs and traffic signals optional. Not everyone will get into car accidents, but it will make driving more difficult, less predictable and less safe.

For these reasons KAC opposes SB 29 and respectfully asks that the committee not advance this bill. Thank you for your attention to this matter.

Jay Hall Deputy Director and General Counsel Kansas Association of Counties hall@kansascounties.org (785)272-2585



#### WRITTEN TESTIMONY IN OPPOSITION OF SB 29

February 5, 2025

Chair Gossage, Vice Chair Clifford, Ranking Member Holscher, and members of the committee:

Thank you for the opportunity to provide written testimony regarding SB 29. The Kansas Chapter American Academy of Pediatrics (KAAP), representing 400 pediatricians and pediatric residents across the state, is dedicated to ensuring that all Kansas children can grow up safe, healthy, and strong. With this mission in mind, we respectfully express our opposition to SB 29.

This bill limits the ability of the Secretary of the Kansas Department of Health and Environment (KDHE) and local health officers to take swift action in response to outbreaks of infectious diseases. Kansas has long upheld the principle of local control and expert-driven decision-making. By restricting the authority of public health officials, SB 29 undermines the ability of communities to protect themselves from the rapid spread of serious diseases like measles, tuberculosis, or future emerging threats.

As physicians, we recognize the balance between personal freedoms and public safety. However, when it comes to infectious diseases, timely and targeted measures—grounded in medical expertise—are essential to keeping families, businesses, and schools running smoothly. Delayed responses to outbreaks burden hospitals, disrupt workplaces, and force unnecessary school closures, creating greater hardship for Kansas families and small businesses.

A strong economy depends on a healthy workforce. When infectious diseases spread unchecked, parents miss work to care for sick children, students fall behind in school, and healthcare costs increase for both families and the state. Local businesses suffer when employees are out sick, and communities bear the financial burden of preventable outbreaks. Ensuring that public health officials can act quickly and appropriately is not just a health issue; it's an economic one.

For these reasons, we urge you to oppose SB 29 and ensure Kansas remains prepared to respond effectively to public health threats while keeping our communities strong and resilient.

Thank you for your time and consideration. We are available to answer questions and serve as a resource on pediatric health issues.

Respectfully, Dena K. Hubbard, MD, FAAP **Public Committee Chair** Kansas Chapter, American Academy of Pediatrics



# Kansas Hospital

TO: Senate Public Health and Welfare Committee

FROM: Karen Braman, Senior Vice President Clinical and Strategic Initiatives

DATE: February 7, 2025 RE: Senate Bill 29

The Kansas Hospital Association (KHA) appreciates the opportunity to submit written comments in opposition to Senate Bill 29.

Kansas hospitals remain committed to ensuring the safety of all patients, staff, and visitors entering a hospital facility. Kansas hospitals employ nearly 100,000 Kansans to provide quality, safe, and effective care in their communities. Protecting patients and staff from infectious disease is a vital component of patient care as well as keeping the healthcare workforce healthy and safe to continue providing medically necessary and life-saving care to Kansans.

The KHA is opposed to Senate Bill 29 as we believe the bill would remove critical public health mitigation strategies and vaccinations that keep Kansas citizens, including healthcare workers, safe from infectious disease and healthy to continue performing their jobs, contributing to the Kansas economy, and keeping their families safe.

Evidence-based public health measures have been demonstrated throughout history to be effective at decreasing the transmission of infectious diseases and reducing their spread across a population. Although there were no treatments or vaccines available during the 1918 Spanish Flu pandemic, nonpharmaceutical interventions such as isolation and quarantine were shown to be effective where implemented. Quarantine dates back to the 14<sup>th</sup> century as a means to protect coastal cities from plague epidemics caused by ships arriving from infected ports.

Two hundred years ago local control of quarantine was so ineffective at containing cholera and yellow fever across the nation that Congress took action to pass federal quarantine legislation in the late 1870s. That legislation led the way for the Public Health Service Act and other interventions to protect citizens from morbidity and mortality resulting from infectious diseases. Smallpox was eradicated in 1980 because of widespread vaccination in combination with quarantine.

Public health interventions to stop the spread of highly contagious diseases are why Kansans and other citizens across the country do not suffer from the scourge of diseases like measles, hepatitis, polio, and other vaccine-preventable illnesses common in third-world countries. There is an ongoing tuberculosis outbreak in Wyandotte County that has been reported as one of the largest in recorded history in the United States. As of January 17, public health officials reported 66 active cases and 79 latent infections in the Kansas City, Kansas, metro area since 2024. Most of the cases have been in Wyandotte County, with several reported in Johnson County. The protection afforded by public health interventions such as isolation, quarantine, testing, treatment, and vaccination are foundational elements of a healthy state that allow Kansans to gather safely and live healthy and productive lives.

Stopping the spread of infectious diseases also keeps Kansas healthcare workers safe and able to provide the needed care we all rely on from our Kansas hospitals. We have seen in the recent past several instances of measles outbreaks across the country that were quickly contained through effective public health measures that prevented widespread disease.

KHA opposes Senate Bill 29, and we thank you for your consideration of our written comments.

<sup>&</sup>lt;sup>1.</sup> Kansas tuberculosis outbreak is now America's largest in recorded history. Topeka Capital-Journal. January 24, 2025.



February 7, 2025

Testimony in Opposition to SB 29, Senate Committee on Public Health and Welfare

Chair Gossage, Vice Chair Clifford, and Members of the Committee, on behalf of the Immunize Kansas Coalition (IKC), this written testimony is submitted in opposition of Senate Bill 29.

IKC is a **nonprofit**, **nonpartisan coalition of Kansas** health care providers, health department officials, researchers and educators working together to improve the health of Kansans through improved vaccination rates to protect against vaccine-preventable disease. IKC is an **independent and objective source of data**, **evidence and facts**. IKC's members volunteer their time and resources to support our mission of **protecting every Kansan from vaccine-preventable diseases**.

SB 29 poses a significant threat to our community's health and well-being by limiting the authority of local health officers and impacting crucial statutes related to disease prevention.

Allowing disease to freely spread quickly gets costly. During a 2018 and 2019 measles outbreak including 72 cases, the public health response to **the outbreak cost approximately \$2.3 million**. The investigators estimated that, if no isolation or quarantine measures had been implemented (which could happen under SB 29), the outbreak would have resulted in an additional 1,296 cases and 72,198 contacts, thus **increasing the cost of the public health response to over \$120 million**.

**SB 29** weakens a core function of public health, which is to prevent the spread of diseases. This bill would prevent the state and local officials from fully utilizing one of the most basic tools to stop the spread of diseases – requiring quarantines during an infectious disease outbreak. These include highly infectious and dangerous childhood diseases like measles, polio, and whooping cough.

While most of the population is vaccinated against these diseases, some children are too young to receive standard immunizations. **Outbreaks must be quickly stopped through infectious disease outbreak tools** before children become hospitalized, end up with lifelong health complications, or die from these diseases.

For these reasons and more, the Immunize Kansas Coalition opposes SB 29 and urges the Committee to not pass it out.

Thank you, and do not hesitate to contact me at criordan@immunizekansascoalition.org with any questions.

Respectfully,

Carrie Riordan
Interim Executive Director
Immunize Kansas Coalition



#### Health & Environment

# Testimony by Charlie Hunt with the Johnson County Department of Health & Environment (JCDHE) to Senate Committee on Public Health and Welfare Written Opponent for SB 29 – February 7, 2025

Chairperson Gossage and Members of the Committee,

Thank you for the opportunity to provide written testimony in opposition to Senate Bill 29, a bill which seeks to revoke public health authority. JCDHE's mission is to promote and protect the health and environment for all who live, work and play in Johnson County.

We are very concerned with this bill and view it as bad policy. Notable highlights:

- Section 2 removes the ability for the secretary of the Kansas Department of Health and Environment (KDHE) from adopting rules and regulations relating to disease control. It also changes the requirement for the secretary of KDHE from taking action against disease introduction to merely recommending. Recommendations will not stop disease spread; we have seen people readily refuse to listen to experts and succumb to misinformation.
- Section 4 removes social workers, teachers, and school administrators from being mandated reporters when seeing those with an infectious or contagious disease. All this change does is try and sweep an outbreak under the rug and puts lives at risk by slowing up response activities.
- Section 5 removes the ability of our local board of health and our local health officer from having isolation and quarantine authority and removes their ability to prohibit public gatherings. This portion not only stomps on local control but hamstrings any effective response to disease outbreaks.
- Section 6 requires the KDHE secretary to give a report of diseases that are infectious or contagious to the Kansas speaker of the house and president of the senate (rather than handling via rules and regulations, removed in Section 2). The speaker and president are not experts in disease control or spread, and this turns an expert-led process into a political one. It will only compromise the ability to respond to emerging diseases and put lives at risk.
- Section 7 further strips the local health officer of any disease control capabilities, reducing them to a mere spokesperson who issues recommendations.
- Section 8 removes the ability for employers to require certain vaccines, even if they work with populations that may expect that level of protection or require it for their health and safety.
- Section 9 further erodes local health officer options for disease control, including reducing the requirement to use all known measures to prevent disease spread to an undefined "medically necessary and reasonable" standard.

Public health must have the ability to issue orders to control disease spread and designate what diseases meet the infectious and contagious threshold (and assess what the science says can control those diseases and adopt rules and regulations accordingly). Without these tools, it will be nearly impossible to control both known, severely damaging diseases and future diseases we have not yet seen and will have no other protections against.

JCDHE asks that the committee not recommend SB 29 favorably for passage.

Sincerely,

Charlie Hunt, Director
Johnson County Department of Health & Environment

TDD: 800-766-3777





Testimony of Lawrence-Douglas County Public Health
To Senate Public Health and Welfare
Written Opponent Testimony for SB 29 | DATE

Chairwoman Gossage, Vice Chairman Clifford, and members of the committee,

Thank you for allowing Lawrence-Douglas County Public Health (LDCPH) to provide written, opponent testimony on SB 29, which would enact the constitutional right to freedom act and regulate the activities of local health officers related to public health functions and revoke the secretary's authority to quarantine individuals and impose penalties. LDCPH serves Lawrence and Douglas County residents and works to create abundant and equitable opportunities for good health.

LDCPH is very concerned about the provisions of SB 29, as our local health officer's ability to quarantine people who present with infectious disease is incredibly important to curtailing the spread of harmful and contagious disease. Further, removing our health officer's ability to require this is a violation of our home rule authority. Public health must have the ability to issue orders to control disease spread and designate what diseases meet infectious disease thresholds. Without the tools listed above, it will be impossible to control both known and potentially unknown emerging diseases that our communities are susceptible to, including Mumps or Measles, which is so contagious, up to 9 out of 10 people exposed will become sick. <sup>1</sup>

LDCPH and our local health officer are experts in the field of public health and only require quarantine when it is medically and physically necessary to curtail the spread of potentially dangerous diseases. From 2015-2023, Douglas County had a Mumps outbreak that infected 18 people. The average age of those infected was 26 years old. Due to this, infected people were encouraged to stay home if they were symptomatic, but none of the 18 people had confirmed quarantine dates. This data provides evidence that local health departments and local health officers are capable and have an established process for curtailing diseases. Removing our ability to do our jobs effectively not only puts Kansans at risk, but it disregards our ability to provide services for our community. As members of our community, we are the most knowledgeable about our community's needs and removing them could have serious, if not deadly effects.

Additionally, the management of animals in conjunction with disease is a critical part of Kansas Statute. K.S.A. 47-622 requires all domestic animals or livestock owners who suspect the animal has a contagious or infectious disease to report it to the Animal Health Commissioner. "This is common practice for sanitation and the health of the public. It seems inconsistent to update quarantine statutes for humans without also considering the practices currently in place for animals. We strongly encourage you to take this into account in your decision-making process.

As Dr. Sammuel Crumbine once said, "the health of all of us is dependent on the health of all of us", we hope that you consider the serious consequences of this legislation, and do not vote SB 29 favorably for passage.

Sincerely,

Jonathan Smith, MPH

Executive Director

Lawrence-Douglas County Public Health

https://www.cdc.gov/measles/contagious-infographic.html

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Written Opposition Testimony on SB 29
Senate Committee on Public Health and Welfare
Hearing on Friday, February 7, 2025

February 4, 2025

Chairwoman Gossage and Members of the Committee:

Thank you for the opportunity to provide written testimony in opposition to SB 29, which would limit the activities of the secretary of health and environment related to public health functions and repeal statutes relating to the secretary's authority to quarantine individuals. The Kansas Public Health Association (KPHA) is a professional organization that represents more than 800 public health practitioners, healthcare providers, researchers, advocates, and other professionals working together to build a healthier Kansas.

SB 29 would undermine the ability of public health officers to use crucial, evidence-based strategies to limit the spread of infectious diseases in their communities. Disease prevention measures like isolation and quarantine are fundamental public health practices that allow local health officers to quickly combat the threats raised by infectious diseases. These measures keep communities across Kansas safe from the negative impact of harmful diseases like polio, measles, and whooping cough. Removing the authority of local health officers to effectively utilize their expertise and prevent the spread of infectious disease puts the health and safety of Kansans at risk.

As such, KPHA supports the current authority of the Secretary of Health and Environment and local health officers to mitigate the spread of infectious diseases and protect the health of their communities. We encourage the Committee to vote NO on SB 29 and maintain the current statute.

Respectfully Submitted,

Sanna Schneeberger, Executive Director

Kansas Public Health Association

**February 7, 2025** 

Testimony to the Senate Committee on Public Health & Welfare

**NAME:** Julie Rios

TITLE: Kansas Citizen

EMAIL ADDRESS: j4rios@gmail.com

BILL NUMBER: SB29 Enacting the Constitutional Right to Health Freedom Act

PROPONENT, OPPONENT, or NEUTRAL: OPPONENT ORAL or WRITTEN ONLY TESTIMONY: WRITTEN ONLY

Chair Gossage & Members of the Committee,

I am writing today to voice my opposition to bill SB29 Enacting the Constitutional Right to Health Freedom Act.

Public health emergencies necessitate quick actions by those with the medical background and knowledge to make them—the Secretary of Health and Environment and our local health officials. Without the authority to act, the impact to the life, health and well-being of Kansans will be severe. The place for public health decisions to be made is not with the legislature where political considerations could be given equal or greater weight than public health considerations.

I urge you to vote NO on bill SB29 Enacting the Constitutional Right to Health Freedom Act.

Thank You,

Julie Rios Shawnee