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## **Unified Government Public Health Department**

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Opponent Testimony :: SB391

Elizabeth Groenweghe with the Unified Government of Wyandotte County/Kansas City, KS Public Health Department

Senate Committee on Public Health

February 12, 2024

Chair Gossage and Members of the Committee

Thank you for the opportunity to submit written testimony in opposition to Senate Bill 391 regarding the authority of local health officers to take steps to prevent the spread of infectious diseases in our community. I am the Chief Epidemiologist at the Unified Government Public Health Department of Wyandotte County and Kansas City, KS. One of my primary job duties is to prevent the spread of serious and potentially life-threatening infectious diseases in Wyandotte County. SB391 would have a pivotal impact on my ability to carry out this job duty.

SB391 proposes to remove the authority of local health officers in each county in Kansas to order individuals to isolate or quarantine while infectious or possibly infectious with disease. Isolation is the practice of separating sick people with an infectious disease from healthy people. Quarantine separates and restricts the movement of people who were exposed to an infectious disease for a specific amount of time in case they become ill. Isolation and quarantine are both foundational control measures necessary to stop the spread of infectious diseases in a community, including whooping cough, measles, and mumps, all three of which have caused outbreaks in the Kansas City metro area in the last decade.

Diseases that may require isolation or quarantine have harmful health impacts for community members if left unchecked; some, like measles and pertussis (aka whooping cough) can have lifelong health consequences or even result in death in young children and infants. These diseases spread rapidly in the community but can fortunately be stopped or slowed down by quickly isolating cases and quarantining those who were exposed.

In addition, Section 8 would remove any kind of immunization requirements for employees, including employees in high-risk settings such as healthcare. An employer may wish to enforce vaccine requirements for several reasons. For one, many workplaces consist of a large number of employees in various states of health. By requiring vaccines like the influenza vaccine, they are helping to keep their employees safe from illness. This not only prevents poor health, but may also reduce employee absenteeism, as less disease will require fewer sick days taken. Additionally, many employers are public facing, and in some cases, serve already vulnerable populations, such as those who are hospitalized or in long term care facilities. These employers have a duty to protect the vulnerable populations that they serve.

Lastly, Section 11 removes K.S.A. 65-126, K.S.A. 65-127, K.S.A. 65-129, and K.S.A. 65-129c. By repealing these statutes, this bill will remove the ability to enforce compliance with mandated quarantine or



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isolation, and thus leaving the general population at risk of being exposed to dangerous communicable diseases. All these changes would have significant public health impacts and make stopping the spread of infectious diseases in Kansas more challenging.

It is important to note that isolation and quarantine are not used often by public health authorities. This authority is limited to preventing the most severe and contagious of diseases from spreading. In fact, there are only eight diseases in Kansas that require an individual to fully isolate while infectious—measles, diphtheria, mumps, pertussis (whooping cough), rubella (German measles), tuberculosis, varicella (chickenpox), and COVID-19. It is essential that public health authorities take immediate action to prevent these diseases from spreading in our community and causing serious health outcomes, especially for babies and young children who can die or have long-term health effects from diseases like whooping cough or measles. Local health officers are non-partisan, medically trained experts whose priority is to minimize the spread of disease in their communities. By removing powers from local health officers to impose isolation or quarantine, this bill would endanger our community members who are vulnerable to dangerous communicable diseases.

It is essential we work together to strengthen our public health system to protect our community members from severe disease. SB391 will weaken our public health system's ability to respond to the threat of infectious diseases in the future. Infectious diseases are a serious threat to the wellbeing of our community and limiting public health's ability to appropriately respond to the next, and possibly worse, infectious disease threat will set Kansas up for failure. For these reasons, I oppose SB391 and ask that the committee not recommend it for passage.

Sincerely,

Elizabeth Groenweghe

Chief Epidemiologist and Epidemiology/Tuberculosis Program Manager, Unified Government Public Health Department