

Andy Marso
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Re: Testimony in opposition to House Bill 2601

Chairman Huebert and members of the House Education Committee,
Good afternoon and thanks for allowing me time to speak in opposition to House Bill 2601. My name is Andy Marso. Some of you may remember me as a statehouse reporter for various news outlets. While I'm not in the habit of wearing short sleeves to legislative hearings, I'm doing it today to give you a sense of the stakes of what you're discussing.
It seems clear that the angst over the mandatory vaccine process stems in part from KDHE adding meningitis to the list of required shots last year. I'd like to give you some context about why the agency did that. Meningitis is pretty rare and most non-medical people don't appreciate how serious it can be. I do, unfortunately, because of personal experience.
I contracted bacterial meningitis in 2004, during my senior year at KU. One day I was totally healthy and the next day I went to bed thinking I had the flu. When I woke up the next morning I couldn't walk. I would have died in bed if my friends hadn't carried me to a car and taken me to the doctor.
Within hours I was being airlifted to KU Medical Center in critical condition, with multiple organs failing. I spent about a month in a medically-induced coma while the folks at KU battled the infection and saved my life.
When I regained consciousness, I realized that I couldn't move my hands and feet. The meningococcal bacteria had cut off circulation to my extremities and my fingers and toes were slowly dying while still attached to my body (see attachments).
I spent that whole summer in the hospital, enduring excruciating treatments to save my arms and legs. I also had surgeries to amputate all of my toes and all but one of my fingers.
Then I spent more than a year in rehab, doing extensive physical and occupational therapy so I could learn to walk again, shower again, feed myself and go to the bathroom on my own.
My medical bills that year ran to about \$1.5 million. All to treat a disease that can often be prevented with a shot that costs \$150.
I was not vaccinated for bacterial meningitis because back then the vaccine was not required in Kansas or in Minnesota, where I grew up. My mom feels guilty about it to this day, but I obviously don't hold it against her. Let's be honest: most parents only get their kids a vaccine if a medical professional tells them to. No one told my mom she should be afraid of meningitis. That's exactly what the professionals at KDHE have done by requiring the meningitis vaccine. They've given parents the clear message that, "Hey, this is critically important, this contagious disease is nothing to mess with, and every teenager who can get vaccinated should get vaccinated to protect themselves and their classmates." Kansas currently ranks in the bottom 5 states for meningitis vaccination. KDHE's experts recognized that problem and made an evidence-based move to fix it.
In doing so, they also saved the state money for years to come. Medicaid is the single largest insurer of children. Remember my medical bills? Now imagine that, God forbid, there's a meningitis outbreak in a Kansas school, and three, four, five or even more kids on Medicaid get seriously ill and rack up bills like that. Those same kids on Medicaid get their immunizations from the Vaccines for Children program, which is federally funded. So by requiring vaccination, you use federal dollars to keep kids healthy, and you decrease the state's financial liability.

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But ultimately this is about much more than money. It's about people's lives, limbs, vision, hearing and brain function. Meningitis can steal them all. KDHE's experts, free from any lobbying or reelection pressures, made a good decision for the sake of public health, and the vast majority of Kansans are fine with that decision. This process is not broke, so why try to "fix" it? I'll stand for questions at the appropriate time.'

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