



Attachment C
Ken McClure
Idaho Medical Association

November 12, 2021

Dear Senator -

The return of the Idaho Legislature for a November session is cause for great uncertainty for physicians and the health care community at large. Physicians across Idaho have been disheartened to see political attacks on science, health care workers, and the COVID-19 vaccine -- the only proven mechanism to end the global pandemic.

While the topics the Legislature plans to discuss are disappointing on many levels, perhaps the most troubling is the discussion about state government restricting the rights of private business. In the case of health care, physicians are extremely concerned about unwarranted intrusion into how medical practices and health care facilities decide to keep our patients and employees safe.

The physician community stands ready to advocate for science and public health, as we communicated to you earlier this year. That has not changed. However, given the uncertainty of what will be discussed the week of November 15th, we ask that you follow the lead of the physician oath and do no harm to Idahoans, public health, and employers. The following is a list of principles that will guide Idaho Medical Association's assessment of proposed legislation:

- IMA is opposed to any new laws or regulations that prohibit physicians' ability to make decisions on how they run their private businesses, especially as it relates to the health and safety of patients and employees.
- IMA is opposed to any new laws or regulations that conflict with federal government policies and leave businesses with no ability to comply with the law.
- IMA is opposed to any new law or regulation that would criminalize physician compliance with federal policies on vaccine distribution or other medically necessary treatment.
- IMA is opposed to any provision that creates a new private right of action that increases liability for employers.
- IMA is opposed to any policy or regulation that does not follow the best available science related to antibody testing and natural immunity.
- IMA fully supports the COVID-19 vaccine and will oppose any policy that inhibits the ability for it to be widely available and accessible to the public.

It isn't a secret that Idahoans do not like government interference. While there is a legitimate debate proceeding in the United States court system about the federal policies proposed by President Biden, IMA implores you not to restrict the rights of private business. We need all the tools available to keep our workforce healthy and our economy open. On behalf of nearly 4,000 members representing physicians in all specialties, practice settings, and geographic locations in Idaho, we stand ready to answer questions and help guide policy that protects the health of and well-being of all Idahoans.

Sincerely,

Susie Keller, IMA CEO



November 12, 2021

Antibody Testing

IMA Public Health Committee Facts and Guidance

1. An antibody test does not tell you whether you are immune to the virus that causes COVID-19 disease.
2. An antibody test may indicate whether you have been infected or vaccinated; testing is currently used in research settings but is not recommended for individual decision-making, such as whether to get vaccinated
3. Even those with antibodies should still be vaccinated if they previously had COVID-19 and should still receive booster vaccinations when they meet the criteria for booster shots. Vaccines after having COVID-19, boosts immunity so you are less likely to get COVID-19 again.
4. If you have a positive antibody blood test, and you develop symptoms, you should still get a COVID-19 nasal swab test to identify if you have an acute COVID-19 infection. A positive nasal swab test will unfortunately indicate that you have COVID-19 reinfection.
5. A positive antibody test is not a reason to not get the COVID-19 vaccine.
6. One day, we may have a blood test that will show whether you are immune and protected from COVID-19, but we don't have that test today.
7. Vaccines are still the most effective and certain way to keep yourself and others safe from COVID. If you want to learn more on natural immunity vs. vaccine immunity, visit the recent IMA Public Health Guidance.

*LabCorp says, "This test should not be used to determine the level of immunity you have."

*CVS says, "The test cannot determine whether or not you can spread the virus to others. It should not be used for diagnostic purposes or to confirm immunity."

The CDC says *antibody testing is not currently recommended to determine if you are immune to COVID-19 following COVID-19 vaccination. Antibody testing should also not be used to decide if someone needs to be vaccinated.*

Background on antibodies and related testing

Some people suggest that it is possible to tell who is immune and protected from getting COVID by checking a blood test to see if the person has antibodies. Unfortunately, that will not work. Why not?

1. Not all antibodies are the same, and it is likely that there are only certain ones that actually protect you from getting infected. We don't yet know the level and type of antibodies that provide you with immunity from COVID.

- a. What does this mean? It means that you might have antibodies that will show up on a test, but perhaps not the right antibodies or enough of them to protect you from getting COVID. This is true even if you already had COVID or were vaccinated.
2. Antibody levels to this coronavirus are reported in different ways with different manufacturers of the tests. Therefore, even if we knew what level of antibodies would be protective for one test, it would not be possible to compare antibody levels from that test with another. There is no approved standard test for COVID-19 immunity.
3. Antibody levels change over time. A test done just days after infection or vaccination may not detect antibodies. Antibody levels rise and are usually detectable by three weeks after infection or vaccination. Antibody levels decline with time, which may, but doesn't necessarily mean that the person has declining immunity to the virus.
4. The immune system is very complicated. Antibodies only represent one part of the immune response and don't tell the whole story. Cells that are part of the immune system are thought to play an important role in defending against the virus and this element of the immune system is harder to measure.



October 15, 2021

IMA Public Health Committee Guidance

The bottom line until we have more data – (1) If you have not had COVID- and are unvaccinated, you and your family, friends and loved ones are at risk. Please get vaccinated as soon as possible. (2) if you previously had COVID, we cannot tell you how much or little protection you may have against getting COVID again, and whether getting the virus again might cause more severe disease, so please get at least one dose of vaccine.

The vaccine is safe and effective. As the Governor said, “Since the COVID-19 vaccine was made widely available to everyone in May, nearly all new COVID-19 cases, hospitalizations, and deaths are among the unvaccinated.”

IMA Talking Points

Natural Immunity vs. Vaccine-induced immunity

1. The IMA is committed to promoting the health and safety of Idahoans.
2. The science around COVID continues to evolve and the decisions regarding natural immunity (immunity from getting COVID) vs. vaccine immunity differ in what science is available to evaluate effectiveness.
3. There are conflicting data from studies looking at the strength and durability of natural immunity. These studies often involve only one vaccine, and any conclusions from these studies cannot be assumed to be the same for other COVID vaccines. These studies also have taken place in different countries at different times, where the virus variants (different types of COVID-19) may differ.
4. The fact that some people who have recovered from COVID appear to have strong immunity that lasts for many months is a very good thing. We do not want Idahoans to get COVID in the first place and risk the fate of nearly 700,000 Americans who have died from COVID. But we certainly are happy that it appears few will get COVID again, at least with the variants that we have encountered thus far.
5. Getting COVID and developing natural immunity is far more dangerous than getting vaccinated and developing vaccine-induced immunity.
6. COVID has caused many hospitalizations, deaths and in many cases long-term complications, such as so-called “long-COVID.” Long-COVID is when a person experiences ongoing symptoms that could last weeks or months after having COVID.

7. While some studies look back at populations of people who have had COVID and have seen evidence of strong immunity, it should be noted that natural immunity is unpredictable – some people develop more protection for a longer period of time than others. The problem is that we have no simple way as of today to identify people who have recovered from COVID that are likely to have strong immunity. The fact that someone may have a positive antibody test, does not necessarily mean that the person is protected from getting sick again, nor that any protection the person does have will protect against future versions of COVID.
8. Antibody tests are qualitative (positive or negative) and do not indicate the amount of immunity a person has.
9. Studies have looked at the natural immunity of people who, in most cases, had COVID with symptoms. We do not have enough data to determine whether those who previously had COVID without any symptoms or those who had a severe case of COVID, have strong and long-lasting immunity. There are reasons based upon our knowledge of immunology to believe that it could be different for these persons.
10. There is some decreasing immunity with people that had COVID. It is likely that this period of time is different for every person.
11. Some people who get COVID a second time can result in more severe disease than the first experience with COVID.
12. Even those who previously had COVID appear to benefit from at least a single dose of vaccine.
13. For those who had COVID, we do not know how long the protection will last and how effective it will be against future types of the disease.