

Letter of Information

Health and Government Operations Committee

House Bill 836 (Pena-Melnyk) COVID-19 Testing, Contact Tracing, and Vaccination Act of 2021

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On behalf of Maryland's independent colleges and universities and the 65,600 students we serve, we thank you for the opportunity to provide information regarding *House Bill 836 (Pena-Melnyk) COVID-19 Testing, Contact Tracing, and Vaccination Act of 2021*. This bill requires institutions of higher education to adopt and implement a COVID-19 testing plan to monitor, prevent, and mitigate the spread of the disease among students and staff. The plan would require a PCR or antigen test before a student may commence in-person class attendance or return to campus to reside in on-campus housing.

Our institutions and the 33,000 individuals that we employ have been impacted by COVID just as have other nonprofit organizations and businesses. During the fall 2020 semester, eight of our institutions offered only virtual instruction, while five of our institutions offered a de-densified socially distant residential experience with a hybrid model of both face-to-face and virtual instruction. Although we were grateful to receive federal stimulus relief funds, they covered only a fraction of the more than \$200 million in losses and over \$40 million in expenses from summer and fall of 2020. These expenses included: the provision of personal protective equipment; **testing**; leasing quarantine space; HVAC modifications; technological enhancements; and additional financial aid for our students. We estimate spring 2021 losses and expenses to exceed \$110 million.

While our member schools support the spirit of the legislation, we note several logistical and implementational challenges: (1) the scope of the bill, for a calendar year, presumes that the state of the pandemic is the same in September of 2021 as it is today; (2) the requirement to use a PCR or antigen test may run contrary to scientific advances that may recommend a different kind of test; (3) the cost of using a PCR or antigen test may far exceed the cost of whatever scientifically-advanced test is developed between now and the fall semester; (4) as vaccination becomes more prevalent, it may be recommended that testing be reduced or eliminated; (5) not all of our institutions have an on-campus health center, and the requirement to "monitor" the spread of COVID-19 may be difficult without one; and (6) many of our institutions partner with the local health department or local health care facilities for the purpose of testing and with the shift in focus to vaccinations, the local health departments and health care facilities have less capacity for testing analysis and reporting.

We appreciate the opportunity to provide this information related to **House Bill 836** and would be happy to address any questions or be a part of a workgroup, if one is established.