

Submitter: Kim Evans
On Behalf Of:
Committee: Senate Committee On Health Care
Measure, Appointment or Topic: SB1598

I am opposed to SB 1598 because, as currently written, it raises serious concerns about government overreach, medical autonomy, civil liability protections, and the scope of authority granted to the Public Health Officer.

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1. SB 1598 Expands Unchecked Authority of a Single Official

SB 1598 authorizes the Public Health Officer to issue standing orders that function like a statewide medical prescription and to require insurers to cover immunizations based on those orders. This delegation puts powerful medical decision-making in the hands of a single unelected official and reduces the role of individual health care providers in making personalized medical decisions with their patients.

This approach raises important questions about who decides what medical interventions are appropriate for individuals and jeopardizes the traditional doctor-patient relationship where care decisions are made based on a patient's unique medical history and personal circumstances.

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2. Concerns About Liability and Accountability

Current draft language includes broad liability protections for the Public Health Officer and any health care provider who follows standing orders. Opponents have raised concern that this eliminates important legal recourse for patients in the rare event of harm from a medical intervention recommended under a standing order.

Every Oregonian deserves clarity and recourse if they believe they've been harmed — especially in health care matters that are deeply personal and can carry significant risk for some individuals.

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3. Impacts on Medical Freedom and Informed Consent

Many Oregonians — including people with allergies, autoimmune conditions, or personal medical experiences — view the bill as a threat to medical freedom and

informed consent. Written testimony submitted during public hearings highlighted fears that state-level standing orders could undermine individual choice or blur the lines between voluntary and expected immunization practices.

Medical care must remain a shared decision-making process between a patient and their provider, not the result of standardized standing orders imposed by state officials.

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4. Lack of Clear Definitions and Potential for Scope Creep

SB 1598 uses broad language about “significant public health concerns” without clear limitations or definitions. This ambiguity could give future public health officers the flexibility to expand standing orders beyond vaccines to other areas of preventive care without sufficient legislative oversight or public debate.

Clear guardrails are critical to ensure that Oregon law protects personal choice, prevents mission creep, and respects individual health care decisions.

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Conclusion

While ensuring access to health care and preventive services is an important goal, SB 1598’s current scope threatens individual medical autonomy, accountability, and informed consent. I urge you to reject SB 1598 in its present form and instead focus on solutions that protect access without ceding broad authority to unelected officials or weakening crucial patient protections.

Thank you
Kim Evans