

STATE OF OHIO
Executive Department

OFFICE OF THE GOVERNOR

Columbus

VETO MESSAGE

**STATEMENT OF THE REASONS FOR THE VETO OF
SUBSTITUTE SENATE BILL 311**

December 3, 2020

Pursuant to Article II, Section 16, of the Ohio Constitution, which states that the Governor may disapprove of any bill, I hereby disapprove of Substitute Senate Bill 311 “Limit Director of Health order-issuing authority” and set forth the following reasons for so doing, as it is not in the best interest of protecting the health and safety of all Ohioans.

Ohio has strong laws that provide public health experts with the ability to respond to a public health crisis and protect Ohioans from the spread of a highly contagious, infectious diseases. On March 9th, 2020, I declared a State of Emergency in Ohio, recognizing COVID-19 (a novel coronavirus), as a serious threat to the health and wellbeing of Ohioans. State and local officials have been working to keep the public safe from this virus for almost a year. Throughout this time, the Ohio General Assembly and my administration have worked constructively to respond to this public health crisis.

However, medical experts believe that Senate Bill 311 restricts public health officials’ ability to react to such threats to our public health. Dr. Bruce Vanderhoff, then-incoming Chief Medical Officer at the Ohio Department of Health, said in recent testimony, “The legislation takes away public health’s ability to be nimble in the response to the COVID-19 pandemic and will limit the ability of public health officials to respond to future infectious disease outbreaks and potential acts of bioterrorism.”

The following are examples of some of the consequences should Senate Bill 311 become law:

1. Earlier this year, President Trump issued a ban on travelers from Wuhan, China, to slow the spread of COVID-19 to the United States. There is no question that this action bought Ohio and the country valuable time to prepare for this virus by reinforcing our healthcare system, increasing the production and supply of personal protection equipment, and developing life-saving treatments. If, in the future, a President failed to take such action and Senate Bill 311

were then in effect, Ohio would not be able to impose its own quarantine on those coming into Ohio from a disease hotspot and would be unable to protect our citizens.

2. In 2001, a bioterrorism attack was unleashed on the United States in the weeks following the September 11th terrorist attacks. Military grade anthrax was mailed to media outlets and U.S. Senate offices. At the time, there was no known culprit, but public health and law enforcement officials moved to protect the public from this infectious disease, which included quarantining individuals and entire physical buildings to stop its spread.

Having essential strategies to protect the public against the spread of infectious, contagious disease is not only important in our efforts to eradicate COVID-19, but it is also necessary to help stop the spread of all infectious diseases and prevent future health crises in Ohio. According to the Association of Ohio Health Commissioners, “The notion that action cannot be taken to prevent the spread of any of these serious illnesses to those who have not been directly exposed is contradictory to public health best practices that have been scientifically tested and verified over the past 100 years.”

Further, as Dr. Andrew Thomas, Chief Clinical Officer and Associate Professor of Clinical Internal Medicine at the Ohio State University Wexner Medical Center, also testified, “One of the most concerning aspects of the COVID-19 pandemic is the ability of an individual to infect another person unknowingly during the asymptomatic or pre-symptomatic phase of the infection. If the ability of the Ohio Department of Health to only issue executive orders related to those already diagnosed with the infection or exposed to someone who is diagnosed, we fear that there will be millions of Ohioans put at risk given the risk of asymptomatic or pre-symptomatic spread.”

The health care industry is straining and desperate for help as it works to keep in front of COVID-19. Dr. Jerry Mansfield, Chief Nursing Officer for Mount Carmel Health System, indicated that staffing levels are stretched thin and “our team of physicians, nurses and other staff are exhausted” and that this act would put additional pressure on the healthcare system.

It is essential that we continue to partner with the Ohio General Assembly to respond to the needs of Ohioans during this time. Just some of the COVID initiatives we have worked on together include:

- Distributing over \$4.5 billion in Coronavirus Relief Funds to small businesses, restaurants, primary and secondary schools, colleges, healthcare providers, non-profit entities, local governments, and many more;
- Enacting legislation that provides liability protections in House Bill 606 (Grendell);
- Enabling state and local governments to continue key operations in House Bill 197 (Powell, Merrin), House Bill 151 (Carfagna), and House Bill 404 (Manchester, Sweeney);
- Maintaining the integrity of houses of worship and the sanctity of the election process in House Bill 272 (Oelslager, Hillyer);
- Distributing needed funding to local governments in House Bill 481 (Fraizer); and
- Supporting schools and teachers affected by COVID in House Bill 164 (Ginter).

Based on the advice from doctors, nurses, and scientists, I agree that this legislation is not in the interest of public health and the protection of the people of Ohio. For these reasons, this veto is in the public interest.

IN WITNESS WHEREOF, I have hereunto subscribed my name and caused the Great Seal of the State of Ohio to be affixed at Cedarville this 3rd day of December, Two Thousand Twenty.

Mike DeWine, Governor

This will acknowledge the receipt of a copy of this veto message of Amended Substitute Senate Bill 311 that was disapproved by Governor Mike DeWine on December 3, 2020.

Name and Title of Officer

Date and Time of Receipt

* Attached are full copies of testimony from Dr. Andrew Thomas, Dr. Bruce Vanderhoff, Dr. Jerry Mansfield, Dr. Susan Koletar, the Association of Ohio Health Commissioners, and a joint letter

signed by OSMA, OHA, American Academy of Pediatrics, Children's Hospitals and the Business Roundtable.