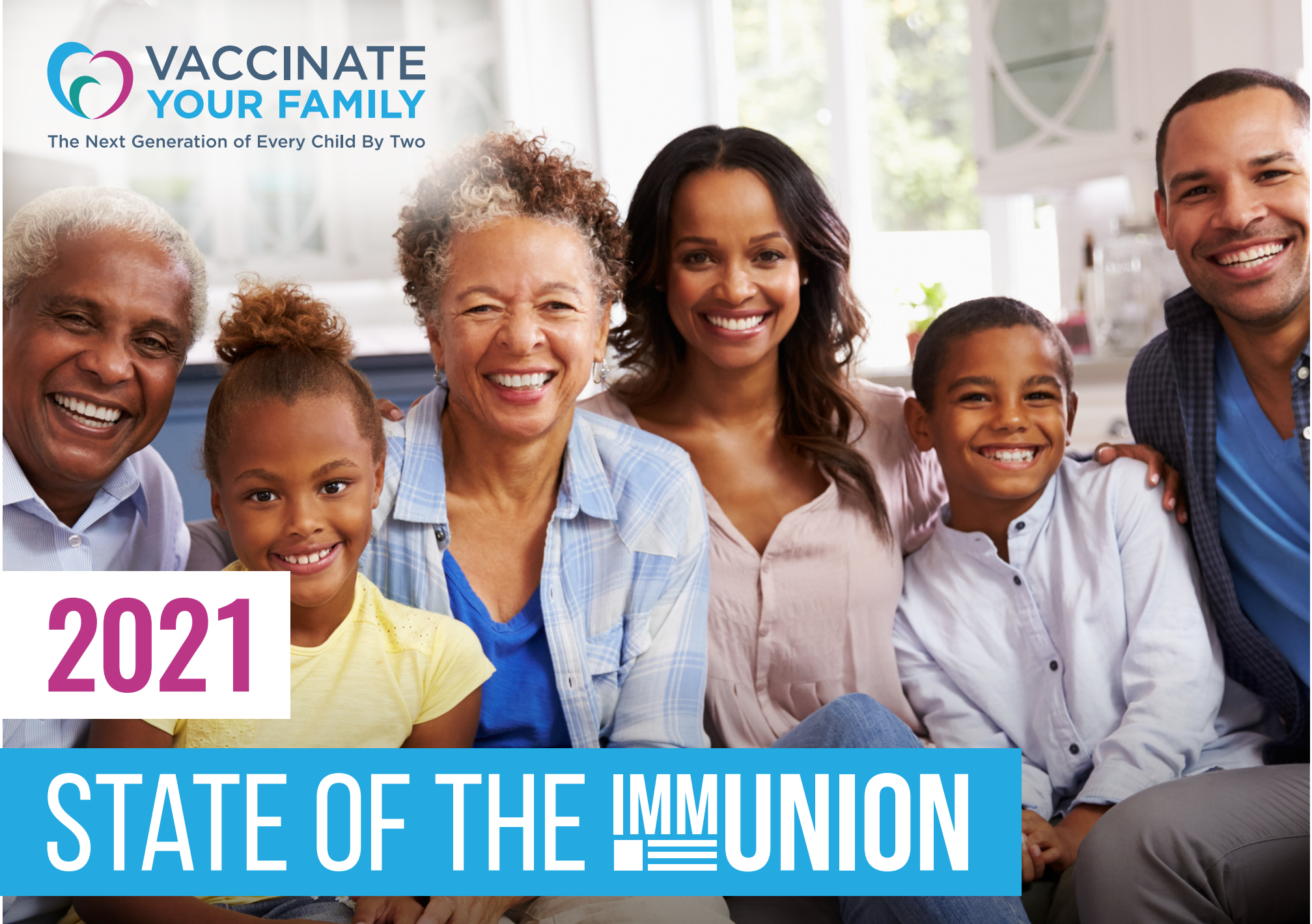




The Next Generation of Every Child By Two



2021

STATE OF THE IMMUNION

A REPORT ON VACCINE-PREVENTABLE DISEASES IN THE U.S.

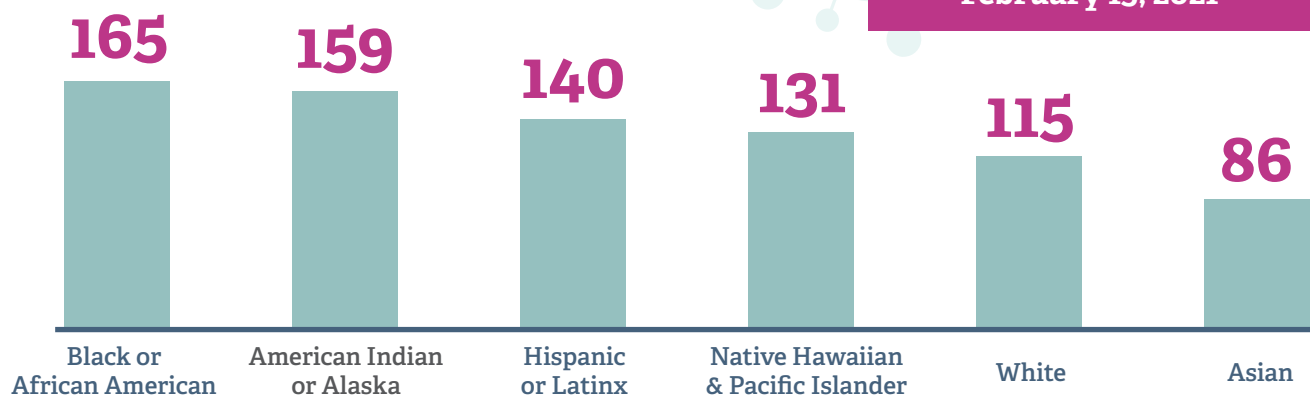
INTRODUCTION

Rarely in the history of our nation have we faced such a serious infectious disease threat as the COVID-19 pandemic. As of February 15, 2021, 486,000 people have died in the U.S. In comparison, about 675,000 people in the U.S. died from the influenza pandemic of 1918 — a time when we had little understanding of either respiratory viruses or vaccines and thus few resources at our disposal to slow the spread of disease.

COVID-19 has brought the many inequalities that pervade our nation's healthcare system into a harsh spotlight. Social determinants of health, such as where a person lives, how much money their family makes and other social and environmental factors, have always

affected people's ability to access vaccines and other critical services. Now, those who have been living with poorer health due to these systemic inequities are suffering most acutely from COVID-19. People with chronic health conditions such as cancer, chronic kidney disease and diabetes are at risk of more complications from COVID-19, although people considered to be otherwise healthy have also suffered serious outcomes. Communities of color have also suffered disproportionately during this pandemic with increased rates of illness, hospitalization, and death due to structural racism.

THE IMPACT OF COVID-19 VARIES BASED ON RACE/ETHNICITY"



Deaths per 100,000 people by race or ethnicity as of February 15, 2021



despite what you may
have heard...



COVID-19 vaccines
won't be able to
alter your DNA.



@Vaccinateyourfamily
Vaccinateyourfamily.org



Vaccine Safety Monitoring Never Stops

Even after a vaccine is recommended for use in the U.S. at least four different monitoring systems work together to look for any rare side effects that might have been missed in clinical trials.

[Vaccinateyourfamily.org/vaccine-safety](https://vaccinateyourfamily.org/vaccine-safety)



To complicate matters, the COVID-19 pandemic hit our country on the heels of a major measles outbreak. Disinformation about vaccines and public health have run rampant on social media and online, in general, for over a decade, leading to the decline of routine immunization rates in several communities. The persistence of this disinformation set the stage for skepticism toward public health officials' recommendations to contain the spread of COVID-19.

As underfunded and understaffed public health departments struggled to contain cases of the new coronavirus, many other routine tasks fell to the wayside, such as regular immunization clinics and special vaccination drives for diseases such as Hepatitis A and B. Further, national and local disagreement about the best way to handle the pandemic, such as mask protocols and stay at home orders, led to increased pressure on and threats against public health officials. As a result, we lost experienced leaders on the ground when we need them most.

This is a unique opportunity in our country's history. We have the opportunity to reverse policies that have been detrimental to the health of people across the U.S. and implement new policies that create an equal opportunity for good health. By rebuilding our public health infrastructure, addressing systemic inequalities that have prevented access to immunizations and other health services, and supporting science, we can build our strongest, healthiest country yet.

In this report, Vaccinate Your Family explores the federal policies necessary to fully realize this brighter future for our country.

LEARN MORE ABOUT COVID-19 AND ITS VACCINES



Visit vaccinateyourfamily.org/COVID19 for more information and resources on COVID-19 and the vaccines developed to prevent against it.



REBUILD OUR PUBLIC

HEALTH INFRASTRUCTURE

We cannot do much to prevent diseases and identify gaps in our communities' immunity if states do not have the ability to identify and intervene in communities where vaccination rates have fallen.

The first step is ensuring states have the funds necessary to implement successful immunization programs. *The Consolidated Appropriations Act, 2021* included nearly \$9 billion in funding for distribution of the COVID-19 vaccines. This funding is absolutely critical to ensure the vaccines can reach every person in the United States — and more may be needed. At the same time, the Centers for Disease Control and Prevention’s (CDC’s) Immunization Program, also known as Section 317 of the Public Health Service Act, continues to be chronically underfunded after more than a decade. The Program has been working at a severe deficit during this time, leading to cuts that have weakened our ability to vaccinate people of all ages.

In CDC’s most recent Professional Judgment report to Congress, the agency requests roughly \$1 billion to adequately support the

vaccination of children, adolescents and adults. This request includes funding for immunization programs across the country to coordinate and implement delivery of vaccines to children, to purchase vaccines for uninsured adults and others during public health emergencies, staff vaccination clinics, conduct targeted outreach and communication campaigns, monitor and contain disease outbreaks, and much more. In addition to an annual appropriation of \$1.1 billion (an increase of \$400 million over Fiscal Year 2020 funding), the Immunization Program will require at least \$900 million to make necessary improvements, which have been stalled for the past decade.

The CDC’s Immunization Program does not include funding for Indian Health Services (IHS) or funds to Tribal Nations operating their own healthcare systems. COVID-19 hit American Indian and Alaskan Native

people particularly hard. They are 5.3 times more likely to be hospitalized from COVID-19 than white people in the U.S.ⁱⁱⁱ That disparity is larger than any other racial or ethnic group in our country. Congress should develop a separate line item for immunization services in IHS funding as well as provide CDC with additional funding to disperse to the Nations who operate their own healthcare systems.

The next step is gathering accurate data on those vaccinated. Immunization information systems (IIS), also known as immunization registries, are confidential, population-based, computerized systems that have the ability to record all vaccine doses administered by participating providers to people residing within a geographic area. Every state, and many large cities, operate their own IIS.

CDC’s Immunization Program is Vital to Our Country’s Health

The program allows immunization programs in states, territories and some large cities to:



Buy and allocate vaccines



Monitor and contain disease outbreaks



Assess vaccine coverage and support registries



Staff vaccination sites



Purchase equipment



Monitor vaccine safety



Educate the public



Strengthen storage infrastructure



Liaise with healthcare providers



Each of the systems collects and shares vaccination data across multiple healthcare organizations, clinics, and pharmacies in a given area, creating a comprehensive, consolidated immunization record for every person. Many IIS also allow vaccine providers to: automate their vaccine inventory; allow expeditious tracking of vaccines in case of shortages and during vaccine recalls; and automatically flag high-risk patients for timely vaccinations. At the population level, an IIS can provide aggregate data for immunization programs to use in vaccination and disease surveillance, targeted outreach, and other program operations — all with the goals of improving vaccination rates and reducing cases of vaccine-preventable diseases.

IIS have been effective tools for immunization programs for several decades; however, modifications to IIS will be required to facilitate scaled up mass immunization efforts needed around the new COVID-19 vaccines, including the onboarding of additional vaccine providers and ensuring that each IIS aligns with standards to facilitate better data exchange with other electronic health systems. The immunization community estimates it will cost at least \$400 million to properly modernize states' immunization information systems.

Last, but certainly not least, **we must encourage people to join, and remain in, the public health workforce.** Like many public positions, entry-level public health jobs are not well paid compared to the private sector. *The Strengthening Public Health Workforce Act* introduced during the last Congress would offer \$35,000 per year in student loan repayments for anyone who commits to working at least two years in the public health sector. This is an important first step in attracting new and recent graduates back to this important work.



DID YOU KNOW?

The American Immunization Registry Association has a complete list of standards for Immunization Information Systems at immregistries.org



WHAT CAN CONGRESS DO?



Increase funding for CDC's Immunization Program to \$1.1 billion annually, with a one-time infusion of at least \$900 million to make necessary improvements to public health infrastructure



Create a line item in Indian Health Services for immunization and provide additional funds to CDC to disperse to Tribal Nations who control their own healthcare systems



Enact H.R. 550 to modernize Immunization Information Systems (IIS) and provide at least \$400 million for that purpose.



Reintroduce and enact the Strengthening Public Health Workforce Act in the 117th Congress to increase the public health workforce – now and for decades to come



ELIMINATE INEQUITIES IN

ACCESS TO IMMUNIZATION

Where a person lives, how much money their family makes and other social and environmental factors, known as social determinants of health, can affect a person's ability to access life-saving vaccinations. Despite many advances in vaccine policy, such as the implementation of the Vaccines for Children (VFC) program in 1994, disparities in access to immunizations remain.

For children, those who live in rural areas as well as those who are on Medicaid are less likely to be fully vaccinated by as much as 33.9% for some vaccines.^{iv}

Uninsured children are also less likely to be protected against dangerous vaccine-preventable diseases than those who are privately insured. The difference is startling: over 4% of uninsured children receive no vaccines, compared to less than 1% of privately insured children.

Challenges in accessing vaccines is not limited to children. There is no program such as Vaccines for Children (VFC) for adults, leaving many without a means to pay for recommended vaccines. First dollar coverage of vaccines can greatly improve the likelihood that an adult will be immunized.

Expanding first dollar coverage of vaccines to Medicare Part D and encouraging Medicare Advantage and stand-alone Medicare Prescription Drug Plans to include immunizations in the zero-cost sharing tier is critical to reducing the barriers to access for seniors. Influenza and pneumococcal vaccines, which are both covered by Part B, have been received by 70.4% and 66.9% of seniors over the age of 65, respectively. This same population must spend between \$14 and \$102, on average to receive either the shingles or the Tdap vaccine. These two vaccines, which protect against four diseases, have only been received by 37.4% and 20.4% of seniors, respectively.^v The cost savings for our economy, coupled with increased workplace productivity, are well worth the investment.



Insurance Coverage Should Not Dictate Access to Childhood Vaccines^{iv}

VACCINATION RATES FOR	PRIVATE INSURANCE	MEDICAID	UNINSURED
DTaP (≥ 4 doses):	86%	76.6%	65.6%
MMR (≥ 1 Dose):	92.8%	89.4%	79.6%
Combined 7-Vaccine Series*:	76.9%	65.7%	50.6%
No vaccines:	0.8%	1.3%	4.1%



DID YOU KNOW?



Disparities in Adult Vaccination Rates

Pneumococcal vaccination rates for people over the age of 65 vary greatly among racial/ethnic groups.^{vi}

White	Black	Latinx	Asian
68%	50%	42%	49%

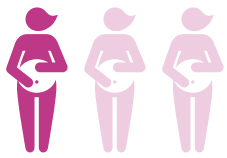
We must also help state Medicaid programs understand the value of first dollar coverage, particularly for pregnant women. Nearly half of all births are covered by Medicaid.^{vii} Depending on the state, however, women may not have access to vaccines recommended during their pregnancy. To help remove financial barriers, many, but not all state Medicaid programs remove vaccination copays for maternal vaccinations.^{viii}

Racial and ethnic disparities also continue in vaccine coverage among adult populations, as white people are consistently better vaccinated than minority groups.^{vi} People of color have traditionally been at disproportionate risk for being underinsured, lacking access to quality treatment, and preventive care through health insurance coverage.

Unfortunately, this trend extends to pregnant people. Pregnant people of color, particularly Black people, and those of lower socioeconomic status are less likely to be vaccinated than white pregnant people or those with higher socioeconomic statuses.^{ix} Lower vaccination rates among pregnant people living below the poverty level and/or participating in Medicaid could be a result of many factors including financial barriers, poor access to care, vaccine hesitancy, and lack of vaccination recommendations from providers.^{viii}



PREGNANT PEOPLE ARE DRAMATICALLY UNDERVACCINATED^{IX}



ONLY 1 IN 3

pregnant people receive both flu and Tdap vaccines



ONLY HALF

receive either flu or Tdap



Black and Latinx people and those who received less education had up to

25% LOWER VACCINATION RATES

WHAT CAN CONGRESS DO?



Ensure all children enrolled in state CHIP programs are eligible for VFC vaccines.



Support the *Helping Adults Protect Immunity (HAPI) Act (H.R.8725/S.4864)* to create more consistent coverage of vaccines under Medicaid and CHIP programs.



Support the *Maternal Immunization Enhancement Act (S.4690)* and the *Maternal Immunization Coverage Act (S.4705)* which would increase Tdap and influenza vaccination rates among pregnant people.

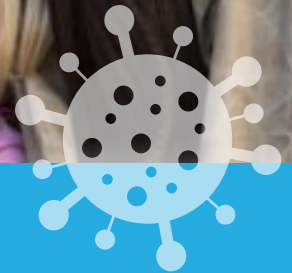


Support the *Protecting Seniors Through Immunization Act (H.R.5076/S.1872)* to eliminate out-of-pocket costs for vaccines covered under Medicare Part D and to improve vaccine awareness and education for beneficiaries.



CREATE A CULTURE

OF IMMUNIZATION



Vaccines have done an excellent job of reducing and eliminating infectious diseases in the U.S. As a result, many people no longer remember how dangerous these diseases are. Even doctors and other healthcare professionals have not seen these diseases outside of textbooks and often consult with more senior colleagues when they suspect a patient has measles or another vaccine-preventable disease.



Additionally, many people are not aware that people with chronic health conditions such as heart disease, asthma and diabetes are at increased risk for complications from certain vaccine-preventable diseases. Many of the people with these conditions do not think of themselves as “sick” and therefore don’t consider themselves to be particularly vulnerable to these serious, and sometimes deadly, diseases. As a result, they may not prioritize getting themselves and their family members vaccinated.

It is time to revive a culture of immunization in the U.S. As we continue to distribute COVID-19 vaccines to much of the country, we must help people understand why it is so critical they protect themselves and their families against not just COVID-19, but all of the other vaccine-preventable diseases.

HAVE QUESTIONS ABOUT VACCINE SCIENCE AND SAFETY?

Visit vaccinateyourfamily.org/questions-about-vaccines for answers to common questions and myths about vaccines.



While the majority of people in the U.S. support the importance of vaccination, many also have genuine questions about immunizations. For better or worse, we live in an age in which people seek out information online, and it can be difficult to tell whether the websites or social media pages they read are science-based.

Now, more than ever, we need legislators and their staff to understand and share vaccine safety and science. Vaccines are carefully studied before approval and monitored by several separate systems after licensure to identify even the rarest side effects.

We know it is not possible to know responses to all of the vaccine myths circulating online, which is why many organizations, including Vaccinate Your Family, have created special webpages constantly updated with answers to the recent questions and concerns your constituents may have about immunizations for themselves and their loved ones.

LEARN MORE ABOUT VACCINE-PREVENTABLE DISEASES

Visit vaccinateyourfamily.org for information on each vaccine, recommended schedules and details on the diseases that vaccines prevent.

The COVID-19 pandemic taught people the importance of community, or herd, immunity. The concept of community immunity is no different for other vaccine-preventable diseases. People must understand that when enough people are vaccinated against a certain disease, the germs can't travel as easily from person to person, and the entire community is less likely to get the disease.

The levels of vaccination rates needed to protect communities from diseases vary based on several factors, including how infectious the disease is and the efficacy of the vaccine. As a society, it is important that we work together to protect one another from deadly diseases. By maintaining high vaccination rates we not only protect ourselves, but we also protect vulnerable infants who are not fully vaccinated yet and people of all ages with weakened or failing immune systems.

Community Immunity Thresholds^{X,XI}



MEASLES: 93-95%



PERTUSSIS: 92-94%



MUMPS: 75-86%



POLIO: 80-86%

If we stopped vaccinating, the limited number of vaccine-preventable disease cases we have in the United States could very quickly become tens or hundreds of thousands of cases.

WHAT CAN CONGRESS DO?

Enact the *VACCINES Act (H.R.2862/S.1619)* which includes critical funding for vaccine communication programs.

Add a section on your website linking to science-based information on vaccines for your constituents. Research shows people like to have a variety of sources, so in addition to linking to government sources such as the Department of Health and Human Services (HHS), CDC, and the Food and Drug Administration (FDA), include non-profit websites that have been certified by the World Health Organization (WHO) as credible sources of vaccine information. Websites such as Vaccinate Your Family receive a "Vaccine Safety Net" stamp of approval once they have been thoroughly vetted by WHO.

Show your support of vaccines on social media using #vaccineswork. Post photos of you and your family receiving vaccines. Follow groups such as Vaccinate Your Family to share and retweet their posts addressing vaccine benefits as well as disinformation.

Learn and share how your constituents have been affected by vaccine-preventable disease. COVID-19 is now a vaccine-preventable disease. People are also still very much affected by diseases such as influenza and whooping cough. Reach out to people whose stories you see or hear and help them get the word out about the importance of immunization.



CONCLUSION: THE STATE OF OUR

IMMUNION CAN BE STRONG AGAIN

The COVID-19 pandemic has shown us the weaknesses in our public health and healthcare systems. While this has been a dark moment for our country, we have the ability to address each of these issues and come out stronger and healthier than ever before.

THAT IS WHY WE ARE URGING CONGRESS TO:

- **Increase funding for CDC's Immunization Program to \$1.1 billion annually**, with a one-time infusion of at least \$900 million to make necessary improvements to public health infrastructure.
- **Create a line item in Indian Health Services for immunization** and provide additional funds to CDC to disperse to Tribal Nations who control their own healthcare systems.
- **Enact H.R. 550 to modernize Immunization Information Systems (IIS)** and provide at least \$400 million for that purpose.
- **Reintroduce the Strengthening Public Health Workforce Act** to increase the public health workforce both now and for decades to come.
- **Ensure all children enrolled in CHIP** are eligible for VFC vaccines.
- **Encourage states to include vaccinations at no cost** to pregnant people in all Medicaid plans.
- **Support the Protecting Seniors Through Immunization Act (H.R.5076/S.1872)** to eliminate out-of-pocket costs for vaccines covered under Medicare Part D and to improve vaccine awareness and education for beneficiaries.
- **Add a section on your website linking to science-based information on vaccines for your constituents.** People like to have a variety of sources, so in addition to linking to government sources such as CDC, HHS and FDA, include non-profit websites that have been certified by the World Health Organization (WHO) as credible sources of vaccine information. Websites such as Vaccinate Your Family receive a "Vaccine Safety Net" stamp of approval once they have been thoroughly vetted by WHO.
- **Show your support of vaccines on social media.** Post photos of you and your family receiving vaccines. Follow groups such as Vaccinate Your Family to share and retweet their posts addressing vaccine benefits and responses to common vaccine myths.
- **Learn and share how your constituents have been affected by vaccine-preventable disease.** COVID-19 is now a vaccine-preventable disease. People are also still very much affected by diseases such as influenza and whooping cough. Reach out to people whose stories you see or hear and help them get the word out about the importance of immunization.





RESOURCES AND USEFUL LINKS

Vaccinate Your Family is a leading source of science-based vaccine information.



Please visit our website for more information on:

Common Questions about Vaccines

- vaccinateyourfamily.org/questions-about-vaccines

Which Vaccines People Should Receive

- vaccinateyourfamily.org/which-vaccines-does-my-family-need

How People May Pay for their Vaccines

- vaccinateyourfamily.org/questions-about-vaccines/paying-for-vaccines

Useful COVID-19 Vaccine Graphics and Handouts to Share

- vaccinateyourfamily.org/vyf-covidgraphics

Personal Stories about the Impact of Vaccine-Preventable Diseases

- vaccinateyourfamily.org/why-vaccinate/personal-stories

Please also visit our partners for more policy resources:

- [Trust for American's Health: Ready or Not?](#) examines the nation's ability to respond to public health emergencies, tracks progress and vulnerabilities, and includes a review of state and federal public health preparedness policies and a state-by-state map rating of preparedness.
- [317 Coalition](#) is solely focused on advocating for increased federal funding for the National Center for Immunization and Respiratory Diseases at the Centers for Disease Control and Prevention, and as such will focus on implementing the policies of the Advisory Committee on Immunization Practices and other relevant policy-making bodies.
- [Adult Vaccine Access Coalition](#) is fostering an inclusive partnership of organizations to inform and engage federal policymakers in working towards common legislative and regulatory solutions that will strengthen and enhance access to and utilization of adult immunization services across the health care system.
- [Association of Immunization Managers](#) enables immunization program managers to work

together to effectively prevent and control vaccine-preventable diseases and improve immunization coverage in the United States and its territories.

- [Association of State and Territorial Health Officials](#) is the national nonprofit organization representing public health agencies in the United States, the U.S. Territories, and the District of Columbia, and over 100,000 public health professionals these agencies employ.
- [Immunization Coalitions Network of the Immunization Action Coalition](#) offers a searchable database to locate state and local immunization coalitions and a host of state policy resources.
- [National Association of County & City Health Officials](#) is comprised of over 2,800 Local Health Departments across the United States.
- [American Academy of Pediatrics](#) offers an overview of recent disease outbreaks and vaccination rates.
- [The Centers for Disease Control and Prevention](#) has created an infographic outlining the country's process for vaccine approval and ongoing oversight.



Endnotes

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- iii McPhillips, Dana. "COVID-19's Tragic Effect on American Indians: A State-by-State Analysis." *U.S. News & World Report*, 7 October 2020.
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The Next Generation of Every Child By Two

Vaccinate Your Family: The Next Generation of Every Child By Two

Our mission is to protect people of all ages from vaccine-preventable diseases by raising awareness of the critical need for timely immunizations, increasing the public's understanding of the benefits of vaccines, increasing confidence in the safety of vaccines, ensuring that all families have access to life-saving vaccines, and advocating for policies that support timely vaccination.