

# THE 317 COALITION

## FY 2016 Labor-HHS-Education Appropriations Bill

### Centers for Disease Control and Prevention

#### Immunization

(Dollars in Thousands)

Program	FY 2016 Appropriation	FY 2017 President's Budget	FY 2017 317 Coalition Recommendation
Section 317 Immunization Program	\$610,847	\$560,508	\$650,000

**Vaccines Save Lives and Money** – Vaccines are one of the greatest success stories in public health and are among the most cost-effective ways to prevent disease. Indeed, we know that for each dollar invested in the U.S. childhood immunization program, there are over ten dollars of societal savings and three dollars in direct medical savings. Moreover, childhood immunizations over the past twenty years have prevented 322 million illnesses, 732,000 deaths, and nearly \$1.4 trillion in societal costs. In the 2014 – 2015 season alone, flu vaccination prevented an estimated 1.9 million illnesses. Maintaining high vaccination coverage is vital for preventing epidemics of diseases that cause preventable illness, disability and death.

Annual influenza epidemics are estimated to result in an average of 3.1 million hospitalized days and 31.4 million outpatient visits, while the direct health care burden of vaccine-preventable diseases in adults is estimated at \$10 billion annually. 2014 saw the largest number of cases of measles in the U.S. since the disease was eliminated in 2000, with over 667 reported cases across 27 states. CDC estimates that it can cost over \$140,000 to contain each individual case of measles. At the beginning of 2015, a measles outbreak stemming from an amusement park in California resulted in over 189 cases among individuals in 24 states plus the District of Columbia over the whole year. This should serve as a wake-up call. Unfortunately, during the past decade, federal funding has not kept up.

**How the 317 Program Continues to Serve a Critical Role** – Vaccines alone cannot protect a population. A robust immunization infrastructure is required to ensure that children, adolescents, and adults receive appropriate immunizations. By partnering at the local and state levels with healthcare providers in the public and private sectors, the program helps assure the implementation of effective and safe immunization practices to achieve high coverage, reduce disparities, and support infrastructure for essential activities.

The Vaccines for Children program, the primary source of federal vaccine purchase funding for children, relies upon the critical infrastructure and operations funded through the Section 317 program to effectively serve millions of children each year. The Section 317 program is the backbone of our nation's public health infrastructure. It supports the science that informs our national immunization policy, provides a safety net to uninsured, low-income adults for vaccine purchases, monitors the safety of vaccines, educates providers, performs community outreach, and conducts surveillance, laboratory testing and epidemiology to respond to disease outbreaks. During the 2015 measles outbreak, 317 funds supported local and state health departments in rapid response, public health communication, data gathering and diagnostics.

In 2015, the CDC submitted a report to Congress estimating that the Section 317 program requires \$1.071 billion to carry out its public health mission of protecting Americans from preventable diseases. As Affordable Care Act implementation should lead to greater access to immunization services for underinsured children and adolescents, Section 317 resources now have the opportunity to reach remaining underserved and uninsured populations. Federal funding has never adequately funded vaccines for adults, and pockets of need remain among this population. Further, strong public health infrastructure will continue to be critical to conduct outreach and education that ensures high vaccination coverage levels, as well as maintaining adequate public health preparedness for response to a vaccine-preventable national emergency.

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The 317 Coalition urges Congress and the Administration to reach this funding level over the next several years to save lives, increase productivity and reduce direct and indirect healthcare costs.

**Professional Judgement** - CDC developed a professional judgement budget estimate that would cover the costs of realizing the prevention opportunities that are in scope for Section 317, accounting for changes in the recommended vaccination schedules, and projecting changes to the immunization financing environment. Program operations include state, local, and national, and come to \$765.3 million. Vaccine purchases include uninsured adults and time-sensitive public health needs, coming to \$265.1 million. In sum, the professional judgement total adds up to over \$1.03 billion.