On behalf of the 317 Coalition, we are writing to thank you for your continued support for the Centers for Disease Control and Prevention (CDC) in the FY 2020 appropriations process, specifically for CDC’s Section 317 Immunization Program with the National Center for Immunization and Respiratory Diseases (NCIRD). We were pleased that an increase was included for this critical program in the House bill. As you move to conference on the Labor, Health and Human Services and Education appropriations bill, we urge you to include the increase of $39 million for the program—and the increase of $10 million for flu planning and response at the NCIRD.

Vaccines are one of the greatest success stories in public health and are among the most cost-effective ways to prevent disease. In fact, for every dollar invested in the U.S. childhood immunization program, there are over ten dollars of societal savings and three dollars in direct medical savings. Between 1994 and 2016, childhood immunizations prevented 381 million illnesses, 855,000 deaths & nearly $1.65 trillion in societal costs.

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. During the 2018-2019 flu season, CDC received reports of 61,200 deaths, 136 of those being pediatric deaths.

Meanwhile, from January 1 to October 3, 2019, 1,250 individual cases of measles were confirmed in 31 states. This is the greatest number of cases reported in the U.S. since 1992. More than 75% of the cases this year are linked to outbreaks in New York. The majority of cases are among people who were not vaccinated against measles. 119 of the people who got measles this year were hospitalized, and 61 reported having complications, including pneumonia and encephalitis.

The states that have reported cases to CDC are Alaska, Arizona, California, Colorado, Connecticut, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Michigan, Missouri, New Mexico, Nevada, New Hampshire, New
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Jersey, New York, Ohio, Oklahoma, Oregon, Pennsylvania, Texas, Tennessee, Virginia, and Washington. CDC estimates it can cost over $140,000 to contain each individual case of measles.

In July, 2019 CDC released a professional judgment 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 $845.6 million. Vaccine purchases include uninsured adults and time-sensitive public health needs, coming to $245.2 million. In sum, the FY 2019 professional judgment total adds up to over $1,010 billion.

We thank you again for your leadership and support of public health and prevention. Maintaining high vaccination coverage is vital for preventing epidemics of diseases that cause preventable illness, disability and death and thus, we urge you to include $660 million for the CDC’s Section 317 Immunization Program in FY 2020. Should you have any questions, please contact Amy Souders, Executive Director, 317 Coalition.

Sincerely,
The 317 Coalition
The American Public Health Association
Arizona Partnership for Immunization
Association of Immunization Managers
Association of State and Territorial Health Officials (ASTHO)
City of Laredo Health Department
Dane County Immunization Coalition
Immunization Action Coalition
Immunization Coalition of Los Angeles County (ICLAC)
Immunization Task Force- Metro Omaha
Langlade County Immunization Coalition
March of Dimes
The National Association of County and City Health Officials (NACCHO)
National Association of Pediatric Nurse Practitioners
Parents of Kids with Infectious Diseases
Pennsylvania Immunization Coalition
STChealth
Trust for America’s Health
Vaccinate Your Family
West Virginia Immunization Network, a program of the Center for Rural Health Development