March 27, 2020

The Honorable Roy Blunt
Chairman
Subcommittee on Labor, Health and Human Services, and Education
Committee on Appropriations
United States Senate
Washington, D.C. 20510

The Honorable Patty Murray
Ranking Member
Subcommittee on Labor, Health and Human Services, and Education
Committee on Appropriations
United States Senate
Washington, D.C. 20510

Dear Chairman Blunt and Ranking Member Murray:

As you prepare the Fiscal Year (FY) 2021 Labor, Health and Human Services, and Education Appropriations bill, we urge you to provide $710 million for the national immunization program authorized under Section 317 of the Public Health Service Act at the Centers for Disease Control and Prevention (CDC).

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 381 million illnesses and 855,000 deaths, and saved trillions of dollars in societal costs.

The Section 317 immunization program acts as the backbone of our nation’s public health system by supporting the science that informs our national immunization policy, providing a safety net to uninsured, poor adults for vaccine purchases, monitoring the safety of vaccines, educating providers and performing community outreach, and conducting surveillance, laboratory testing, and epidemiology to respond to disease outbreaks. A robust immunization infrastructure – in addition to the vaccines – is imperative to support programs such as Vaccines for Children (VCF). VCF relies upon the critical infrastructure and operations funded through the Section 317 program to effectively serve millions of American children each year.

Last year, the CDC submitted a report to Congress concluding that the Section 317 program requires additional funding to carry out its essential public health mission of protecting Americans from preventable diseases. In 2019, there were 1,282 cases of measles of which 128 were hospitalized and 61 reported having complications, including pneumonia and encephalitis. So far this year, CDC has confirmed five cases of measles in five states, with outbreaks recorded in seven jurisdictions. CDC estimates that it can cost over $140,000 to contain each individual case of measles. That is why the Section 317 program is so vital in supporting rapid response efforts during outbreaks and buttressing local and state public health capacity for surveillance, detection, and response.
Further, 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 136 pediatric deaths; and after considering under-reporting, CDC estimated that it was likely closer to 480 deaths associated with influenza in children.

Unfortunately, during the past decade, federal funding has not kept up with the need to support a robust national immunization program in order to better respond to outbreaks, and prevent them in the first place. Providing $710 million for the Section 317 program in FY 2021 would ensure access to cost-effective prevention measures to help keep Americans healthier. We greatly appreciate your consideration of this vital request.

Sincerely,

Jack Reed
United States Senator

Thomas R. Carper
United States Senator

Richard J. Durbin
United States Senator

Angus S. King, Jr.
United States Senator

Margaret Wood Hassan
United States Senator

Cory A. Booker
United States Senator

Sheldon Whitehouse
United States Senator

Tina Smith
United States Senator
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