



State Trends in Vaccine Policy 2021-2022

Tahra Johnson

NCSL Health Program

State Legislative Priorities and Trends 2021-2022

Pharmacist Vaccine Authority

Arkansas HB 1134

California AB 1064

Maryland HB 1040

Ohio HB 6

Other Providers

Optometrists (Illinois and New Jersey)

Podiatrists (South Carolina)

Dentists (Wisconsin)

Cardiac/emergency technicians (Georgia)



State Legislative Priorities and Trends 2021-2022

Vaccine Access and Planning

[Colorado HB 1401](#)

[Georgia HB 1086](#)

[Mississippi SB 2799](#)

[Washington HB 1368](#)

Vaccine Exemption Policy

[Oklahoma SB 658](#)

[Connecticut HB 6423](#)



NCSL Vaccine Databases and Resources

NCSL Vaccine Tracking

[State Public Health Legislation Database](#)

[COVID-19 Database](#)

[Maternal and Child Health Database](#)

NCSL Vaccine Resources

[Vaccine Policy Toolkit, 2021](#)

[Health Policy Snapshot: COVID-19 Vaccine Infrastructure and Access, 2021](#)

[State Vaccine Exemptions Webpage, 2022](#)



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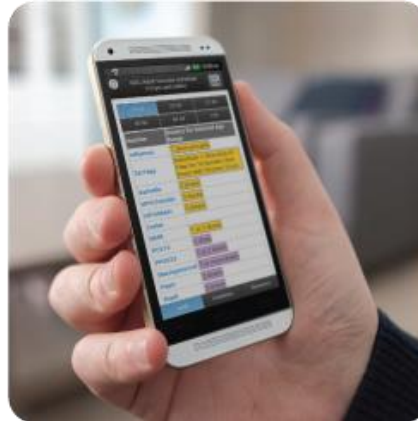
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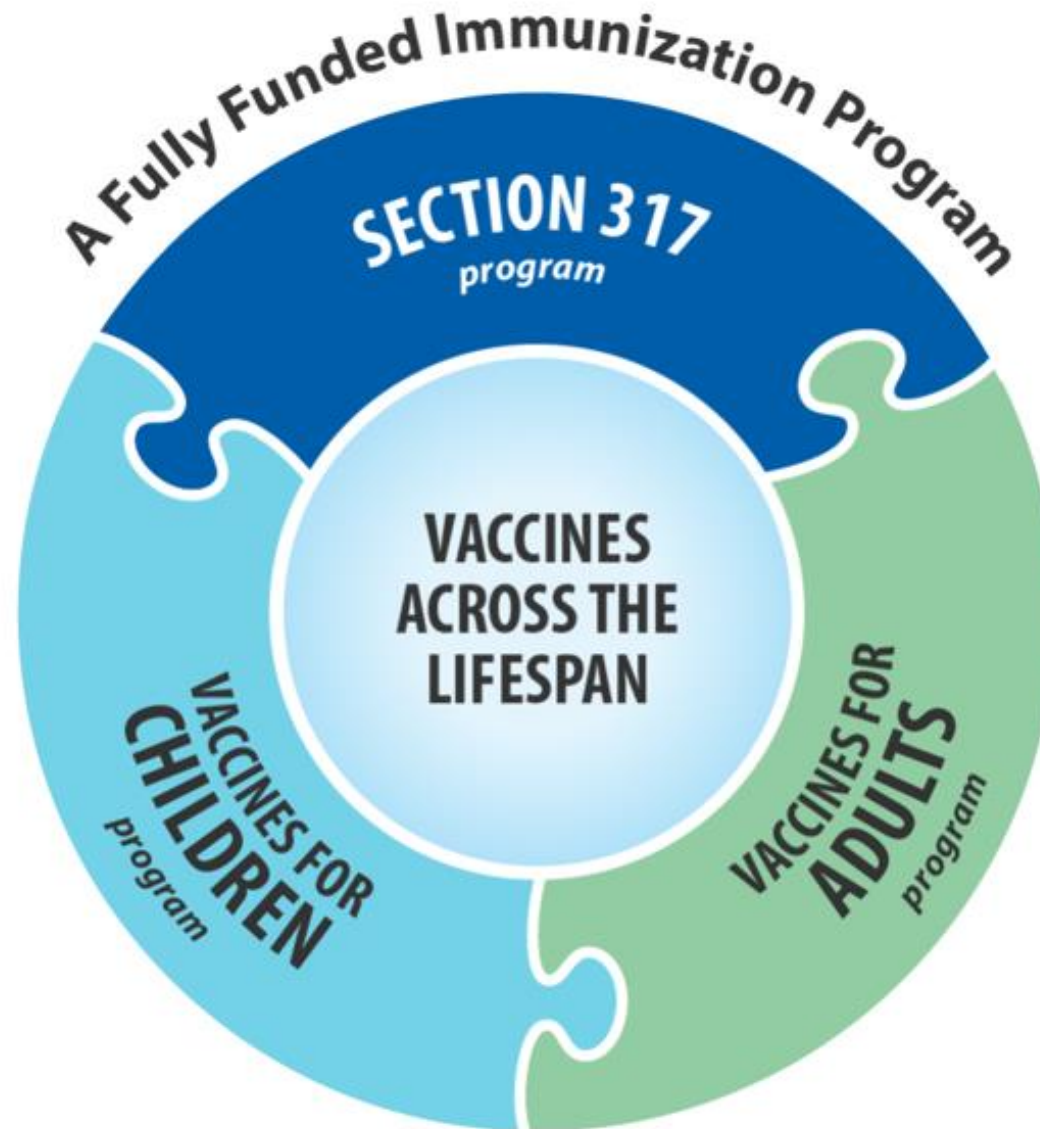
Thank you!

Immunization Overview



Georgina Peacock, MD, MPH
Director
Immunization Services Division

Comprehensive Immunization Program



Discretionary Immunization Funding

- Core public health infrastructure promotes immunization recommendations across the lifespan.
- Essential in protecting communities from VPDs, including providing a safety net for uninsured adults, responding to outbreaks of VPDs, and ensuring a scientifically sound and robust immunization infrastructure.



FY2023 President's Budget Request increase supports ongoing immunization program needs and supports future COVID-19 vaccinations.

Vaccines for Children (VFC) Program

- Important part of the comprehensive immunization program
- **FY2023 President's Budget Request:**
 - Increase for CDC's efforts to support state, tribal, local and territorial (STLT) health departments
- **Requested Program Updates Requiring Legislative Authority**
 - Expanding the program to include all children under age 19 enrolled in CHIP
 - Making program improvements
 - updating the provider administration fee structure to increase provider capacity
 - eliminating cost-sharing for eligible children

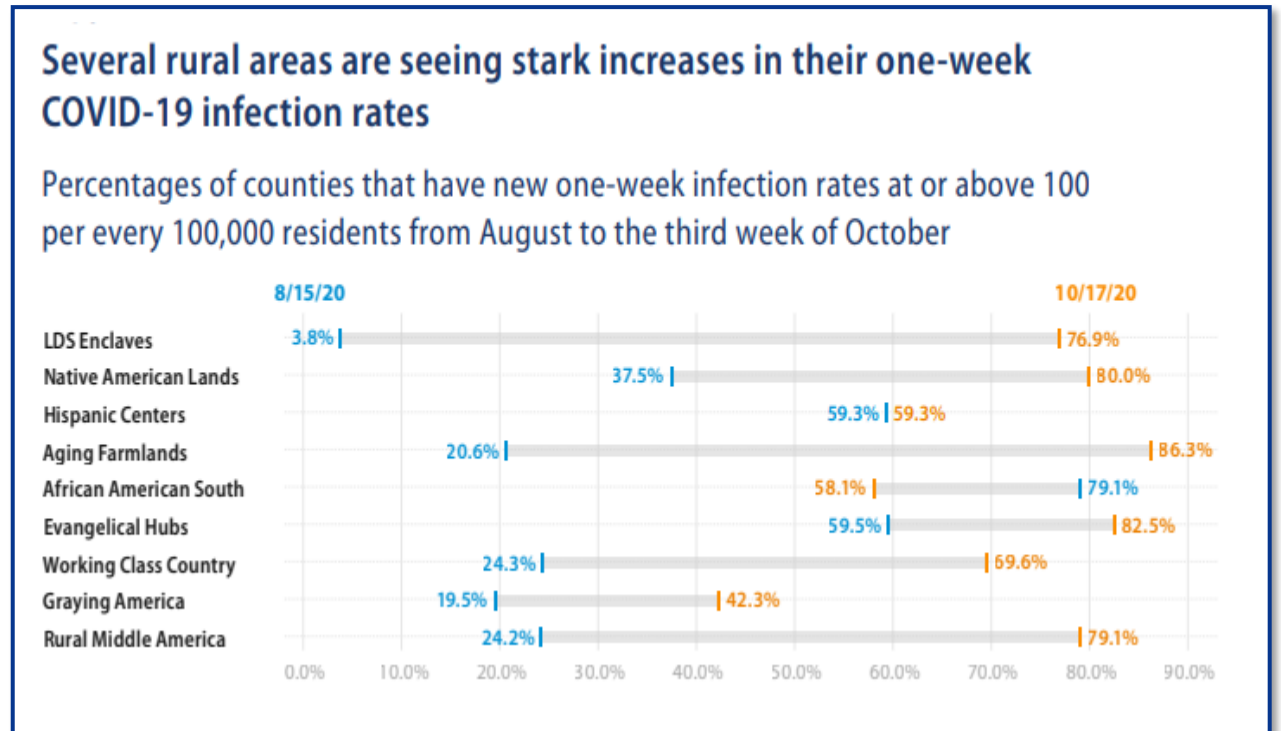


Sources: 1. Long-Term Payoff: An Economic Perspective on Immunization December 23, 2019. 2. Since The Start Of The Vaccines For Children Program, Uptake Has Increased, And Most Disparities Have Decreased

Adult Immunization Program

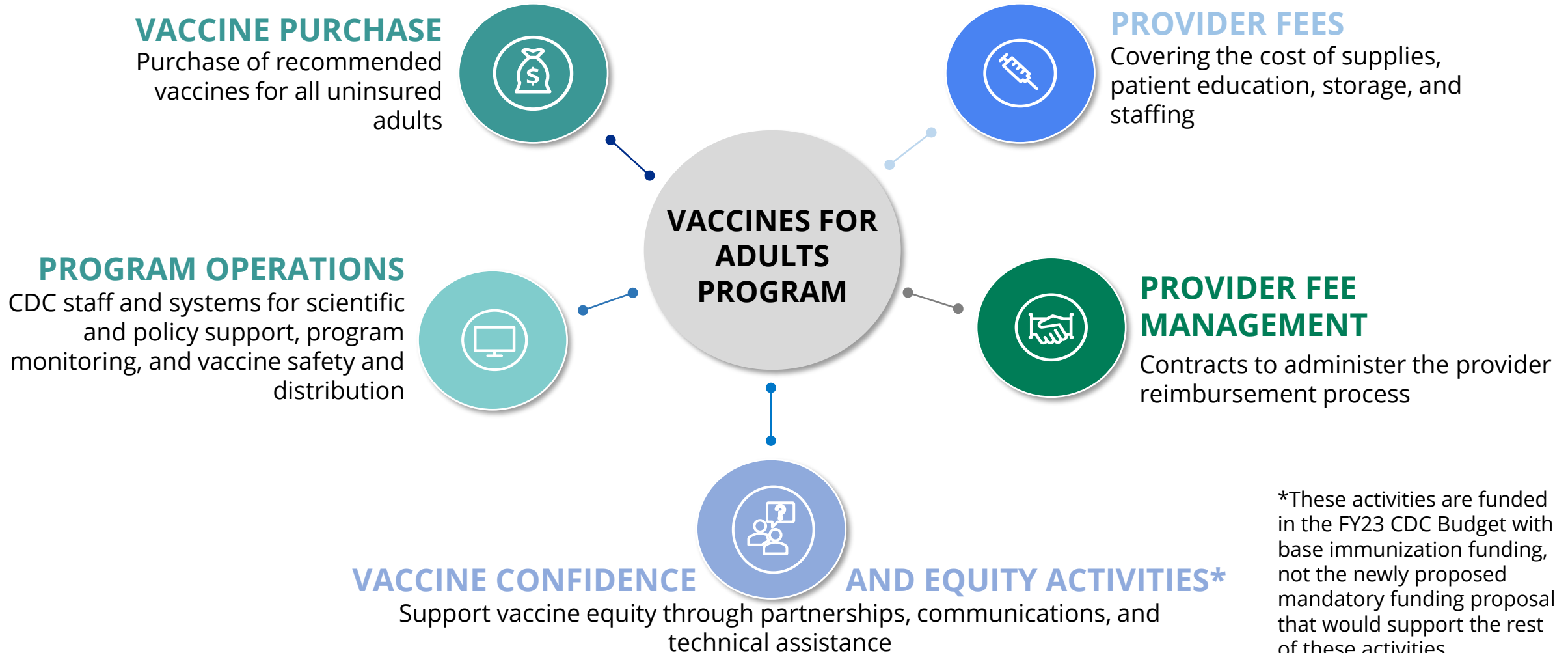
COVID-19 has further highlighted the need for a robust adult immunization program

- The **lack of a robust, national adult immunization program** that facilitates a more agile and effective response to pandemics has hindered federal and state government response
- COVID-19 has disproportionately impacted groups who have been marginalized – including rural, low-income, and essential worker communities – **highlighting long-standing and systemic inequities** in health care and public health



Vaccines for Adults (VFA) Program

The proposed Vaccines for Adults program would reduce the spread of vaccine-preventable diseases and pave the way to greater health equity



Impact of COVID-19

- Stood up COVID vaccination program, distributing 600 Million doses have been distributed nationwide to over 92,000 providers in just one year.
- COVID-19 pandemic's impact on the U.S.'s health and economy included disruption of health systems' administration of routine childhood immunization
- Increased need for health equity and vaccine confidence programs



COVID-19 vaccines administered (as of June 16, 2022)

% of People Fully Vaccinated:



≥5 years of age:
71%



≥18 years of age:
77%



≥65 years of age:
91%

% of Fully Vaccinated People with First Booster Dose:



≥12 years of age:
49%



≥18 years of age:
51%



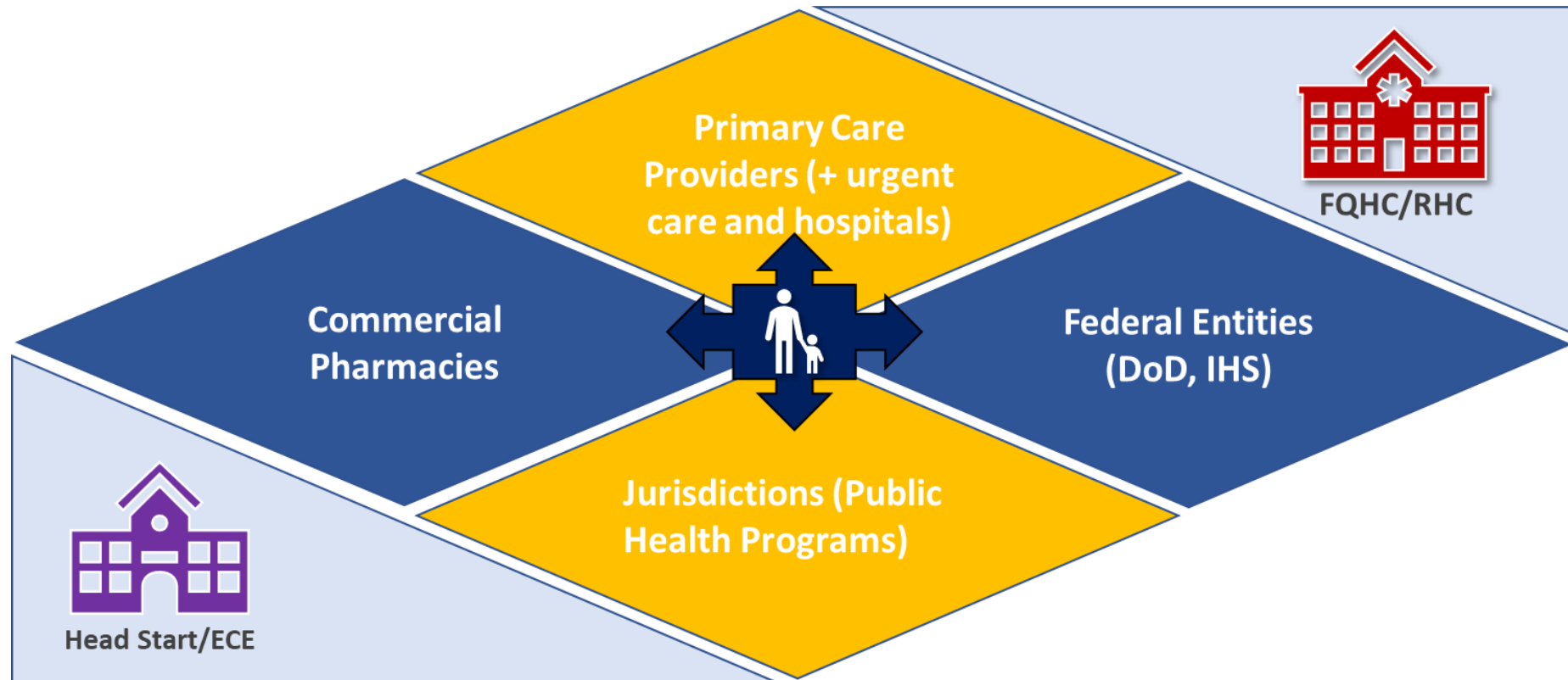
≥65 years of age:
70%

Pediatric vaccination update

- On June 16, 2022, FDA granted emergency use authorization for:
 - A two dose Moderna COVID-19 vaccine primary series for administration to individuals ages 6 months through 17 years
 - A three dose Pfizer-BioNTech COVID-19 vaccine primary series for administration to individuals ages 6 months through 4 years

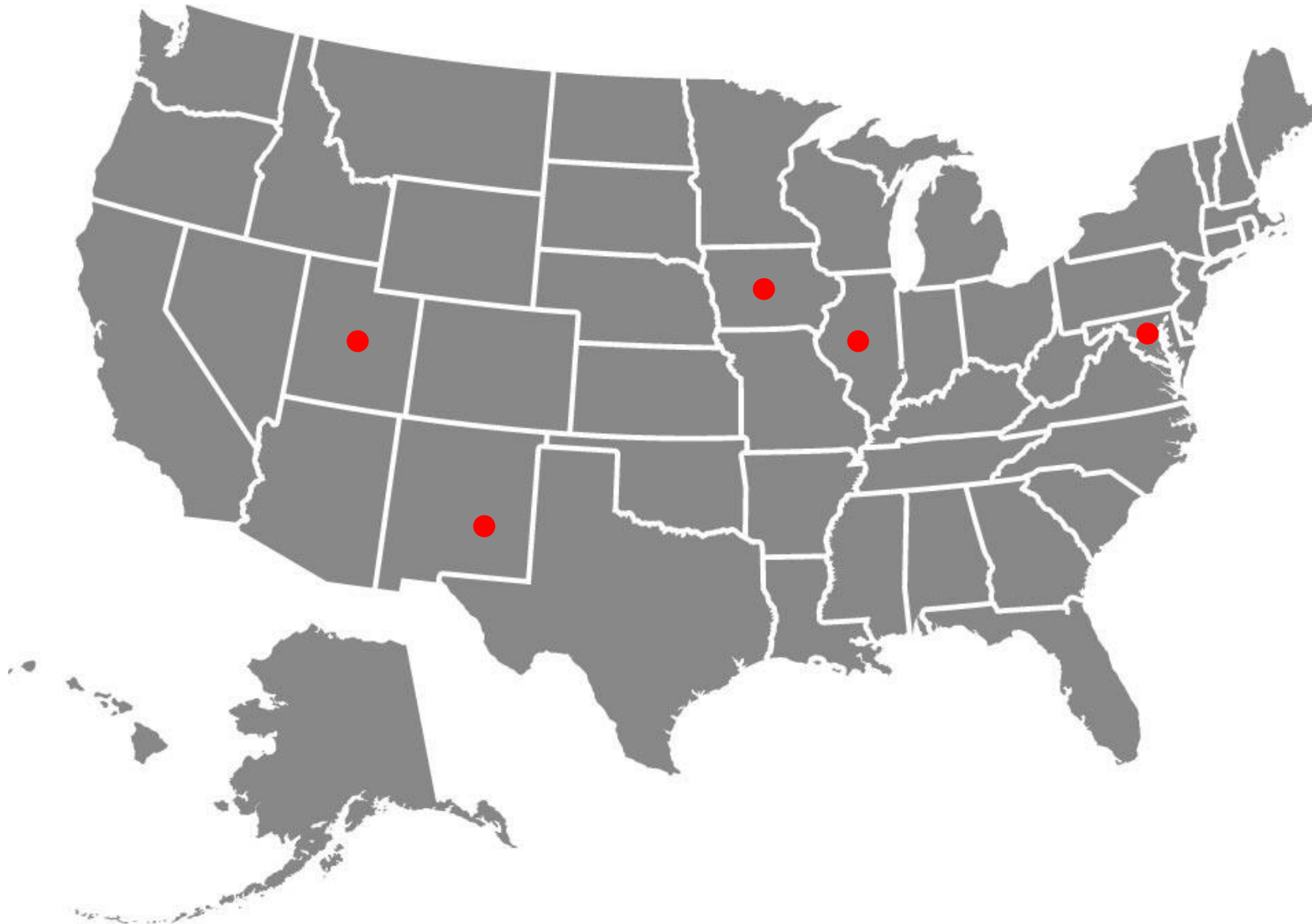
Approach to Reaching All Children Aged 6 Months–4 Years

Goal: Ensure all eligible children <5 years old (~20 million) have access and ability to get vaccinated*

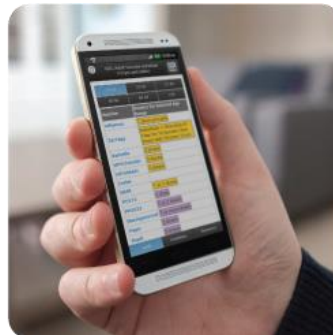


*ECE: Early care and education, DoD: Department of Defense, IHS: Indian Health Service, FQHC: Federally Qualified Health Center, RHC: Rural Health Clinic

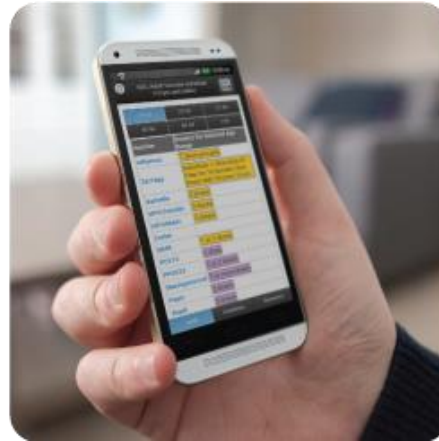
State Examples of Vaccine Implementation



Thank You



Routine Childhood Vaccinations



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Director
Immunization Services Division

IN SOUTHERN TEXAS

Philadelphia Battles a Measles

First Epidemic in 1992 Stride WITT

New York Times

a Popular Tourist Area Feb. 19 — City

disease control. "But measles itself is not even close to peaking. This is an epidemic."

deaths from the childhood disease.

Measles is fatal in

Measles Cases Are Epidemic In the Region

Officials Call Problem

Federal officials say.

The "children will be out of luck" unless state and local governments can find emergency money or Congress can provide more money soon, a Kenneth Almer of the Federal Center

Measles Resurgence of 1989-1991 Spurs VFC Program

TALLS ON MONEY

S. Runs Out of Funds for Emergency Vaccinations to Fight the Epidemic



Vaccines for Children Program (VFC) Section 1928 of the Social Security Act

- Enacted in 1993 (Omnibus Budget Reconciliation Act); implemented in 1994
 - Response to measles resurgence of 1989-1991
 - Part of Childhood Immunization Initiative
- Entitlement program
 - Funding from Medicaid Trust Fund
 - CDC delegated responsibilities for vaccine
 - Centers for Medicare and Medicaid Services (CMS) delegated responsibility for administration fee
 - Advisory Committee on Immunization Practices (ACIP) responsible for VFC formulary
 - Entitlement is to the child

VFC Program Benefits

- Allows children to receive vaccination services in the medical home
- Eliminates or reduces vaccine cost as a barrier to vaccinating eligible children
- Entitlement allows new vaccines to be provided more quickly than through annual appropriation
- Incentivizes innovation with price caps on legacy vaccines
- No state contribution for vaccine purchase for children on Medicaid
- Helps assure vaccine availability through stockpiles
- Opportunities for public health to work with providers on quality improvement of vaccination services



VFC Program Eligibility

Children 0 through 18 years of age who meet at least one of the criteria:

- Medicaid eligible
- Uninsured, or
- American Indian/Alaska Native, or
- Underinsured*

*Eligible to receive vaccine only through an enrolled Federally Qualified Health Center (FQHC), Rural Health Center (RHC) or a deputized provider under Delegation of Authority

VFC eligibility by age group (PES, FY 2019)

<1	1 to 2	3 to 6	7 to 18	total
57.2%	52.1%	51.3%	49.6%	50.7%





VFC Program Reach

- \$4.3 billion program
- CDC distributes more than 76M doses of pediatric vaccine each year, the vast majority of which is purchased through VFC. (Avg of 2017-2019)
- Approximately 600,000 routine vaccine shipments/year
- Nearly 38,000 VFC provider locations across 61 VFC awardee jurisdictions