

September 20, 2009

Members of the United States Senate Finance Committee:

The undersigned public health, advocacy, and healthcare professional organizations would like to thank the Senate Finance Committee for the provisions broadening coverage of adult immunizations in the 2009 *America's Healthy Future Act*. We especially applaud the inclusion of the Medicaid FMAP increase for states that provide immunizations to adults with no cost-sharing, and the removal of cost-sharing for all preventive services recommended by the United States Preventive Services Task Force (USPSTF) under the Insurance Exchanges and Medicare.

While a recommendation from the USPSTF is crucial for most preventive services, the Task Force does not make recommendations on immunizations, and instead defers to the Director of the Centers for Disease Control and Prevention (CDC) after a review by the Advisory Committee on Immunization Practices (ACIP), so as to not duplicate resources. The CDC, through the ACIP, is the only entity in the federal government that makes recommendations regarding vaccines and is considered the “gold standard” for coverage policies. We would strongly encourage the Finance Committee to add language related specifically to CDC-recommended immunizations within the preventive services sections for Exchange plans, Medicaid and Medicare.

Requiring coverage without cost-sharing for preventive services sends a strong message regarding the importance of these interventions for the health of all individuals. Therefore we encourage the Finance Committee to add more robust incentives for vaccine coverage of the most vulnerable Americans through Medicaid. Almost 40% of the uninsured are adults ages 35-64 who may have underlying chronic conditions that put them at higher risk for pneumonia, flu and other vaccine-preventable diseases. Not only will the health of Medicaid patients improve, but over time, the program will not have to bear the costs associated with treating vaccine-preventable diseases.

Data released in July 2009 by the National Foundation for Infectious Diseases (NFID) confirms that adults from minority groups have lower vaccination rates for influenza, pneumococcal, shingles, tetanus, and other vaccines. Minorities comprise over 50% of the uninsured and are more likely to be on Medicaid, in part because they are more likely to be from low-income, working families. Strengthening Medicaid coverage of adult vaccines would help in reducing the disparities in vaccination rates noted above.

In addition, we strongly urge the Finance Committee to include language similar to Section 1310 of the House Tri-Committee health care bill that would move coverage for all CDC-recommended immunizations from Medicare Part D to Part B. This policy, which has wide support from the Medicare Payment Advisory Commission (MedPAC), healthcare organizations, and prevention and public health groups, would eliminate the need for up-front payment for vaccines, result in lower out of pocket costs for beneficiaries, especially those with lower incomes, and improve access to these important preventive interventions.

Better utilization of these immunizations is crucial to protecting the health of our seniors. According to an Agency for Healthcare Research and Quality (AHRQ) analysis of Medical Expenditure Panel Survey data, on average in 2003–2005 total US medical spending to treat shingles or its complications totaled \$566 million per year (in 2005 dollars).

Vaccines for influenza and pneumonia, which are covered under Part B, have rates of immunization at 60% or better. The immunization rate for the shingles vaccine, which is covered under Part D, is under 7%. We believe that this access issue can be significantly improved by moving coverage for all CDC-recommended immunizations from Medicare Part D to Part B, and allowing all healthcare professionals capable of administering these valued vaccines to do so.

We ask the Finance Committee to consider the significant savings that can be generated by preventing disease through vaccination at all ages.

We appreciate your leadership and consideration of this request.

Sincerely,

Alzheimer's Foundation of America
American Academy of Family Physicians
American College of Physicians
American College of Preventive Medicine
American Pharmacists Association
American Social Health Association
Association for Prevention Teaching and Research
Automotive Industry Action Group
Center for Infectious Disease Research and Policy
Children's Hospital of Philadelphia
Every Child By Two
Immunization Action Coalition
Infectious Diseases Society of America
Joseph H. Kanter Family Foundation
National Association of Pediatric Nurse Practitioners
National Cervical Cancer Coalition

National Coalition of STD Directors
National Foundation for Infectious Diseases
National Latina Health Network
Partnership for Prevention
Satcher Health Leadership Institute (Dr. David Satcher)
Society for Public Health Education
Society for Women's Health Research
Strategic Health Policy International, Inc.
Trust for America's Health

Stan Karson
Matthew Tuck

