

A SHOT IN THE ARM

SEASONAL FLU VACCINATION RATES

(Percentage of adults age 18 and older, who received the vaccine in 2008)

It's flu season, and even though H1N1 is no longer at pandemic levels, it's still important to get a flu shot every year (which includes H1N1 and two other flu strains this year). Other adult vaccines, such as pneumonia and shingles, also are important. Each year, approximately 23,000 Americans die of the seasonal flu, 5,000 die from pneumonia, and more than 1 million adults get shingles, a painful rash caused by the same virus that causes chickenpox. Direct health care costs of adult vaccine-preventable diseases are \$10 billion annually according to the Centers for Disease Control and Prevention.

Yet only 36.1 percent of adults are vaccinated each year for the seasonal flu (recommended now for everyone over six months old), only 66.9 percent of seniors get the pneumococcal vaccine (recommended once for adults age 65 and older), and only 2 percent are vaccinated for shingles (recommended for everyone over 60), according to a report by the Trust for America's Health, the Infectious Diseases Society of America, and the Robert Wood Johnson Foundation. The CDC recommends flu vaccinations for all healthcare workers.

Immunizations are one of the most cost-effective ways to protect individual and public health, but little public health infrastructure exists to support mass vaccination of adults. In August, federal authorities announced a \$1.9 billion plan to identify and manufacture drugs and vaccines for public health emergencies with the goal of shaving weeks off the time it takes to identify promising scientific discoveries, produce vaccines and get them to market.

POLICY OPTIONS TO INCREASE ADULT VACCINATION RATES

- ◆ Require insurers (including Medicaid) to cover vaccine costs for all 10 adult vaccines recommended by the CDC.
- ◆ Increase public education.
- ◆ Develop standard practices or systems such as voluntary immunization registries that allow providers to review patients' immunization histories and offer vaccines at appropriate medical visits.
- ◆ Provide incentives to encourage research, development and production of vaccines.
- ◆ Support state purchase and distribution of vaccines.
- ◆ Broaden the types of professionals who can administer vaccines, such as physician assistants, certified nursing assistants and dentists.

South Dakota	49.2
Minnesota	46.6
Nebraska	45.2
Iowa	44.8
Hawaii	44.2
New Hampshire	42.6
North Dakota	42.1
Rhode Island	42.0
Oklahoma	41.8
Connecticut	41.1
Virginia	40.7
Maine	40.6
Massachusetts	40.5
Wisconsin	40.5
Colorado	40.4
North Carolina	40.4
Vermont	40.2
Arkansas	40.1
Utah	39.8
Tennessee	39.5
Wyoming	39.5
Missouri	39.2
West Virginia	39.1
Kansas	38.9
Delaware	38.8
Kentucky	38.6
New Mexico	38.6
Maryland	38.5
Pennsylvania	38.3
D.C.	38.2
Louisiana	38.2
Washington	38.0
Alabama	37.9
Montana	37.8
New York	37.8
Ohio	37.6
South Carolina	37.1
Michigan	36.3
Mississippi	35.7
Texas	35.5
Oregon	35.4
Alaska	35.3
Arizona	35.2
New Jersey	34.8
Indiana	34.8
Idaho	34.1
Illinois	33.0
Georgia	31.9
Florida	31.8
California	31.4
Nevada	30.8
National Total	25.5
	36.1

Source: CDC Behavioral Risk Factor Surveillance System, 2008.