

VACCINE POLICY TOOLKIT

# Flu Vaccination

BY NOAH CRUZ





## → Overview

The annual influenza season mobilizes an international response. The World Health Organization convenes teams of epidemiologists and other experts to monitor strains and develop vaccines for the yearly outbreak of the virus commonly known as the flu. During the [2019-2020 influenza season](#), the flu infected an estimated 38 million people in the United States; of those, 405,000 were hospitalized, and 22,000 died. The flu presents an annual challenge for policymakers to contain its spread and mitigate its most severe outcomes.

The [seasonal flu](#) is most harmful to younger children and older adults, especially those with chronic health conditions, though it poses a risk to all demographics. Accordingly, the Centers for Disease Control and Prevention [recommends](#) everyone 6 months and older receive a flu vaccine annually.

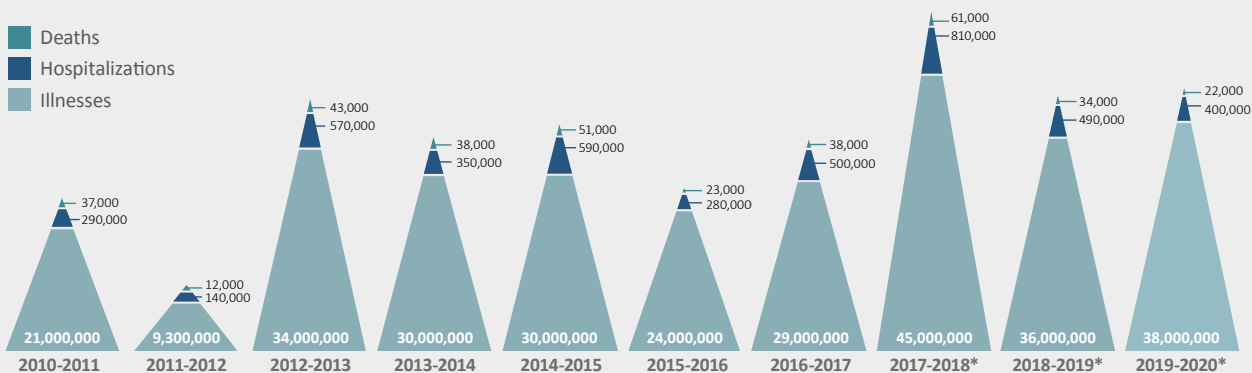
Private manufacturers produce and distribute the flu vaccine in the United States. The number of flu vaccine doses distributed has, on average, [trended upward](#) since 2009, with [174.5 million doses](#) distributed during the 2019-2020 flu season—the most to date. Flu vaccination and prevention efforts took on greater urgency during the COVID-19 pandemic. Policymakers and health care providers adapted to new physical and social limitations to [provide such essential public health services](#).

[Most private and public insurers](#) cover the cost of the flu vaccine. Medicare covers the cost of the vaccine for people over 65, and Medicaid covers the cost for enrolled adults and children. Uninsured or underinsured children can receive the vaccine through the [Vaccines for Children Program](#), though it may be accompanied by an administrative fee. For adults without insurance, major pharmacies generally offer the vaccine for a small cost. Some states, including [Pennsylvania](#) and [Washington](#), offer the vaccine to uninsured adults at little to no cost.

Although international and national efforts to address influenza are important components of the response, states have substantial authority in determining the scope and substance of flu vaccination efforts.

**FIGURE 1**

Estimated U.S. Influenza Burden, By Season (2010-2020)



\*Estimates for these seasons are preliminary and may change as data are finalized.

SOURCE: <https://www.cdc.gov/flu/about/burden/index.html>

## → Policy Options

Key state strategies to slow the spread of influenza include increasing the immunization workforce, making sure those most at risk have access to the flu vaccine and supporting public information campaigns that communicate the importance of receiving the vaccine.

To increase access to the vaccine, states can expand the number of qualified health care workers who can administer it. States have increasingly turned to [pharmacists](#) and other non-physician providers to expand access to immunizations. Pharmacies offer a variety of unique qualities, such as expanded evening and weekend hours and locations near patients, and typically do not require an appointment. In 2017, a Johns Hopkins University [study](#) found that authorizing pharmacists to deliver influenza vaccines during a severe influenza pandemic could mitigate up to 23.7 million symptomatic influenza cases and save up to \$2.8 billion.

Some populations, such as residents in long-term care facilities, adults 65 years and older, young children and those with chronic conditions, are at [higher risk](#) for complications related to the flu. States can increase access to flu vaccines to manage the spread of the disease and prevent severe complications in these vulnerable populations.

States can also remind residents of the importance of receiving the flu vaccine through public information campaigns. Increasing knowledge about and visibility of the vaccine can help dispel misinformation and increase confidence in the flu vaccine.

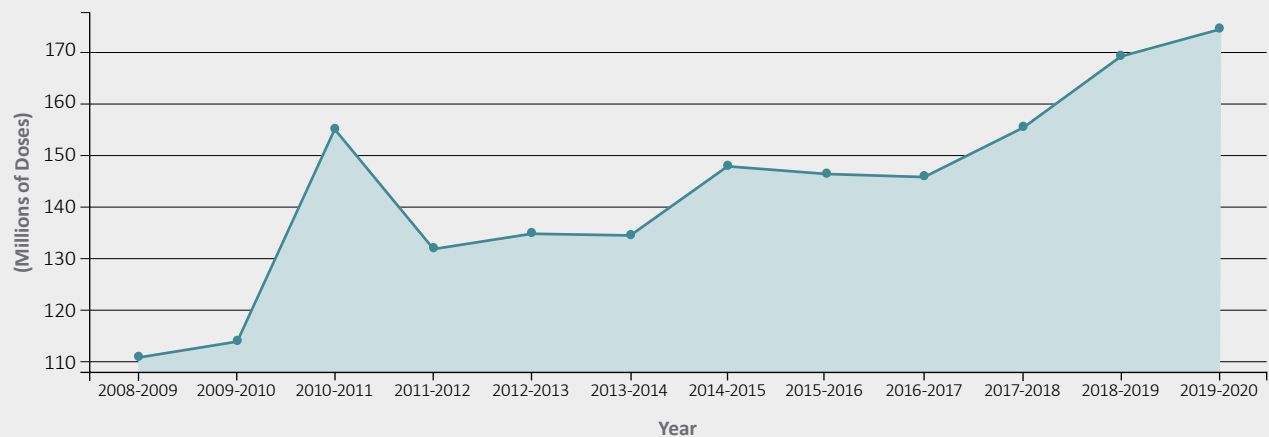
## → State Examples

### Administration

Non-physician providers are important partners to consider in efforts to expand access to the flu vaccine. [All states](#) permit pharmacists to administer the flu vaccine, although the age groups they allow pharmacists to vaccinate vary. Some states have expanded the population of qualified vaccine administrators. For example, Indiana [HB 1207](#) allows pharmacy technicians to administer the flu vaccine. New Hampshire [HB 1639](#) and West Virginia [SB 544](#) authorize qualified pharmacy interns to administer the vaccine. Ohio [SB 178](#) allows podiatrists to administer the flu vaccine, and Virginia [HB 2493](#) allows “persons who are otherwise authorized to administer controlled substances in hospitals” to administer it.

**FIGURE 2**

Influenza Vaccine Doses Distributed in the United States, By Season

SOURCE: <https://www.cdc.gov/flu/prevent/vaccine-supply-historical.htm>

### Vulnerable Populations

Policymakers can take steps to mitigate the spread of the flu in populations more at risk of developing complications. For example, Kentucky [HR 278](#) emphasizes the risk adults aged 65 years and older face from influenza and underscores the importance of immunizations.

New Jersey [AB 4476](#) seeks to further protect vulnerable populations in long-term care facilities by tracking the number of employees who have received the influenza vaccine and the medical exemption status of those who have not. Virginia [HB 5041](#) requires certified long-term care facilities to provide or arrange for the administration of the flu vaccine for their residents. New Mexico [HB 274](#) requires hospitals to offer the influenza vaccine to patients over 65 upon discharge.

### Information Campaigns

States can act to keep citizens informed about the importance of vaccination and the availability the flu vaccine. New York [J 2387](#) memorializes Immunization Awareness Month to increase public knowledge of the importance of receiving the seasonal flu vaccine, among others. South Dakota's Department of Health utilizes [CDC resources](#) to support state efforts to inform residents about flu prevention and vaccination. The Michigan Department of Health and Human Services launched a [statewide media campaign](#) that emphasized the importance of getting vaccinated to avoid straining the state's economy and health care system during the COVID-19 pandemic.

## → Resources

- Preventing and Mitigating the Flu, NCSL
- Influenza (Flu), CDC
- Flu Activity & Surveillance, CDC
- Flu Efforts During a Pandemic: State Roles in Influenza Response, NCSL
- Digital Media Toolkit, CDC
- Communication Resource Center, CDC