



## Preventing and Mitigating the Flu

BY ERIK SKINNER

Nearly 80,000 people died from influenza complications in the U.S. during the 2017-2018 flu season—the most deaths since the 2009 influenza pandemic—and over 959,000 were hospitalized. Of those, 10,000 who died and over a quarter million who were hospitalized were between the ages of 18 and 64.

Because influenza affects people of all ages, the Centers for Disease Control and Prevention (CDC) has recommended since 2010 that every person 6 months or older, unless contraindicated, receive the flu vaccine every year. CDC research estimates the flu vaccine prevented 7.1 million illnesses during the 2017-2018 flu season.

Most private and public insurers cover the cost of the flu vaccine. Medicare covers the cost of the flu shot for people over 65 and Medicaid covers the cost for enrolled children. Uninsured or underinsured children can receive the shot through the Vaccines for Children Program, though it may be accompanied by an administrative fee. For adults

without insurance, the flu vaccine is generally available for between \$30 and \$70.

While CDC recommends annual vaccination as the best way to help prevent the flu, additional policies and behaviors can help stop the virus from spreading and mitigate the effects of the most serious flu-related complications. The federal government, state governments and private organizations often undertake public information campaigns to remind employees and the population as a whole to stay home when sick, wash their hands, consume vitamin C, get plenty of rest, and cover their mouth when coughing or sneezing. Although many cases are preventable, the CDC estimates the flu accounts for 17 million lost work days each year.

The discussion about the flu's human and health system costs often center around the very old and very young being most at risk of severe complications from the influenza virus. While those groups experience an elevated risk, there are other groups vulnerable to serious flu complications. People with chronic conditions like cardiovascular disease, diabetes and asthma are more likely to experi-

### Did You Know?

- It is safe to get a flu vaccine during pregnancy. Doctors recommend pregnant women be vaccinated, as they are at higher risk of developing severe complications from the flu.
- Over a quarter million people between the ages of 18 and 64 were hospitalized by the flu during the 2017-2018 flu season.
- The CDC estimates the flu accounts for 17 million lost work days each year.

ence [severe complications](#), such as chest pain or pressure, difficulty breathing, shortness of breath and worsening of their chronic medical condition. This can result in hospitalization and sometimes death. In fact, recent research from the Journal of the American Medical Association suggests that influenza may contribute to the [risk of hospitalizations for heart failure](#). Recent studies also show that [stroke patients vaccinated for influenza](#) showed better outcomes and consumed fewer medical resources than non-vaccinated patients. In addition to addressing the needs of groups with elevated risk of flu complications, policymakers consider the population as a whole when working to minimize the spread of influenza to healthy and vulnerable populations alike.

## State Action

State strategies to stop the spread of the influenza virus and mitigate its most serious effects include promoting vaccination, conducting education campaigns, and increasing the availability of or access to the influenza vaccine. Below are laws and initiatives that states use to address the effects of the influenza virus across age groups, conditions and other demographics.

All states allow pharmacists to administer the flu vaccine to make it more widely available. In June 2019, North Carolina enacted HB 388 allowing pharmacists to administer the vaccine to children over 6 years old, if prescribed after a physical examination of the patient.

Populations vulnerable to complications from the flu are receiving attention from state legislators as well. In 2017, New Mexico enacted HB 274 requiring hospitals to offer the influenza and pneumococcal vaccine to patients over 65 upon discharge. Texas took a different approach when the Legislature this year enacted HB 1848 to create a "long-term care facility infection control and prevention program." The legislation's main actions include monitoring drug-resistant organisms and implementing procedures to make rapid influenza diagnostic tests available to long-term care residents. The law also establishes a regional advisory committee of health providers, public health experts and long-term care facility administrators.

Other states work to immunize health care personnel who are in contact with patients vulnerable to the flu virus or in situations that could lead to its rapid spread. States may pass laws that encourage or ensure health workforce immunization across a variety of health care settings. In 2018, Illinois enacted HB 2984. It allows the Department of Public Health to require the immunization of health care workers from certified local health departments with jurisdiction over areas with more than 500,000 residents and any facility licensed by the department.



Most state health departments provide information to prevent and treat the flu for people of all ages. For example, Rhode Island's Department of Health lists actions people can take to treat and prevent the flu, including CDC recommendations that anyone over 6 months old receive a flu vaccine. Florida's Department of Health provides locations where people can obtain low-cost or free flu vaccines.

## Federal and Global Action

Monitoring changes to influenza strains and developing vaccines to respond is a globally coordinated effort. Every year, the World Health Organization (WHO) convenes teams of epidemiologists and other experts to recommend viruses that should be included in the vaccine for the upcoming flu season. The WHO teams up with Collaborating Centers around the world to track and understand the influenza virus. As a [Collaborating Center](#), CDC's Influenza Division collects influenza viruses from around the world to study the epidemiology, immune response, antiviral susceptibility and genetic characterization of these strains.

In addition to global influenza efforts, CDC also produces [data and tools](#) that states can use to monitor flu activity regionally or at the state level. CDC issues weekly influenza surveillance reports, flu activity maps and an interactive data tool, allowing scientists, policymakers and the general public to examine the research from multiple angles. CDC also monitors [vaccination coverage](#) using the Behavioral Risk Factor Surveillance System, the National Health Interview Survey and other national surveys.

## Additional Resources

- [NCSL's Immunization Policy Issues and Overview](#)
- [NCSL's Vaccines and Immunizations webpage](#)

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