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TESTIMONY BEFORE THE HOUSE ENERGY AND COMMERCE COMMITTEE
SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATION
A SHOT AT NORMALCY: BUILDING COVID-19 VACCINE CONFIDENCE

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Vaccinate Your Family: The Next Generation of Every Child by Two (VYF) builds on the important legacy of Former First Lady Rosalynn Carter and Betty Bumpers, Former First Lady of Arkansas/wife of Senator Dale Bumpers. Together, these pioneers worked to advance a national focus on protecting all people in the United States from vaccine-preventable diseases. Their work began in the 1970s as First Ladies of Georgia and Arkansas, respectively, and continued during the Carter Administration, resulting in infederal support for vaccine programs nationwide and the passage of state laws requiring evidence of vaccinations for school entry.

Thirty years ago, in response to a U.S. measles epidemic, which sickened more than 55,000 people, hospitalized over 11,000, and killed more than 120, many of whom were young children, Mrs. Carter and Mrs. Bumpers founded our organization as *Every Child by Two* (ECBT). Prominent epidemiologist, Dr. William Foege, former CDC Director and Chief of the Smallpox Eradication Program, Dr. Walt Orenstein, Director of the CDC's National Immunization Program, and other esteemed board members offered their expertise in immunizations and health care, helping to guide our mission and implementation plans.

Within two years of the establishment of ECBT, Carter and Bumpers traveled to more than a dozen states, and ultimately to all 50 states to foster vaccination efforts and build immunization coalitions, consisting of local policymakers, grassroot organizations and concerned citizens. Today, these coalitions continue to work along with state and local immunization programs across the U.S. and are doing their part to ensure access to COVID-19 vaccines.

During the Clinton, Obama and both Bush Administrations, ECBT successfully secured support to make vaccinations a national priority, institutionalized immunization screening for the seven million pregnant women and children served annually by the USDA's Women, Infants and Children (WIC) program and helped to facilitate the Vaccines For Children program (VFC), which provides free vaccines to eligible children.

Our work has saved lives. Among children born over the last twenty-five years, the CDC estimates that access to the VFC program will prevent 419 million illnesses, 936,000 early deaths, and 24.5 million hospitalizations, resulting in a savings of nearly \$1.9 trillion in societal costs and \$360 billion in direct costs.

Today, thanks to our founders enduring legacy, our organization's impact is beyond measure as vaccinations have saved millions of lives and significant costs. Today, we are led by a committed board of directors, scientific advisory board and staff comprised of renowned medical, public health and policy experts. Building on ECBT's successes in raising childhood vaccination rates and reducing immunization disparities, the organization decided to broaden its mission to include people of all ages. To reflect our expanded focus, Every Child By Two was renamed Vaccinate Your Family in 2018.

It has been an unbelievably challenging year for everyone, both here in the U.S. and around the world. On the heels of a major measles epidemic in the U.S., we were leveled by a pandemic the likes of which we have not seen since 1918. Nearly everyone knows someone who has died or been hospitalized from COVID-19 and too many businesses have collapsed. Many people who were already struggling to make ends meet found themselves in greater economic and emotional despair. The greatest toll in both deaths and economic disruption occurred among communities of color and for those with comorbid health conditions.

I want to take this moment to thank the Members of Congress for the work you have done to keep economic ruin at bay for many people and businesses while we awaited a vaccine. I, and many others in the immunization and public health space, also acknowledge the immense effort policymakers and both Administrations made to keep the public safe and shore up our public health infrastructure in the lead up to, and roll out of, lifesaving COVID-19 vaccines.

As you know, everyone 12 years of age and older are now eligible for at least one COVID vaccine authorized by the Food and Drug Administration (FDA) for emergency use. This extended age range is a critical development as nearly 14,000 children have been hospitalized due to COVID since the start of the pandemic. Babies under 1 year old and children with certain underlying health conditions may be more likely to have severe illness from COVID-19, and children may develop a very rare, yet very serious condition called MIS-C, or Multisystem Inflammatory Syndrome. Even if a child is asymptomatic, they can still pass the virus on to more vulnerable individuals. There are ongoing clinical trials for children younger than 12, and we expect the results to be available later this year.

In my 26 years at Vaccinate Your Family, we have consistently tackled three important issues: access, public education, and hesitancy. It is important not to view these issues in isolation. If vaccines are difficult to access, and evidence-based information is not readily available, people will be more likely to lean into vaccine hesitancy rather than deal with some rather extraordinary financial and geographical access hurdles. Similarly, if people are hesitant about vaccines, they will not support policies that would make it easier for people who *want* them, to have access to them.

Vaccine confidence is built on trust. Trust takes time that we do not currently have to end this pandemic. However, Vaccinate Your Family has been working to build confidence in routine vaccines since our inception thirty years ago. We have learned that the two key tenets to building confidence, other than time, are: transparency and respect.

Transparency: Since the beginning of the pandemic, we have focused not on encouraging people to blindly accept an eventual vaccine, but to learn about the safety systems in place to ensure the ongoing safety of all vaccines. We encouraged the public to watch the vaccine development and authorization processes carefully. And VYF called for companies developing vaccines to meet all the usual milestones in vaccine development and research, keeping in mind that some steps could be conducted simultaneously to speed up the process without compromising safety or efficacy.

We also called for the FDA to adhere to normal review procedures, ensuring that each vaccine would be vetted as it would for any other product seeking an Emergency Use Authorization and eventual full approval. As a result of this work, VYF hosted a series of webinars and live Facebook events on which FDA's Dr. Hahn, Dr. Woodcock, Dr. Marks and CDC leadership have spoken to broad groups of stakeholders and answered their questions about the COVID-19 vaccines.

Respect: Our work to ensure transparency is an ongoing part of our efforts to respect the ability of each person to decide whether a vaccine is right for themselves and their loved ones. We invite people to ask questions about vaccines and point them to science-based information, without judgment.

I know that having access to science-based information is essential to building confidence, because I personally experienced hesitancy while I was pregnant with my first child, twenty years ago. In the year 2000 after just two years in my role as the Executive Director of ECBT, I attended the House Committee on Oversight & Government Reform hearings where Andrew Wakefield (who has since been stripped of his medical license) was given the opportunity to share his (now retracted) Lancet study that proclaimed that MMR vaccines caused autism. As a pregnant person who was still learning the science of vaccines, I too became susceptible to the gravitas of Wakefield and bewildered by the data he was presenting to members of the Committee. Fortunately, I was able to reach out to VYF's Board members including Dr. Walter Orenstein and Dr. Paul Offit, renowned vaccine experts. They answered each of my questions with patience and compassion, helping me move from hesitancy to confidence by the time my child's vaccines were due. Later that year, as anti-vaccine celebrity Jenny McCarthy began to gain traction in her efforts to sow doubt about vaccine safety, Danielle Romaguera, a mother who lost her infant to whooping cough came to our organization to share her story and become an advocate to stop the disinformation that was becoming increasingly prevalent via the media and Internet. It was at that moment when we realized that if everyone had access to experts and the science, they too could move from hesitancy to confidence. And that is how our Vaccinate Your Baby (now called Vaccinate Your Family) campaign was born. The campaign grew and became our focal point and has evolved into becoming one of the nation's largest social media programs aimed at educating the public on vaccines and their safety and to counter vaccine disinformation. We built a WHO Vaccine Safety Net certified website www.vaccinateyourfamily.org and filled it with the facts on vaccines, global safety studies, and personal stories of families devastated by the loss of loved ones to vaccine preventable diseases. We have made an impact by bringing the

information to the public so that they can make informed decisions about their family's vaccinations.

We also understand that a variety of trusted sources must be engaged in order to impact the public's confidence in the vaccines. That is why we are partnering with stakeholders in much of our outreach around COVID-19 vaccines. We recently launched the Good Health WINS (Women's Immunization Networks) program with the National Council of Negro Women (NCNW) to reach their 2 million members and affiliates as they sort through COVID-19 information and find new ways to educate and vaccinate their families, friends, and neighbors. We've also begun work with Dia De La Mujer to not just translate materials into Spanish, but to create culturally relevant resources that engage and motivate people who are more comfortable communicating in Spanish. Finally, we are working with immunization coalitions in the Midwest and South to develop new campaigns to raise vaccination rates in both rural and conservative areas, enlisting new partners such as agricultural extensions and Evangelical leaders.

Vaccinate Your Family stands ready to continue these programs into the future, until we have proven through our actions that vaccines are of critical importance to *everyone*. Congress can help us on the path to vaccine confidence by supporting policies to one, improve access and two, ensure the flow of information.

First is access. Data shows that children in rural areas as well as those on Medicaid are up to 33.8% less likely to receive some immunizations. The difference is startling: over 4% of uninsured children receive no vaccines, compared to less than 1% of privately insured children. For adults the disparities are startling. According to a report published in 2016y, only 16% of African Americans were vaccinated against shingles, compared to 38% of white individuals. In fact, the US spends nearly \$27 billion treating four adult vaccine-preventable diseases (flu, pneumococcal disease, shingles, and whooping cough), including costs of medical visits, hospitalizations, and prescription costs.

For seniors, first dollar coverage is critical in getting necessary vaccines. Without it, we can expect more adults to be required to pay out-of-pocket expenses for vaccines. Expanding first dollar coverage of vaccines to Medicare Part D and encouraging Medicare Advantage and stand-alone Medicare Prescription Drug Plans to include immunizations in the zero-cost sharing tier is also critical to reducing the barriers to access for all adults. Influenza and pneumococcal vaccines, which are both covered by Part B, have been received by 71.5% and 61.3% of seniors over the age of 65, respectively. This same population must spend between \$14 and \$102, on average to receive either the shingles or the Tdap vaccine. These two vaccines that protect against four diseases have only been received by 27.9% and 14% of seniors, respectively. The cost savings of vaccinating all adults for our economy, coupled with increased workplace productivity, are well worth the investment.

The second focus area is information. Public health officials need good, timely data to evaluate vaccination efforts, direct appropriate resources to under-vaccinated communities and remind individuals when they or their children are due for a vaccine. To that end, based on our experience, we ask that Congress support timely access to appropriate vaccines and improved

public health information systems to better measure immunization rates. This Committee can help achieve this goal by doing three things:

First, strengthen the Vaccines For Children Program. As part of CDC's Immunization Programs, VFC buys vaccines in bulk, distributes them to state and local health agencies, who distribute them to providers who then administer them to eligible children. VFC has made tremendous strides in closing vaccine disparities, but this gap seems to be widening in the past few years. In that vein, we ask that Congress support HR 2347, introduced by Dr. Schrier, a member of this Subcommittee and cosponsored by other members. The bill would improve VFC by expanding eligibility, incentivizing more providers to participate in the program and better tracking vaccine administration to understand these disparities.

Second, focus on adult populations that are at risk of going unvaccinated. To that end, we ask support for HR 959, Representative Underwood's "omnibus" bill, that would encourage the inclusion of pregnant and nursing women in COVID vaccine clinical trials, so that we can ensure these vaccines are safe for these women and create a campaign to educate and encourage vaccination among pregnant women, particularly those in underserved communities. In addition to a COVID vaccine, pregnant women need to be immunized in each pregnancy against influenza and pertussis (also known as whooping cough) to protect both mom during pregnancy and their infant until they are old enough to receive their own vaccines. Sadly, women of color are much less likely to receive vaccines in pregnancy than their white counterparts, and this bill will help to address this disparity.

We also request support for HR 8725, the Helping Adults Protect Immunity, or HAPI, Act. Introduced by Representative Soto, the bill would ensure that Medicaid recipients can receive necessary vaccines, without having to pay out of pocket. No one should go without life-saving vaccines because they cannot afford them, especially in a public health emergency.

Finally, we ask that Congress support HR 550, introduced by Subcommittee Member Anne Kuster and Dr. Buschon. This bill would strengthen the Immunization Information Systems to allow for better information sharing among health agencies, all while protecting patient privacy.

It is important to remember that people also still need other life-saving immunizations. In fact, recent data show that during the pandemic significant numbers of children, adolescents and adults have fallen behind on routine vaccines recommended by the Centers for Disease Control and Prevention (CDC). While providers, health systems and patients have adapted to telehealth visits, you cannot administer immunizations virtually. As COVID restrictions lift, we must ensure children and adults are up to date on their vaccines to ensure that we do not end a pandemic with another vaccine preventable disease epidemic. I urge you to visit www.vaccinateyourfamily.org to learn about our *Don't Skip Vaccines* and *Good Health Wins* collaborations and for educational information on all vaccine preventable diseases.

Thank you for your time and your commitment to our nation's health.

