

# Obama's budget proposal cuts \$50 million from immunization funding

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As part of the 2016 budget proposal, the Obama White House announced that it will cut \$50 million, or 8 percent, from \$611 million for the Department of Health and Human Services' "317 program." The 317 Program provides free vaccinations to children with and without insurance, as well as insured adults in response to outbreaks and disaster relief. It also funds the infrastructure needed for high immunization coverage. The announcement comes at a time when the measles has now spread to 14 states with over 120 confirmed cases.

The budget proposal also calls for \$128 million to be added to the Vaccines for Children program, an entitlement program that covers insured, uninsured, and Medicaid-eligible children for vaccines. The Obama Administration has argued that through the Affordable Care Act (ACA) access to immunizations will be expanded, decreasing the need for the 317 program.

L.J. Tan, chief strategy officer for the Immunization Action Coalition, told CNN that despite the ACA now covering many children who were previously covered by the 317 program, the budget cuts will be a setback. "The program funds a lot of the states' infrastructure for vaccine delivery," he said. The program is also critical in monitoring the spread of the disease and interviewing those who have come in contact with it.

The announcement that the federal immunization program will be cut is in direct contrast to President Obama's statement to NBC: "There is every reason to get vaccinated, but there aren't reasons to not," adding, "You should get your kids vaccinated."

While the Affordable Care Act requires insurance providers to pay for vaccines without cost-sharing, it does not cancel out the function of the 317 program, which acts as a safety net for Americans with and without insurance. It also provides for insured children and adults during a major outbreak such as when 317 program vaccines were used to immunize privately-insured children during

2012-13 when pediatricians did not buy enough pediatric influenza vaccines, according to the Centers for Disease Control and Prevention.

Most of the 317 program provides for state and local health officials to purchase vaccines, educate immunization providers, prepare and respond to outbreaks, and have infrastructure in place. The program was cut \$51.5 million last year, eliminating \$37.5 million for vaccine purchases. Program operations, which include public awareness and immunization provider education, were cut by \$14 million.

Despite the proposed \$128 million increase for the Vaccines for Children Program, millions of Americans still rely on the 317 program's vaccines. According to the Kaiser Family Foundation, more than 41 million non-elderly Americans did not have health insurance in 2013. This did not include the underinsured, whose health plans do not cover all vaccines.

Another strain on the country's immunization system is that fewer physicians are providing the full host of vaccines to insured patients, while vaccine costs more and more and insurance reimbursement rates decline. This means that local public health providers have to pick up those who fall through the cracks.

The National Vaccine Advisory Committee, in its report to Health and Human Services wrote, "As we have learned over the years, insurance coverage alone is not enough to ensure disease control or high vaccination coverage rates. ... Current vaccine financing strategies, including those offered now by the ACA, do not address the fundamental resource needs to support the immunization infrastructure."

Even if the additional funds are going toward vaccine purchases, the ability of local health departments to prepare and respond to outbreaks has been diminished by the cuts. Chris Aldridge, senior director for infectious disease at the National Association of County and City

Health Officials told the *Washington Post*, “When we’re looking at an outbreak, such as with measles, sometimes the concern is less about, ‘Is that person insured,’ than it is really about getting the vaccine out there and distributing it. There is still a need for vaccine purchasing and making sure we can get out there.”

Meanwhile, the measles outbreak, which began last December in Disneyland, has spread to 17 states and has affected at least 125 people. This year’s outbreak is on track to surpass last year’s total of 644 cases, the highest number since the disease was thought to be eradicated in 2000.

A private Christian school in Port Angeles, Washington, was quarantined after a 5-year-old kindergartner was diagnosed with measles. Students at Olympic Christian school who cannot show proof of immunity were told to stay home, avoid public places, and have no contact with anyone susceptible to measles until February 27, according to the county health department. According to the state health records, of the 115 students at the school, nearly 16 percent were exempted from the required vaccinations, meaning that some 18 students could be affected by the quarantine.

Three new cases of measles were also reported in Toronto, Canada, bringing the total in that country to 22. Health officials there confirmed an unvaccinated 14-year-old girl from the Niagara region was infected. Two more cases were also confirmed in Cook County, Illinois, bring the total there to 13 cases statewide. At least 12 of those cases have been tied to a suburban daycare center in Palatine, mostly occurring in children too young to be vaccinated.

In California, where the disease was thought to have first appeared, two new cases were reported in Ventura County, bringing the county total to 14, and the statewide total to 110. At least one of the cases involved a person who visited Disneyland last December. The amusement park has asked California health officials to reassure the public that the park is safe to attend.



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