SECTION 317 FUNDS ARE THE KEY TO SAVING LIVES AND MONEY

Vaccine-preventable diseases are deadly and expensive.

Vaccines have been recognized as one of the most important public health interventions in the 20th century, second only to clean water. Since 1994, childhood vaccines have prevented more than 1 million early deaths and 472 million illnesses, and saved more than $2.2 trillion in both direct and in-direct costs.\[i\]

But we still have work to do. In addition to COVID-19 and influenza, the U.S. has experienced measles, pertussis, and hepatitis A and B cases in recent years. The country has also seen its first case of paralytic polio in decades, leading to the discovery of polio virus in waste water across the country.

Aside from the horrible human toll, vaccine-preventable diseases can create a significant economic burden. Each year, the United States spends $26.5 billion preventing just four vaccine-preventable diseases in adults: influenza, pertussis, shingles, and pneumococcal disease.\[ii\] The COVID-19 virus demonstrated the devastating impact of pandemic beyond the loss of life: It is estimated to have cost the U.S. $16 trillion.\[iii\]

Investing in immunization saves lives and money.

To increase vaccination rates and alleviate both the emotional and economic toll of vaccine-preventable diseases, Congress created the Immunization Programs at the Centers for Disease Control and Prevention (CDC). Known as the Section 317 program after the section of the Public Health Service Act that created it, the program awards funds to 64 grantees in the program, including all 50 states, six large cities, and eight current and former territories.

Grantees can use these funds to:

- Coordinate and implement the delivery of vaccines to children
- Purchase and administer vaccines to uninsured adults
- Respond to public health emergencies
- Staff vaccination clinics
- Conduct education and outreach campaigns tailored to their communities
- Monitor and contain disease outbreaks

IN ORDER TO CREATE EQUITY IN VACCINE ACCESS AND PROTECT ALL COMMUNITIES FROM DEADLY DISEASES, CONGRESS MUST FULLY FUND SECTION 317 IMMUNIZATION PROGRAMS AT $1.13 BILLION.
Section 317 is vital to protecting our country, but it is grossly underfunded. While Congress has provided minor increases to Section 317 funding in the past few years, it is simply not enough. Responding to recent outbreaks while maintaining routine services is straining already tight budgets. The response for mpox alone may cost as much as $7 billion,[i] yet Congress allocated only $682 million for the entirety of Section 317 programs in fiscal year 2023.

PUBLIC HEALTH IS ALWAYS DEALING WITH THE UNEXPECTED

317 funds must cover a broad array of vaccination needs in 64 states, territories, and large cities. Yet just one outbreak of a vaccine-preventable disease in a single community can mean funds are depleted for routine immunization, clinic staff and hours, and communication campaigns across the country.

2017 HEPATITIS A & MEASLES

**SECTION 317 CONGRESSIONAL APPROPRIATION:** $606,792,000

San Diego County, California spent nearly $12.5 million to respond to a major Hepatitis A outbreak.[ii]

Minnesota experienced a measles outbreak that cost state and local health departments $1.3 million.[iii]

2018 FLU

**SECTION 317 CONGRESSIONAL APPROPRIATION:** $610,847,000

The 2017-18 flu season was particularly bad, resulting in 2,000 deaths. Flu costs the US an estimated $3.2 billion in direct medical costs and another $8 billion in indirect costs.[iv]

2019 MEASLES

**SECTION 317 CONGRESSIONAL APPROPRIATION:** $610,847,000

Measles outbreaks resulted in over 1,000 cases. One outbreak in Washington State required a $2.3 million public health response while New York City spent $8.4 million to respond to its measles outbreak.[v]

2020 COVID-19

**SECTION 317 CONGRESSIONAL APPROPRIATION:** $615,847,000

The U.S. government has spent $84.8 trillion to combat COVID-19 and its effects on the economy.[vi] Public health departments had to address COVID-19 while carrying out routine vaccination efforts.

2021 COVID-19

**SECTION 317 CONGRESSIONAL APPROPRIATION:** $613,847,000

In addition to COVID, outbreaks of measles, mpox (monkeypox), and polio as well as a severe flu season have taxed resources. Exact costs will be available later this year.

2022 MEASLES, MPXV, FLU

**SECTION 317 CONGRESSIONAL APPROPRIATION:** $650,797,000

In order to create equity in vaccine access and protect all communities from deadly diseases, Congress must fully fund Section 317 Immunization Programs at $1.13 billion.


