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## **Academy devoting resources to four major vaccine issues**

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American Academy of Pediatrics

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**LETTER FROM THE PRESIDENT**

# Academy devoting resources to four major vaccine issues

**Dr. Tayloe**

The Academy is working on many fronts to assure all children receive the full benefits of immunization. Vaccine safety, supply, financing and advocacy are four main areas in which the Academy expends resources.

Our vaccine safety system is excellent. It takes years of careful study — and testing in thousands of human subjects — for a new vaccine to qualify for approval from the Food and Drug Administration

and the Advisory Committee on Immunization Practices.

Once a new vaccine is approved, the Vaccine Datalink System provides feedback to the National Vaccine Program on thousands of patients enrolled in health insurance plans. The Vaccine Adverse Event Reporting System is available for all providers, parents or others so that suspected vaccine-related injuries are reported to the National Vaccine Program.

The federal Immunization Safety Office is constantly looking for ways to further improve the immunization program based on data provided through the vaccine safety system. A number of changes have been made in the immunization program in the last 15 years to improve safety and/or efficacy, e.g., acellular pertussis vaccine, inactivated polio vaccine, new rotavirus vaccine, pneumococcal conjugate vaccine.

Vaccine supply issues are in the news because of epidemics of illness and death secondary to *Haemophilus influenzae* type b (Hib) disease brought on by a combination of a Hib vaccine shortage and parental vaccine refusal. The federal government should increase stockpiles of childhood vaccines and assure the existence of at least two manufacturers of every vaccine. In addition, each manufacturer should be capable of producing enough vaccine for all U.S. children.

Vaccine financing issues continue to plague primary care pediatricians. The Academy is working on two major fronts to assist pediatricians with these challenges. First, we are trying to convince the federal government that all providers who participate in the Vaccines for Children Program should be paid at least the Medicare rates for vaccine administration.

Second, we are working with the Centers for Medicare & Medicaid Services (CMS) to have childhood vaccines removed from the Medicare “list” as it may not be up-to-date or reflect current market prices. Congress requires CMS to set payment rates for only pneumococcal and influenza vaccines, so it does not have to list rates for other vaccines. The Academy has become concerned that private sector insurance companies, including those that provide services for Tricare, are using CMS vaccine prices and therefore paying pediatricians significantly less than their vaccine-related costs. Members of our Private Payer Advocacy Advisory Committee and Section on Administration and Practice Management continue to meet regularly with health insurance administrators and vaccine manufacturers

to discuss vaccine financing.

The Academy also has been busy on the advocacy front. During the 2008 Annual Leadership Forum (ALF), the top-ranked resolution advised the AAP Board of Directors to address the public perception of vaccine safety. Pediatricians were spending significant time well beyond that needed to review the Vaccine Information Statements explaining vaccine issues to parents concerned about inaccurate but emotional media reports of presumed vaccine-related illness.

In response to the ALF resolution, the AAP established the Immunization Alliance, a group of organizations that are strong supporters of vaccines. Every Child By Two, a member of the alliance, recruited Amanda Peet, a concerned mother and actress, to help combat the anti-vaccine media campaign.

A recent Vaccine Injury Compensation Program (VICP) court ruling reinforced the Academy’s clear scientific evidence-based message that vaccines do not cause autism. The Vaccine Court found against the claims made by three test families who contended that their children’s autism was caused by childhood vaccines.

The Academy is writing an amicus brief for the U.S. Supreme Court concerning a vaccine-related injury lawsuit in Georgia that is being brought by plaintiffs in state court prior to a final ruling by the VICP on the merits of their claim. The viability of the VICP could be in jeopardy if the manufacturer is not successful in this case. The VICP must remain the first contact for all alleged vaccine-related injuries before plaintiffs are allowed to pursue legal action in civil court. Rolling the clock back to the early 1980s when many vaccine manufacturers exited the market secondary to massive vaccine-related injury lawsuits would significantly undermine our already fragile childhood immunization program.

Immunizations continue to be the hottest issue for our members, and the Academy will continue to do its best to assure the timely immunization of all children in a medical home.

AAP members can help in these efforts by assisting chapters in educating families and the general public about the vaccine safety system and by participating in pediatric councils’ initiatives to convince payers to adequately pay pediatricians for their vaccine-related costs. I welcome your suggestions and assistance in this critically important child advocacy saga.

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