

March 25, 2014

Senator Cathy Giessel
State Capitol Room 427
Juneau, Alaska 99801

Re: **SB 169**

Dear Senator Giessel,

I am writing in support of Senate Bill 169, *an act establishing in the Department of Health and Social Services a statewide immunization program and the State Vaccine Assessment Council.*

Premera Blue Cross Blue Shield of Alaska provides healthcare coverage to over 100,000 members in Alaska and offers a range of innovative programs focused on wellness and prevention to help members improve their overall health. Our health benefit plans cover in-network preventive care in full which includes coverage for all vaccinations recommended by the U.S. Centers for Disease Control and Prevention for members under age 19 and certain vaccines for adults without cost sharing.

Premera supports SB 169 to maintain the state's universal vaccine program to ensure that Alaskans can continue to access the recommended vaccines in a cost-effective manner. The state would continue to purchase vaccines at a bulk, discounted rate thereby minimizing healthcare costs for these critical immunizations. The bill would also establish a financing mechanism such that all payers are paying for their fair share of vaccines that are administered.

While a number of details will need to be discussed and resolved for implementation, we look forward to working with the stakeholders and the Department of Health and Social Services to establish a sustainable solution for the Alaska market that helps to lower healthcare costs while preserving access to important preventive healthcare services.

Thank you for your time and consideration.

Sincerely,



Sheela Tallman
Senior Manager, Legislative Policy



CORE PHYSICIANS

an exeter health resource | The Art of Wellness

Alaska State Legislature
Re: Support for Senate Bill 169

March 10, 2014

I wish to thank the distinguished members of the Alaska state legislature for affording me the opportunity to express my support for the bill to preserve universal access to state-supplied vaccines in Alaska.

My name is Dr. Everett Lamm, and I am an American Board of Pediatrics Certified, New Hampshire State-licensed Pediatrician and a Fellow of the American Academy of Pediatrics. I am employed by Exeter, NH's Core Pediatrics where I have been practicing community-based pediatrics for the past 12 years on New Hampshire's Seacoast. I also recently joined the Board of the New Hampshire Vaccine Association (NHVA), a not-for-profit corporation that assesses insurers and other payers to fund New Hampshire's universal childhood vaccine purchasing program.

I understand that in the past, Alaska had a universal vaccine program funded with federal and state dollars, and that the recently-introduced Senate Bill 169 would establish a self-sustaining vaccine financing solution similar to the one implemented in New Hampshire. I also understand that questions have been raised regarding the benefits of such a program, both for health care providers and for the children of Alaska. I am writing to share my experience as a pediatrician practicing under such a program and to share with you the beneficial impacts that this program has had on the children and physicians in my state.

In its approximately 11 years of operation, the NHVA has produced over \$45 million dollars in health care cost savings. Not only has the program saved our state significant sums of money, but it has also contributed to New Hampshire's consistently high rankings for childhood immunization. Currently, we rank second in the nation with an 80.1% childhood immunization rate. The NHVA represents a highly successful, cost-saving, joint public-private venture, whose achievements have been made possible through bipartisan legislative sensibility, medical ingenuity and corporate compassion.

Much of NHVA's success is due to the fact that the program makes it possible for the state to distribute vaccines to providers free of charge, thus making it possible for all providers to offer immunization services. With the advent and technological advancement of childhood vaccines, there is considerably less work for pediatricians. Quite literally, pediatricians are vaccinating

Core Pediatrics Exeter
Mark Covey, MD, FAAP
Eileen Forrest, MD, MPH, FAAP
Kristen Johnson, MD, FAAP
Daniel Kyle, MD, FAAP
Everett Lamm, MD, FAAP
Steven Loh, MD, FAAP
Lori McClure, APRN
Jan Michaud, APRN
Elizabeth Williams, APRN

Core Pediatrics Epping
Alexandra Bonesho, MD, FAAP
Thomas Fitzgerald, MD, FAAP
Jo Ann Gates, MD, FAAP
Jennifer Jones, MD, FAAP
Shanta Dawson, APRN
Danielle Lambert, APRN

Core Pediatrics Plaistow
Elizabeth, Melendy, MD, FAAP
Andrea Westinghouse, MD, FAAP

ourselves out of jobs. Years ago, treating infectious disease was the mainstay or “bread and butter” of pediatrics. These illnesses have not mysteriously disappeared; rather our population has grown healthier by receiving immunity through vaccination. As a result of childhood vaccination, pediatric hospitalizations and office visits are at an all-time low. Vaccination is by no means a get-rich-quick scheme for doctors. In fact, there are significant financial and administrative burdens on providers who offer immunization services.

In states without universal vaccine purchasing programs, providers must pay the up-front costs for vaccines out of their own pockets and await reimbursement from insurers, often at reduced rates. Additionally, even in universal purchase states, every provider bears the burden and expense of managing their vaccine inventory, cold storage through costly closely-monitored refrigerators and freezers, state-of-the-art thermometers, syringes, needles, alcohol wipes, electricity which includes the need for back-up generators (because there are penalties for losses due to weather, power outages, equipment failure, etc.), and emergency kits which include date-sensitive, expensive medications which are available in the unlikely event of any rare adverse reactions. Additional costs are incurred through shipping, medical record updating and office staffing which is required to maintain, inventory and administer the supply. These supplies and costs are independent of the physical space and the considerable time needed to provide federally-mandated vaccine information, address questions, obtain appropriate consents, then ensure safe and proper vaccine administration, all-the-while meticulously documenting and accounting for each and every one given. For many providers, especially those in small practices, these burdens are just too great, forcing the difficult decision to stop offering immunization services.

Physicians across the country experience these challenges. One of my colleagues, formerly a busy solo-practice pediatrician, was forced to close her practice in a neighboring state due to financial hardship. The cost of maintaining vaccines for her patients was overwhelming and insurmountable. She attempted to maintain an office-based vaccine supply, but was unable to as a result of the expense of the vaccines and their associated costs. In order to continue practicing in a manner consistent with her high standards, she relocated to New Hampshire, where she could access recommended vaccines for children without facing these burdens.

In New Hampshire, we are fortunate that the universal vaccine purchasing program funded by the NHVA allows our state to purchase vaccines at substantially discounted rates and distribute them to providers free of charge, ensuring that all children have access to critical vaccines regardless of insurance coverage or income. This approach also permits state health officials to manage the supply of vaccines, thereby lowering providers’ administrative costs and ensuring that the state can quickly supply vaccines to vulnerable patient groups, particularly during emergencies or vaccine shortages.

We know that offering all recommended childhood vaccines in all medical provider offices throughout the state, regardless of office size and location and provider ability to up-front the cost of vaccines, keeps our entire population healthier. There may be questions related to school necessary vaccines; in my state, these serve as minimal guidelines as New Hampshire is not a

state where mandates are well tolerated. I have heard that Alaskans share this independent mindset. State-supplied vaccines benefit all children and everyone in and out of our school systems, particularly those who are immunocompromised and unable to receive vaccines themselves. Additionally, when vaccines are managed by the state, there is no concern for patient's or their family's ability to pay for them.


If states stop offering all recommended childhood vaccines, we must then prepare for the return of previously seen widespread diseases that infected millions of people in our own country and still cause widespread morbidity and mortality in under-developed and medically under-served parts of our globally interdependent world. You would be asking my colleagues and me to diagnose and treat devastatingly infectious diseases, such as Haemophilus, poliovirus and diphtheria to name a few, which I have fortunately never seen in my combined 7 years of medical training and 12 additional years of pediatric practice.

While there is no denying that there are considerable financial costs associated with immunizing our population, the overall medical expense and societal effects of not immunizing children will far exceed the current expenditures should Alaska limit its vaccine program. As noted above, New Hampshire's program has produced short and long-term savings of millions of dollars and at the minimum, hundreds of lives in the state over the past decade. Via the New Hampshire Vaccine Association, this has been made possible due to the collaborative efforts of insurers, healthcare providers and the NH Departments of Insurance and Health & Human Services. Our system for immunization funding and distribution is safe, cost-effective and efficient, and it ultimately keeps the children of our state among the healthiest in the nation. Our methods are not secrets; the NHVA Board is devoted to transparency, fairness and integrity through its adherence to right to know principles and responsible governance. This organization strives to make every bit of information from minutes, agendas, financials, etc. easily accessible to anyone who is interested, from legislators to laymen alike. As you carefully consider the vaccine legislation before you, I urge you to evaluate the success of a similar state program in New Hampshire.

It is a privilege for me, as a pediatrician, to serve and collaborate with dedicated and committed individuals who scrupulously tend to the governance of the New Hampshire Vaccine Association. I take tremendous pride, both personally and professionally, in knowing that our actions and hard work positively and directly impact the health of our children.

Again, I thank you for allowing me this time to express my support for the bill to preserve universal access to state-supplied vaccines in Alaska. Please accept my best wishes toward your continued efforts to protect the health and safety of Alaska's children.

Regards,



Everett Lamm, MD, FAAP



Editorial: Keep up the pressure - support vaccination

Posted: March 28, 2014 - 12:00am

More often than not, we use this space to criticize. This time, we'd like to offer our congratulations.

One week ago, 18 Alaska Senators voted in favor of SB169, a measure that will provide vaccines to all Alaska children and to most adults. Alaska will buy vaccines in bulk and sell them to clinics, hospitals and others who administer vaccinations.

Sens. Cathy Giessel and Hollis French should be commended for their sponsorship of this bill, which will benefit all Alaskans.

Patients benefit — they receive vaccines more cheaply. The state benefits — it has a healthy workforce. Children benefit — they are protected from deadly disease.

Now it's up to the Alaska House to ensure this program moves forward.

Vaccination is the most powerful tool in modern public health. It has saved more lives than any other medical innovation since the dawn of history. Humanity has eliminated smallpox. It has almost eliminated polio. Other diseases will follow, we hope.

But there are problems — not with the vaccines, but with people.

Anti-vaccination campaigns are hurting public health. Ignorance and doubt persist despite the evidence. In the 18th and 19th centuries, there were anti-vaccination riots. In the early 20th century, New York City mustered its police force to break down doors and ensure the vaccination of newly arrived immigrants.

Now, we have people who — either through fear or mistrust of government and big business — refuse to vaccinate themselves or their children.

As a result, long-disappeared illnesses have returned: measles, in New York City and British Columbia; whooping cough, here in Juneau. The consequences of these diseases can be fatal.

That's a high price to pay for ignorance, and that's why we support SB169 and urge the House to pass it as soon as possible.

This bill will not eliminate ignorance. It will not eradicate hesitation. But it will be a good first step.

• Empire editorials are written by the Juneau Empire's editorial board. Members include Publisher Rustan Burton, rustan.burton@juneauempire.com; Director of Audience Abby Lowell, abby.lowell@juneauempire.com; Managing Editor Charles L. Westmoreland,

Jane Conway

From: Lily J. Lou <lilylou@mindspring.com>
Sent: Monday, March 31, 2014 1:34 PM
To: Rosalyn J. (CDC/OID/NCEZID) Singleton; Jane Conway; Lewis, Jill (HSS); Marin Granholm; Patricia Senner; Jody Butto (jlbutto@gci.net)
Subject: Fwd: please support SB 169-vaccine commission

Follow Up Flag: Follow up
Flag Status: Flagged

Just sent this to Les Gara,
Lily

Begin forwarded message:

From: "Lily J. Lou" <lilylou@mindspring.com>
Subject: please support SB 169-vaccine commission
Date: March 31, 2014 1:32:23 PM AKDT
To: Rep.Les.Gara@akleg.gov

Dear Representative Gara,

I had the pleasure of meeting you several years ago at the March of Dimes Legislative Summit and I appreciate your track record as a champion for health care excellence here in Alaska. I am a pediatrician with the subspecialty of neonatology, the current Medical Director of the NICU at Providence. I am also the AAP (American Academy of Pediatrics)-Alaska Chapter President. I serve on the executive committee of the AAP Section on Perinatal Pediatrics, and I am on the March of Dimes Board of Directors.

I am writing to you today to encourage your strong support of SB 169 in the House Finance Committee. This is the bill which would create a vaccine commission, with a proposal for a universal purchase program for vaccines for Alaskans. **There is no doubt in my mind that this is essential for our state at this point in time.** Immunizations are one of very few public health measures that are proven to work. We are currently in a 3-year stop-gap coverage mode, which will end in 2015 and we must find a way to provide this essential need before this funding ends.

I recently returned from a national forum of leaders in pediatric care. I spoke with several physicians who have passed similar legislation in their states. All are extremely grateful that they have taken that route--for improvements in their immunizations rates, standardization of their processes, and in their cost savings. Alaska can now learn from the experience of others and move forward with the benefit of their groundwork.

I understand that there has been significant opposition from PHARMA to this bill in the House. I'd like to highlight 3 specific points:

Alaska had a 30 year history of federal funding for immunizations. The state is currently providing three years of interim funding, until we can craft a good permanent solution. This proposal will appropriately shift costs from the state to insurance payers, but *the ability to purchase vaccines at a discount will benefit all of us*

(except perhaps the pharmaceutical companies, who will lose the benefit of Alaskans having to pay full price for their products. This is a great opportunity for a win-win public-private collaboration that assures a sound strategy for the future.

2. It is important to include adults in this program. There is more federal support for children's immunizations than for adults with gaps in coverage. We are grateful for help in taking care of our children, but *we cannot afford to leave uninsured adults in our neighborhoods unprotected*. Immunizations work partly by decreasing the burden of contagious infection on a community-wide basis. Prevention is always more cost-effective than treatment after someone gets sick and starts spreading it around.

3. Health care is getting more complex and the paperwork is getting more cumbersome every day. This is actually a proposal that will streamline our health care system and eliminate the costs of duplicate ordering, storage, and administrative tracking systems. *Simplifying the system will reduce errors and decrease management costs*.

Please support this legislation, which will provide a healthy strategy for disease prevention in Alaska. Be careful of inaccuracies and misrepresentations in testimony from factions who will be treated fairly but will not benefit from this legislation. I wholeheartedly believe that this is a thoughtfully crafted proposal that will serve our state well.

Thank you for your attention to my concerns as a citizen and health care provider. As always, please feel welcome to contact me any time if I can be of service in legislative issues concerning the health of Alaska's children.

Respectfully,

Lily Lou

Lily J. Lou

16501 Chasewood Lane

Anchorage, Alaska 99516

(907) 222-3273

lilylou@mindspring.com

Please support S.B. 169 re-establishing the universal vaccination program. Currently we keep 2 sets of vaccines on hand at our small non profit clinic. One set for vaccine eligible children obtained from the state, and one set for children with private insurance obtained from a private supplier. This can be confusing. To avoid the loss that comes with expiration of very expensive vaccines we keep only small amounts of state and private vaccines on hand. There is a mechanism in place to remedy mistakes however I am finding that having to keep 2 separate supplies contributes to waste of both supplies. Additionally we are unable to keep all of the available state vaccines because I do not want them to be wasted. Some of the purchased vaccines are available only in lots of 10. We purchase the expensive vaccines from a local pharmacy in small lots to avoid waste. This increases our costs for each vaccine and additionally we must pay a courier to pick up the vaccines in Anchorage. I am assuming that other small and rural clinics face the same problems.

S. B. 169 funds vaccines through contributions from insurers, groups, etc. SOA buys the vaccine, using their lowest cost ability through CDC. . There will be no increase in the cost to the SOA over the cost of the current program. Our clinicians will be spending their time educating parents and vaccinating children instead of sorting out who gets which vaccines Many parents continue to believe that MMR's cause autism and that vaccines are "toxic" and "foreign substances". Having all the vaccines available for children allows us to seize the moment to have a factual dialogue with parents and get their children vaccinated. S.B. 169 would relieve the burden of keeping track of double sets of vaccines for Alaska children resulting in improved vaccination rates for all our children.

Sincerely,
Kerry Dorius RN, MS, ANP
Executive Director Girdwood Health Clinic.

Allergy, Asthma and Immunology Center of Alaska, L.L.C.

March 25, 2014

Mark Neuman
Chairman, Health & Social Services: Finance Subcommittee
Alaska State Legislature
Representative, District 10
State Capitol Room 513
Juneau AK, 99801

Re: Senate Bill 169

Dear Mr. Neuman,

I am writing in support of SB-169, which would establish a statewide immunization program, and a State Vaccine Assessment Council within the Department of Health and Social Services. This Act will provide less expensive, broader access to immunizations for all Alaskans, and will lead to a significant reduction in influenza and other infections and reduce morbidity and mortality among our population. It would reduce the cost not only of vaccines, but also the costs associated with handling, recording and administering them. Vaccines remain the single most important advancement in health care.

I urge you to support immunization coverage to both adults and children, by passing SB169.

Sincerely,



Jeffrey G Demain, MD, FAAAAI, FACAAI, FAAP
Director, Allergy Asthma & Immunology Center of Alaska
Clinical Professor, University of Washington
Adjunct Professor, University of Alaska

From: "alaskacares ." <afmc4045@gmail.com>
Date: March 24, 2014 at 8:52:22 PM AKDT
To: <Sen.Cathy.Giessel@akleg.gov>
Subject: Vaccines

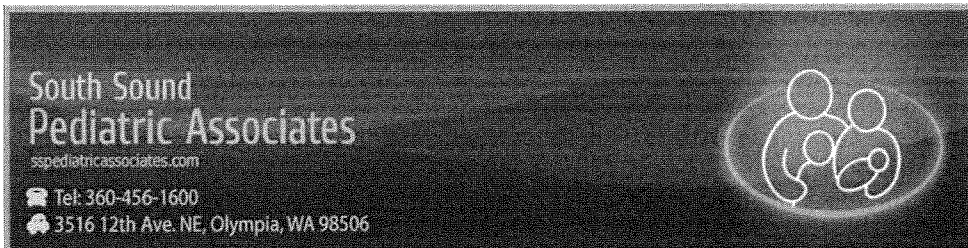
Senator Cathy Giessel;

I am writing in support of your universal vaccination program for children and adults. It is very confusing as a practitioner to try and keep two separate lots of vaccines one from the state for the poor and a separate set of vaccines I purchase for those who are insured ie" the rich" when income between the two groups is often similar. The volume of immunizations was too low in our office to support two sets of vaccines so I made a decision recently to stop providing vaccines for children altogether because it was too expensive and time consuming to have two separate accounting systems. There ended up being too much waste as vaccines cost me over \$5000.00 last year alone and they have short expiration dates.

I find that many people are not getting their shingles vaccine because of expense, and have seen several cases of shingles recently. I have also seen cases of pertussis, flu, and pneumonia. At one time we had a universal immunization program here in Alaska for both adults and children. I would like to see this again as I find people on Medicaid are getting immunized better than other children because of cost barriers re immunizations. Our tax dollars should be used to benefit all and not just a few that state has designated as poor as this is very discriminatory and prevents everyone from having access to the vaccines that all would benefit from obtaining.

Pertussis and pneumonia are debilitating diseases in adults that can lead to chronic respiratory problems, hospitalization and death. I would like to see more adults vaccinated to help prevent these diseases and believe your legislation would help achieve this goal. I like the Alaska vaccine program and would like to see it continue for both adults and children. Let me know how we can work together to get this legislation passed.

Ilona Farr MD



To: Alaska State Legislature

Date: March 19, 2014

Re: Support for Senate Bill 169

As a Washington state pediatrician, I have been administering vaccines to my patients since 1997. I am also a long-time advocate of the universal purchase of vaccines by states so that all children and adolescents have access to recommended vaccinations in their medical home without cost or access barriers.

I was vice president of the Washington Chapter of the American Academy of Pediatrics when our state's universal purchase program was threatened by budget cuts in 2009. Our leadership surveyed members of the WCAAP to see if they had concerns about losing universal purchase. Our members were overwhelmingly concerned that they would not be able to continue providing access to vaccines in their clinics due to new burdens of keeping two separate stocks of vaccines and the financial overhead to start purchasing new private stock. Because of our members' concerns the WCAAP and immunization leaders in our state gathered stakeholders to try to find a solution to save universal purchase. The result of this work was the formation of the Washington Vaccine Association (WVA). The WVA is a nonprofit organization legislated to assess private health insurers for vaccines for the state's privately insured children. The assessments become part of the state's general fund and support the continuation of Washington's universal purchase system so all children continue to have access to vaccines in their medical home.

In my capacity as a pediatrician, a WVA founding board member, and the past president of the Washington Chapter of the American Academy of Pediatrics, I welcome the opportunity to support universal purchase of childhood vaccines for the children of Alaska.

Without state-supplied vaccines for privately insured patients, the average pediatric practice would have to spend \$50,000 to \$100,000 per month to buy vaccines, negotiate new contracts with health plans, and potentially settle for less than full reimbursement. In addition, practices would need to add refrigerators, separate vaccine storage for publicly and privately insured children, and find a way to track their vaccine stock. The degree of administrative complexity, as well as the financial burden this entails would have discouraged many providers from offering vaccinations to children; lacking access to vaccines in their medical home, many parents would simply forgo vaccinations for their children. In our state there is no public health clinic backup option. From our surveys the most rural and isolated regions of our state had the least ability to support access to vaccines if our system did away with universal purchase.

To summarize the benefits of universal purchase in Washington to state-wide pediatricians, clinics, and other providers:

- Providers receive vaccines at no charge from the state Department of Health, affording their patients easy access to critical vaccinations.
- Providers don't have to independently manage supplies for new vaccines or vaccine shortages — all vaccines are available from the state in a timely fashion.
- No cash outlay or additional staff is necessary to acquire vaccines. Providers use the state's online immunization information system to choose their vaccine brand preferences from the full list of childhood vaccines.

In addition to these significant benefits for providers and families, universal purchase of childhood vaccines holds many advantages for the state's public health system, as well as for insurers, health plans, and other payers. Universal purchase benefits Public Health by:

- Preserving the relationship between providers and public health
- Simplifying vaccine ordering and distribution
- Streamlining vaccine management and quality assurance
- Ensuring access to vaccines in children's medical homes

In Washington state, despite the presence of one of the country's most active anti-vaccine contingents, immunization rates have held steady over the last decade — and the cost of these vaccines has remained stable. The percentage of Washington state kindergarteners with complete immunizations has improved steadily since 2009.¹

Here, the amount health plans contribute to support the universal purchase system is done using a dosage-based assessment. All vaccines recommended by the federal Advisory Committee on Immunization Practices (ACIP) are accessible to all children in a timely fashion, and available in all provider offices regardless of the size of the practice or the remoteness of the practice's location.

Our universal purchase program has allowed us to have a unique public private partnership where we focus on access to all vaccines for children. We have an open formulary and the state does not restrict any vaccines from physicians. We are able to rapidly adjust to shortages as the state supply fluctuates. As a pediatrician in private practice with many Medicaid patients, having less capital outlay has allowed me to invest in more patient services such as care coordination, medical home transformation and purchase of an electronic health record. I firmly believe that if we had lost universal purchase of vaccines our immunization rates would have fallen instead of increased.

I think we were successful because we kept children and their health our focus and we tried to keep the system as simple as possible. Best wishes in your efforts.

Sincerely,



¹ WA State Dept. of Health, Office of Immunization and Child Profile, see [Kindergarteners with Complete Immunizations for each Vaccine, 2003-04 to 2012-13](#)

March 14, 2014

Jane Conway

m: Jane Conway
Sent: Monday, March 17, 2014 11:53 AM
To: Sen. Cathy Giessel; Lindsay Williams; 'Lewis, Jill (HSS)' (jill.lewis@alaska.gov); jason.hooley@alaska.gov; Rosayln Singleton MD (risingleton@anthc.org)
Subject: Editorial Vaccination saves lives Juneau Empire - Alaska's Capital City Online Newspaper

March 17, 2014 | 11:48 am



Editorial: Vaccination saves lives

Posted: March 16, 2014 - 12:03am

In July 1881, naturalist Edward William Nelson landed on St. Lawrence Island and found horror.

“In July, I landed at a place on the northern shore where two houses were standing, in which wrapped in their fur blankets on the sleeping platforms lay about 25 dead bodies of adults, and upon the ground and outside were a few others. Some miles to the eastward, along the coast, was another village, where there were 200 dead people,” he wrote in his book, “The Eskimo about Bering Strait.”

St. Lawrence Island had suffered famine, then various diseases brought by traders and explorers.

These diseases had been beaten by vaccination in the United States, but St. Lawrence Island had no vaccination program in 1881. When disease arrived, it found fertile ground for death.

Vaccination is the greatest single medical breakthrough in human history. It has saved more lives than any other medical innovation, but its overwhelming success has made us forget what life was like before vaccination.

Last week, we were alarmed to learn of an outbreak of chickenpox on the Kenai Peninsula. The three reported cases were reportedly among people who had not been vaccinated.

We think of chickenpox as a mild disease, but it can cause complications including pneumonia, encephalitis and — occasionally — death.

More than the disease itself, this outbreak is a signal that Alaskans may not be protecting themselves from more serious diseases.

Last year, an outbreak of whooping cough struck Southeast Alaska. Worldwide, measles is on the rebound as the scared and misinformed keep their kids unprotected by shunning vaccination.

In 1988, the British medical journal Lancet published discredited research from Andrew Wakefield, who incorrectly linked the measles vaccination with autism.

No one has ever reproduced Wakefield’s results, and Lancet retracted the article. But Wakefield’s misinformation lives on.

Alaskans were offered a vaccine against broken legs — take this, and you’ll never break a leg again — there would be a run on pharmacies. Why are we reluctant to protect ourselves against diseases so much worse than a broken leg?

Perhaps cost or accessibility are the problems. The Alaska Legislature is considering SB169, a proposal that would revive the state's universal vaccination program. Children and some adults would have universal access to state-distributed vaccines.

Expect the Legislature to approve this obviously needed measure, but you can help, too.

Don't neglect your own vaccinations or those of your children. The more Alaskans who are vaccinated, the better-protected the state is. The more people who are vaccinated, the harder it is for disease to spread.

The world has eradicated smallpox with a dedicated vaccination effort, and polio is nearly extinct. You can do your part to keep Alaska safe from other diseases and avoid the horrifying scenes Nelson observed.



new 3/10/14

Planned Parenthood Votes Northwest

Senator Cathy Giessel
Alaska Legislature
State Capitol Room 427
Juneau, AK 99801

Re: SB 169

March 4, 2014

Dear Senator Giessel,

On behalf of Planned Parenthood Votes Northwest, I write today to thank you for sponsoring Senate Bill 169, which would establish a statewide immunization program in Alaska.

As a health care organization and a provider of vaccines, we know that immunizations are safe and effective in preventing serious diseases. In fact, vaccines are one of the most successful and cost-effective health investments in history, and this program will help ensure that Alaskans have better access to this critical health care.

It's in our state's best interest to rid the population of vaccine-preventable diseases. Expanding access to vaccines strengthens our ability to fight disease, keeps our families healthy, and improves economic stability. Immunized children are more likely to succeed in school and become healthy, productive adults.

Vaccines work to level the playing field so that everyone, no matter their circumstances, has a shot at a healthy life. Increasing access is one of the best steps we can take towards improving public health in our state. Thank you for your leadership on this issue.

Sincerely,

A handwritten signature in black ink that reads 'Jessica Cler'. The signature is fluid and cursive.

Jessica Cler
Alaska Public Affairs Manager

Planned Parenthood Votes Northwest
4050 Lake Otis Parkway Suite 205 Anchorage, AK 99516
907.770.9705 | jessica.cler@ppvotestnorthwest.org



THE STATE
of **ALASKA**
GOVERNOR SEAN PARNELL

Department of
Health and Social Services

ALASKA COMMISSION ON AGING

P.O. Box 110693
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Main: 907.465.3250
Fax: 907.465.1398

March 3, 2014

Senator Cathy Giessel
Alaska Capitol, Room 427
Juneau, Alaska 99801-1182

Subject: Support SB 169, Statewide Immunization Program

Dear Senator Giessel:

The Alaska Commission on Aging (ACoA) is pleased to express our support for SB 169 to establish a statewide immunization program that will provide recommended vaccines for Alaskans of all ages. This legislation, authored by you and co-sponsored by Senator French, proposes a business model that allows the program to become self-sustaining over time with revenues collected from assessment fees paid by health insurance payers and savings resulting from the state's bulk purchase of vaccine supplies at a reduced cost. It creates a permanent solution to fill the fiscal gap of reduced federal funding for Alaska's immunization program. HB 310 (SB 144) addressed this issue as a temporary measure in 2012, legislation which ACoA supported, that is scheduled to expire on July 1, 2015. Although SB 169 addresses the immunization needs of all Alaskans, our comments will focus on the benefits of this legislation we perceive for older Alaskans.

Preventative services, such as immunizations, are important tools for maintaining the health of all Alaskans at every stage of life. Immune systems weaken with age, which places older people at risk for severe illnesses from pneumonia, influenza, and shingles. The Centers for Disease Control and Prevention recommends vaccines for these conditions for all people over the age of 60. Based on our understanding, vaccines for pneumonia, influenza and shingles would be included under the statewide immunization program proposed by SB 169. Your legislation would help improve access to these vaccines by seniors who are low-income, those not eligible for Medicare, and for seniors who receive services by providers who do not accept Medicare.

SB 169 will also help a growing number of Alaskan seniors who are grandparents raising grandchildren on a fixed income with limited insurance coverage. They desire healthy grandchildren who have access to recommended immunizations recognized by public health standards. Medicare does not cover the cost of childhood immunizations, which are required for admission to public schools. Rather than seeing their grandchildren go without immunizations, many grandparents will make personal and financial sacrifices to insure their grandchildren receive the recommended immunizations. SB 169 will help reduce the cost of immunizations and improve access for these children being raised by grandparents with modest incomes.

The ACoA supports SB 169 and believes this legislation provides an innovative public-private partnership solution that will create a strong foundation for ensuring improved health outcomes for Alaskans. We thank you and Senator French for your leadership on SB 169.

Sincerely,



Mary E. Shields
Chair, Alaska Commission on Aging

Sincerely,



Denise Daniello
ACoA Executive Director

Cc: Senator French