





American Disease Prevention Coalition (ADPC) calls on state policymakers to permit all pharmacists to provide and administer all CDC ACIP-recommended or FDA-authorized vaccines. This helps ensure our communities are protected from vaccine-preventable diseases and individuals are as healthy as possible.

Vaccination is one of the most effective public health interventions in the world after clean water.¹

Vaccines protect children, adolescents, and adults against some of the world's most devastating and deadly communicable illnesses such as measles, influenza (flu), herpes zoster (shingles), meningitis, pneumonia, whooping cough, tetanus, hepatitis A, hepatitis B, and human papillomavirus (HPV). A COVID-19 vaccine has been authorized by the U.S. Food and Drug Administration (FDA), with multiple other vaccine candidates under development and being studied in clinical trials. Expanded access to the vaccine will be critical for the nation's response to the 2020 coronavirus pandemic.

Vaccines reduce the incidence of vaccine-preventable disease, resulting in lower overall health care costs to both patients and the health care system. For example:

- ♣ An estimated \$3 in direct payer savings and \$10 in societal savings for every dollar spent on childhood vaccinations.²
- A study found that in 2015 in the U.S., the economic burden associated with 10 vaccines recommended for adults, for vaccine-preventable diseases, was \$9 billion. Nearly 80% of those costs were attributable to unvaccinated individuals.³

Every year, more than 50,000

Americans die of—and thousands more become seriously ill with—vaccine-preventable diseases.

Vaccines reduce the incidence of vaccine-preventable disease, resulting in lower overall health care costs to both patients and the broader health care system. By getting immunized, Americans can stay healthier and productive, as well as avoid spreading serious vaccine-preventable diseases.

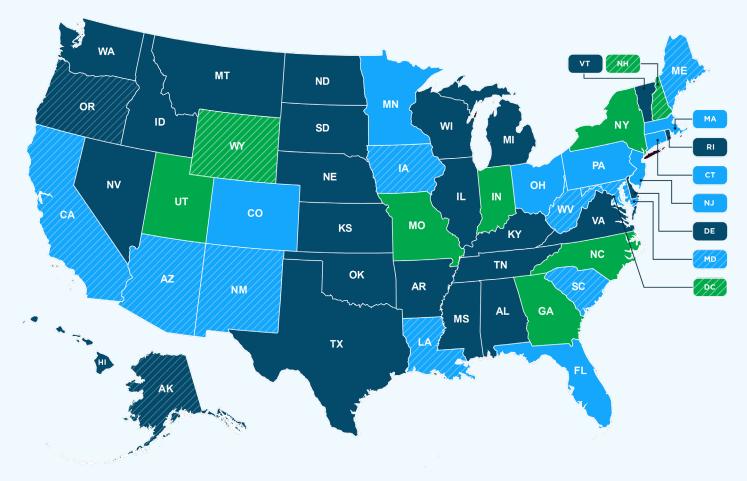


Access to Vaccines During the COVID-19 Pandemic and Beyond

Pharmacies will play a critical role in ensuring that tens of millions of Americans are eventually vaccinated against COVID-19. Under the current national public health emergency, the U.S. Department of Health and Human Services (HHS) has granted universal authority for pharmacists in all 50 states to administer COVID-19 vaccines to all adults.

However, this authority will expire whenever the public health emergency designation is lifted, which is concerning because state laws on pharmacist-administered vaccines vary widely, limiting pharmacies' ability to provide accessible and convenient care during and beyond the COVID-19 pandemic.

The American Disease Prevention Coalition urges all states to permanently remove excessive restrictions on pharmacists' ability to administer adult vaccines, a critical component to protecting Americans' health during this crucial time and beyond.



All 50 states and the District of Columbia currently allow pharmacists to administer vaccines; however, state laws may have limitations based on age, vaccine, parental consent, or physician authorization.⁴

MAP LEGEND



Pharmacists can administer all CDC ACIP-recommended and FDA-approved vaccines to adult patients without requiring individual prescriptions.



Pharmacists can administer all CDC ACIP-recommended vaccines to adult patients under pre-set protocols approved by licensed physicians and/or individual prescriptions.



Pharmacists can administer a pre-set list of vaccines to adult patients without requiring individual prescriptions.



Pharmacists can administer all CDC ACIP-recommended and FDA-approved vaccines to adult patients under preset protocols approved by licensed physicians and/or individual prescriptions.



Pharmacists can administer all CDC ACIP-recommended vaccines to adult patients without requiring individual prescriptions or protocols.



Pharmacists can administer a pre-set list of vaccines to adult patients, but only by requiring individual prescriptions.

Sources in Brochure

- 1 World Health Organization. "Immunization." December 5, 2019. https://www.who.int/news-room/facts-in-pictures/detail/immunization
- 2 Rémy V, Zöllner Y, Heckmann U. Vaccination: the cornerstone of an efficient healthcare system. J Mark Access Health Policy. 2015;3:10.3402/jmahp.v3.27041. Published 2015 Aug 12. doi:10.3402/jmahp.v3.27041
- 3 Ozawa S, Portnoy A, Getaneh H, Clark S, Knoll M, Bishai D, Yang H Keri, and Patwardhan P. Modeling The Economic Burden Of Adult Vaccine-Preventable Diseases In The United States. Health Affairs (Project Hope) 35, no. 11 (November 1, 2016): 2124–2132. 2
- 4 "Pharmacist-Administered Vaccines." Based on APhA/NASPA Survey of State IZ Laws/Rules. June 2020. https://naspa.us/wp-content/uploads/2019/04/Pharmacist-Administered-Vaccines-June-2020-Final.pdf
- 5 Bartsch SM, Taitel MS, DePasse JV, et al. Epidemiologic and economic impact of pharmacies as vaccination locations during an influenza epidemic. Vaccine. 2018;36(46):7054-7063. doi:10.1016/j.vaccine.2018.09.040
- 6 Steyer TE, Ragucci KR, Pearson WS, Mainous AG 3rd. The role of pharmacists in the delivery of influenza vaccinations. Vaccine. 2004;22(8):1001-1006. doi:10.1016/j.vaccine.2003.08.045

- 7 Drozd EM, Miller L, Johnsrud M. Impact of Pharmacist Immunization Authority on Seasonal Influenza Immunization Rates Across States. Clin Ther. 2017;39(8):1563-1580.e17. doi:10.1016/j.clinthera.2017.07.004
- 8 Papastergiou J, Folkins C, Li W, Zervas J. Community pharmacist-administered influenza immunization improves patient access to vaccination. Can Pharm J (Ott). 2014;147(6):359-365. doi:10.1177/1715163514552557
- 9 Centers for Disease Control and Prevention. Place of influenza vaccination among adults—United States, 2010-11 influenza season. MMWR Morb Mortal Wkly Rep. 2011;60(23):781-785.
- 10 Goad JA, Taitel MS, Fensterheim LE, Cannon AE. Vaccinations administered during off-clinic hours at a national community pharmacy: implications for increasing patient access and convenience. Ann Fam Med. 2013;11(5):429-436. doi:10.1370/afm.1542
- 11 PrescribeWellness 2017 Vaccination and Preventive Care Survey. Published March 2017.
- 12 Qato DM, Zenk S, Wilder J, Harrington R, Gaskin D, et al. (2017) The availability of pharmacies in the United States: 2007–2015. PLOS ONE 12(8): e0183172. https://doi.org/10.1371/journal.pone.0183172

Why Pharmacists Should Administer Vaccines

Pharmacists, like other health care providers under their own authority, should be able to administer vaccines. With rigorous professional education and training around medications and vaccines, vaccine practice management, vaccine guidance and recommendations, and vaccine and medication administration, pharmacists play an important role in preventing and treating disease. Pharmacists also play an important role within communities by enhancing awareness of vaccines, assessing a patient's immunization status, recommending vaccines, administering vaccines, and reporting vaccinations to registries—all in alignment with current practice guidelines and recommendations.

The federal government recognizes the vital role pharmacists play in expanding access to vaccines, especially during the current COVID-19 pandemic and has provided expanded authority for pharmacists to order and administer vaccines, including COVID-19, to patients ages 3 and older. Benefits of more pharmacists administering more vaccines include:



Increased Vaccination Rates. Allowing more pharmacists to administer more vaccines can increase vaccination rates, as has been found for the H1N1 flu pandemic.

A Johns Hopkins University study found that allowing pharmacists to administer flu vaccinations during a severe flu pandemic would avert up to 23.7 million symptomatic cases, preventing up to 210,228 deaths, and saving \$2.8 billion in direct medical costs. In fact, during the 2009 H1N1 flu pandemic, pharmacists played a critical role in improving access to the vaccine developed to help stop the further spread of the disease.⁵

Data has been collected regarding pharmacist-administered vaccines and vaccination rates as far back as 1995. A 2004 study to determine whether influenza vaccine rates increased in states where pharmacists can give vaccines (from 1995 – 1999) concluded "allowing pharmacists to provide vaccinations is associated with higher influenza vaccination rates for individuals aged 65 years and older." Overall, as states moved to allow pharmacists to administer influenza immunizations, the odds that an adult resident received an influenza immunization rose, with the effect increasing over time. 6



Broader Population Reached. Pharmacists may increase equity in immunization. Evidence suggests that pharmacies have the capacity to provide health care services to populations like those living in rural areas

and the medically underserved. Allowing pharmacists to administer vaccines can also help other underserved or under-resourced populations, including communities of color, people with chronic illnesses, and people with limited proficiency in English.⁷ For example, one study found that, in one year, 21% of high-risk patients would not have been immunized if pharmacy-based vaccination were not available.⁸

The U.S. Centers for Disease Control and Prevention (CDC) reports that people who hadn't been to the doctor for a routine checkup in more than a year were more likely to receive vaccinations in a pharmacy than those who had been more recently (53.5% versus 38.8%). The study suggests that pharmacists can successfully identify new, previously unvaccinated populations for immunization. Pharmacies can serve as entry sites to health care and referrals to providers accepting new patients for needed follow-up.

Pharmacist-Administered Vaccines Can Improve Access & Convenience¹⁰

A 2017 survey found 62% of Americans prefer receiving immunizations in the pharmacy over other health care settings, due mostly to convenience. Roughly 9 out of 10 Americans live within five miles of a pharmacy with the capacity to provide vaccinations during extended business hours and without an appointment. 12



Benefits when pharmacists administer vaccines:

- Access for patients with no or limited access to primary or routine medical care
- Protection for acutely and chronically ill patients
- Encouragement, education, and enhanced access for those who wouldn't otherwise get vaccinated
- Convenience for people who live far from or lack transportation to their healthcare provider
- Access for people who cannot get vaccinations during their physicians' or clinics' business hours
- Documentation of vaccines into Immunization Information Systems (IIS)
- Improved management of patient care activities because physicians' time is freed up to focus on patients' complex and urgent medical issues
- Access for communities of need, especially low-income communities after low-income, underserved communities, or communities of color, where vaccination is less common or less accessible
- Fewer outbreaks across society, as a whole



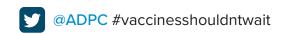
About the American Disease Prevention Coalition

ADPC advocates for state legislation that enables pharmacists to administer adult immunizations recommended by the CDC within Recommended Immunization Schedules; immunizations or vaccines recommended in the CDC's Health Information for International Travel; and those approved or authorized by the United States FDA for Use in the United States—under pharmacist's own authority, similar to how other vaccine providers initiate and administer vaccines.

ADPC Steering Committee: AmerisourceBergen, Good Neighbor Pharmacy, GlaxoSmithKline, Merck, McKesson Corporation, National Association of Chain Drug Stores, Pfizer, Walgreen Co.

Supporting Members: Alliance for Patient Access, American Pharmacists Association, Americans for Tax Reform, CVS Health, Global Healthy Living Foundation, The National Alliance of State Pharmacy Associations, National Community Pharmacists Association





VACCINES SHOULDN'T WAIT www.VaccinesShouldntWait.org