

Submitted by electronic mail

June 24, 2022

Senator Patty Murray, Chair
U.S. Senate Committee on Health,
Education, Labor and Pensions
428 Dirksen Senate Office Building
Washington, D.C. 20510

Senator Richard Burr, Ranking Member
U.S. Senate Committee on Health,
Education, Labor and Pensions
217 Russell Senate Office Building
Washington, D.C. 20510

Dear Senators Murray and Burr,


The undersigned organizations appreciate all you have done in support of the nation's response to the COVID-19 pandemic, especially your efforts to ensure access to vaccines to address COVID-19. But COVID-19 is unlikely to be our nation's last battle with infectious diseases, especially with diseases that more frequently originate abroad. All vaccines recommended by the Centers for Disease Control and Prevention are critical to public health, and there should be no financial barriers to at-risk patients accessing such lifesaving, preventive care.

Today, we write as public health stakeholder organizations to ask you to urge HHS to act now to clarify its current regulations and ensure that the *Public Health Service Act requirement for commercial coverage of all CDC recommended vaccines with no patient cost-sharing is fully implemented*.

As you know, Section 2713 of the Public Health Service Act (the Preventive Care Mandate) provides broad, unqualified language prohibiting cost sharing for all recommended vaccines. See 42 U.S.C. §300gg-13. This statutory mandate was narrowed by regulation to apply only to "routine" immunizations listed on the CDC's "Immunization Schedules." See 45 C.F.R. §147.130. The misalignment between the law and regulation has resulted in coverage gaps in the commercial marketplace, ultimately limiting patient access to important CDC recommended vaccines, including for individuals at risk of exposure due to their occupation or travel. Recent outbreaks of monkeypox, Japanese Encephalitis, and Crimean-Congo hemorrhagic fever show the value of a proactive policy enabling access to vaccines without cost sharing.

One lesson of the pandemic is the imperative for removing financial barriers to preventive care and ensuring broad access to vaccines with no cost-sharing. Because of the current HHS regulation, Congress had to step in to ensure that COVID-19 vaccines would be available with no cost-sharing. By giving full force and effect to the Preventive Care Mandate, HHS can exhibit further public health leadership. A proactive, rather than piecemeal, approach to vaccine access is sound policy, and what was intended in the enactment of the Preventive Care Mandate.

Given the urgency of the issue and the growing threat of global infectious diseases, we urge you to lend your voice in support of expedited HHS action to rectify this critical vaccine coverage gap by revising HHS regulations, thereby demonstrating unwavering commitment to vaccine access.



Eliminating financial barriers to all CDC recommended vaccines for at-risk individuals would be an administrative action supported by a broad group of stakeholders. We agree that ensuring access to CDC recommended vaccines is an investment in our future health, wellbeing and economic success of our nation, and we stand ready to work with you.

Thank you for your consideration of this important matter. If you have any questions, please contact Joel Straus at jstraus@bio.org.

Sincerely,

Adira, LLC

American Association of Veterinary Medical Colleges

Association of Veterinary Technician Educators

Bavarian Nordic

Biotechnology Innovation Organization

Dakota County Technical College

Dynavax

The Gerontological Society of America

Healthy Women

Infectious Diseases Society of America

Merck

NAFSA: Association of International Educators

National Association of Veterinary Technicians in America

National Consumers League

Valneva