

ACCV Adult Immunization Workgroup Update

November 17, 2015

Background

During the December 5, 2013 meeting of the Advisory Commission on Childhood Vaccines, Dr. Steve Bende from the National Vaccine Program Office (NVPO) reported that one important area of immunizations was that of adults. Dr. Bende then discussed activities under way at NVPO to support the objective of the Adult Immunization Strategy and Plan. One update would include standards and practices of healthcare providers, specifically those who provide immunization services, to increase vaccine access and coverage. In March 2014 Dr. Bende updated the ACCV that NVPO intended to present a National Adult Immunization Plan which will be launched in early 2016. During the September 2014 ACCV meeting there was a discussion about whether vaccines recommended for routine use in adults should be considered for inclusion to the National Vaccine Injury Compensation Program (VICP). It was recommended, and the ACCV agreed, that a workgroup be established to look at the issues. Also, in Fiscal Year 2014, about 75% of the claims filed have been for adults (persons 18 years and older) and this percentage increased to 83% in Fiscal Year 2015.

Summary of Workgroup Activities

The Adult Immunization Workgroup met monthly via teleconference from January 2015 to October 2015. It carefully considered and discussed issues related to vaccines that are routinely recommended for use only in adults. The workgroup asked the Division of Injury Compensation Programs (DICP) to provide any claims data for the Zoster (Zostavax) and PPSV 23 (Pneumococcal 23) vaccines. Because these vaccines are not routinely recommended for children and are not covered by the VICP, if claims are received for these vaccines, they are categorized as unqualified vaccines in the DICP information system. Therefore, there is not any specific data about claims filed for these two vaccines.

It is the conclusion of the workgroup that because of data limitation, claims limitation, and potential unintended consequences of allowing amendments to the National Childhood Vaccine Injury Act of 1986, that Zoster and PPSV 23 will not be recommended for coverage by the VICP. It is concluded that the risk to the program through legislative change potentially outweighs any perceived benefit of modifying the legislation to include these two vaccines.

It is the workgroup's strong recommendation to the ACCV that the Commission be open to revisit the debate and potential recommendations regarding amendments to the VICP in the future as new vaccines might qualify for coverage under VICP, especially considering the potential inclusion of vaccines that would be routinely recommended for use during pregnancy solely for the benefit of a live born child. The Adult Immunization Work Group respectfully submits its deliberations and conclusions to ACCV