

March 3, 2021

Subcommittee on Article II Committee on Appropriations Texas House of Representatives Post Office Box 2910 Austin, TX 78768-2910

Invited Testimony by Allison N. Winnike, J.D.,
President & CEO of The Immunization Partnership,
on
Department of State Health Services Appropriations in HB 1

Good morning, Chair Capriglione, Vice Chair Rose, and members of the Subcommittee. My name is Allison Winnike and I am President and CEO of The Immunization Partnership. Our non-profit mission is to eradicate vaccine-preventable diseases by educating the community, advocating for evidence-based public policy, and supporting immunization best practices. Thank you for the opportunity to provide testimony on Article II appropriations for the Department of State Health Services.

Today I have two recommendations for the Subcommittee regarding appropriations to the Department of State Health Services: (1) prioritize strengthening our immunization infrastructure; and (2) fully fund immunization programs within the Department.

I. Prioritize Strengthening Our Immunization Infrastructure

Now is the time to devote resources to strengthening our immunization infrastructure so we can respond to the current crisis and prepare for the future outbreaks and epidemics which will inevitably come. The COVID-19 pandemic has exposed the fissures of our neglected public health infrastructure. The cornerstone of a strong

immunization infrastructure is a state's immunization registry. Each state's immunization registry is a vital tool in public health emergency preparedness and response, used to track immunization records of all state residents.¹

The bad news is that Texas's immunization registry ranks in the bottom tier of functionality among the nation's immunization registry systems.² In fact, our ImmTrac2 registry does not meet the essential functionality standards developed by the U.S. Centers for Disease Control and Prevention (CDC) to support the control and management of vaccine-preventable disease outbreaks.³

The good news is that there are federal funds available to Texas to bring our registry up to national standards and make it work for Texans, not the least for our front-line health care providers working to vaccinate us out of this pandemic.

- The federal Coronavirus Aid, Relief, and Economic Security (CARES) Act⁴ provided Texas with \$24,515,406 in funding for COVID-19 vaccine preparedness.⁵
- The federal Coronavirus Response and Relief Supplemental Appropriations Act of 2021⁶ provided states with over \$3 billion in COVID-19 Vaccination Supplemental Funding to support the pandemic response while securing long-term immunization

¹ Kavya Sekar, Congressional Research Service, *Tracking COVID-19 Vaccines: U.S. Data Systems and Related Issues, IN11584* (January 28, 2021), https://crsreports.congress.gov/product/pdf/IN/IN11584.

² Memorandum from the Network for Public Health Law to the Partnership for Public Health Law (December 1, 2014), https://www.astho.org/Public-Policy/Public-Health-Law/Cross-Jurisdictional-Sharing-IIS-Data/.

³ National Center for Immunization and Respiratory Diseases, U.S. Centers for Disease Control and Prevention, *Immunization Information System (IIS) Functional Standards*, v4.1 (January 3, 2021), https://www.cdc.gov/vaccines/programs/iis/functional-standards/func-stds-v4-1.html.

⁴ Coronavirus Aid, Relief, and Economic Security (CARES) Act, P.L. 116-136 (March 27, 2020), https://www.congress.gov/bill/116th-congress/house-bill/748/text.

⁵ National Center for Immunization and Respiratory Diseases, U.S. Centers for Disease Control and Prevention, *COVID-19 Vaccination Supplemental Funding: Funding for the implementation and expansion of the COVID-19 vaccination program* (January 13, 2021),

https://www.cdc.gov/vaccines/covid-19/downloads/vaccination-supplemental-funding.pdf.

⁶ Coronavirus Response and Relief Supplemental Appropriations Act of 2021, P.L. 116-260 (December 27, 2020), https://www.congress.gov/bill/116th-congress/house-bill/133/text.

registry system sustainability.⁷ This includes \$227,056,156 awarded to Texas in January which can be used to upgrade our immunization registry capacity and functionality.⁸

In addition, the bipartisan Immunization Infrastructure Modernization Act of 2021⁹ was introduced in Congress in January. If passed, this federal legislation would provide states with an additional \$400 million to help modernize and improve state immunization registries.

The Immunization Partnership recommends the Texas Legislature include appropriations language instructing the Department of State Health Services to first use the available federal funds to strengthen our immunization registry infrastructure to create the robust system we desperately need.

II. Fully Fund DSHS Immunization Programs

The Texas Legislature should fully fund immunization programs within the Department of State Health Services. Texas remained mired in the middle of a pandemic, one that we can only end by vaccinating, perhaps, over 90% of Texans.¹⁰ We need robust funding for educational outreach and awareness campaigns for both COVID-19

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⁷ National Center for Immunization and Respiratory Diseases, U.S. Centers for Disease Control and Prevention, *COVID-19 Vaccination Supplemental Funding: Funding for the implementation and expansion of the COVID-19 vaccination program* (January 13, 2021),

https://www.cdc.gov/vaccines/covid-19/downloads/vaccination-supplemental-funding.pdf.

⁸ U.S. Centers for Disease Control and Prevention, *CDC COVID-19 State, Tribal, Local, and Territorial Funding Update* (January 7, 2021), https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/funding-update.pdf.

⁹ Immunization Infrastructure Modernization Act of 2021, H.R. 550, 117th Congress (2021), https://www.congress.gov/bill/117th-congress/house-bill/550/text.

¹⁰ Sarun Charumilind et al., When will the COVID-19 pandemic end? An update, MCKINSEY & Co. (January 20, 2021),

https://www.mckinsey.com/~/media/McKinsey/Industries/Healthcare%20Systems%20and%20Services/Our%20Insights/When%20will%20the%20COVID%2019%20pandemic%20end/Jan%202021/When-will-the-COVID-19-pandemic-end-an-update-vF.pdf.

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vaccines, regular adult vaccines, and the regular childhood vaccines for which rates have dropped during the pandemic.¹¹

Within A.2.1. Strategy: Immunize Children and Adults in Texas, both the childhood vaccine program and the Adult Safety Net program should be fully funded to ensure adequate vaccination procurement and distribution for childhood and adult immunizations. It is imperative that we restore our adult and childhood vaccination rates that have dipped during the COVID-19 pandemic. Otherwise, Texas risks outbreaks of other deadly vaccine-preventable diseases such as measles and flu as we transition out of the pandemic and begin to congregate in groups once again.

Thank you for the opportunity to share our recommendations with the Subcommittee. As the only organization in Texas solely devoted to creating a community free of vaccine-preventable diseases, we are here to work with the Department of State Health Services, providers, stakeholders, and the Texas Legislature to improve our immunization systems which serve as a key component of a robust and efficient public health infrastructure. I welcome any questions or requests for additional information.

Respectfully,

Allison N. Winnike, J.D.

President & Chief Executive Officer

The Immunization Partnership

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¹¹ Texas Department of State Health Services, Preliminary Report on the Texas Vaccines for Children (TVFC) Program: Impacts of COVID-19 on TVFC Vaccine Administration (September 18, 2020), https://www.dshs.texas.gov/immunize/docs/COVID19impactTVFC.pdf.