



September 25, 2009

Dear Medical Director:

On behalf of the over 60,000 members of the AAP, I commend those carriers and employers that have already taken steps to provide benefits coverage for administration of the H1N1 influenza vaccine. I now urge all payers to appropriately cover the total costs of the immunization administration by paying a fee that is at least 100% of Medicare.

Pediatric medical practices and other medical providers who serve children face a special challenge from the H1N1 virus. The AAP anticipates that pediatric practices will encounter a “double whammy” of business interruption due to staff shortages as a result of H1N1 illness while simultaneously experiencing a dramatic increase in workload from sick children and families seeking vaccination. It is much more difficult to immunize children. Pediatricians must spend time convincing parents of the importance and value of immunizations because of all the misguided information in the media concerning vaccine safety. Studies to be published in *Pediatrics* show that the actual costs of pediatric immunization administration are in the range of \$29-\$32. Unless the administration fee is paid at a minimum of the current Medicare rate, pediatricians and others who care for children cannot afford to provide this service.

Pediatric practices are the public health infrastructure for the nation's childhood immunization program. Eighty-five percent of all childhood immunizations are delivered through the private sector, the vast majority of those being provided in pediatricians' offices. (Centers for Disease Control and Prevention. National Immunization Survey 2008. Available online at [http://www.cdc.gov/vaccines/stats-surv/nis/data/tables\\_2008.htm#facility](http://www.cdc.gov/vaccines/stats-surv/nis/data/tables_2008.htm#facility).) It is imperative to incentivize physicians to participate in the H1N1 immunization efforts.

Pediatricians are in the best position in the child's medical home to both deliver the vaccines and to ensure accurate recordkeeping while educating parents about the importance of immunizing against H1N1. While the AAP recognizes that schools and other non-traditional locations may be utilized as vaccination sites in some states, children, and particularly those who are 6 months to 5 years, will need access to the H1N1 influenza vaccine in their medical home.

Although the H1N1 vaccine will be provided to the physician at no cost, there remains the practice overhead costs of storage and inventory as well as administration expenses that must be appropriately covered. Thank you for carefully considering our concerns as we work with you to meet the challenges of the H1N1 pandemic. I look forward to your response.

Sincerely,

/S/

David T. Tayloe, Jr., MD, FAAP  
President

DTT/lt

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