

# Influenza Disease and State Best Practices

Washington Representative Cindy Ryu, Chair,  
Women In Government Board of Directors (Moderator)

Steve Ketterbaugh, Senior Director, State Government Affairs &  
Immunization Policy, Sanofi



*#AccessToHealthCare*



sanofi

# Influenza Disease & State Best Practices

*2022-2023*



# Agenda

**I. Health Burden of Influenza**

**II. Economic Burden of Influenza**

**III. Equity**

**IV. CDC's Advisory Committee on Immunization Practices**

**Administration Recommendations**

**V. State Best Practices**

# Influenza Activity Increased Late in Season Across the United States

CDC estimates that, from October 1, 2021 through May 21, 2022, there have been<sup>1</sup>:

7,300,000 – 12,000,000  
*flu illnesses*



3,400,000 – 5,500,000  
*flu medical visits*



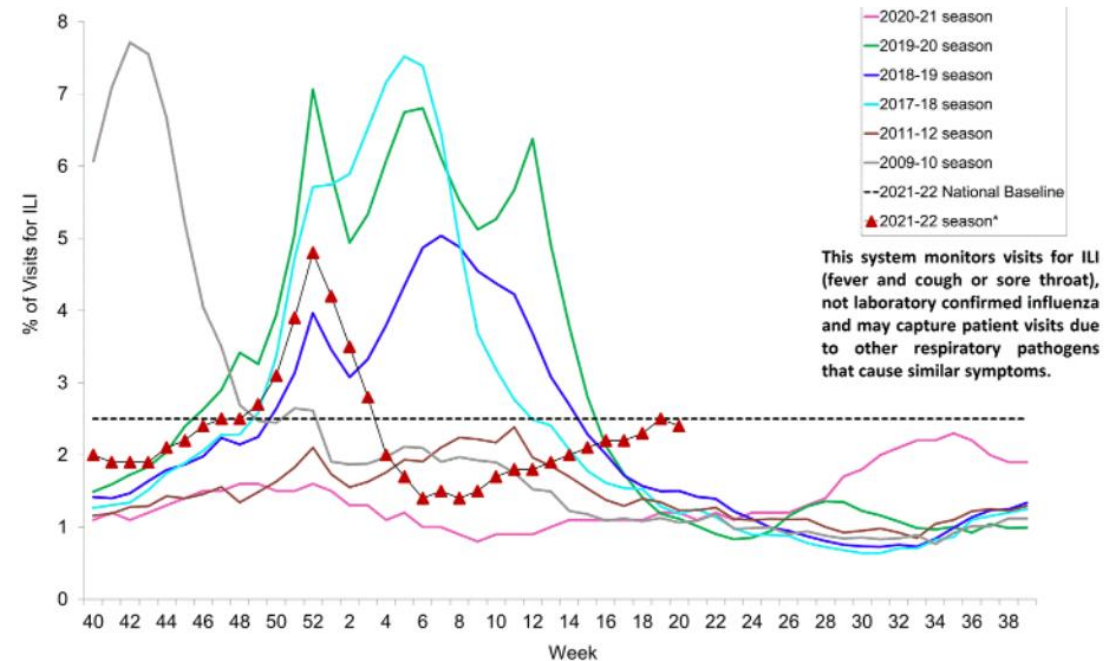
74,000 – 150,000  
*flu hospitalizations*



4,500 – 13,000  
*flu deaths* (25 pediatric deaths)

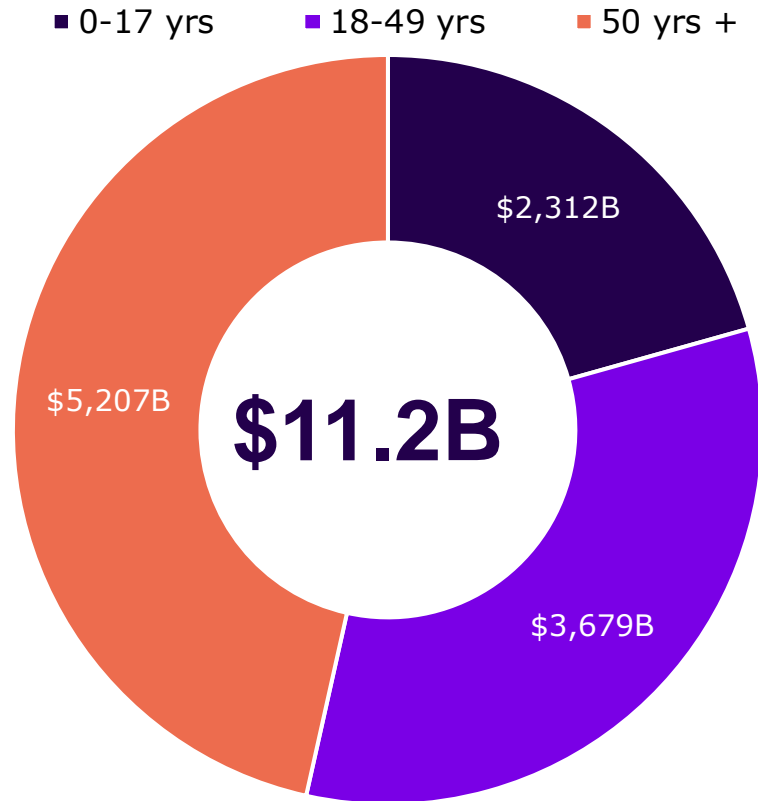


Percentage of Outpatient Visits for Respiratory Illness, 2021-22 and Selected Previous Seasons<sup>2</sup>

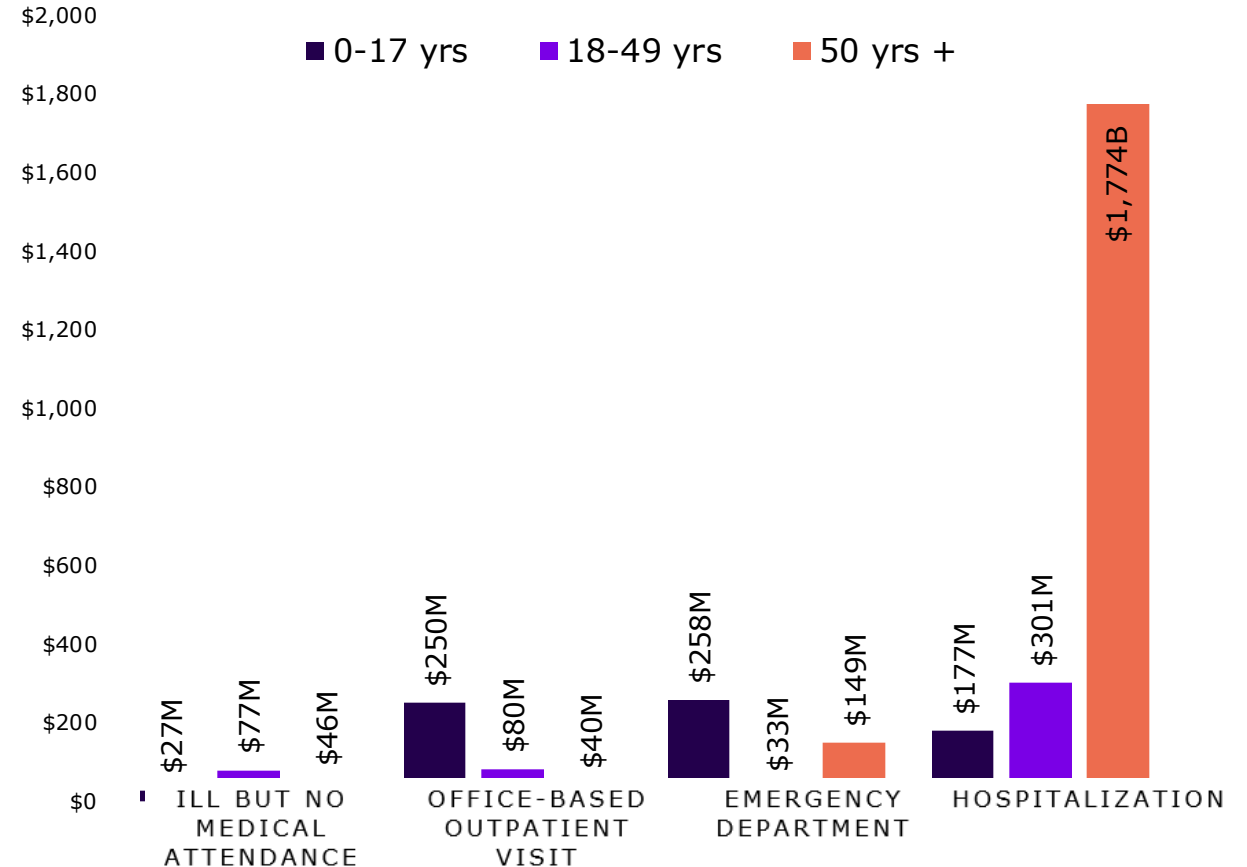


# \$11.2B Estimated Economic Burden of Influenza Has \$3.2B Direct Impact on Customers Due to Increased Hospitalizations in Patients 50+

**Total Annual Economic Burden of Influenza**



**Direct Medical Costs of Influenza Per Age Group**



*This study aimed to understand current influenza economic burden by using the 2015 demographic profile*

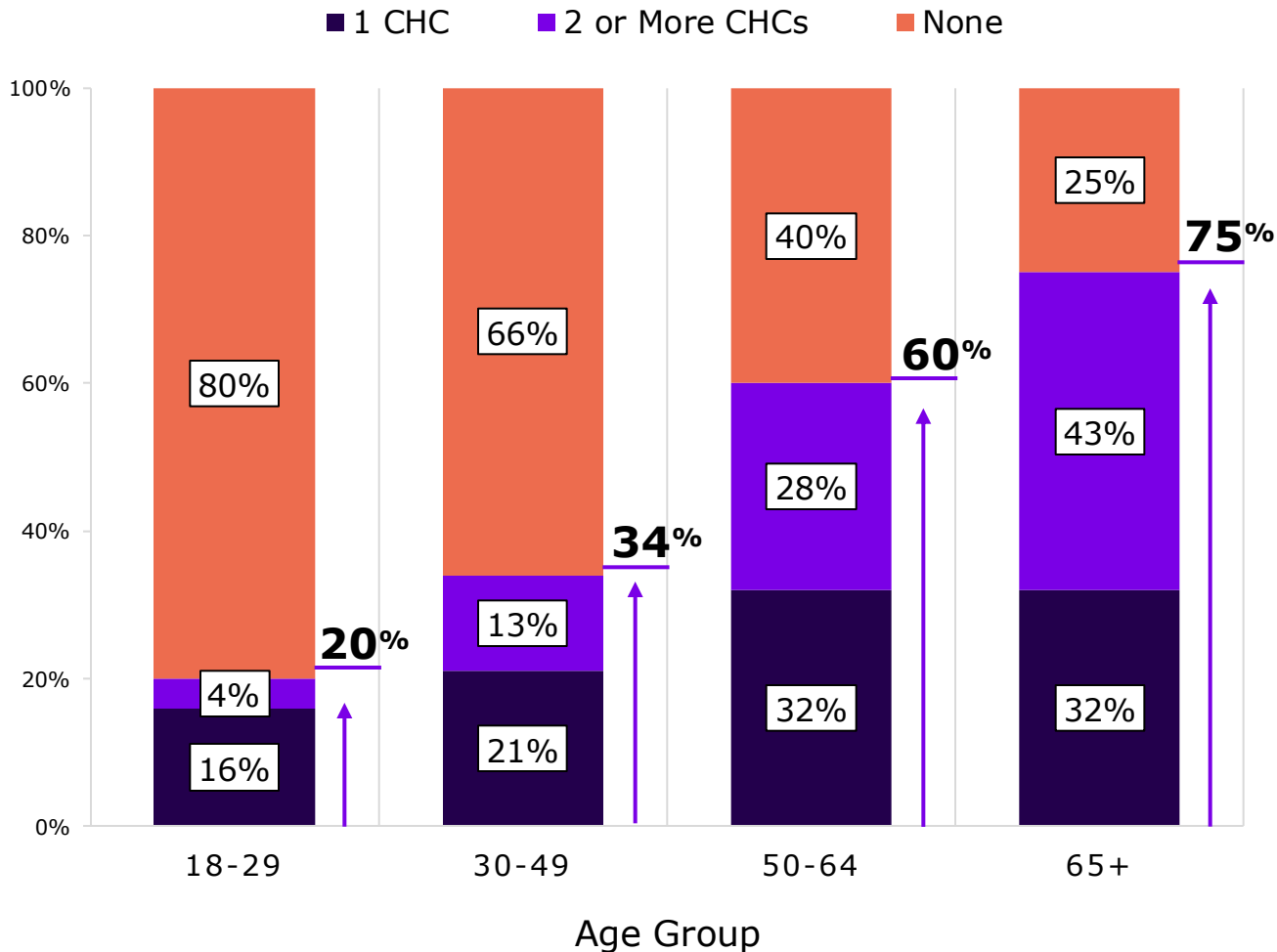
*Limitation: There can be uncertainty in estimates of influenza disease burden and there is need to establish a more consistent method in estimating influenza-associated outcomes*



**Data Source:** Economic burden of seasonal influenza in the United States. <https://pubmed.ncbi.nlm.nih.gov/29801998/>. Published May 11, 2018. Accessed March 22, 2022.

# Direct Costs of Influenza on Customers is Driven by the Prevalence of Chronic Health Conditions (CHCs) in Adult Patient Populations

**Adults Living With Chronic Health Conditions, by Age<sup>1</sup>**



*In a 10-year study of the correlation between influenza and cardiovascular events, within a week of influenza infection, adults had an:*

**~10x**

increased risk of **first heart attack** in 1,227 subjects 40 years of age and older<sup>2</sup> (95% CI 2.37-40.5)

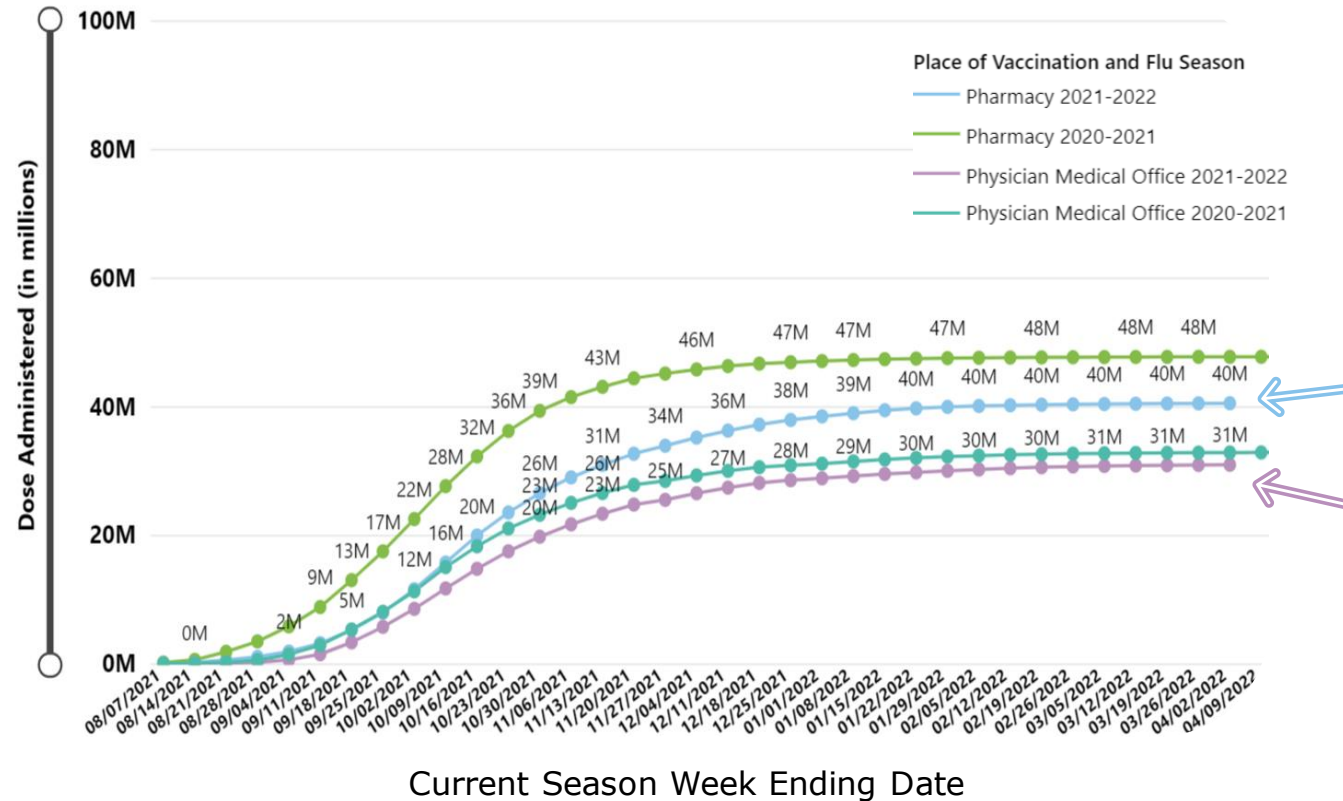
**~8x**

increased risk of **first stroke** in 762 subjects 40 years of age and older<sup>2</sup> (95% CI 1.07-56.9)



# Opportunity to Return Influenza Vaccinations Administered to 2019 Levels and Continue on Pre-Pandemic Trajectory

**Weekly Cumulative Estimated Influenza Vaccinations Administered in Pharmacies and Physician Medical Offices, U.S., Adults 18 years and older<sup>1</sup>**



Influenza Season	Cumulative Influenza Claims <sup>2</sup> (Mds*)
2016-17	73.3
2017-18	83.8
2018-19	86.9
2019-20	92.2
2020-21	100.5
<b>2021-22</b>	<b>87.6</b>

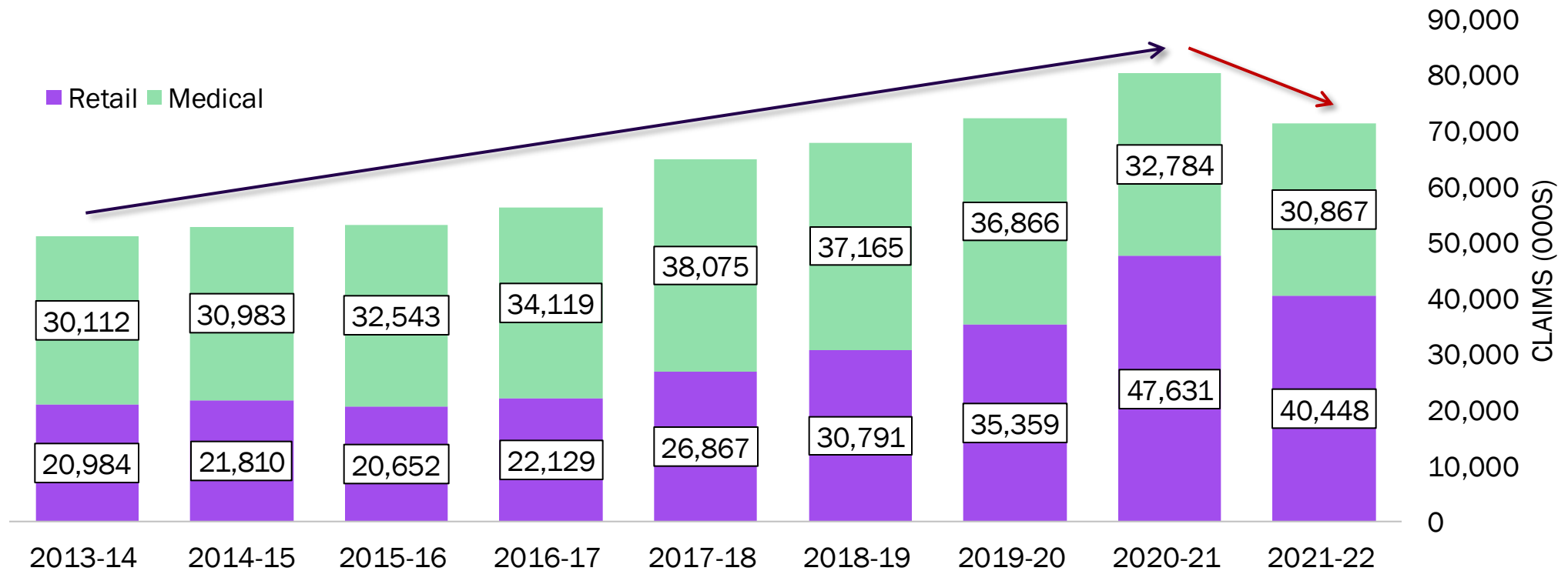
\* Million doses



**Data Sources:** 1. IQVIA Claims Retail Week Ending March 04, 2022 and Medical Week Ending March 05, 2022 2. CDC website. Influenza Vaccinations Administered in Pharmacies and Physician Medical Offices, Adults, United States. Pharmacy Data are current through January 29, 2022. Medical Office Data are current through January 29, 2022. <https://www.cdc.gov/flu/fluview/dashboard/vaccination-administered.html>. Accessed March 28, 2022.

# Even More Critical Than Ever To Reprioritize Influenza Vaccinations In Response To Covid-19 Interference to Vaccine Coverage Rates

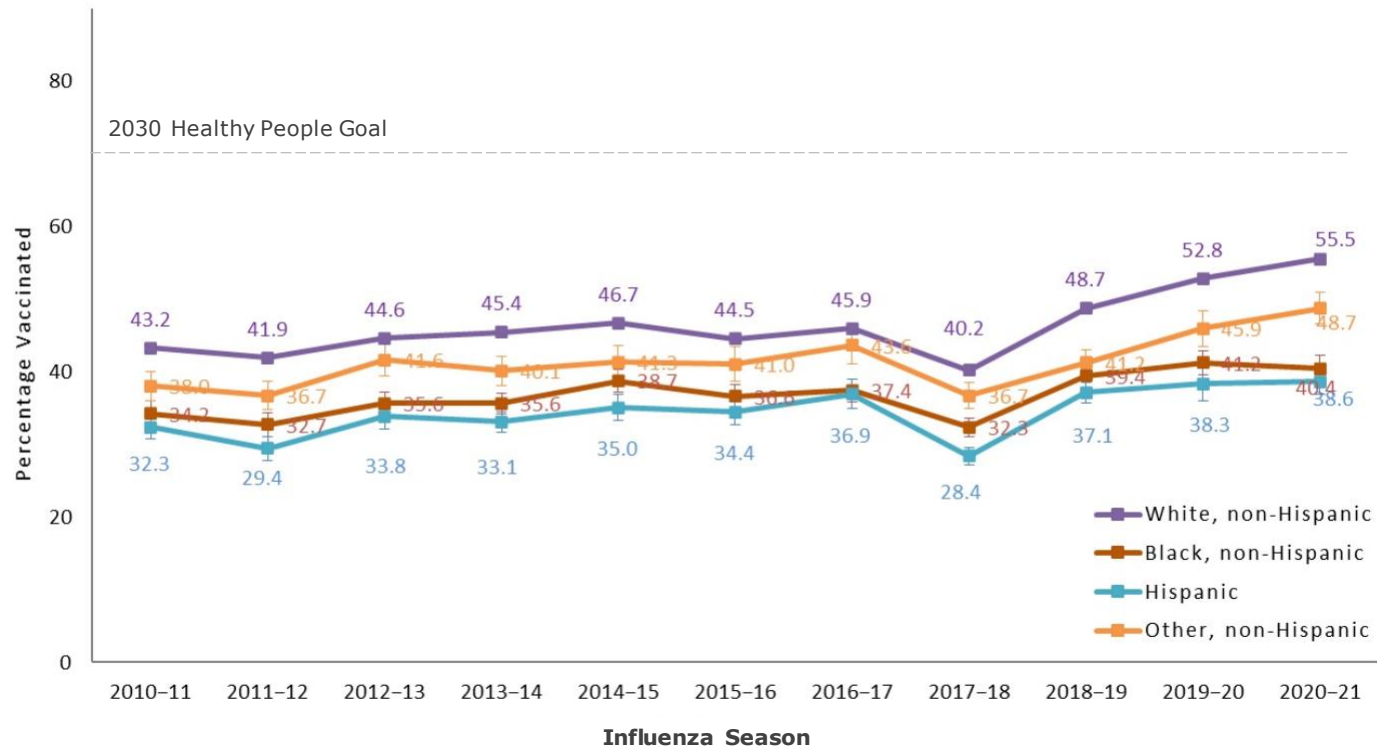
Adult 18+ Influenza Claim Volume By Medical And Retail<sup>1</sup>





# Consistent Evidence of Racial and Ethnic Disparities in Adult Influenza Vaccination<sup>1</sup>

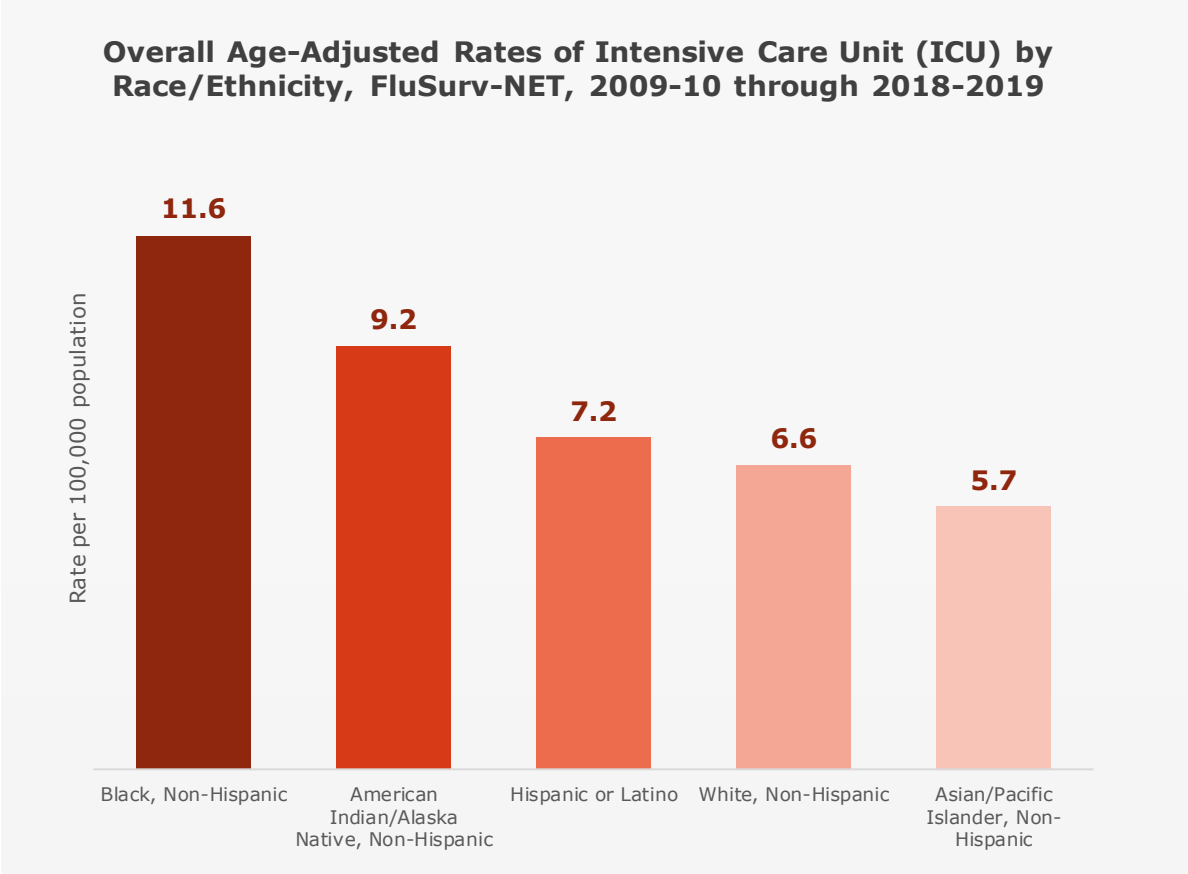
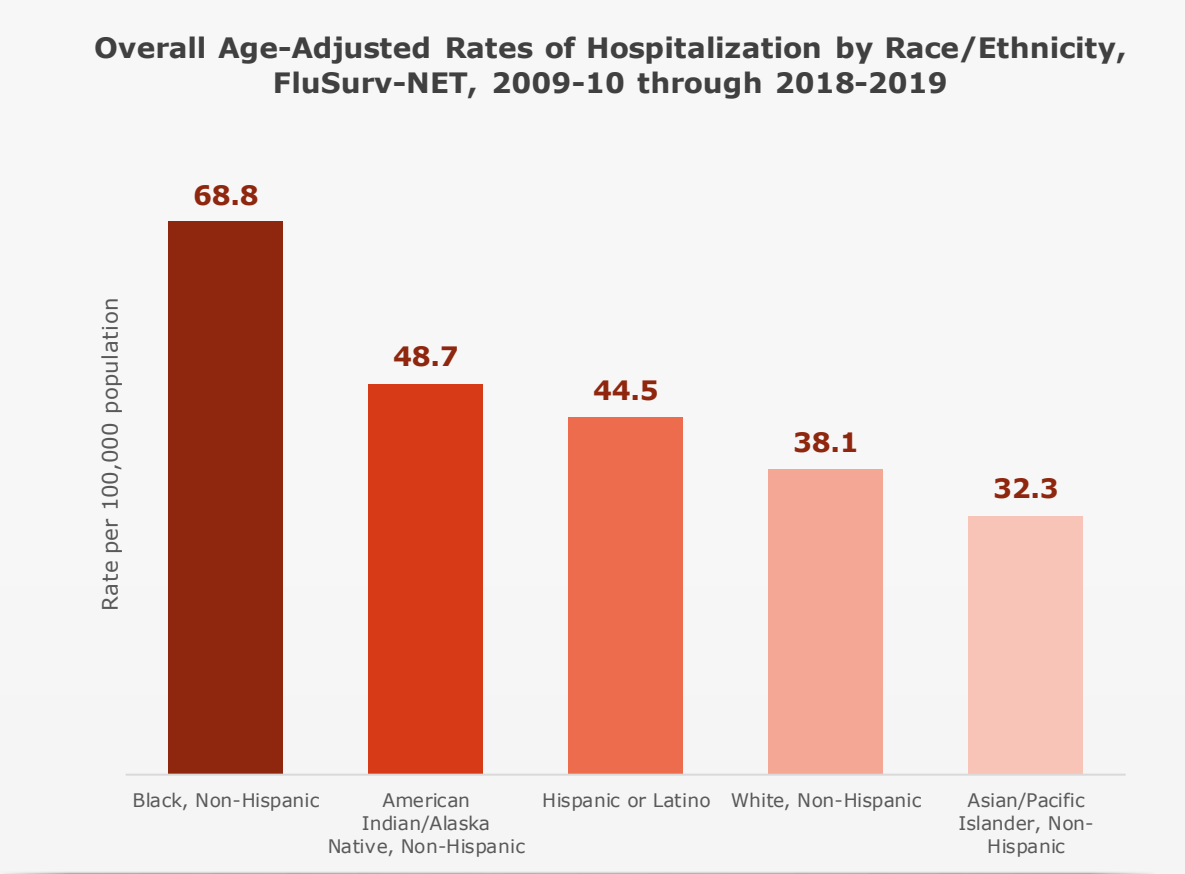
**Influenza Vaccination Coverage by Racial/Ethnic Group, Adults 18 years and older, U.S., 2010-2021<sup>1</sup>**



**Data Source:** Behavioral Risk Factor Surveillance System (BRFSS). Error bars represent 95% confidence intervals around the estimates.

While no group reached the 2030 Healthy People goal of 70% annual influenza vaccination rate, **Non-Hispanic Black, Hispanic, and adults of other, non-Hispanic racial and ethnic groups** consistently had lower influenza vaccine coverage rates than their White, non-Hispanic counterparts.<sup>1,2</sup>

# Vaccination Against Influenza is Critical for People in Racial and Ethnic Groups Already at High Risk for Severe Influenza Illness



**Data Source:** CDC Website. Influenza (Flu) Flu Disparities Among Racial and Ethnic Minority Groups. <https://www.cdc.gov/flu/highrisk/disparities-racial-ethnic-minority-groups.html>. Accessed March 21, 2022.

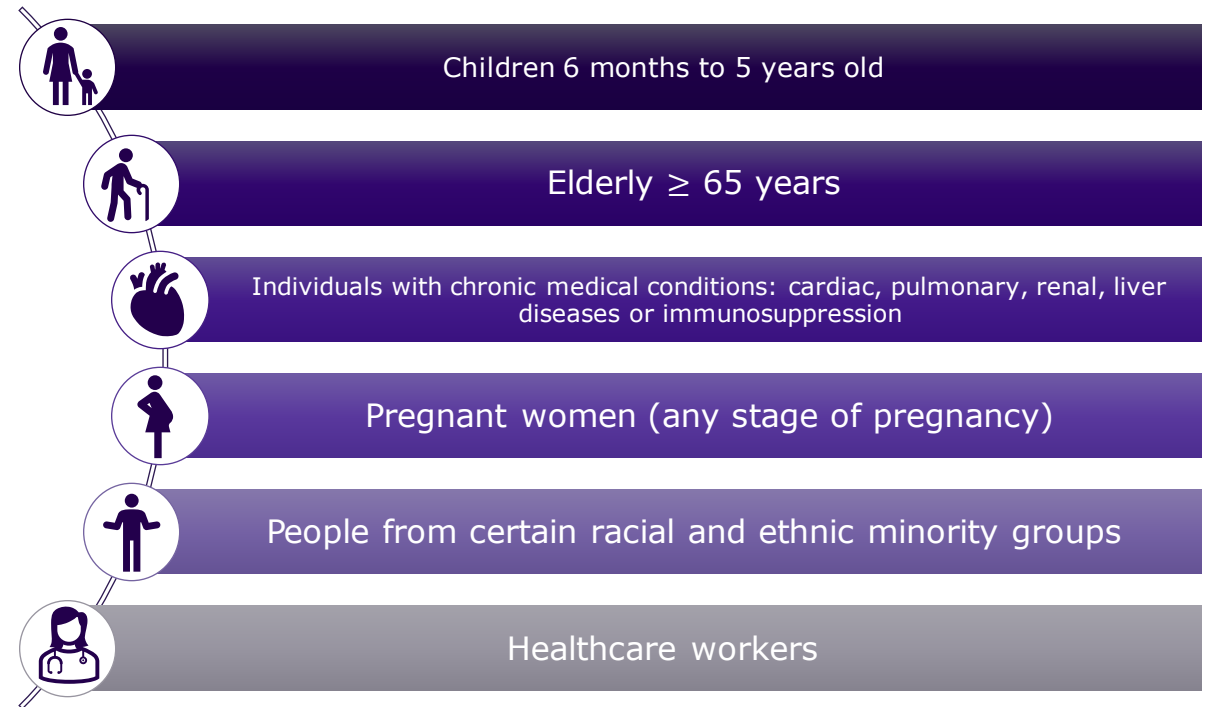
# CDC Recommends Immunization to Help Protect Against Influenza<sup>1,3</sup>

CDC's Advisory Committee on Immunization Practices recommends that **everyone 6 months of age and older** should get an influenza (flu) vaccine every season with rare exception.<sup>1</sup>

Vaccination to prevent flu and its potentially serious complications is particularly important for people who are at **higher risk of developing serious flu complications**.<sup>1</sup>

## Who is at higher risk of developing flu-related complications?<sup>2</sup>

CDC recommends annual flu vaccination for people at greater risk of severe disease or complications.<sup>5</sup> These high-risk groups include:<sup>5</sup>



# State Best Practices

- Legislation requiring Hospitals to offer influenza vaccine to inpatients, age 65 and older, prior to discharge. Law in: **OR, CA, TX, LA, MS, TN, GA, FL, MO, IL, OH, PA, NY, WV, RI**
- Legislation requiring Hospitals to offer influenza vaccine to inpatients, age 50 and older, prior to discharge. Law in: **GA**
- Influenza Daycare Education - Law in: **MA, NY, KS, MS, GA, LA, FL, CT**
- K-12 Influenza Education – Law in: **TN, NC, KS, MI, NY, CT, MA**
- PSA`s on Influenza – Certain States have In House Studios, develop & play on broadcast media



Thank you



**sanofi**