Mass. Curtails Free Vaccines for Older Children

BY JANE ANDERSON
Contributing Writer

Massachusetts health authorities, facing huge demands for vaccines to prevent meningitis, diphtheria/tetanus/pertussis, and chickenpox, have asked the state's pediatricians to limit use of the shots in older children under the state's free vaccine program.

Although state officials said that no child will go without needed vaccines, pediatricians in Massachusetts said the shortage, plus a state decision last year not to cover the quadrivalent human papillomavirus vaccine (Gardasil), marks the end of the state's universal vaccination program, and is leading to additional red tape for them.

Previously, Massachusetts provided all childhood vaccinations for every child, regardless of insurance coverage or coverage by the joint federal-state Vaccines for Children (VFC) program. In the past, as shots were added, the state Department of Public Health (DPH) typically bought enough vaccine stock to cover the children in the age group recommended, plus a bit more to help older children "catch up," DPH spokeswoman Donna Rheaume said in an interview.

Massachusetts has been in the forefront of states that buy vaccines for children and then distribute them to physicians, and will spend about $40 million this year to buy pediatric vaccines, she said.

But this year, the state has seen unprecedented demand for three vaccines—conjugate meningococcal vaccine (MCV4) (Menactra), tetanus-diphtheria acellular pertussis (Tdap; Adacel or Boostrix), and varicella vaccine (Varivax), Ms. Rheaume said. Therefore, there is only enough vaccine left to cover seventh-graders, the group that is routinely given the shots.

"The only change now is that providers will have to bill the insurance companies for non–VFC-eligible children—children who have private health insurance," said Ms. Rheaume. There are no plans to buy additional vaccine doses, she said, adding that "in 5 years, we anticipate all children will have received these vaccines."

But Massachusetts insurers are not set up to pay for childhood vaccines because the state has provided them for free until now, said Dr. David Link, chief of pediatrics at Cambridge Health Alliance. "What was taken for granted—that all children would have full access to vaccines—that compact has now disappeared," he said in an interview.

"We're now creating disparities we never have had before," added Dr. Sean Palfrey, professor of pediatrics at Boston University and former president of the Massachusetts chapter of the American Academy of Pediatrics.

Both Dr. Palfrey and Dr. Link said that pediatricians are facing huge paperwork hurdles to prove children are eligible for the free federal-state program, and that they also have needed to chase down doses of the three vaccines in question for children whose vaccinations now must be paid for by private insurance companies.

The reason for the changes in state policy is the much higher cost of newer vaccines, such as Menactra and Gardasil, said Dr. Link.

In fact, he said, the decision by the Massachusetts legislature in 2007 not to cover the HPV vaccine—which would have cost up to $14 million a year—marked the end of the last state program that provided free, universal vaccinations. Despite heavy lobbying of Massachusetts lawmakers by physicians and children's advocates, there currently are not enough votes to reverse the decisions to curtail the vaccine program, he said.

Eventually, there will be outbreaks of preventable disease, Dr. Link predicted: "Some kid is going to wind up very damaged or dead because of this, because we decided we preferred some more asphalt [instead of] protecting kids."