

Abstract

Title: Role of Public Health Clinics Vaccinating the Underinsured

Background: AIM conducted a survey of members to explore the role of public health clinics (excluding FQHCs, RHCs, and public health clinics which are deputized as FQHCs or RHCs) in vaccinating underinsured and the number of underinsured children served by those clinics.

Methods:

The AIM Executive Director developed the survey. In 2008, the survey was administered to all 64 Immunization programs (IP) via an online survey tool.

Results:

Forty-three of 64 IP participated in the survey. Seventy-nine percent (34 of 43) of state/city/territory's public health clinics (excluding FQHCs, RHCs, and public health clinics which are deputized as FQHCs or RHCs) vaccinate children, 12% (5 of 43) do not vaccinate children and 9% (4 of 43) indicated the question as not applicable. Approximately 46% of IP (18 of 39) indicated *all* public health clinics (excluding FQHCs, RHCs, and public health clinics which are deputized as FQHCs or RHCs) in the state/city/territory vaccinate children. Fifteen percent indicate *most* (6 of 39), 8% indicate *some* (3 of 39) and 15% indicate *few* (6 of 39) public health clinics (excluding FQHCs, RHCs, and public health clinics which are deputized as FQHCs or RHCs) in the state/territory/city vaccinate children. Seventy-two percent (28 of 39) of public health clinics serve less than 100,000 underinsured children annually, 3% (1 of 28) serve 100,000-500,000 underinsured children and 10% (4 of 28) do not know the number of children served.

Conclusion:

Survey was valuable in providing NCIRD data for a cost analysis to investigate the potential effects of legislation on existing 317 financing.