

116TH CONGRESS
1ST SESSION

S. 1619

To amend the Public Health Service Act to provide for a national campaign to raise awareness of the importance of, and combat misinformation about, vaccines in order to increase vaccination rates.

IN THE SENATE OF THE UNITED STATES

MAY 22, 2019

Mr. PETERS (for himself, Mr. ROBERTS, and Ms. DUCKWORTH) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend the Public Health Service Act to provide for a national campaign to raise awareness of the importance of, and combat misinformation about, vaccines in order to increase vaccination rates.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Vaccine Awareness
5 Campaign to Champion Immunization Nationally and En-
6 hance Safety Act of 2019” or the “VACCINES Act”.

1 **SEC. 2. IMPROVING AWARENESS OF DISEASE PREVENTION.**

2 The Public Health Service Act is amended by striking
3 section 313 of such Act (42 U.S.C. 245) and inserting
4 the following:

5 **“SEC. 313. PUBLIC AWARENESS CAMPAIGN ON THE IMPOR-**
6 **TANCE OF VACCINATIONS.**

7 “(a) IN GENERAL.—The Secretary, acting through
8 the Director of the Centers for Disease Control and Pre-
9 vention and in coordination with other offices and agen-
10 cies, as appropriate, shall award competitive grants to one
11 or more public or private entities to carry out a national,
12 evidence-based campaign to increase awareness of vaccines
13 for the prevention and control of diseases, combat misin-
14 formation about vaccines, and disseminate scientific and
15 evidence-based, vaccine-related information, with the goal
16 of increasing rates of vaccination across all ages, as appli-
17 cable, particularly in communities with low rates of vac-
18 cination.

19 “(b) CONSULTATION.—In carrying out the campaign
20 under this section, the Secretary shall consult with appro-
21 priate public health and medical experts, including the Na-
22 tional Academy of Medicine and medical and public health
23 associations and nonprofit organizations, in the develop-
24 ment, implementation, and evaluation of the evidence-
25 based public awareness campaign.

1 “(c) REQUIREMENTS.—The campaign under this sec-
2 tion—

3 “(1) shall be a national, evidence-based initia-
4 tive;

5 “(2) may include the use of television, radio,
6 the internet, and other telecommunications tech-
7 nologies;

8 “(3) may be focused to address specific needs
9 of communities with low vaccination rates;

10 “(4) shall include the development of resources
11 for communities with low vaccination rates, includ-
12 ing culturally and linguistically appropriate re-
13 sources, as applicable;

14 “(5) shall include the dissemination of vaccine
15 information and communication resources to health
16 care providers and health care facilities, including
17 such providers and facilities that provide prenatal
18 and pediatric care;

19 “(6) shall be complementary to, and coordi-
20 nated with, any other Federal efforts and State ef-
21 forts, as appropriate;

22 “(7) shall assess the effectiveness of commu-
23 nication strategies to increase vaccination rates; and

1 “(8) may include the dissemination of scientific
2 and evidence-based vaccine-related information, such
3 as—

4 “(A) advancements in evidence-based re-
5 search related to diseases that may be pre-
6 vented by vaccines and vaccine development;

7 “(B) information on vaccinations for indi-
8 viduals and communities, including individuals
9 for whom vaccines are not recommended by the
10 Advisory Committee for Immunization Prac-
11 tices, and the effects of low vaccination rates
12 within a community on such individuals;

13 “(C) information on diseases that may be
14 prevented by vaccines; and

15 “(D) information on vaccine safety and the
16 systems in place to monitor vaccine safety.

17 “(d) EVALUATION.—The Secretary shall—

18 “(1) establish benchmarks and metrics to quan-
19 titatively measure and evaluate the awareness cam-
20 paign under this section;

21 “(2) conduct qualitative assessments regarding
22 the awareness campaign under this section; and

23 “(3) prepare and submit to the Committee on
24 Health, Education, Labor, and Pensions of the Sen-
25 ate and Committee on Energy and Commerce of the

1 House of Representatives an evaluation of the
2 awareness campaign under this section.

3 “(e) AUTHORIZATION OF APPROPRIATIONS.—There
4 are authorized to be appropriated to carry out this section
5 and section 317(k) such sums as may be necessary for
6 fiscal years 2020 through 2024.”.

7 **SEC. 3. GRANTS TO ADDRESS VACCINE-PREVENTABLE DIS-**
8 **EASES.**

9 Section 317(k)(1) of the Public Health Service Act
10 (42 U.S.C. 247b(k)(1)) is amended—

11 (1) in subparagraph (C), by striking “; and”
12 and inserting a semicolon;

13 (2) in subparagraph (D), by striking the period
14 and inserting a semicolon; and

15 (3) by adding at the end the following:

16 “(E) planning, implementation, and evaluation
17 of activities to address vaccine-preventable diseases,
18 including activities to—

19 “(i) identify communities at high risk of
20 outbreaks related to vaccine-preventable dis-
21 eases;

22 “(ii) pilot innovative approaches to improve
23 vaccination rates in communities with low rates
24 of vaccination;

1 “(iii) reduce barriers to accessing vaccines
2 and evidence-based information about the
3 health effects of vaccines;

4 “(iv) partner with community organiza-
5 tions and health care providers to develop and
6 deliver evidence-based interventions to increase
7 vaccination rates; and

8 “(v) improve delivery of evidence-based
9 vaccine-related information to parents and oth-
10 ers; and

11 “(F) research related to strategies for improv-
12 ing awareness of scientific and evidence-based, vac-
13 cine-related information, including for communities
14 with low vaccination rates, in order to understand
15 barriers to vaccination, improve vaccination rates,
16 and assess the public health outcomes of such strate-
17 gies.”.

○