

PROGRAM DESCRIPTION

Health and Senior Services **HB Section(s):** 10.700, 10.710, and 10.755

Communicable Disease Control and Prevention

Program is found in the following core budget(s):

	DCPH Program Operations	DCPH Programs and Contracts	Office of Emergency Coordination				TOTAL
GR	807,545	788,550	0				1,596,095
FEDERAL	1,793,591	2,388,118	345,194				4,526,903
OTHER	118,133	0	0				118,133
TOTAL	2,719,269	3,176,668	345,194				6,241,131

1a. What strategic priority does this program address?

Infant and Maternal Health; Emerging Public Health Threats Preparedness; and Whole Person Health Access.

1b. What does this program do?

The Bureau of Communicable Disease Control and Prevention includes the programs: general communicable diseases, healthcare-associated infections, tuberculosis elimination, and zoonotic diseases. These programs improve the health of Missourians through the prevention and control of communicable diseases and communicable disease outbreaks. These programs provide the following services:

- Conducting surveillance and investigates more than 90 different communicable diseases and conditions of public health significance in Missouri. The majority of the diseases are mandated for reporting by healthcare providers to DHSS, including diseases that could be result of a bioterrorism event.
- Responding to emerging and reemerging diseases such as anthrax, COVID-19, Ebola, healthcare-associated carbapenemase-producing carbapenem-resistant Enterobacteriales (CP-CRE), influenza, multi-drug resistant tuberculosis, measles, monkeypox, rabies, Rocky Mountain spotted fever, and West Nile virus.
- Providing training and technical assistance to local health officials to prevent communicable diseases in their communities and rapidly respond to outbreaks of infectious disease when identified.
- Coordinating with government at all levels, community organizations, hospitals, health care providers, and the media to implement control measures, and educate the public during local, statewide, national, and worldwide outbreaks of communicable diseases.
- Assisting with community planning and response for emergencies such as bioterrorism, pandemic influenza, other pandemics such as COVID-19, and natural disasters such as flooding and earthquakes. Program staff is also responsible for public health surveillance, disease investigation, and disease related community education associated with these events.

The Immunization Program works to increase immunization participation to protect Missourians against vaccine-preventable diseases based on the recommendations of the Centers for Disease Control and Preventions (CDC), Advisory Committee on Immunization Practices (ACIP). This program provides the following services:

- Providing vaccines to eligible children and adults through the federal entitlement Vaccines for Children (VFC) Program and Public Health Act Section 317 funding.
- Offering education, immunization record assessments, and quality improvement strategies for health care professionals to increase coverage rates.
- Maintaining a central immunization registry, ShowMeVax, which tracks immunization records and is used to conduct immunization validations required for school and childcare; forecasts need and manages centralized vaccine inventory; and allows providers to order vaccine and track shipments.
- Offering technical assistance to health care providers and the general public regarding vaccine recommendations, safety, schedules, and other general information.
- Focusing on the provision of services to prevent and control vaccine-preventable outbreaks in vulnerable populations through immunization of VFC/317-eligible populations and is an integral participant in pandemic planning.

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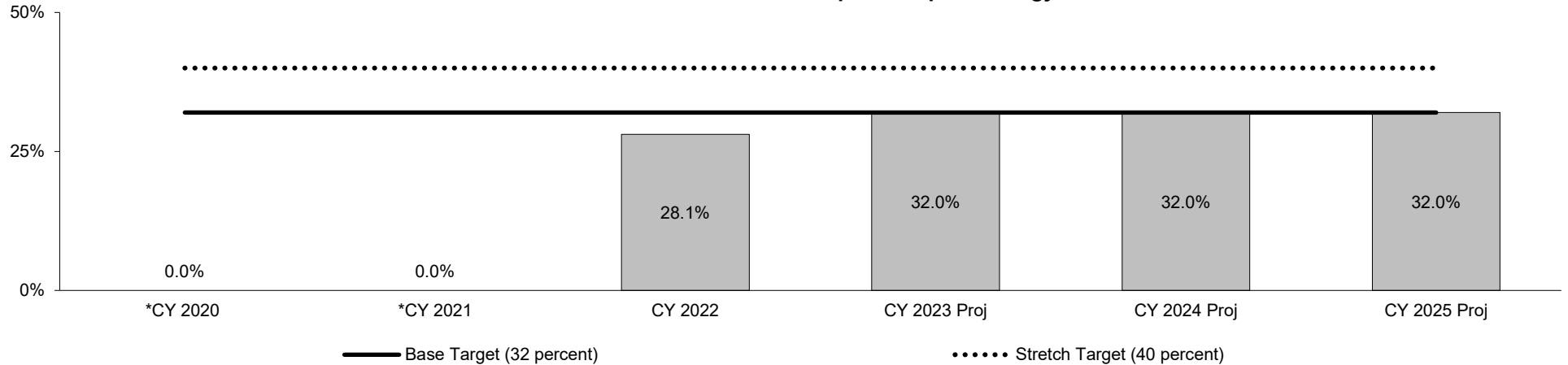
2a. Provide an activity measure(s) for the program.

	CY 2020	CY 2021	CY 2022	CY 2023 Proj.	CY 2024 Proj.	CY 2025 Proj.
Conditions reported to DHSS for surveillance and investigation	174,823	41,458	99,498	94,406	104,473	130,947
Communicable Disease Outbreaks	28*	54*	75	100	100	100
Principles of Epidemiology Training Attendees	0**	0**	50	50	50	50
DHSS Staff Visits and Technical Assistance to Vaccines for Children Providers	650	650	650	650	650	650
Vaccines Distributed	1,199,291	1,259,256	1,322,218	1,388,329	1,457,746	1,530,633

*The large variation in numbers reflects the unprecedented impact of the COVID-19 pandemic on conditions reported and number of outbreaks. The reduction in reported outbreaks in 2020 and 2021 is mostly likely due to COVID-19 and COVID-19 control measures. For example, the absence of influenza during 2020-2021 influenza season and reduction in flu reported during 2021-2022 seasons.
 **Some Principles of Epidemiology classes were cancelled due to the pandemic.

2b. Provide a measure(s) of the program's quality.

Increase in Scores Post-test v. Pre-test for Principles of Epidemiology Course Attendees



*Principles of Epidemiology classes were cancelled due to the COVID-19 pandemic.

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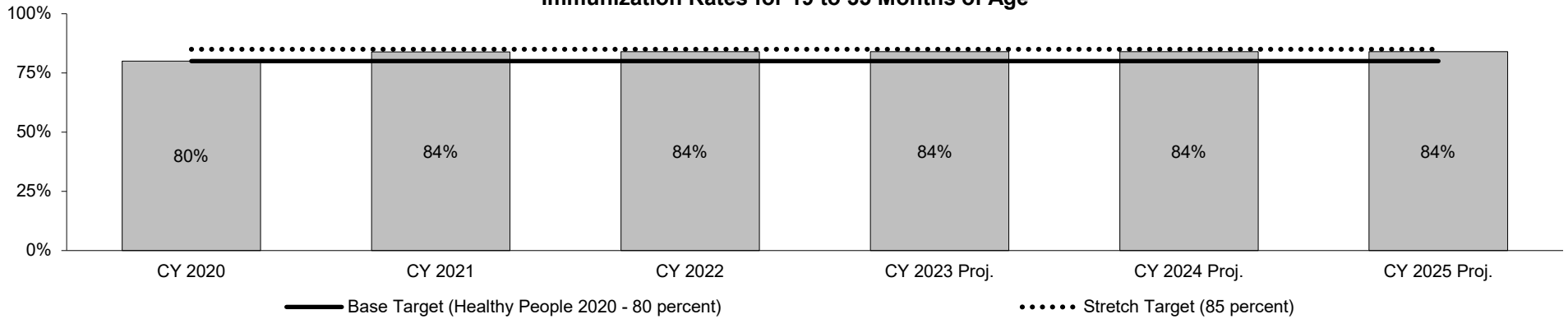
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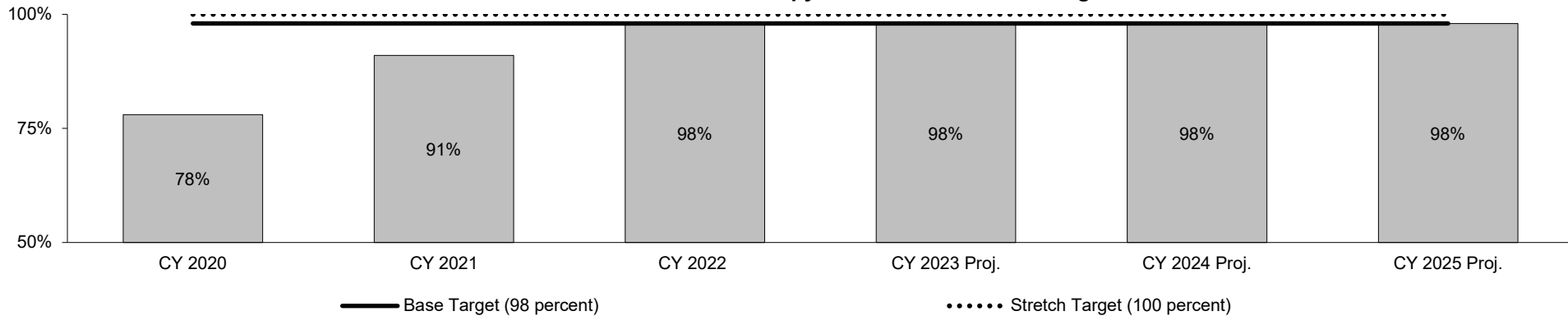
2c. Provide a measure(s) of the program's impact.

Immunization Rates for 19 to 35 Months of Age



2019 National Level: 79 Percent. Immunization rates for 19 to 35 months of age include the combined 7-Vaccine (4:3:1:3*:3:1:4) Series Recommended by US Centers for Disease Control and Prevention: 4 or more doses of DTaP, 3 or more doses of Polio, 1 or more doses of MMR, Hib full series (3 or 4 doses, depending on product type received), 3 or more doses of HepB, 1 or more doses of Varicella, and 4 or more doses of PCV. Higher immunization rates indicate greater protection against life-threatening vaccine-preventable diseases. Source: National Immunization Survey. The 2020 National Immunization Survey results have not been released as of 7/13/2021.

TB Disease Cases Started on Therapy Within One Month of Diagnosis



Arranging care in a timely manner assists in decreasing the communicability and severity of TB.

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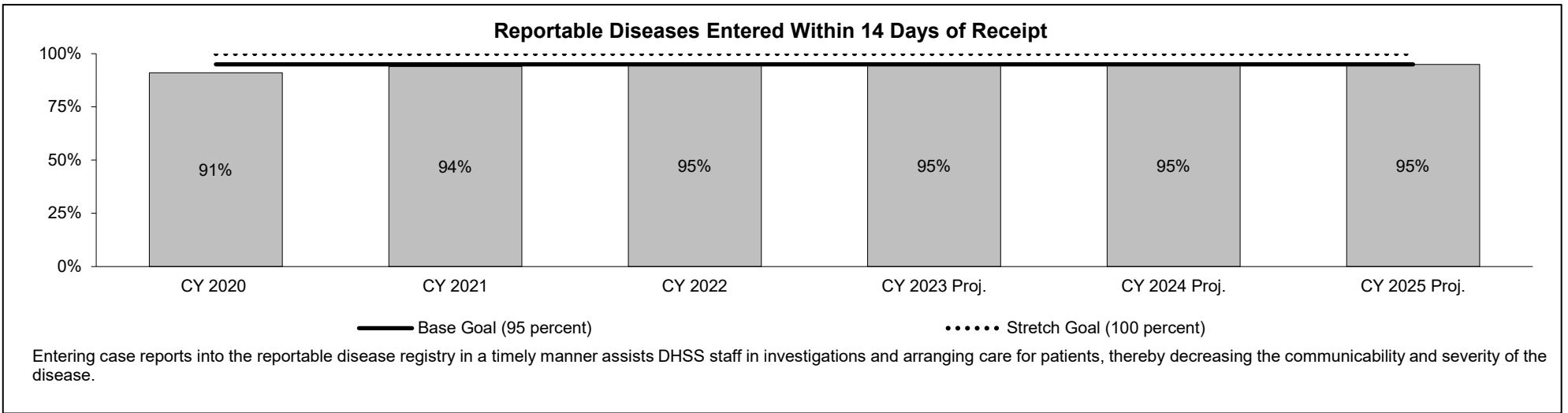
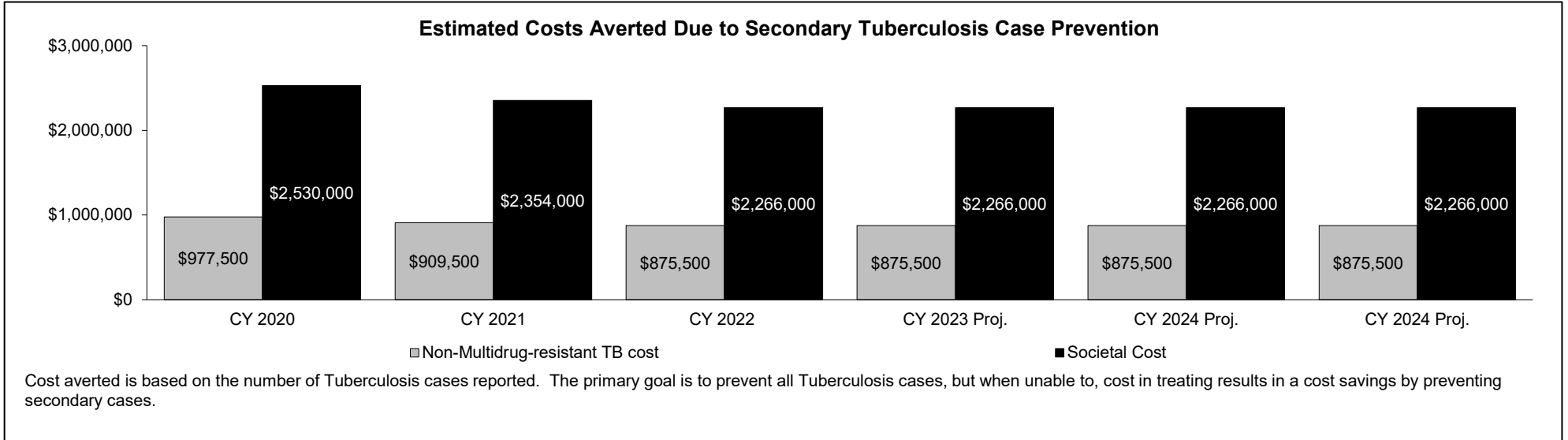
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2d. Provide a measure(s) of the program's efficiency.



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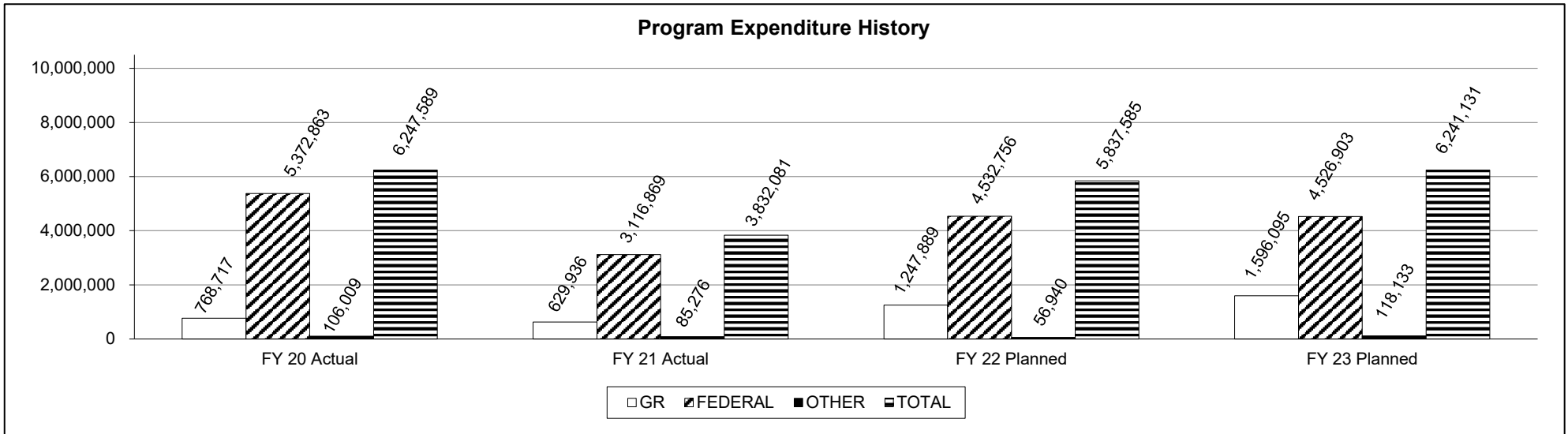
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3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Health Initiatives (0275) and Department of Health and Senior Services - Donated (0658).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 192.020, 192.110, 192.138, 192.139, 192.320, 199.170-199.350, and 701.328, RSMo. Sections 167.181, 167.183, 192.006, 192.020, 192.072, 192.630, 210.003, and 210.030, RSMo. Section 317 of the Public Health Service Act, 42 USC Section 247b, as amended; Section 1902(a)(62) of the Social Security Act, 42 USC Section 1396(a)(62); Section 1928(a) of the Social Security Act, 42 USC Section 1396s(a).

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

Immunization programs are required in every US state and territory. Missouri's immunization program is 100 percent federally funded.