

**DECLINING MEASLES VACCINATION RATES PREDICTED TO COST THE UNITED STATES ~\$7.8 BILLION BY 2030, FINDS STUDY FROM THE COMMON HEALTH COALITION AND YALE SCHOOL OF PUBLIC HEALTH**

*New modeling shows that families, payers, health care, and public health will bear ~\$1.5 billion in costs per year by 2030 due to declining measles vaccination rates*

**New York, NY** — The [Common Health Coalition](#) today released [More Illness. Greater Cost: Spotlight Brief on Childhood Immunizations](#), in partnership with researchers at the [Yale School of Public Health](#) that warns that declines in childhood vaccination could carry substantial human and economic consequences. The modeling analysis finds that a sustained **1% annual drop in MMR coverage** could lead to more than **17,000 measles cases, 4,000 hospitalizations, and 36 preventable deaths** each year, while adding billions in avoidable costs across the U.S. health system and economy by 2030. Over the next five years, declining measles vaccination rates could cost **\$1.5 billion** annually and add approximately **\$7.8 billion** in cumulative costs. The brief examines how weakening vaccine infrastructure can quickly translate into greater illness, higher costs, and growing strain across health care, public health, the economy, and communities nationwide – and builds on the Coalition’s [previous report](#) analyzing the consequences of public health cuts for the health care system. The potential for cascading impacts from declining vaccine uptake is not inevitable; coordinated action can prevent this projected suffering, disruption, and resulting costs.

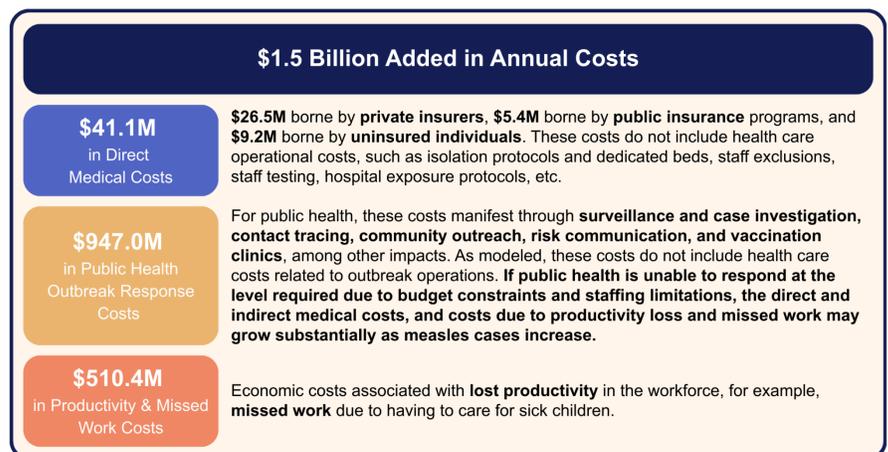
“Vaccination is one of the most powerful investments we can make for the health of our children, but when we fail to maintain high vaccination rates, we all pay the price,” said **Dr. Dave A. Chokshi, Chair of the Common Health Coalition**. “Declining coverage carries real consequences: families facing avoidable hospitalizations, employers absorbing lost work, public health departments stretched too thin to respond, and health care systems forced to shoulder the burden of emergency response. Yet these human and economic consequences can be prevented by strong leadership and partnership across health sectors.”

“When immunization rates decline, disruptions follow – and the costs to our communities and the economy are steep. Behind every projected case in this model is a child fighting to get better, a parent forced to choose between a paycheck and their sick kid, and a community shaken by a preventable outbreak,” said **Dr. Megan Ranney, Dean of the Yale School of Public Health**. “As a physician, I’ve seen the terrible impact of vaccine-preventable illnesses firsthand. But the human costs outlined in this brief are avoidable. By taking action now, health care leaders and partners can keep kids, families, and communities safe.”

**Key Datapoints:**

By 2030, a predicted 1% decline per year in MMR coverage could result in **\$7.8 billion** in cumulative costs from 2026–2030 due to:

- **More than 17,000 cases annually** (an increase of more than 15,000)
- **4,000 hospitalizations annually** (an increase of more than 3,000)
- **An additional \$988 million** in annual health system costs on average
- **More than \$510 million** in lost productivity annually on average



Declines in other childhood vaccines will have their own [cascading impacts](#) and costs associated. These findings demonstrate how sustained drops in childhood vaccination rates can quickly lead to large and cascading consequences for both patients' health and the economy. Outbreak response and direct medical costs are inversely related. If public health systems cannot adequately respond to an outbreak, costs will shift to health care systems. The full methodology and underlying assumptions can be found in the accompanying [manuscript](#).

### **Actions to Mitigate Declining Rates:**

As outlined in the brief, there are key actions that payer organizations, state leaders, health systems, and providers can take to mitigate these impacts, maintain access, and reinforce trust. Some of these actions include:

- Public health and health care can build confidence in vaccines and embed trusted messengers, like community health workers, into vaccine access strategies.
- Payer organizations can continue to cover all childhood immunizations without cost sharing, [as AHIP affirmed in 2025](#).
- Employers can maintain vaccine coverage in employer-sponsored health plans and promote vaccine coverage for workers and their dependents.
- Policymakers can maintain school-entry immunization requirements and link state-level policies to trusted professional medical societies.
- Across all sectors, health leaders can establish or grow regional immunization coalitions to share policy approaches and resources, and explore [creative shared financing solutions](#) to stabilize vaccine infrastructure through ongoing policy changes.

“The costs we will face as a result of declining childhood vaccination rates won't stop with measles, and the disruption will be felt across families, workplaces, health sectors and the economy,” said **Chelsea Cipriano, Managing Director of the Common Health Coalition**. “By aligning health care, public health, payers, and community partners around urgent action, we can protect children and prevent billions in avoidable downstream impacts.”

“Our analysis shows that highly contagious diseases like measles exploit even small gaps in immunity, leading to cascading infections and compounding costs for health systems, communities, and families,” said **Dr. Alison P. Galvani, Director of the Center for Infectious Disease Modeling and Analysis at Yale School of Public Health**. “What may appear to be a modest one-percent annual decline in immunization coverage can produce outsized consequences. The projections in this report reflect how quickly preventable risk can escalate, how maintaining high coverage can avert both human suffering and economic burdens.”

“Declining vaccination rates have far-reaching consequences for our health sectors, directly impacting provider capacity across our patient population,” said **Dr. Bechara Choucair, Executive Vice President and Chief Health Officer at Kaiser Permanente**. “Outbreaks of preventable diseases can divert clinical teams, disrupt scheduled care, increase avoidable utilization, and drive up care costs for employers and families alike. Vaccination is one of the most effective tools we have to improve health outcomes, lower long-term costs, and sustain high-quality, coordinated care for the communities we serve.”

“Local public health departments, especially in the nation's biggest cities, are often the first to see the warning signs when vaccine coverage begins to erode,” said **Chrissie Juliano, Executive Director of the Big Cities Health Coalition**. “Diseases, like measles, do not respect city or state boundaries. When jurisdictions come together to align around policy approaches and public communication, they can stabilize vaccine infrastructure and prevent localized declines from becoming regional or even larger crises.”

“In Lubbock, we've seen the impacts of declining measles vaccination coverage firsthand,” said **Dr. Katherine Wells, Director of Lubbock Public Health**. “Preventable cases quickly become resource-intensive investigations and emergency response efforts that require time, staffing, and sustained coordination. Strong immunization coverage is what keeps communities steady, protects

families from avoidable harm, and ensures local health departments have the capacity to respond not just to one outbreak, but to whatever challenge comes next.”

### **About The Common Health Coalition**

The Common Health Coalition is the largest multi-sector collaboration spanning clinician groups, health departments, hospitals, payers, and community organizations. By uniting leaders who rarely share the same table, we turn alignment into action at a scale no single sector can reach, and transform relationships into results for people and communities.

Founded in 2023 by the Alliance of Community Health Plans, AHIP, American Hospital Association, American Medical Association, and Kaiser Permanente, the Coalition now represents more than 350 members across 45 states and territories. Learn more by visiting [commonhealthcoalition.org](https://commonhealthcoalition.org) and follow on [LinkedIn](#) and [Instagram](#).

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