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**Re: SB 1598: Vaccine access**  
**Position: Support**

Chair Patterson and members of the Senate Health Care Committee:

On behalf of Oregon's 33 county public health authorities, I respectfully urge your support for SB 1598. SB 1598 updates Oregon statute to allow state-specific vaccine recommendations rather than relying solely on federal references. This change ensures Oregon can continue to rely on credible, science-based medical guidance to inform vaccine policy and practice.

The bill also protects insurance coverage for vaccines and maintains important safeguards for vaccine providers. Many pediatric practices are unable to obtain certain vaccines outside of the federal Vaccines for Children (VFC) program. Preserving broad access points is essential so families can obtain recommended immunizations without unnecessary barriers. California and Washington have taken similar steps to protect vaccine access, and Oregon should do the same to ensure our families are not left behind.

Vaccination rates in Oregon underscore the urgency of this issue. During the 2024–25 school year, only 86% of Oregon kindergarteners were fully vaccinated. Community immunity requires a 95% vaccination rate. Falling short of that benchmark increases the likelihood of preventable disease outbreaks.

The financial impact of outbreaks is significant. Nationally, the average public health cost per measles case is approximately \$43,000 and can reach as high as \$243,000. In 2019, the Clark County, Washington measles outbreak resulted in an estimated \$3.4 million total cost, including \$2.3 million in public health response, \$76,000 in direct medical expenses, and \$1 million in productivity losses.

Failure to protect vaccine access places Oregon communities at risk of similar costly outbreaks. Investing in prevention is far more effective, and far less expensive, than responding to avoidable disease spread.

For these reasons, we urge your support of SB 1598. Thank you for your consideration.

Sincerely,

Janet Fredrickson  
JEF