Why the HPV vaccine is worth it

(including economics)

2026 Arkansas HPV Summit
8 May 2026

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Our aim for vaccination (and other protective measures):

1. Make it **worth it**
2. Make it **normal**
3. Make it **easy**

Among commercially insured women treated for newly diagnosed cervical cancer, median out-of-pocket costs in the first year:

$2,253

Blanco *et al.* Cost of care for the initial management of cervical cancer in women with commercial insurance. *American Journal of Obstetrics and Gynecology.* 2020. doi:10.1016/j.ajog.2020.08.039.

Among privately insured patients newly diagnosed with common cancers*, estimated out-of-pocket expenses associated with the diagnosis—from diagnosis through the first 6 months—can be:

$4,145

*Breast, colorectal, lung

Rose *et al*. 2025. "Estimated Out-of-Pocket Costs for Patients With Common Cancers and Private Insurance." JAMA Network Open. doi:10.1001/jamanetworkopen.2025.21575.

$2,253

Out-of-pocket bill

Median out-of-pocket cost in the first year for newly diagnosed cervical cancer

$56,250

Treatment episode

Median total medical expenditure in the first year for newly diagnosed cervical cancer

~$35M

Arkansas treatment burden

Estimated annual direct medical cost of treating HPV-attributable cancers in Arkansas

$3.95B

U.S. treatment burden

Estimated annual U.S. direct medical cost of treating HPV-attributable cancers

The costs of not preventing HPV are personal—and local.

Blanco M, *et al*. Cost of care for the initial management of cervical cancer in women with commercial insurance. American Journal of Obstetrics and Gynecology. 2021. doi:10.1016/j.ajog.2020.08.039.

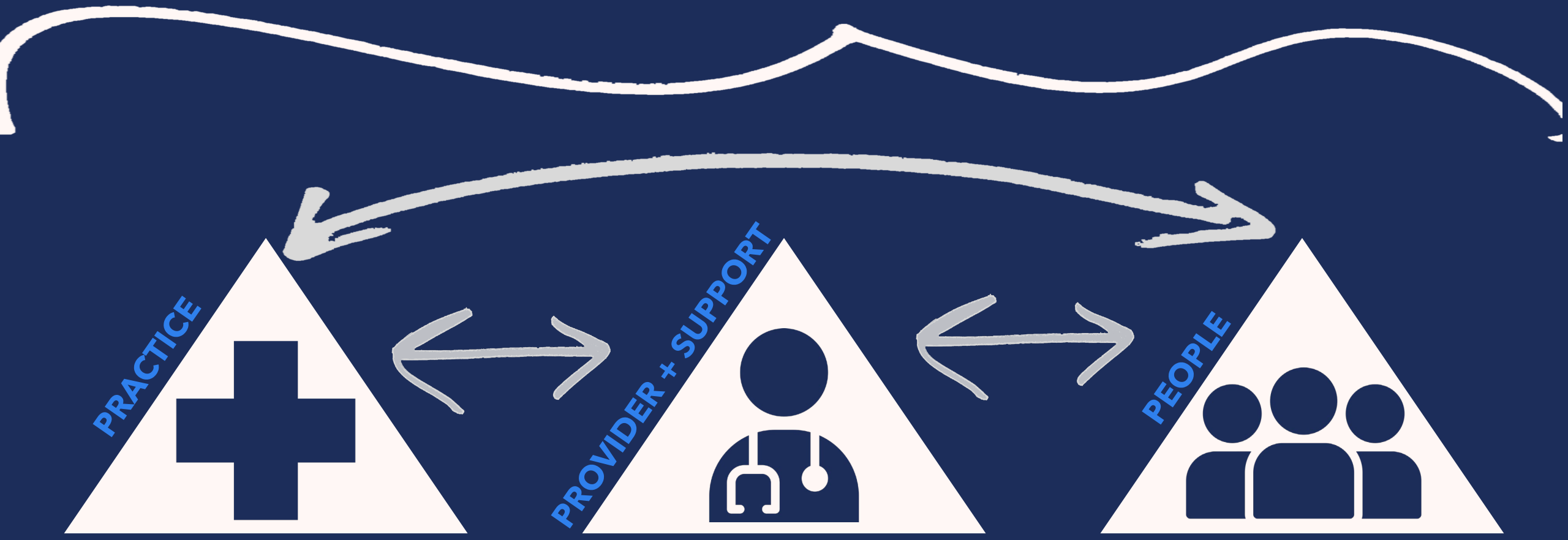
Derived estimate: Arkansas share of HPV-attributable cancers applied to national treatment-cost estimate. Arkansas cancer counts from Arkansas Department of Health; national treatment-cost estimate from Clay *et al*.

Clay PA, *et al*. Updated estimate of the annual direct medical cost of screening and treatment for human papillomavirus associated disease in the United States. Vaccine. 2023;41(14):2376–2381.

What you're protecting against	Protection tactic
Could it happen to me?	What are the benefits of this tactic?
How bad would it be if it happened?	What are the risks and costs of this tactic?

e.g., Betsch *et al*., 2015; Rabb *et al*., 2022; Whitehead *et al*., 2023

Protective behavior



What is set up and reinforced.

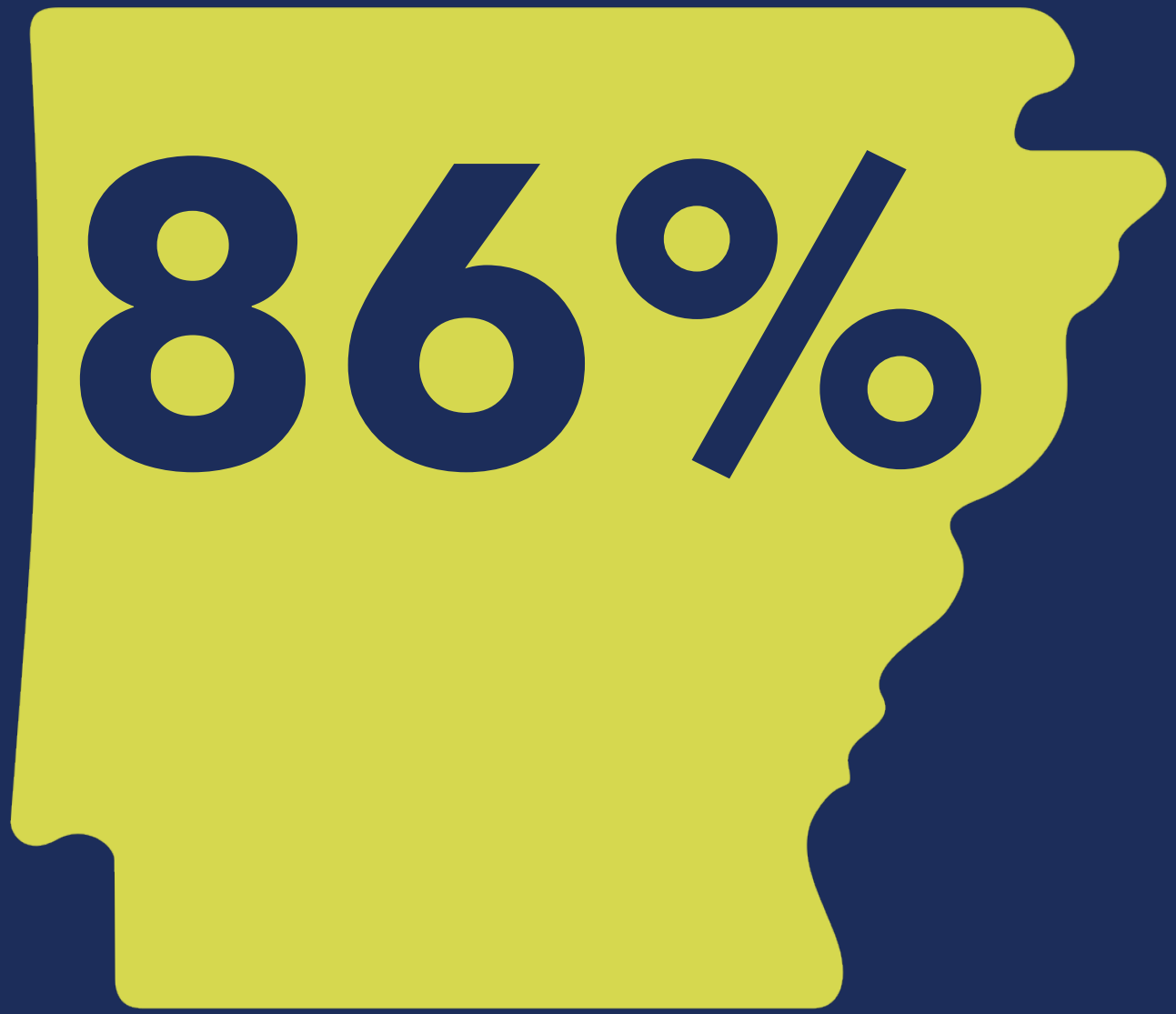
What is said--and how.

What is expected and felt.

Systems & signals

Skills & support

Experiences & environment



Of likely voters in AR support policies that make vaccines <u>easily available</u> at local pharmacies and <u>fully affordable</u> (covered by insurance), so anyone who wants vaccination can do so without barriers.

Infectious Disease Prevention Network (research by Cygnal)

September 2025

Red-state likely voters…

DON’T WANT

- Coercion
- Politics

DO WANT

- Choice + access
- Provider-led, evidence-based guidance

1. Make it worth it

Real stakes, relevant evidence

2. Make it normal

Repeated, trustworthy signals

3. Make it easy

Reduced frictions