Winter 2026

# PROVIDER UPDATE

*News from your local Health Department*

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CD Report for 2025



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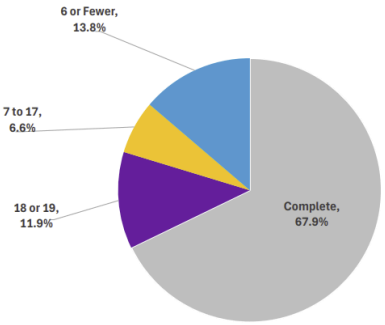
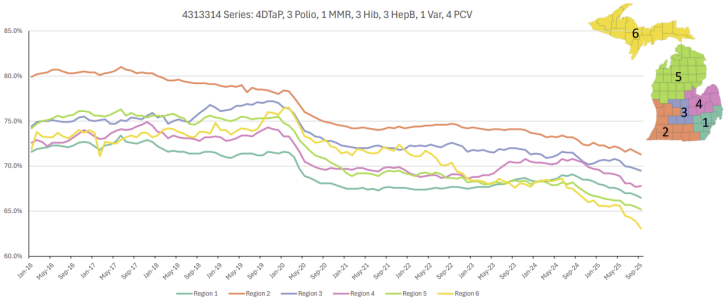
## Michigan Immunization Data & Current Surveillance

Michigan's 2025 immunization surveillance shows continuing gaps in childhood vaccine coverage and concerning increases in certain vaccine-preventable diseases.

Recent MDHHS epidemiology slides report that only about 68% of children complete the recommended childhood series by 19–35 months (leaving a large cohort partially vaccinated), and state surveillance in 2025 documents increased activity for diseases such as measles and pertussis compared with prior years. These data highlight missed opportunities for catch-up vaccination: MDHHS found that over half of children who are behind need only one office visit to get back on schedule, underscoring how small, targeted interventions in primary care can rapidly improve coverage.

| Michigan Cases | 2021 | 2022 | 2023 | 2024 | 2025 |
|---|---|---|---|---|---|
| **Chickenpox (Varicella)** | 184 | 233 | 363 | 293 | 202 |
| Diphtheria | 0 | 0 | 0 | 0 | 0 |
| H. Influenzae <5 years old (Hib) | 12 | 23 | 14 | 15 | 19 (2) |
| **Measles **** | 0 | 0 | 0 | 7 | 29 |
| Mumps | 5 | 15 | 22 | 15 | 20*** |
| **Pertussis** | 72 | 85 | 110 | 2074 | 924 |
| Polio | 0 | 0 | 0 | 0 | 0 |
| Rubella | 4 | 4 | 7 | 7 | 1*** |
| Tetanus | 1 | 1 | 1 | 0 | 0 |
| Meningococcal Disease | 5 | 5 | 8 | 14 | 6 |
| Mpox | - | 395 | 4 | 21 | 19 |







County Data – mcir.org

- Missing 18+ vaccinations
  - Moved out of state
  - Completely unvaccinated
- Missing 7 to 17 vaccinations
- Missing 6 or fewer vaccinations

HEALTH DEPARTMENT of Northwest Michigan
800-432-4121
www.nwhealth.org

Benzie-Leelanau District Health Department
Caring for our Communities
231-882-4409
www.bldhd.org

District Health Department No. 4
Prevent. Promote. Protect.
989-356-4507
www.dhd4.org

# Infant Botulism

There have been two cases of infant botulism reported in the Health Department of Northwest Michigan (HDNW) region in the last several months. One probable case was associated with the recalled formula, and a confirmed case that was not associated with the nationwide outbreak. On November 11, 2025, ByHeart Inc. recalled all of its Whole Nutrition infant formula products. 51 infants have been affected as of mid-December, across 19 states. Parents and caregivers are urged to stop using any ByHeart Whole Nutrition Infant formula immediately, including all lot numbers, all sizes of cans, and single serving packets.

Infant botulism is the most common form of human botulism in the United States, with an incidence of around 100-150 cases per year. The disease occurs across diverse geographic regions but shows notable regional variation in incidence. Infants ingest Clostridium botulinum spores present in the environment, dust, soil, honey, or contaminated foods, which germinate in the gut and produce toxin in vivo.

Nationally, there is uneven geographic distribution of cases, and these are the first cases reported in Northern MI region since 2015.

Most cases occur in infants under 6 months of age (median age 16-18 weeks). Classic symptoms include constipation progressing to lethargy, poor feeding, floppy/loss of muscle tone and eventual respiratory failure from muscle paralysis. Most affected infants require hospitalization, support, and treatment with antitoxin, botulism immune globulin.

# WIC Updates

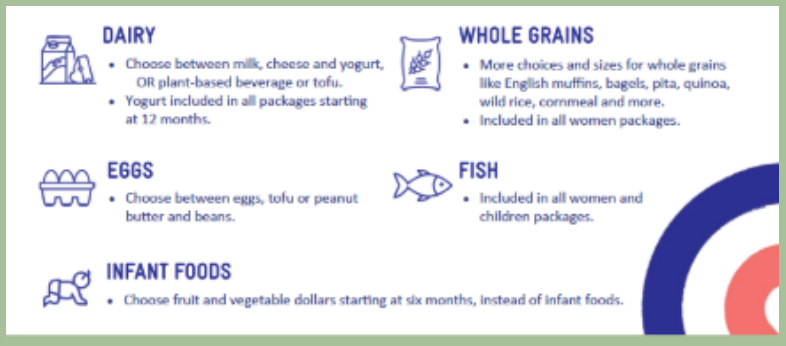
The Women, Infants & Children (WIC) program is a health and nutrition program that has demonstrated a positive effect on pregnancy outcomes, child growth and development. Many people can confuse the WIC program with the SNAP benefits program. WIC provides food for women, infants, and children while providing nutritional education, high risk nutrition counseling, health care referrals, and breastfeeding support.

Starting in March 2026, there will be a new WIC Food Package and the main changes can be found on MDHHS WIC webpage.

## WIC VS. SNAP

**Key differences at a glance.**

| | WIC | SNAP |
|---|---|---|
| **Focus** | Nutrition support for pregnant people, babies, and young children. | Food access for all eligible low-income households. |
| **How it's funded** | Funded each year by Congress. | Automatically funded based on how many people qualify. |
| **What it provides** | Nutrition education, breastfeeding support, social services, and healthcare screenings and referrals. | Help families buy groceries |
| **What you can buy** | Specific healthy foods like milk, eggs, fruits, and veggies. | It can be used for most food grocery items. SNAP benefits can't be used to buy alcohol, tobacco products, or nonfood items. |



## Michigan Health Communications Initiative

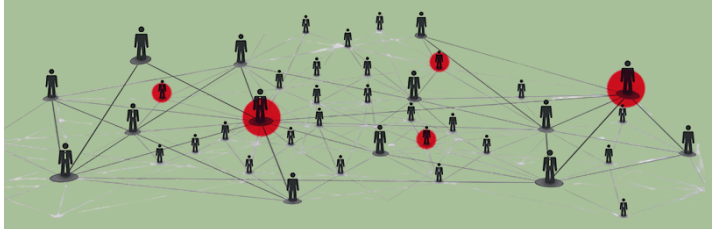
The Michigan Health Communications Initiative was formed to tackle misinformation on polarizing topics in public health. This growing initiative is committed to providing timely, evidence-based health messaging that meets the evolving information needs of the community. Educational materials provided through this initiative are created the respond to information gaps and trending health narratives like gun violence prevention, vaccines and opioid education. Social Media posts are created to address a variety of topics and include English, Spanish and Arabic translations.

This Michigan Health Communications Initiative is brought to you by the public health nonprofit PGP with support from the Michigan Association for Local Public Health. To sign up for their newsletter, visit: Michigan Health Communications Initiative

MICHIGAN
Health
Communications
Initiative

## New MDHHS Cancer Investigation Program Website

Michigan Department of Health and Human Services (MDHHS) has launched a new webpage to share more information on cancer investigations and the unusual patterns of cancer that may be associated with environmental exposure. The Cancer Investigation Program has a variety of resources to assess potential cancer clusters and unusual patterns of cancer.



The Cancer Investigation Program will share information with you, which may include:

- General information on reported cancer(s), such as rates over time, potential risk factors and screening and prevention information.
- Information about any potential environmental contamination sources.
- Publicly available cancer data.
- In some cases, data analysis results from the Michigan Cancer Surveillance Program. The cancer epidemiologist will evaluate this possibility after learning more about your concern.

Their resources page may also provide valuable data like environmental maps and data, MiTracking Data Portal on Cancer, and the Michigan Cancer Plan: 2021-2030. Find these resources at: Resources

## Community Health Needs Assessments (CHNAs): Shared Priorities Across Local Health Departments

Each of our local health departments has recently released or will soon be releasing their updated Community Health Needs Assessment. Despite serving different counties and populations, all three CHNAs identified the same top three priorities for our region:

**New Community Health Priorities**

These priorities reflect the most pressing needs reported by community members, partners, and regional data sources. Providers interested in reviewing the full findings can visit their local health department's website to view each CHNA report.

A sincere thank-you to all local medical providers who participated in surveys, interviews, or stakeholder groups during this assessment process. Your input directly shaped the identification of community priorities and will help guide coordinated public health and healthcare efforts over the next several years.

How to get involved and to see the data- visit https://northernmichiganchir.org/mithrive/

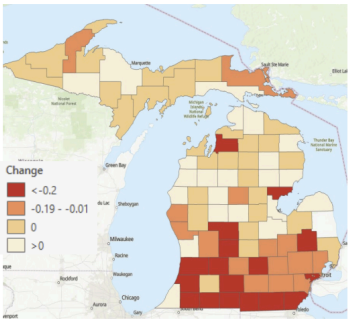
# Immunization Updates

## Vaccines For Children (VFC): Participation Matters

The Vaccines for Children program remains a cornerstone for equitable pediatric immunization, supplying federally purchased vaccines to eligible children and allowing them to be immunized at their medical home at no cost. Loss of VFC-enrolled providers diminishes access, particularly for Medicaid and uninsured families who rely on local clinics for routine childhood immunizations.

MDHHS data show a net decline in VFC providers statewide (from 1,147 in 2018 to 1,070 in 2025, about a 7% decrease), with sharper declines in some counties, a trend that threatens access and could worsen coverage disparities if not addressed. Continued engagement of private practices and health departments as VFC sites is critical to preserve on-time vaccination and to prevent outbreaks.

- VFC Providers in 2018 vs 2025:
  - Statewide: 1,147 → 1,070 (Δ7%)
    - Antrim: 7 → 3 (Δ57%)
    - Branch: 11 → 6 (Δ46%)
    - Van Buren: 13 → 8 (Δ39%)
    - Allegan: 11 → 7 (Δ36%)
    - Monroe: 13 → 9 (Δ31%)
    - Detroit: 95 → 67 (Δ30%)




## Policy & practice: Michigan's recommended schedules and what that means for clinicians

MDHHS Immunization Recommendations now directs Michigan clinicians to use the immunization schedules published by the American Academy of Pediatrics (AAP) for children and adolescents and the American Academy of Family Physicians (AAFP) for adults as the clinical standards of care. In October 2025 the Michigan Advisory Committee on Immunizations (MACI) endorsed adopting the AAP/AAFP/ACOG schedules as Michigan's standard and the Chief Medical Executive issued standing recommendations.

The recent changes made by the Director of the U.S. DHHS were not reviewed or approved by medical societies, experts, or even the ACIP, but instead were issued by edict. There are many inaccuracies in the reporting of and the justification for the changes made at the federal level. A good resource for those wanting to know more is the Evidence Collective that examines in depth some of these issues. Reassuringly and according to their fact sheet, these changes should not alter insurance coverage, including Medicaid, the Children's Health Insurance Program, and the Vaccines for Children program.

## Resources and Continuing Education

- MDHHS Immunization Resources: Access annual summaries of VPD cases in Michigan, immunization data, and statistics.
- American Academy of Pediatrics and American Academy of Family Physicians
- Ivaccinate: Ivaccinate provides information and tools based on real medical science and research to help Michigan parents protect their kids.

# 2025 Communicable Disease Report

for

Health Departments of Benzie-Leelanau, District No. 4, and Northwest Michigan

## Counties Include:

Benzie
Leelanau
Alpena
Cheboygan
Montmorency
Presque Isle
Antrim
Charlevoix
Emmet
Otsego

| Disease Group | Disease | BLDHD | DHD4 | HDNW |
|---|---|---|---|---|
| COVID19/MIS | Novel Coronavirus COVID-19 | 85 | 482 | 641 |
| Carbon Monoxide Poisoning | Carbon Monoxide Poisoning | 0 | 2 | 4 |
| Foodborne | Campylobacter | 6 | 21 | 29 |
| Foodborne | Cryptosporidiosis | 2 | 1 | 0 |
| Foodborne | Giardiasis | 5 | 1 | 2 |
| Foodborne | Listeriosis | 0 | 1 | 0 |
| Foodborne | Norovirus | 8 | 1 | 18 |
| Foodborne | Salmonellosis | 3 | 12 | 17 |
| Foodborne | Shiga toxin-producing Escherichia coli --(STEC) | 0 | 5 | 5 |
| Foodborne | Shigellosis | 1 | 2 | 0 |
| Foodborne | Yersinia enteritis | 2 | 2 | 5 |
| Influenza | Flu Like Disease* | 840 | 42 | 4137 |
| Influenza | Influenza | 77 | 317 | 303 |
| Influenza | Respiratory Syncytial Virus | 0 | 4 | 13 |
| Meningitis | Meningitis - Aseptic | 1 | 0 | 3 |
| Meningitis | Meningitis - Bacterial Other | 1 | 1 | 1 |
| Meningitis | Streptococcus pneumoniae, Inv | 4 | 14 | 10 |
| Other | Blastomycosis | 0 | 2 | 0 |
| Other | Botulism- Infant | 0 | 0 | 2 |
| Other | CPO | 0 | 2 | 2 |
| Other | Candida auris | 0 | 2 | 1 |
| Other | Coccidioidomycosis | 0 | 3 | 0 |
| Other | Creutzfeldt-Jakob Disease | 0 | 0 | 2 |
| Other | Cryptococcosis | 1 | 0 | 0 |
| Other | Cyclosporiasis | 1 | 0 | 1 |
| Other | Gastrointestinal Illness | 324 | 12 | 0 |
| Other | Head Lice | 26 | 0 | 78 |
| Other | Histoplasmosis | 1 | 12 | 1 |
| Other | Legionellosis | 0 | 3 | 2 |
| Other | Staphylococcus Aureus Infect.* | 0 | 1 | 1 |
| Other | Strep Throat | 41 | 0 | 265 |
| Other | Streptococcal Dis, Inv, Grp A | 6 | 5 | 5 |
| Other | VISA | 0 | 0 | 1 |
| Other | Ususual Outbreak or Occurence | 15 | 1 | 0 |
| Rabies | Rabies: Potential Exposure & PEP | 11 | 76 | 98 |
| STD | Chlamydia (Genital) | 36 | 69 | 102 |
| STD | Gonorrhea | 5 | 2 | 10 |
| STD | Syphilis - Early Latent | 1 | 0 | 2 |
| STD | Syphilis - Secondary | 1 | 0 | 1 |
| STD | Syphilis - Unknown Duration or Late | 0 | 3 | 3 |
| Tuberculosis | Latent Tuberculosis Infection | 5 | 3 | 14 |
| Tuberculosis | Nontuberculous Mycobacterium | 1 | 5 | 6 |
| VPD | Chickenpox (Varicella) | 0 | 2 | 3 |
| VPD | H. influenzae Disease - Inv. | 1 | 7 | 4 |
| VPD | Mumps | 0 | 1 | 0 |
| VPD | Pertussis | 9 | 2 | 11 |
| VPD | Shingles | 5 | 2 | 3 |
| Vectorborne | Anaplasmosis | 30 | 3 | 4 |
| Vectorborne | Ehrlichiosis, all types | 1 | 1 | 0 |
| Vectorborne | Lyme Disease | 75 | 15 | 61 |
| Vectorborne | West Nile Virus | 0 | 0 | 2 |
| Viral Hepatitis | Hepatitis A | 0 | 2 | 1 |
| Viral Hepatitis | Hepatitis B, Acute | 0 | 1 | 0 |
| Viral Hepatitis | Hepatitis B, Chronic | 0 | 2 | 6 |
| Viral Hepatitis | Hepatitis C, Acute | 0 | 1 | 0 |
| Viral Hepatitis | Hepatitis C, Chronic | 6 | 16 | 20 |
| | **Total** | **1637** | **1164** | **5902** |

**Dr. Joshua Meyerson serves as the Medical Director for three local health departments in northern Michigan: Health Department of Northwest Michigan, Benzie-Leelanau District Health Department, and District Health Department No. 4.**