Stefan Gravenstein, MD, MPH

Gerontological Society of America Member
NAVp Workgroup Member and
NAVp Project Director
The Gerontological Society of America

- An interdisciplinary organization touching all facets of aging
- Mission
  - Promote multi- and interdisciplinary research in aging
  - Disseminate findings
  - Promote and advocate for education on aging across disciplines
  - Foster application of research into policy development
- Sections
  - Biological Sciences (BS)
  - Health Sciences (HS)
  - Behavioral and Social Sciences (BSS)
  - Social Research, Policy, and Practice (SRPP)
  - Emerging Scholar and Professional Organization (ESPO)

GSA and Affiliates

- Oldest/largest international, interdisciplinary scientific organization in aging

- Association for Gerontology in Higher Education
  - Academic institutions with programs in gerontology and/or geriatrics

- National Academy on an Aging Society
  - Non-partisan policy institute
National Adult Vaccination Program

• National campaign to address policy, improve adult immunization rates, and deliver sustainable change
  – Pull through essential health benefits of the ACA
  – Link important existing campaigns, initiatives, and relevant legislation and policies
  – Deploy drivers of high pediatric vaccination rates missing for adults
    • No medical home – no clear schedule – <50% of states require tracking
  – Diffuse promising policy practices from states such as Michigan that have implemented successful adult initiatives

• National Adult Vaccination Program Summit
  – April 25-26, 2012
• Supported by GlaxoSmithKline

Workgroup Acknowledgements

• R. Gordon Douglas, MD, NAVP Workgroup Chairperson, Weill Cornell Medical College
• Paul Etkind, DrPH, MPH, National Association of County and City Health Officials
• Stefan Gravenstein, MD, MPH, Alpert Medical School of Brown University
• Walter Orenstein, MD, Emory Vaccine Center and Emory University School of Medicine
• Barbara Resnick, PhD, RN, CRNP, FAAN, FAANP, GSA member, University of Maryland
• William Schaffner, MD, Vanderbilt University School of Medicine
• Supported by GlaxoSmithKline
Stakeholder Organizations

NAVP April 2012 Summit Highlights

• Current State of Adult Vaccination Policy
  – Gregory Poland, MD, Director, Vaccine Research Group, Mayo Clinic
• Adult Vaccination Policy Barriers and Evidence-Based Solutions
  – Joseph Fortuna, MD, Vice Chair, Michigan Primary Care Consortium
  – Litjen (LJ) Tan, PhD, Director, Medicine and Public Health, American Medical Association
• Working Roundtables: Delivering Sustainable Change at the System, Insurer/Provider, and Patient Levels using Brain Maps
• Roundtable Reports and Open Discussion
• Summary and Next Steps
Goals for the Day

• Tap into participant expertise to address HealthyPeople 2020 adult vaccination goals
  – Roundtable breakout sessions to assess state of adult immunizations
    • Policy implications of ACA’s requirement for Essential Health Benefits that include preventive and wellness services
    • Drivers to improve the systems/processes/framework for all stakeholders and at all levels (patient, provider, setting, insurer)
    • Leverage national efforts of the CDC/ACIP, HHS, Public Health, etc., focused on improving adult immunization rates
• Establish a call-to-action framework based on Summit findings
  – A foundation for a 2013 invitational conference on improving vaccination rates for adults to showcase promising and best practices from across the nation

System/Framework/Process Priorities

• Create a culture supportive of adult immunizations
  (slide 1 of 2)
  – Engage social science, anthropology experts, and consumers (Identify intergenerational strategies)
  – Instill a desire in and demand by consumers for adult immunizations (Mandate immunizations; understand /address consumer beliefs, perceptions, attitudes; identify and tap into trusted sources)
  – Explore broadening the definition of immunizers (Educate nontraditional providers to deliver vaccines, implement scope of practice policy changes)
System/Framework/Process Priorities

• Create a culture supportive of adult immunizations (slide 2 of 2)
  – Engage providers as advocates (Establish positive and negative incentives; assess/address HCW perceptions regarding vaccines; identify champions in each office and all settings; add immunization education into all health professions as education requirement)
  – Develop and communicate positive messaging regarding adult immunizations that create a positive value proposition (Identify national advocate; identify and communicate stories and storyteller)

Provider/Payer Priority

• Provide national leadership for adult immunization through education, quality improvement, and wellness visits
  – Increase accountability by payers and providers (Create mechanisms for reporting; identify and empower a coordinating entity for the national effort with sustainable support)
  – Build consensus (Convene stakeholders; develop statements/messages; improve payer reimbursement—business case, cost assessment of vaccine delivery, and cost avoidance)
  – Support provider ability to implement adult immunization services (Make tools and resources available and disseminate them)
Patient/Caregiver (Driver 1)

- Expand policies and mandates to promote adult immunizations (slide 1 of 4)
  - Advocate for Part D rebate $ paid by adult vaccine manufacturers to subsidize adults to be immunized (through direct payment or tax credits) (Engage, build, and mobilize a coalition to lobby CMS; create and implement a grassroots campaign; engage in 1:1 education with key legislators—make phone calls to CMS)
  - Any person who receives federal or state services must receive all up-to-date vaccinations

Patient/Caregiver

- Expand policies and mandates (slide 2 of 4)
  - Require employers with more than 50 employees to have a vaccination policy (Incorporate immunizations into new employee trainings; require immunization of all employees working at a facility providing health care services; develop a report card system for employers)
  - Create Healthcare Effectiveness Data and Information Set (HEDIS) measures for all adult immunizations (Have outside audits of immunization records and compare performance of different practices, departments, and facilities)
Patient/Caregiver

• Expand policies and mandates (slide 3 of 4)
  – Require providers to report all adult vaccinations into the state registry (Rebates for looking at patient registry and vaccination on time; ensure immunization registries include adult vaccines; make immunization query part of health recommendations; develop reimbursement code to ask patients about vaccinations as required by their registry)
  – Develop a national standard for college entry vaccination requirements (Enforce a full adult schedule as a requirement for entry; work with Council of State and Territorial Epidemiologists to develop standard)

Patient/Caregiver

• Expand policies and mandates (slide 4 of 4)
  – Expand the scope of practice for practitioners able to order and administer immunizations (Change state regulations on practice; lobby professional societies to get buy-in; have practitioners lobby their boards to change licensure requirements to administer; enlist other providers: dentists, podiatrists, mental health centers, EMS workers, etc.)
  – Seek policy input periodically from patients, caregivers, and providers (Community advisory boards/focus groups; engage Google; ask patients what stops them from getting immunized to help craft messaging)
Patient/Caregiver (Driver 2)

- Incentivize providers to immunize
  - Implement financial incentives (P4P: plans, insurers; increase reimbursement per code, new codes; subsidize immunization information system—IIS—component of EHR, e.g., via ONC, CMS, foundations, CDC grants, pharma)
  - Implement educational incentives (Create QI module for maintenance certification on professional boards; free CE and peer-to-peer detailing through professional associations, foundations, pharma, educational institutions)
  - Implement intangible incentives via better efficiency and recognition (Highlight vaccine info on patient medical record, maximize use of IIS; recognition programs, awards from respected sources including media; free “best practices” toolkit from institutional and setting experts)

Outcomes and Next Steps

- Summit findings published in a peer-reviewed journal
- GSA Annual Scientific Meeting Session November 2012, San Diego, California
- National Academy on an Aging Society Public Policy & Aging Report
- Expand efforts to collaborate and connect with other national projects/initiatives such as NAIS
NAVP Publications Available Now

CHARTING NEW FRONTIERS ACROSS THE AGING CONTINUUM

NAVP

NATIONAL ADULT VACCINATION PROGRAM

THE GERONTOLOGICAL SOCIETY OF AMERICA

CHARTING NEW FRONTIERS ACROSS THE AGING CONTINUUM