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## Administration fee for Immunizations

- ▶ Over the years we have heard that one of the barriers to immunizations is the low payment to providers for the administration.
- ▶ The importance of the administration fee – cover costs associated with storage, cold chain, counseling, etc.
- ▶ If the reimbursement is inadequate providers stand to lose money when providing immunizations in their practice.

## Federalization of the Administration fee

- ▶ The Affordable Care Act provides an opportunity for evaluating the impact of an increased payment for the administration fee.
- ▶ A two-year provision permits the use of federal funds to cover the difference between the state Medicaid reimbursement rate and the regional Medicare rate.
- ▶ Draft regulations released on Friday (30 day comment period)

## An Opportunity and a Challenge

- ▶ This provision provides a unique opportunity to demonstrate the impact of increasing administrative payments to providers on the access to immunizations.
- ▶ The challenge is that the provision is only for two years, starting in January 2013.

## ASTHO – NVPO Partnership

- ▶ ASTHO and the National Vaccine Program Office (HHS) are working together to learn from the states about how this provision may be implemented and evaluated.
- ▶ We are conducting key informant interviews in 5 states.
- ▶ Meetings include the State Health Officer, Immunization Manager, Medicaid Director, provider organizations, and other interested parties.

## State Meetings

- ▶ To date we have held meetings in Boston, Massachusetts; Seattle, Washington; and Salt Lake City, Utah.
- ▶ We will be having meetings in Jackson, Mississippi; and St. Paul, Minnesota.

## What we have learned so far...

- ▶ Do you think this provision will help increase access in your state?
- ▶ Yes to maybe
- ▶ Could see particular impact for adult providers – incentive to participate.
- ▶ Could see improvement to small rural providers
- ▶ Depends on the volume of immunizations

## Other Barriers Identified by States

- ▶ Maintaining cold chain
- ▶ Lengthy paperwork
- ▶ Time in counseling for the hesitant patients – highlighted by Washington as an issue, particularly in their younger patients.
- ▶ Providers limiting the number of Medicaid patients in order to maintain overhead costs.

## How can providers become aware of the provision?

- ▶ States have communication channels with their existing VFC and Medicaid providers.
- ▶ They will work with their Board's of Medicine or Statewide Medical Society's to help spread the word.

## Implementation

- ▶ Each state had unique issues around implementation depending upon their current Medicaid systems - how they categorize providers, etc.
- ▶ This is one provision in a long line of ACA provisions that require state Medicaid staff time and systems changes - there may be a delay in implementation.

## Potential Evaluation Tools

- ▶ Targeted campaign on one or two specific adult immunizations - ie Tdap or Zoster to providers and public.
- ▶ Evaluate claims data pre and post
- ▶ Compare providers that are eligible for the bump with those who are not.
- ▶ Case stories of providers telling how the bump-up impacted their practice.
- ▶ Survey providers
- ▶ Compare provider data pre and post

## Potential Opportunity to Modernize systems

- ▶ Upgrade the refrigerator
- ▶ Participate in IIS EHR integration
- ▶ Invest in bar coding scanner

## Next Steps

- ▶ The draft regulations for the provision are now available for comment (30 day comment period – June 9th).
- ▶ ASTHO will finish our state visits and summarize the information we have gathered and make that available to other states.

## Conclusion

- ▶ This “bump-up” provision is one tangible opportunity to test one aspect of increasing access to immunizations.
- ▶ It comes with challenges.
- ▶ Given the lack of an established adult infrastructure, states feel that the most likely area for impact is in the adult provider arena.

# Contact Information

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