



National Adult Immunization Coordinators' Partnership
Quarterly Meeting
July 5, 2016
Meeting Minutes

Welcome – Stephanie Borchardt (Wisconsin) co-chair of the National Adult Immunization Coordinators' Partnership

Stephanie welcomed everyone to the call.

Barriers and Motivators to Immunizations: Exploring the Provider/ Patient Journey- Brittany Stalsburg, PhD, Whitman Insight Strategies

Whitman Insight was hired by NYC health department to conduct research on adult vaccinations. What they found:

- Most adults will research their health care concern, using the internet, to validate their provider's recommendation
- It is important that adults know what credible online sites are available
- A successful recommendation is a conversation about the benefits and risks of receiving a vaccine
- When patients think of personal health, immunizations are not at the top of the list
- However, preventive health is very important to adults and immunizations are preventive health
- Concerns about side effects are a barrier to adults receiving needed vaccines
- Protection of one's self and family is a powerful motivator for vaccination
- Having accurate and simple information about vaccination motivates adults
- CDC three reasons to get vaccinated piece includes messages that have been focus group tested with the adult population (see <http://www.cdc.gov/vaccines/hcp/adults/downloads/fs-three-reasons.pdf>)
 - Patients like clear, simple, direct messages on why to get vaccinated against certain diseases
 - Many appreciate statistics with a good balance between scary and informative
 - Patients would like more immunization resources in providers offices
 - Protecting one's self and family from disease is a powerful motivator
- Immunizations are given a relatively low provider priority compared to other health issues
 - Many providers are more concerned with immediate health issues of their patients and put vaccinations on the back burner
 - Providers lack a sense of urgency regarding adult immunizations
 - Specialty doctors do not feel it is their place to approach immunization with patients; instead it should be the primary care provider's responsibility
- Most providers strongly support vaccinations but some hold personal biases against them
- Time is also a barrier to vaccinating patients
- Cost precludes some providers from offering and carrying all adult vaccines
 - The cost of vaccination prevents some providers (especially those in private practice) from carrying and recommending vaccines
 - Because of cost, many providers stop short of actively recommending adult vaccination
- Providers would like help from health departments to educate patients on the importance of vaccinations
- Information and education helps motivate patients to choose vaccination



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Affordable Care Act (ACA) Impact on Adult Immunizations- LJ Tan, MS, PhD, Immunization Action Coalition

- Assures near universal, stable and affordable coverage by building on the existing system of public and private health insurance
- Note that intent was to improve access, not necessarily to improve payment to providers
- Improve conditions for consumers and small businesses
 - Eliminated pre-existing conditions
 - Publicly justify any rate increase of 10% or more
 - Increased choice or more options for insurance
- Has had a measurable impact on improving access to health coverage for millions of Americans
- Mandates provision of Advisory Committee on Immunization Practices (ACIP)–recommended vaccines at no cost sharing
 - Must cover adult children up to age 26 years
 - No pre-existing conditions for children less than 18 years
 - No plan is required to cover vaccinations delivered by an out-of-network provider
- Extends many of its standards to the self- insured ERISA group health plans
 - Must cover all ACIP-recommended vaccines at no cost sharing
- The number of grandfathered plans have been cut in half since 2011
 - Plans in existence before ACA took affect
- The healthcare industry has the greatest number of grandfathered plans
- Established market standards for state regulated health insurance regardless of available through an exchange or open market
 - Essential health benefits including preventive services must be covered
- All state-regulated, non-grandfathered insurance plans must include ACIP-recommended vaccines at no cost sharing
- Medicaid expansion
 - States offer new eligible enrollees an alternative benefits package which includes immunization services to children and adults at no cost sharing
 - States decide whether existing Medicaid enrollees are to be covered for the alternative benefits package
 - Creates disparity between newly eligible and already enrolled persons in expanded states and states without traditional Medicaid
 - The Centers for Medicare and Medicaid Services (CMS) has provided no guidance on these issues
- Medicaid primary care payment increased for the first 2 years of ACA but has since decreased
- Required private insurance:
 - to comply with Category A and B vaccines (exception is travel vaccines, unless indicated in the footnotes of the ACIP schedule)
 - increase number of access points for getting vaccinated
 - All providers of care for adults have a responsibility to assess, counsel, recommend or refer and to administer
 - Improve the number of in-network providers
 - Unfortunately complementary immunizers such as pharmacists, school-based clinics or public health clinics are considered out-of-network providers and thus ACA provisions do not apply
- Challenges remain:
 - Uninsured adults still remain so public health safety nets are still necessary
 - Continuing Medicare B/D challenge



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- Adequacy of provider payment for vaccines and administration remains
- New vaccines are more expensive
- No federal vaccine purchase program for adults
- Vaccine prices can vary as much as 3-fold from provider to provider
- Adult vaccine providers do not have the benefits of economies of scale that pediatric practices have
- Cost of vaccine storage and handling
- Cost of administration
- Medicare Part D
 - Payment for Part D vaccines and their administration are made solely by the individual drug plans
 - Physicians are considered out-of-network providers
- Manufacturers provide hotlines to assist with coding, preparing claims and appeals

Centers for Disease Control and Prevention (CDC) Update: LaDora Woods, Immunization Services Division

The 2016 [National Immunization Conference](#) registration is open. The conference will be held September 13 -15 in Atlanta. Conference agenda and location and hotel information can be found online.

Association of Immunization Managers (AIM) Update: Anuradha Bhatt, MPH

No report

Wrap up and adjourn- Stephanie Borchardt