Optimizing the Employer Role

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Why Should Employers Care (besides being the right thing to do)?

- COVID – Estimated cost for employers $213.1B\(^1\)
- Influenza - Direct medical costs have been estimated to be $3.2B\(^2\)
- Pneumococcal disease, Herpes Zoster, HPV, Hepatitis B - $5.1B\(^3\)
- Absenteeism & Presenteeism
- Influenza indirect costs estimated to be $5.3B from the 18-64 age group\(^2\)
- COVID ongoing impacts on how and where employees work

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2. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8983919/#:~:text=Influenza%20costs%20originate%20from%20inpatient,costs%20related%20to%20lost%20productivity.&text=In%20the%20United%20States%2C%20total%20inpatient%20costs%20were%20estimated%20at%20US%248.0%20billion.
What is the Opportunity for Employers?

Adolescents and Adults Missed An Estimated 37+M Doses of Recommended Vaccines Jan 2020 to July 2021

Total Adult Vaccinations (excluding influenza) 2019 – Jun 2022

https://www.vaccinetrack.com/


Current State

NEBGH survey of 103 mostly large employers about their vaccination policies.

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Here’s How Employers Ranked Priorities

<table>
<thead>
<tr>
<th>Condition</th>
<th>Not a Priority</th>
<th>Most Important</th>
<th>Significant Priorit</th>
<th>High Priority</th>
</tr>
</thead>
<tbody>
<tr>
<td>INFLUENZA</td>
<td>7%</td>
<td>49%</td>
<td>53%</td>
<td></td>
</tr>
<tr>
<td>HPV</td>
<td>61.7%</td>
<td>33.7%</td>
<td>6.1%</td>
<td></td>
</tr>
<tr>
<td>PEDIATRIC VACCINES</td>
<td>44.5%</td>
<td>44.9%</td>
<td>10.2%</td>
<td></td>
</tr>
<tr>
<td>SHINGLES</td>
<td>49%</td>
<td>42.9%</td>
<td>6.2%</td>
<td></td>
</tr>
<tr>
<td>PNEUMONIA</td>
<td>56%</td>
<td>40.8%</td>
<td>9.2%</td>
<td></td>
</tr>
<tr>
<td>TETANUS, Diphtheria, Pertussis (Tdap or Td)</td>
<td>48%</td>
<td>41.2%</td>
<td>9.5%</td>
<td></td>
</tr>
<tr>
<td>HEPATITIS B</td>
<td>46.4%</td>
<td>45.4%</td>
<td>10.1%</td>
<td></td>
</tr>
<tr>
<td>COVID</td>
<td>3.6%</td>
<td>18.6%</td>
<td>78.3%</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL RESPONSES: 162
Employer Checklist: What You Can Do!

- **Provide Information**
  - Do your employees have access to accurate and up-to-date information on vaccines?

- **Make It Easy for Employees to Get Vaccinated**
  - Do you host vaccination clinics or partner with other organizations to do so?
  - Do you offer time off for obtaining vaccinations?

- **Communicate Your Organization’s Commitment to Vaccination**
  - Are your organization’s leaders leading by example?
  - Have you developed campaigns to promote vaccination supported by mailers, social media, newsletters and employee platforms?
  - Have you considered combining incentives with your communication campaigns?

- **Collaborate with DE&I Leadership and ERGs**
  - Have you shared information about vaccination disparities with ERGs?
  - Have you encouraged them to share experiences, and asked them for suggestions to encourage vaccination?

- **Fight Misinformation**
  - Are you actively fighting vaccine misinformation and employing tactics like using visuals, quoting experts and telling stories as part of your messaging?
  - Are you emphasizing the benefits of vaccination and keeping messages clear and positive?

- **Promote Immune Fitness as Part of Your Well-being Strategy**
  - Do you emphasize the importance of PCPs and wellness check-ups?
  - Do you provide information on vaccines at employee health fairs?
  - Have you enlisted your digital vendors in efforts to promote vaccination?

- **Make Sure Vaccinations Don’t Require Out-of-Pocket Expense**
  - Do your employees know they won’t have to pay for recommended vaccines?

- **Collect Vaccination Data About Your Employee Population**
  - Do you work with your health plan to collect data to track and better understand vaccination rates in your population?
  - Do you set targets for selected vaccines and track progress?

- **Advocate**
  - Does your health plan know vaccination is a key priority for your organization?
Employers Have a Critical Role to Play in Vaccination Education, Promotion and Delivery

• Educate and Promote
  • Employers one of the most trusted sources of information - Keep politics out of it – use factual, clinical information
  • Lead by example
  • Develop Effective Communication Campaigns that - Capture Attention, Simple/Clear, Credible, and are Relevant
  • Fight Misinformation - Put vaccination in a “gain frame”—emphasize the benefits and “avoid needles and tears.”
  • Tell Stories
  • Consider incentives –
    • Small, fun, support messaging

Make it Easy, Convenient and Integrated

• Leverage
  • Integrate vaccinations into your organization's wellness strategy – HRA, Rewards, Education – Concept of “Immune Fitness”
  • Encourage employees to have a PCP and attend annual wellness checkups
  • DE&I initiatives and Employee resource Groups

• Make it Easy, make it Convenient
  • Host vaccination clinics in house or at central locations throughout the year, not just during flu season
  • Partner with local community organizations to host vaccination clinics.
  • Bundle vaccines when possible—flu/COVID-19 or flu/pneumococcal
  • Align the timing of in-house clinics to coincide with “bring your child to work” days.
  • Provide vouchers for family members not covered by the employer benefits plan.
  • Provide transportation subsidies or vouchers for employees who need to travel to get vaccinated.
  • Offer additional time off for vaccinations—an especially important consideration for shift workers.
Collect Vaccination Data About Your Employee Population

• Developing immunization information systems that track adult immunizations is a key Healthy People 2030 goal
• Ask your health plan for annual or more frequent vaccination data so you can understand vaccination rates among employees and family members
• Set Goals for Employee Vaccination

  • Percentage of eligible who are vaccinated by vaccine
  • Increased vaccination rates year to year
  • Progress against targets
  • Education, employee sentiment etc..

What If We Do Nothing?

• Employees, family members and the community at large become vulnerable to poor health outcomes
• Diseases we thought we beat, come back – polio, measles, etc.
• Scientific advances mean nothing if vaccines sit on shelves
  • New RSV, cancer vaccines, for example
• We remain ill-prepared for the next pandemic (and there will be one)