

National Adult and Influenza Immunization Summit (NAIIS)

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Background: National Adult and Influenza Immunization Summit

- Multi-sector coalition of organizations working toward increasing uptake of ACIP-recommended adult vaccines and influenza vaccine for all ages
- Started in 2000 in response to influenza vaccine supply issues
 - Founded by AMA and CDC
- Summit Organizing Committee provides input on priorities and in-person meeting agendas
- Over 140 public and private organizations

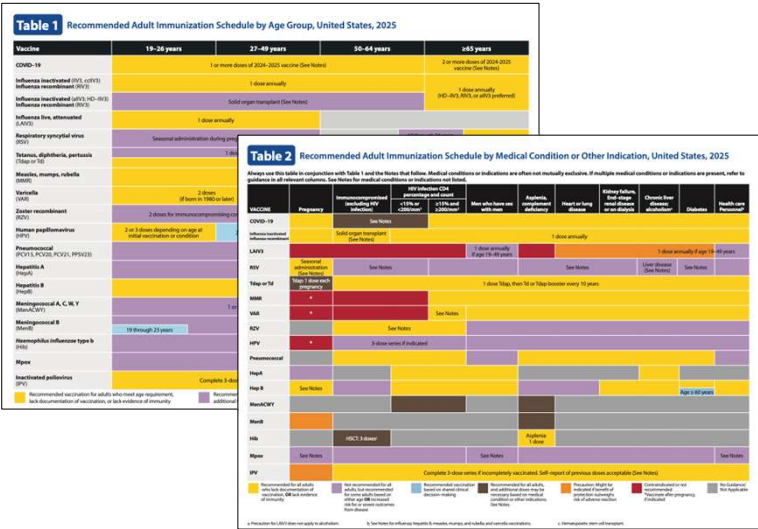
Summit Organizing Committee (SOC)

- American Academy of Family Physicians
 - American Academy of Pediatrics
 - American Academy of Physician Associates
 - American Association of Nurse Practitioners
 - American College of Obstetricians and Gynecologists
 - American College of Physicians
 - American Medical Association
 - American Nurses Association
- American Pharmacists Association
 - AMGA
 - Centers for Disease Control and Prevention
 - Gerontological Society of America
 - Immunize.org
 - Infectious Diseases Society of America
 - National Foundation for Infectious Diseases
 - The Joint Commission
 - U.S. Department of Health and Human Services' National Vaccine Program

AIM, NACCHO, AIRA, PALT-MED, ASTHO, BIO also participate as SOC
liaisons

Adult Immunization Landscape – Challenges for Providers and Patients

- Complex adult immunization schedule, new vaccines, and changing recommendations
 - Aged-based versus risk-based recommendations

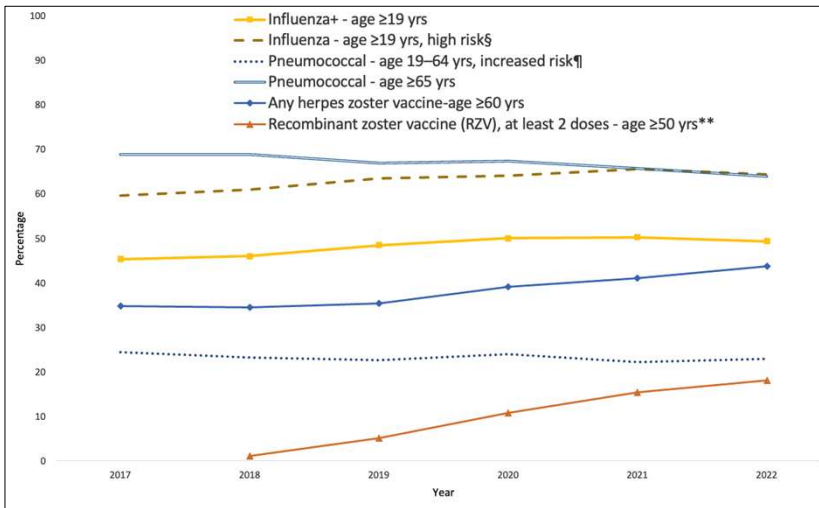


Challenges For Adult Immunization Compared to Pediatrics

- **Adults see many different providers and some have no primary care provider**
 - Challenges with knowing which vaccines someone has had and who is “responsible” for ensuring adults are up-to-date
- **Vaccinations less integrated into routine adult care**
 - Acute issues take precedence over preventive care
- **Complex payment landscape**
 - Private insurance covers vaccines on adult schedule
 - Variable coverage and provider payment by vaccine and for vaccine administration by state for Medicaid
 - Some vaccines covered by Medicare Part B vs Part D
 - Part D vaccines more challenging for non-pharmacist providers to bill
 - No “Vaccines for Adults” program to vaccinate uninsured adults
- **Few vaccine requirements for adults**
 - E.g., school vaccine requirements a facilitator for children
- **Complex adult vaccination schedule with many risk-based (vs age-based) recommendations**

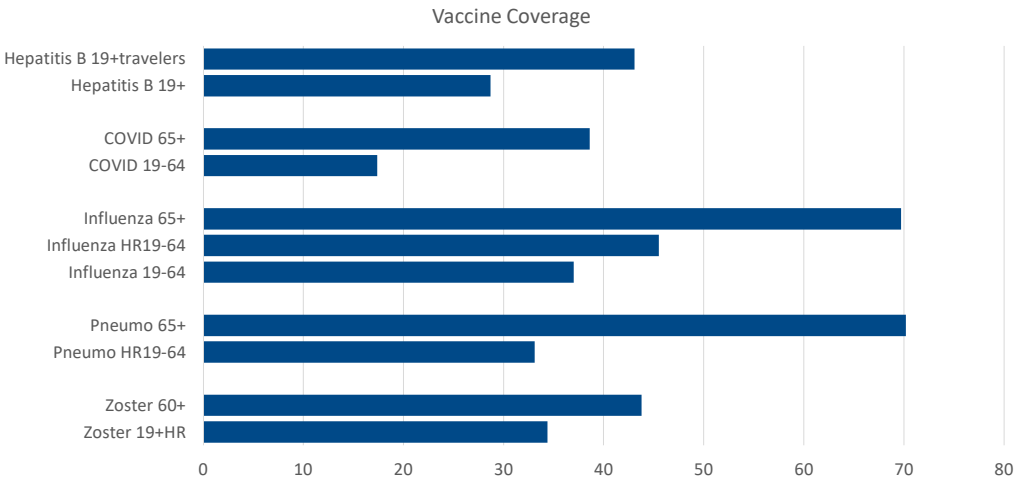
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Estimated proportion of adults aged ≥19 years who received selected vaccines,* by age group and risk status — National Health Interview Survey, United States, 2017–2022, CDC



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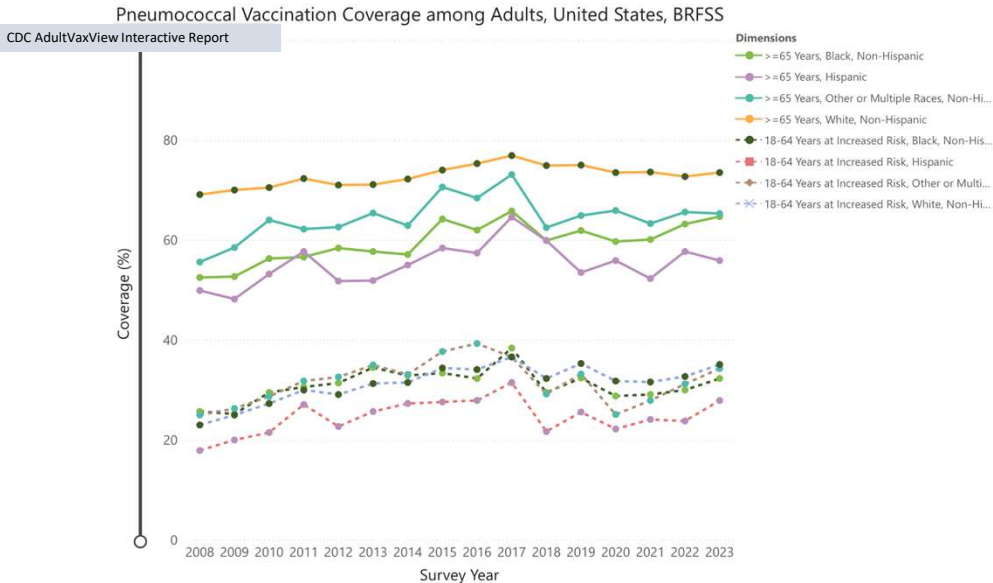
Selected US Vaccination Coverage Among Adults by Age and Indications



Sources and years of data by vaccine: Zoster 2022 NHIS; Pneumococcal 2023 BRFSS; Influenza 2023-24 FluVxView; COVID 2023-24 COVIDVxView; Hepatitis B 2021 NHIS.

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Racial and Ethnic Disparities Long-Standing



CDC. www.cdc.gov/adultvaxview/about/general-population.html. Accessed April 10, 2025

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Vaccination coverage estimates using an age-appropriate composite* adult vaccination quality measure and individual component measures, by age group — National Health Interview Survey, US, 2022

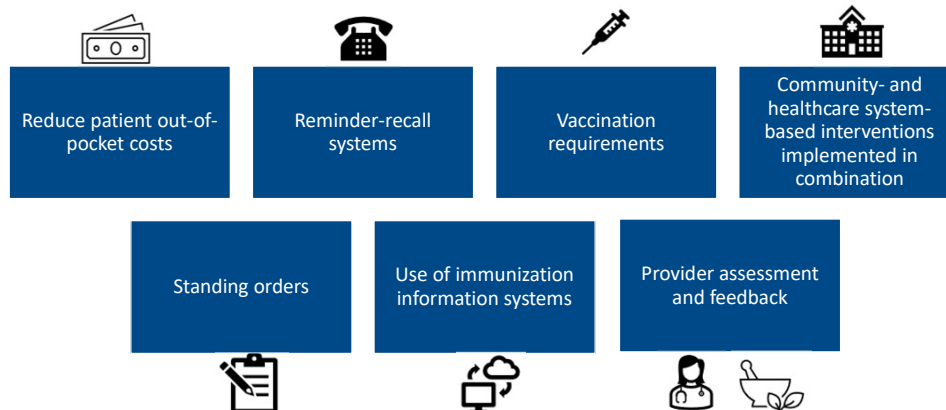
	Age Groups by percent coverage (95% CI)			
Composite Measure	≥ 19 years	19–49 years	50–64 years	≥ 65 years
	(n†=27,376)	(n†=11,700)	(n†=6,905)	(n†=8,771)
Includes influenza in past 12 months§	22.8 (22.0-23.7)	25.4 (24.3-26.5)	14.7 (13.7-15.8)	26.2 (25.0-27.4)
Does not include influenza in past 12 months¶	42.4 (41.4-43.4)	59.4 (58.0-60.7)	18.9 (17.7-20.2)	28.6 (27.4-29.9)
Abbreviations: CI = confidence interval; Composite includes reported influenza, Td/Tdap (last 10 years), pneumococcal (any prior), and zoster (any prior) vaccines.				

<https://www.cdc.gov/adultvaxview/publications-resources/adult-vaccination-coverage-2022.html>

Factors Associated with Adult Vaccination



Evidence-based Interventions to Increase Vaccination – the Community Guide*



*Included those most applicable to adults. Full list at www.thecommunityguide.org/pages/task-force-findings-increasing-vaccination.html.

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Recent Progress to Improve Adult Vaccination Implementation Opportunities

- **I.R.A. – Inflation Reduction Act**
 - Requires no out-of-pocket costs for patients getting ACIP recommended vaccines for Medicare Part D vaccines and for persons on Medicaid
 - Prior to I.R.A., Affordable Care Act required private insurance to include coverage for all ACIP recommended vaccines on the adult schedule without cost sharing
- **Improvements in reporting adult vaccination to immunization information systems due to COVID-19**
- **Two quality measures**
 - Maternal immunization measure
 - Adult composite measure

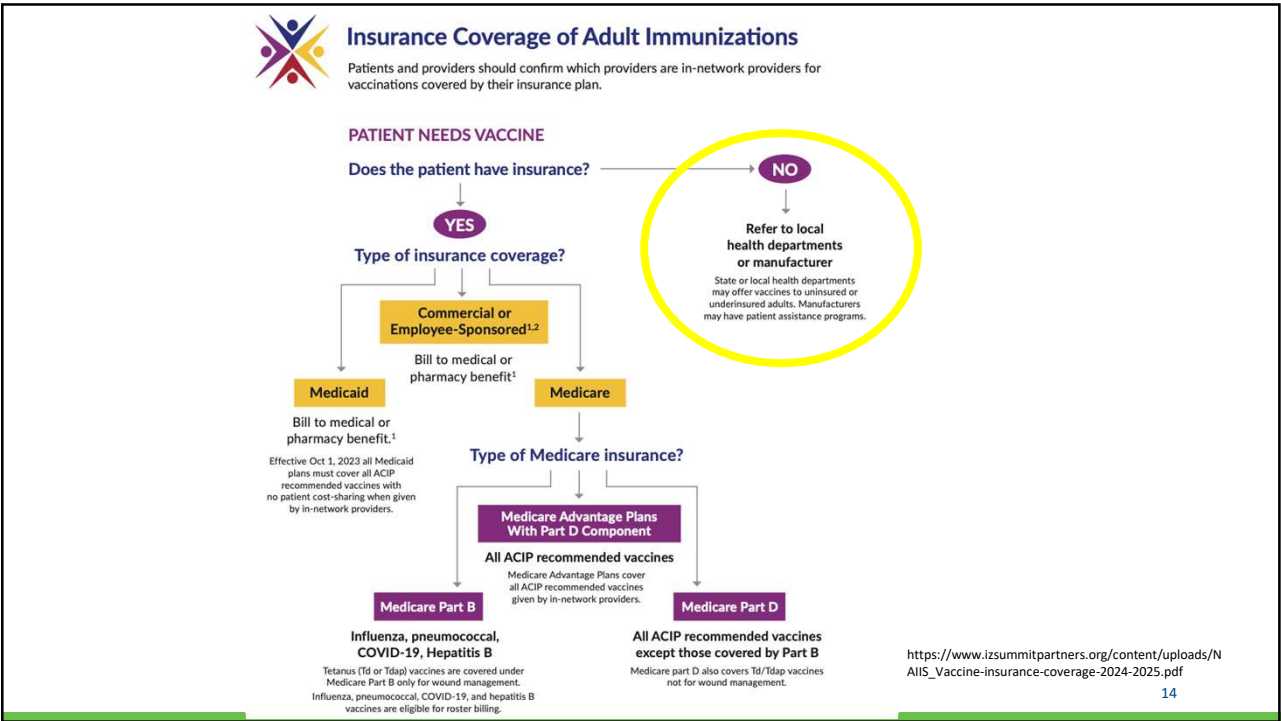
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Insurance Coverage for Adult Vaccinations

- Among insured adults, complex payment environment
- No adult vaccine equivalent to Vaccines for Children Program
 - States may use state funds or federal 317 program funds for adult vaccinations

<https://advisory.avalerehealth.com/wp-content/uploads/2023/10/Guide-to-Vaccine-Coverage-Policies.pdf>



https://www.izsummitpartners.org/content/uploads/NAIS_Vaccine-insurance-coverage-2024-2025.pdf
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Patient concerns about vaccines and vaccine safety



Healthcare provider recommendations remain key predictor of vaccine acceptance.

- Vaccine counseling can be time consuming. - Standards for Adult Immunization Practices recommend discussing vaccine needs at every clinical encounter



Many adults do not have a primary care provider or regular source of care.



Community-based organizations key partners and trusted sources of information especially in communities with historically lower vaccination rates

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Strategies for Improving Adult and Influenza Immunizations Through NAIIS Partner Engagement



COMMUNICATE (identify issues of concern and possible solutions)

Through in-person meetings, weekly webinars, email updates from partners, and task group meetings



COORDINATE (identify shared key principles and goals)

Opportunities to leverage all partners to respond to national questions about flu and adult vaccination



MOTIVATE (through showcasing/recognizing successful and innovative practices and programs)

NAIIS Immunization Excellence award winners' www.izsummitpartners.org/2024-immunization-excellence-awards/.



SHARE developed tools for modification and use by others

Tools developed by task groups to address identified needs for implementation www.izsummitpartners.org/naais-workgroups/.

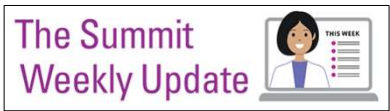
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Activities of NAIIS

- Convene adult and influenza immunization stakeholders
 - Typically one in-person meeting annually
 - Working groups meet remotely as needed
 - Weekly webinars
- Facilitate identification of issues facing stakeholders and actions that may lead to improvements in uptake of ACIP recommended vaccines
- Develop tools to help address identified needs to improve vaccine implementation



NAIIS Meetings and Current Task Groups



- Weekly current topic updates on ZOOM
 - Emails sent weekly to NAIIS members
- Yearly in-person meetings
 - Working meeting provides current landscape, annual awards, and breakout groups to identify priorities for coming year
- Task Groups meet as needed
 - Billing, Coding, and Payment
 - Operationalizing Adult Immunizations and Respiratory Season Vaccination
 - Vaccine Confidence and Sustaining Community-Based Organizations

Standards for Adult Immunization Practice

- Recognized update needed given low adult vaccine coverage
- Working group formed including state and local public health, professional societies, and others
- NAIIS working group draft shared with NVAC which revised and published as NVAC Standards for Adult Immunization Practices in 2014
- NAIIS member organizations promoted to their memberships and signed on as supporting organizations

REPORTS AND RECOMMENDATIONS

Recommendations from the National Vaccine Advisory Committee: Standards for Adult Immunization Practice

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National Adult and Influenza Immunization Summit (NAIIS) Call to Action – 2021



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta, GA 30329-4027

August 23, 2021

Majority of U.S. Adults Are Missing Routine Vaccinations

A Call to Action to Protect All Adults from Vaccine-Preventable Disease and Disability

Dear Colleagues,

Vaccinations are critical components of routine healthcare for adults. They provide protection against severe illness, disability, and death from 19 different infectious diseases such as influenza, pneumococcal disease, herpes zoster (shingles), hepatitis A, hepatitis B, HPV-related cancers, tetanus, and pertussis (whooping cough). The enormous impact of COVID-19 vaccines on reducing illness, hospitalizations, and deaths further demonstrates the immense value of vaccines.

Despite the tremendous benefits of vaccines, at least 3 out of every 4 adults are missing one or more routinely recommended vaccines. Given the recognized health benefits of adult vaccinations and low rates of adult vaccination, made worse by the COVID-19 pandemic, the National Adult and Influenza Immunization Summit (NAIIS) members call on providers across the healthcare spectrum to take actions to improve vaccination of adults.

Specifically, NAIIS calls on all clinicians and other healthcare providers, such as pharmacists, occupational health, and clinical social workers, to follow the National Vaccine Advisory Committee's (NVAC) Standards for Adult Immunization Practice including:

- Assess the vaccination status of patients at all clinical encounters, even among clinicians and other providers who do not stock vaccines.
 - Update a jurisdiction's immunization information system (IIS) to view patients' prior vaccinations to support vaccine needs assessment.
- Identify vaccines patients need, then clearly recommend needed vaccines.
- Offer needed vaccines or refer patients to another provider for vaccination.
- Document vaccinations given, including in the jurisdiction's IIS.
 - Many electronic health record (EHR) systems already link to jurisdiction's IIS – providers should check with their EHR administrators.
 - Providers not already utilizing an IIS should contact their local or state immunization program to inquire about enrolling in their jurisdiction's IIS.
- Measure vaccination rates of providers' patient panels, making changes to clinic patient flow and taking other steps to address barriers to patient vaccination.

Taking these actions will help protect adults across the U.S. against preventable illness, disability, and death.

Resources for implementation of the Standards for Adult Immunization Practices can be found at

<https://www.cdc.gov/vaccines/hcp/adults/for-practice/increasing-vacc-rates.html>
For a list of NAIIS members supporting the Standards, visit <https://www.cdc.gov/vaccines/hcp/adults/for-practice/increasing-vacc-rates.html>

Standards for Adult Immunization Practice

- **Assess** the vaccination status of patients at all clinical encounters
- **Identify** vaccines patients need, then clearly **recommend** needed vaccines.
- **Offer** needed vaccines or refer patients to another provider for vaccination.
- **Document** vaccinations given.
- **Measure** vaccination rates of providers' patient panels.

<https://www.cdc.gov/vaccines/hcp/adults/for-practice/increasing-vacc-rates.html>
<https://www.izsummitpartners.org/call-to-action-adult-immunizations/>

Practices for safety conducting off-site vaccination clinics

- Concern raised by some NAIS members regarding temporary non-clinic workplace vaccination clinics and need for detailed guidance
- Resulted in checklist for such clinics, cleared by CDC in ~2016, with input from NAIS Influenza Working Group
- This guidance became key tool for planning off-site, safe COVID-19 vaccination clinics



Ten Principles for Holding Safe Vaccination Clinics at Satellite, Temporary, or Off-Site Locations

During All Stages (Pre-Clinic, During the Clinic, and Post-Clinic)

1. Keep vaccines at the correct temperature at all times using proper procedures for vaccine transport, handling and storage. Document temperature monitoring at appropriate intervals during all stages. For further guidance: www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf

Frequently Asked Questions

about the National Adult and Influenza Immunization Summit
"Checklist of Best Practices for Vaccination Clinics Held at Satellite, Temporary, or Off-site Locations" and Pledge for Implementing the Checklist

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Operationalizing and Implementing Respiratory Season Vaccination

- NAIS discussions identified challenges adding RSV and COVID-19 vaccinations into provider routines in fall
- Developed tools to help with implementation, updated for 2024-25
- Key points (talking points) for providers when discussing respiratory season vaccines



Talking with Adults about Vaccines to Prevent
Respiratory Illnesses During Cold and Flu Season

Get Adults' Vaccinations Back on Track

Tip sheet for providers on new CDC adult vaccine recommendations and tools to help adults catch up on needed vaccinations




National
Adult and
Influenza
Immunization
Summit

At least 3 out of every 4 adults are missing one or more vaccines like tetanus (Td/Tdap), pneumococcal, shingles, and HPV vaccines. In addition, respiratory syncytial virus (RSV) vaccine was new in 2023, and pneumococcal, flu, and COVID-19 vaccine recommendations continue to evolve.

www.izsummitpartners.org/naais-workgroups/operationalizing-adult-immunization-taskgroup/.

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Fall 2024 Respiratory Season Vaccination for Adults 60 years and Older

To be up to date for Fall Respiratory Season, CDC recommends annual influenza (flu) and seasonal COVID-19 vaccination. In addition, RSV vaccine is recommended for people 75 years and older or 60–74 years at increased risk of severe RSV. Because pneumococcal bacterial infections can follow viral infections, ensure your patients are up to date with pneumococcal vaccines, too.

Timing of Vaccines to Protect Adults 60 Years and Older From Seasonal Illnesses

Month	Seasonal/Yearly Vaccines		Not Annual*	
	Influenza (Flu)	COVID-19 ¹	RSV	Pneumococcal
July				
August				
September				
October				
November				
December				
January				
February				
March				
April				
May				
June				

KEY ■ Ideal timing ■ Keep vaccinating¹ ■ In some circumstances² ■ If flu viruses still circulating³

Coadminister Vaccines

To avoid missed opportunities, CDC recommends giving all needed vaccines at the same visit.² Counsel patients about potential side effects, including possible fatigue, soreness, and fever in the 2 days after vaccination. For adult patients who prefer receiving vaccines spread over more visits, schedule all needed vaccine appointments before they leave the clinic.

Vaccinate patients with recommended vaccines that you have in stock. Counsel and refer patients to other clinics or pharmacies that can administer vaccines that you do not stock.

General Information

- In June 2024, the Advisory Committee on Immunization Practices recommended that people 60–74 years old at increased risk of severe RSV illness and all adults 75 years and older receive a single dose of RSV vaccine. People at highest risk of severe RSV disease include those with lung diseases; cardiovascular diseases; moderate or severe immune compromise; diabetes;

My One-Year Vaccination Action Plan

The checked vaccines are recommended for you by your healthcare provider to be given during the next year:

☐ COVID-19
☐ Hepatitis A
☐ Hepatitis B
☐ 2-dose product
☐ 3-dose product
☐ Human papillomavirus (HPV)
☐ Influenza
☐ Measles, mumps, rubella (MMR)

☐ Meningococcal
☐ ACWY
☐ B
☐ Mpox
☐ Pneumococcal disease
☐ PCV15 + PPSV23
☐ PCV20 or PCV21
☐ Polio

☐ RSV
☐ Shingles (zoster)
☐ Tetanus, diphtheria, pertussis
☐ Td
☐ Tdap
☐ Varicella (chickenpox)
☐ Other: _____
☐ Other: _____

VACCINE ACTION PLAN (to be completed with your healthcare provider or pharmacist)

JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE


PATIENT NAME _____ DATE _____

HEALTHCARE PROVIDER NAME _____


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Addressing potential financial and other barriers for patients and providers

Strategies to Address Policy Barriers to Adult Immunizations in Federally Qualified Health Centers



National Adult and Influenza Immunization Summit



NATIONAL ASSOCIATION OF Community Health Centers

SEPTEMBER 2019

Reasons to Invest in Adult Vaccination Implementation

The National Adult and Influenza Immunization Summit (www.izsummitpartners.org), a national coalition representing over 130 organizations, compiled the information below to inform healthcare organizations and providers about the importance of adult immunization for population health, the financial feasibility of adult vaccination implementation, and implementation strategies.

Top Questions on Coding and Billing for Vaccines: Avoiding Common Errors

The Summit Provider and Access Workgroup surveyed partners and compiled the following Top Questions associated with coding and billing for adult vaccines. Click on each question to view the helpful guidance that has been developed for each of these questions.

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Provider Billing and Payment Resources

Multiple Resources To Assist Providers with Billing and Coding

- [Strategies to Address Policy Barriers to Adult Immunizations in Federally Qualified Health Centers](#) – Outlines policy barriers and strategies that specifically impact Federally Qualified Health Centers (FQHCs) in their efforts to increase adult immunizations, and updates the 2019 publication
- [Adult Current Procedural Terminology: Coding Case Scenarios](#)
- [NAIIS Billing and Coding of Vaccines in the Pharmacy](#)
- [Top Questions for Medical Benefit Coding and Billing for Vaccines: Avoiding Common Errors](#)
- [Insurance Coverage of Adult Immunizations](#)

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Billing and Payment Task Group

- In August 2024, identified a number of updates needed to existing documents
 - Updates made in January 2025, including hepatitis B vaccination now included fully in Medicare Part B.
- Developed pilot project for collecting reports of vaccine payment issues
 - Key issue identified is delay by payers in covering newly added vaccines, newly approved vaccine brands, and new indications for existing vaccines
 - Medicaid and Medicaid Advantage Care plans most often cited
 - Providers and other partners may report issues from main NAIIS page.

Report Vaccine Payment Challenges

The NAIIS seeks to better understand providers' vaccine billing challenges. Click below for more information about reporting challenges.

More Information

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Vaccine Confidence and Sustaining Community Based Organizations

- Document highlighting importance of community-based organizations (CBO's) in improving vaccine confidence and equity
- Developing document to establish the evidence-base for what works to increase vaccine equity based on published efforts
 - Lead organizations is Brown University



<https://www.izsummitpartners.org/naiis-workgroups/sustaining-cmty-based-organizations-taskgroup/>

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Getting the Most Out of NAIIS May 2025 Meeting

- Get inspired!
- Please ask questions
- Participate actively in the breakout groups
- Meet other groups that may support your efforts or collaborate
- Provide post-meeting feedback
- Get involved in a priority activity to be determined based on discussions at this meeting and task groups

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How can you participate and stay up-to-date on NAIS activities after the meeting?

- Join the NAIS at www.izsummitpartners.org
- Weekly update webinars at 3 PM ET
 - [Archived at www.izsummitpartners.org/weekly-update/](http://www.izsummitpartners.org/weekly-update/).
- Special co-sponsored webinars, e.g.,
 - American College of Physicians (ACP) on mRNA vaccines
 - American College of Obstetricians and Gynecologists on Maternal Vaccination
 - Dr. Goldman from ACP on Implementing Vaccinations in Internal Medicine Primary Care Practices
- Participate in task groups
- Provide partner updates regarding webinars and resources for dissemination to NAIS

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Questions?

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Immunize.org Resources

- [Standing orders](#) templates for all vaccines
- [Vaccine Information Statements](#) in multiple languages
- [Ask the Experts](#) questions and answers for challenging clinical situations
- Tools to [administer vaccines](#), including giving multiple vaccines per visit and managing vaccination-related [anxiety](#)
- Links to [FDA package inserts](#)
- MORE!!



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Keeping NAIIIS organizations informed and developing tools

Using Immunization Information Systems (IMMUNIZATION REGISTRIES)



The Benefits
for Pharmacists
and their
Adult Patients

Using Immunization Information Systems (IMMUNIZATION REGISTRIES)



The Benefits
for Clinicians
and their
Adult Patients

QUICK GUIDE TO ADULT VACCINE MESSAGING



Get Adults' Vaccinations Back on Track

Tip sheet for providers on new CDC adult vaccine recommendations and tools to help adults catch up on needed vaccinations



At least 3 out of every 4 adults are behind on routine vaccines like influenza (flu), tetanus (Td/Tdap), hepatitis A, and HPV. In addition, COVID-19 vaccine recommendations continue to evolve, and new changes were made to hepatitis B, shingles, pneumococcal, and flu vaccine recommendations since 2021.

VACCINE	NEW RECOMMENDATION	BRAND NAME(S)	DOSING
Hepatitis B	Everyone 19-59 years. ≥60 years who want vaccination or have high-risk indication.	Engerix-B, Twinrix, PreHevbrio, Heplisav-B	2- or 3-dose series depending on brand
Zoster (shingles)	Everyone ≥50 years. ≥19 years immunocompromised.	Shingrix	2-dose series
Pneumococcal	Everyone ≥65 years. ≥19 years immunocompromised or high-risk medical condition.	Vaxneuvance (PCV15), Pneumovax (PCV20), Pneumovax 23 (PPSV23)	Either PCV15 then PPSV23 one year later or one dose PCV20
Preferred flu vaccines for adults ≥65 years	≥65 years: give flu vaccines preferred by CDC for this age group. If not available, give any age-appropriate flu vaccine.	Fluad (adjuvanted), Fluzone High-Dose (inactivated), or Flublok (recombinant)	Annual vaccination

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Examples of priority issues identified during November 2022 NAIIS in-person meeting

- Continue to support work of community organizations beyond the pandemic and to improve confidence and interest in adult vaccinations
- Encouraging use of maternal and adult composite quality measures
- Continue reporting of adult vaccinations to immunization information systems as a key information needed for vaccine needs assessment and adult vaccination catch-up
- Supporting providers in incorporating new vaccines as the adult vaccine schedule expands

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