



Vaccines for Adults Enrolled in Medicaid: Interview Findings

Medicaid and CHIP Payment and Access Commission

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Overview

- Background
 - Coverage of vaccines
 - Vaccination rates
- Methods
- Interview findings
- Policy options assessment
- Next steps

Adult Vaccine Coverage Varies by Population and State

- Vaccines are not a mandatory benefit for all adult enrollees
- New adult group
 - Mandatory benefit without cost sharing
- Other adults (not subject to essential health benefits)
 - States may opt to cover vaccines
 - 24 out of 49 states covered all ACIP-recommend vaccines

Medicaid-enrolled Adults Had Lower Vaccination Rates Than Those Enrolled in Private Insurance

Vaccine	Primary source of coverage ¹			
	Total	Medicaid or CHIP	Private	Uninsured
Influenza	43.6%	32.8%	40.8%*	16.3%*
Tetanus	62.6	56.7	66.7*	50.1*
Tdap	29.2	22.6	35.2*	16.3*
Pneumococcal	25.2	16.9	13.3*	9.3*
Herpes zoster (shingles)	22.9	7.4	12.8*	4.3*
Hepatitis A	16.9	16.9	20.6*	13.9*
Hepatitis B	32.1	33.7	38.8*	26.2*
HPV	33.1	32.6	36.0*	19.8*

Notes: Tdap is tetanus, diphtheria, and pertussis. HPV is human papillomavirus. For the herpes zoster (shingles) vaccine, the analysis was limited to those adults 50 years and older. For HPV, the analysis was limited to adults 19 to 26 years old.

* Difference from Medicaid is statistically significant at the 0.05 level.

¹ In this table, the following hierarchy was used to assign individuals with multiple coverage sources to a primary source: Medicare, private, Medicaid, other, uninsured. Not separately shown are the estimates for those covered by Medicare and by any type of military health plan or other federal government-sponsored programs.

Source: MACPAC, 2021, analysis of 2015–2018 National Health Interview Survey data.

Interviews

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Methods

- MACPAC staff conducted interviews with state and federal officials, Medicaid managed care plans, providers, vaccine manufacturers, immunization experts, and a consumer group.
- Interviews focused on:
 - state vaccine policies,
 - barriers to access, and
 - the relative effectiveness and challenges of different federal policy options

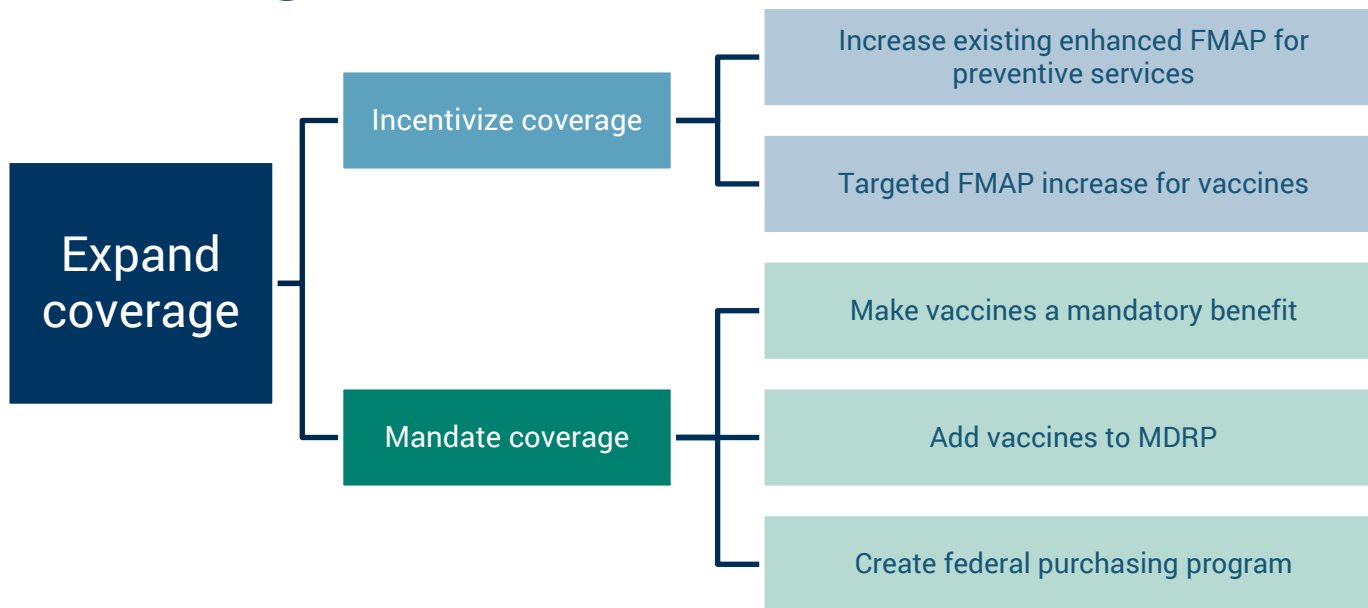
Summary of Findings

- Low vaccination rates for Medicaid-enrolled adults result from:
 - limited coverage,
 - payment policies, and
 - beneficiary-specific barriers
- A vaccine benefit should be universal
- Low provider payment could hinder provider willingness to administer vaccines and reduce access
- Beneficiaries need access at multiple points wherever they receive care and may need additional education on benefits of vaccines

Findings: Coverage

- Increasing vaccination rates will require a multi-faceted approach, but the first step is ensuring all Medicaid enrollees have vaccine coverage.
 - Many interviewees thought financial incentives alone would not guarantee universal coverage
 - A federal purchasing program has the greatest potential to improve vaccination rates but has operational challenges
 - Most interviewees preferred making recommended vaccines a mandatory benefit

Policy Options for Expanding Coverage

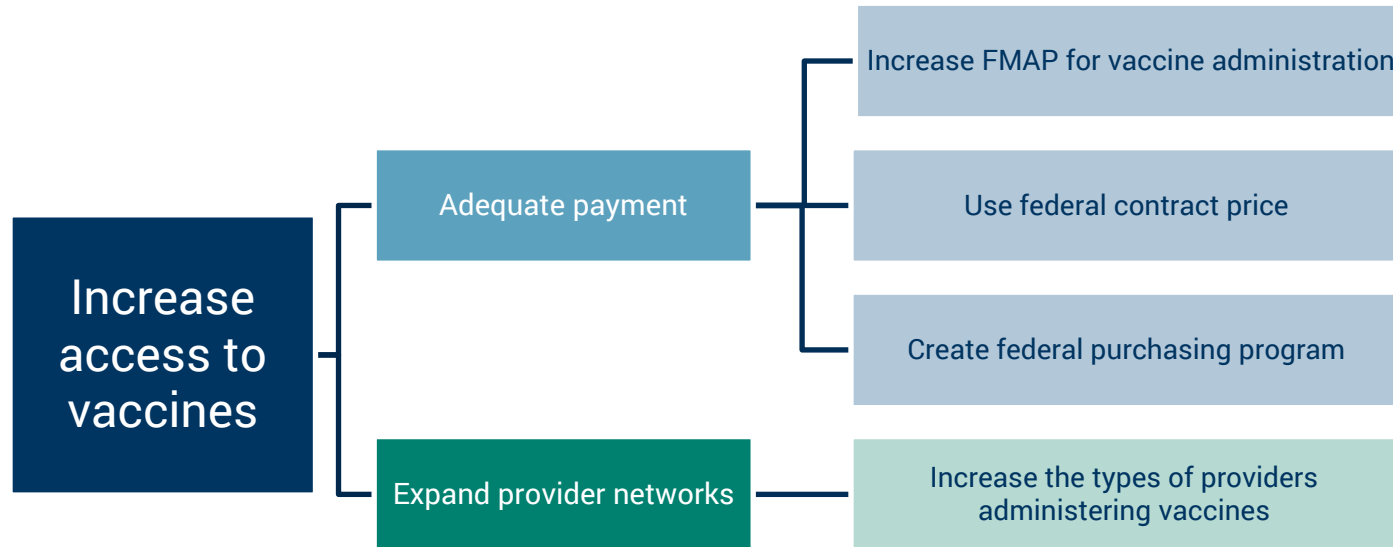


Notes: FMAP is federal medical assistance percentage. MDRP is Medicaid Drug Rebate Program.

Findings: Access

- Policies should improve vaccine access by expanding the types of providers paid to administer vaccines and ensuring that they receive adequate payment.
 - Broad support for improving provider payment by increasing the FMAP for vaccine administration
 - Some interest in using federal contract price
 - Broad support for increasing the type of providers administering vaccines

Policy Options for Ensuring Access to Vaccines

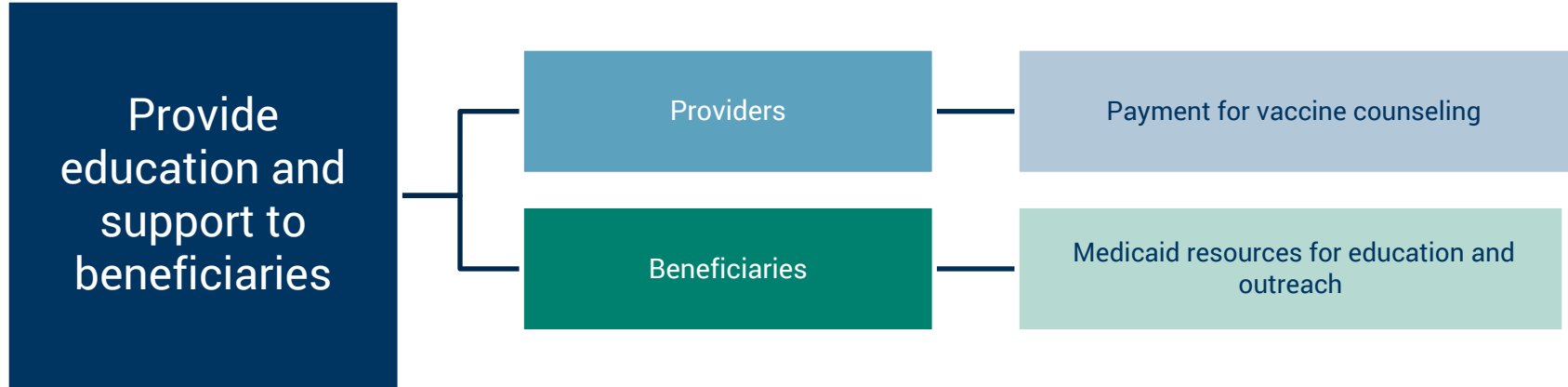


Notes: FMAP is federal medical assistance percentage. MDRP is Medicaid Drug Rebate Program.

Findings: Beneficiary Education and Support

- Beneficiaries need greater support and education to ensure that they receive recommended vaccines
 - Mixed support for vaccine counseling payment
 - General support for Medicaid resources being used for education and outreach efforts

Policy Options to Cover Vaccine Education and Support



Policy Options Assessment

Policy Options Assessment

Policy option	Improve vaccination rates	State spending	Federal spending	Operational complexity	Reduce racial disparities
Mandatory coverage of vaccines	Medium	Increase	Increase	Low	Medium
Coverage of vaccines through the Medicaid Drug Rebate Program	Medium	Medium decrease ¹	Medium decrease ¹	Medium	Medium
Additional federal funding for vaccines	Low	Decrease ²	Increase ²	Low-medium	Low-medium
Federal purchasing program	High	High decrease	High increase	High	High
Federal contract price	Low	Low decrease	Low decrease	Medium	Low

Notes:

¹ The MDRP rebates would decrease the acquisition cost of the vaccine, but overall spending on vaccines could increase if utilization also increases.

² The amount of decrease in state spending and increase in federal spending depends on the amount of additional federal funding and to what extent utilization increases.

Other Considerations

- Vaccine inclusion
- Cost-sharing requirements
- Immunization information systems

Next Steps

- Policy options for December meeting
- Claims analysis



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