Improving Access to and Financing of Vaccines Across the Lifespan

National Vaccine Advisory Committee

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SESSION OVERVIEW - 1

I. Overview:

3rd Immunization Congress: Financing Vaccines Across the Lifespan

– February 2016 NVAC
– Context:

NVAC: 2009 Financing Recommendations

“Assuring Vaccination of Children and Adolescents without Financial Barriers”

NVAC: 2011 Adult Immunization

“A Pathway to Leadership for Adult Immunization”

National Adult Immunization Plan 2016
WHAT DO WE MEAN BY FINANCING BARRIERS? TO WHOM?

MANAGING THE BUSINESS OF VACCINATION: PROVIDERS

Purchase of vaccines → Manage inventory and associated supplies → Payment for vaccine and vaccination services

Vaccination event
THE AFFORDABLE CARE ACT HAS HAD A MEASURABLE IMPACT ON IMPROVING ACCESS TO HEALTH COVERAGE FOR MILLIONS OF AMERICANS

- 5.7 million young adults
- 9.4 million seniors with Medicare
- 16.4 million previously uninsured Americans now have health insurance
- 105 million Americans have had lifetime limits removed from their insurance
- 137 million Americans have private health insurance that provides preventive services without cost sharing
ACA GREATLY REDUCED FINANCIAL BARRIERS TO IMMUNIZATION FOR MILLIONS; GAPS REMAIN

**Increased access:**
- Medicaid expansion
- Private insurance coverage on the marketplace
- FDC: routine vaccinations without cost-sharing for in-network providers; the ACA greatly reduced financial barriers to immunizations for millions.

~20 million adults have gained health insurance as a result of the ACA (2013-2016)

**Some gaps remain:** certain groups of adults are *not* directly impacted by ACA provisions and thus do not have access to all ACIP-recommended vaccines without cost-sharing.
- Lack insurance (e.g., uninsured non-U.S. citizens, low-income individuals in states that have not expanded Medicaid)
- Insurance coverage that is not subject to ACA requirements (e.g., traditional Medicaid enrollees, Medicare beneficiaries with and without Medicare Part D benefits).
II. Panel Discussion – Views from providers and payors

- AAFP
- AAP
- ACP
- ACOG
- AHIP

“to better understand (perceived) barriers and challenges to vaccination from a financial perspective”

toward
“identifying key remaining financial barriers to access for routinely recommended vaccines for children and adults and areas that should be addressed to eliminate those financial barriers, including those that patients and providers face”
CONGRESS DAY 2 – SELECT HIGHLIGHTS

• Coding challenge: Establishing and enforcing a national coding standard is important particularly as payers move toward the use of value-based payment systems

• Cost of vaccinating adults: Financial feasibility of providing vaccines under value-based payment models

• Cost of vaccinating adults: “In the past 12 months, have you stopped giving vaccines…”

• Panel: AAP, ACOG, AAFP, ACP
  – Providers should not lose money to provide IZ services
  – Professional societies can help with better understanding of barriers
  – Providers can take steps to pay less than list price
  – Successful peer leaders can engage with other physicians to demonstrate best practices
THANK YOU & MORE INFORMATION

• Visit our NVPO webpage for more information or to download the National Vaccine Plan or the National Adult Immunization Plan:
  http://www.hhs.gov/nvpo/index.html

• Refresh your memory on the NVAC work which led to the 2009 Financing Recommendations “Assuring Vaccination of Children and Adolescents without Financial Barriers”:
  Pediatrics Dec 2009 “Reducing Financing Barriers to Vaccination in the United States: Call to Action”
  http://pediatrics.aappublications.org/content/124/Supplement_5