Challenges and Opportunities to Changing the Adult Vaccination Landscape

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Immunization Adult Coverage Markets, Post-ACA

1. Medicaid
   - Traditional
   - Alternative Health Benefit Plans
2. Medicare
3. Large Employer-Sponsored Self-Insured Health Plans
   - Non-Grandfathered
   - Grandfathered
4. Qualified Health Plans Sold in Health Insurance Marketplaces
   - Individual
   - SHOP
5. Non-Exchange Individual and Group Markets
   - Individual
   - Small Groups
   - Large Groups
   - Grandfathered insured plans
6. The Uninsured
The ACA Immunization Coverage Standard

- ACA sets an immunization coverage standard, consisting of ACIP recommended immunizations without cost-sharing (PPACA section 1001)

- This coverage standard extends to most but not all post-ACA coverage markets
  - Applies to all individual and group (regardless of size) fully insured health plans (PPACA section 1001)
  - Applies to self-insured ERISA plans (PPACA section 1563) and to self-insured public plans
  - Applies to essential health benefits package required of all individual and small group health plans (100 or fewer) sold in both Exchange and non-Exchange markets (PPACA section 1302)
  - Applies to all Medicaid “alternative benefit plans” (PPACA section 2001)
  - Not applicable to “traditional” Medicaid coverage
  - Not applicable to “grandfathered” health plans (PPACA section 2001)
  - Not applicable to Medicare, which is governed by separate provisions of law

- ACA does not address what happens to the uninsured
Fully Insured Group and Individual Markets

- All non-grandfathered insured health plans (including ERISA-governed plans) subject to the ACA immunization standard
  - No size limitation on fully insured group plans
  - Grandfathered fully insured plans are exempt
    - Grandfathered status lost as a result in significant changes in premiums as well as benefit and cost-sharing design (Tri-Agency rules)
  - Requirement also extends to the self-insured public plan market, which is an ERISA-exempt market
  - About 40 percent of workers with employer health plan coverage work for firms whose plans are fully insured plans (Center for Studying Health Systems Change)
Self-Insured ERISA-Governed Health Plans

- Subject to the ACA immunization standard unless grandfathered
- 60 percent of workers with coverage through an employer-sponsored plan are in self-insured plans
Insurance Markets Subject to the Full Essential Health Benefits Requirement

- **Essential health benefit requirements**
  - Incorporate the section 1001 immunization requirements
  - Extend to all health plans sold in the individual and small group markets (100 and fewer), inside and outside Exchanges
  - Apply to all qualified health plans (QHPs) sold in health insurance marketplaces (Exchanges)
    - Individual health plans – individual premium tax credits and cost sharing assistance available
    - SHOP plans
  - Grandfathered individual and small group plans exempt from essential health benefits requirements
Medicaid – Traditional Adults

- Traditional non-elderly adult beneficiaries (18 and older, ~ 20 million non-elderly people)
  - Consist of pregnant women, parents/caretakers of dependent children, low income parents, working age adults with disabilities

- Not protected by the ACA immunization coverage requirement or by its cost-sharing provisions

- ACA does include modest state incentive (1% FMAP increase) for coverage of optional preventive services.
  - But immunizations remain an optional preventive service for adults
  - Kaiser Family Foundation shows variation in state coverage of ACIP-recommended immunizations for adults, with nearly all covering Hepatitis A, Hepatitis B, Meningococcal, and Pneumococcal in 2011.
Medicaid – Newly Eligible Adults

- ~ 15 million people

- Actual numbers expected to be lower as a result of NFIB v Sebelius which permits states to opt out of new coverage group

- Entitled to “alternative benefit plan” coverage which includes the ACA’s immunization coverage standard
Medicare

- **Part B**
  - Influenza, pneumonia, hepatitis B, tetanus, rabies

- **Part D**
  - Other approved vaccines

**Medicare not subject to the ACA immunization coverage standard’s ban on cost-sharing (deductibles and coinsurance) for recommended immunizations. Deductibles and cost-sharing vary.**
The Uninsured

- Roughly 25 million following full implementation
  - Low income (<100% FPL) non-elderly adult citizens in states that opt out of the Medicaid expansion

- Individuals who lack access to affordable coverage
  - Group includes uninsured spouses and children of workers with access to affordable employer sponsored self-only coverage. Employers do not have to subsidize dependent coverage; spouses and dependents barred from premium and cost sharing assistance through health insurance marketplaces

- Individuals who receive hardship exemptions

- Individuals who experience breaks in coverage because of market transitions

- Undocumented persons
Key Issues

- Outreach to populations protected by the ACA’s coverage guarantees
- Provider outreach regarding coverage and payment
- Health plan innovations that reflect lessons from the VFC program as they relate to vaccine replacement and direct supply
- Emphasis on adult immunizations (both routine and where clinically recommended) as performance measurement
- Emphasis on provider immunization incentives in payment reform
- Emphasis on immunization in efforts to incentivize health information exchange
- Medicare and Medicaid traditional adult immunization coverage policies remain challenging
- Support for the uninsured: CDC grants, funding through other PHSA programs (e.g., health centers, Title X) and a potential focus nonprofit hospital community benefit investments required under the Internal Revenue Code as a condition of federal tax exemption