



Keeping Vaccinations Up to Date:

Vaccines save lives— including adult vaccines for flu, shingles, Tdap, and more.



Immunizations are a highly cost-effective form of preventive medicine that saves our health system money and protects the health of Americans. Over the last decade, advancements in technology, policy and infrastructure have strengthened the immunization landscape.

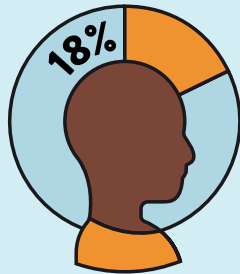
Despite the demonstrated benefits, vaccine-preventable diseases (or their complications) account for 50,000 to 90,000 adult deaths in the U.S. each year.¹ Adult immunization coverage lags behind federal targets for most commonly recommended vaccines. In fact, 75% of adults are missing one or more critical vaccines for flu, pneumococcal, shingles, and Td or Tdap.²

Adults still suffer from substantial morbidity and mortality and incur significant health care costs because of vaccine-preventable diseases. The United States spends \$26.5 billion annually treating four vaccine-preventable diseases in adults over the age of 50.³ In addition to the economic consequences, gaps in vaccinations leave older adults and persons with chronic conditions, such as heart and lung disease and diabetes, vulnerable to the devastating effects of routine as well as emerging infectious disease outbreaks.⁴

Millions of adults suffer from vaccine-preventable diseases, causing them to miss work, leaving some unable to care for those who depend on them. Adults aged 50 and over are particularly susceptible to many vaccine-preventable diseases and account for a disproportionate number of the deaths and illnesses associated with vaccine-preventable diseases. Additionally, disparities exist in vaccination status. In 2019, white adults were almost twice as likely to receive shingles vaccinations than Black and Hispanic adults.⁵



OF WHITE ADULTS RECEIVED THE VACCINE



OF BLACK ADULTS RECEIVED THE VACCINE



OF HISPANIC ADULTS RECEIVED THE VACCINE

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Sustain Support for Immunization Infrastructure and Vaccine Confidence Activities

Everyday readiness is pandemic preparedness. To be truly prepared for the next pandemic, we must have a stable and robust public health infrastructure that is resourced to continue to support immunization education, awareness response and recovery efforts at the community level. Another important lesson from the pandemic is the need for real-time data to inform response and recovery activities. Federal, state and local health officials and health care providers must have 21st century tools, technology and capabilities to plan, prepare and respond. Immunization data collection tools must be timely, accountable, transparent and consistent in meeting privacy, security, accuracy and interoperability standards.

It will be important to sustain activities building the trust that patients, their families and providers have in recommended vaccines; build trust for providers who administer vaccines; and instill confidence in the processes and policies that lead to vaccine development, licensure or authorization, manufacturing and recommendations for use.

The need for clear policies and stable long-term funding for public health infrastructure are the same, regardless of whether it is an outbreak of a routine childhood disease or a newly emerging infectious disease threat. Congress must continue to support both funding and policies to improve vaccination in terms of pandemic preparedness and response, as well as routine public health immunization activities.

Improving the Landscape for Vaccine Access

Recent federal policy changes are expected to greatly improve access to and utilization of adult vaccines. Starting January 2023, adults with Medicare Part D coverage have access to Advisory Committee on Immunization Practices (ACIP)-recommended vaccines at no cost, including Shingles, Tetanus-Diphtheria-Whooping Cough and future vaccines. Medicaid-enrolled adults will have access to ACIP-recommended vaccines at no cost starting October 2023, greatly expanding vaccine access for millions of low-income adults.

With expanded Medicare and Medicaid vaccine coverage, additional challenges to access for these patients must also be addressed. Providers across the health care system continue to face burdens when it comes to purchasing, storing, administering and billing for vaccines under Medicare and Medicaid. Insufficient vaccine data and limited availability of immunization providers in rural and underserved areas hinders efforts to improve vaccine access.



37 MILLION routine adolescent and adult vaccine doses were missed from January 2020 to July 2021⁶ as a result of the COVID-19 pandemic.

Implement Standards for Adult Immunization Practice

Policies must encourage providers to not only offer immunizations, but also to work consistently to raise awareness and make a strong recommendation to patients who are eligible and would clearly benefit from this important preventive service. Incentives should be available to support widespread health care provider adoption and implementation of the National Vaccine Advisory Committee (NVAC) Standards for Adult Immunization Practice:

- ◆ Assess the vaccination status of patients at all clinical encounters, even among clinicians and other providers who do not stock vaccines.
- ◆ Utilize a jurisdiction's existing 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 administered, including in the jurisdiction's IIS.

Support Vaccine Providers

It is also important to consider the need to adequately reimburse providers who offer and administer vaccines in a variety of health care settings. Inadequate and delayed reimbursement for vaccine services are strong disincentives for providers, particularly those who serve vulnerable patients who are low income, live in rural and underserved areas or suffer from multiple chronic conditions. Considering the significant potential impact on access to vaccine services, Congress should support legislative and regulatory changes that encourage a permanent, reliable and adequate reimbursement methodology for the provider costs associated with vaccine administration.

About AVAC

The Adult Vaccine Access Coalition (AVAC) is a diverse group of health care providers, vaccine innovators, pharmacies, public health organizations, patient and consumer groups. AVAC's mission is to raise awareness, improve access and increase utilization of vaccines among adults. Near universal access to immunizations for children has been one of the greatest public health accomplishments of the 20th century. AVAC seeks to achieve the same level of success for adult immunization.

Endnotes

- 1 <http://www.mayoclinicproceedings.org/article/S0025-6196%2811%2964406-6/fulltext>
- 2 <http://dx.doi.org/10.15585/mmwr.ss7003a1>.
- 3 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4486398/>
- 4 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4959618/>
- 5 [MMWR 2021;70:901. https://www.cdc.gov/mmwr/volumes/70/wr/mm7024a5.htm](https://www.cdc.gov/mmwr/volumes/70/wr/mm7024a5.htm)
- 6 <https://avalere.com/insights/declines-in-routine-adult-and-teen-vaccinations-continued-in-2021>

3 **OUT OF** **4**

adults are missing one or more of four critical vaccines for flu, pneumococcal, shingles, and Td or Tdap.

