



PROGRAM PRACTICES  
SUBMISSION FORM

IMMUNIZATION PROGRAM PRACTICES INFORMATION

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**Program:** *(as you want it to appear publicly)* Vermont Immunization Program

**Does AIM have permission to share this information on the publicly accessible AIM website?** *All materials submitted will be posted on the AIM website.* \_X\_Yes \_\_No

BULL’S-EYE AWARD

The **Bulls-Eye Award for Innovation and Excellence in Immunization** recognizes immunization strategies that “hit their mark” and achieve immunization goals with special consideration for practices that are innovative and easily replicated. Each year, AIM awards three programs the Bull’s-Eye Award. Only those practices with activities that are **currently ongoing** or **concluded during 2016** (including implementation, follow-up, and/or evaluation activities) will be considered for the award.

**Would you like for this submission to be considered for the 2017 AIM Bull’s- Eye Award?** \_x\_Yes \_\_No

PROGRAM PRACTICE INFORMATION

**Title**  
The Vermont Vaccine for Adults (VFA) Program

**Keywords** (up to 5 main terms/phrases that describe the practice)  
Adult, health insurer funding

**Is this practice Evidence / Guideline Based?** *(if yes, please include reference below)* \_X\_Yes \_\_No

**Reference:** [http://www.thecommunityguide.org/vaccines/clientoutofpocketcosts\\_archive.html](http://www.thecommunityguide.org/vaccines/clientoutofpocketcosts_archive.html)

**Background** (scope of the immunization need or problem)

Adult vaccination rates in Vermont and across the U.S. are significantly lower than the rates for children and teens. The VFC program has effectively increased immunization rates in those 0-18 years by making immunizations available at no cost to primary care providers and public health departments. Through the use of state-supplied or health insurer funding some states have created a “universal vaccine program” – making all recommended vaccines for those 0-18 years available to providers at no cost. This reduced overall health care costs and direct costs to primary care providers, as they no longer need to maintain two stocks of vaccines and don’t have to purchase vaccines.

The effectiveness of adult immunizations in reducing morbidity and mortality from vaccine preventable diseases has been clearly demonstrated. In recent years, the Advisory Committee on Immunization Practices has made new recommendations for adult vaccines. But, the rates of immunization are very low due to a variety of factors, including out-of-pocket costs.

### **Program Practice Description**

*Goal: Increase Vermont's adult immunization rates.*

*Objectives:*

- 1) *Create a universal vaccine program modeled after the VFC program.*
- 2) *Use a pilot program to identify an equitable and fair way to assess insurers for vaccine costs.*
- 3) *Ensure sustainability through a legislative mandate for health insurer funding.*

*What were the main implementation activities?*

1. *Create an advisory committee with representation from the three largest insurers to determine how vaccine costs would be assessed.*
2. *Contract with KidsVax for collection of funds from insurers and guidance on how to set annual per member per month rates.*
3. *Conduct outreach with primary care and OB/GYN providers to encourage participation in the program. Share data on current adult immunization rates.*

*Where and when did the practice take place?*

The Pilot began in 2011. It became a formal program in 2014 with the passage of legislation.

*How much staff time was involved?*

Planning to determine the annual rates per member per month adult rates, ordering vaccine, working with consultants – 80 hours/annually

Re/enrollment, outreach – 100 hours /annually

Site visits to VFA only practices – 120 hours/annually

*What were the costs associated with the activity? What was the funding source?*

Initially, the state funded the purchase of adult vaccines and associated administrative costs.

Currently, insurer assessments fund all costs except for the 317 funds used for uninsured adults. Medicaid pays into the assessment system, as all other insurers.

*Identify the target population that the practice affected.*

Adults 19-64 years

*If partners were involved, include who was involved, and how.*

The Vermont AAP and AAFP, the states three largest commercial insurers and Medicaid.

### **Timeframe of Implementation (Start and Stop Dates)**

2011 - Ongoing

**Evaluation Data: Was the implementation and/or effectiveness of this practice assessed? (if "yes" or "limited," provide any data that is available)**

X Yes    \_\_No    \_\_Limited

**Data:** We contracted out for a 3-part evaluation of the Pilot. BRFSS data is used to assess Tdap and Zoster rates. The percentage of Vermont adults 60 years and older who have ever received zoster vaccine has increased from 16 % in 2009 to 47% in 2014 (BRFSS).

**Conclusions / Lessons Learned / Key Factors for Success**

1. Making adult vaccines available to primary care providers, can increase immunization rates.
2. It is essential to have a clear method for insurers to provide current covered lives data.
3. A statutory mandate for insurer assessments ensures participation by all.
4. Involving the largest insurers and providers in the planning helps gain their support and trust.
5. You can't provide vaccines for a population that isn't supported by the primary insurer (Medicare).
6. All recommended vaccines should be included, from the beginning. (We didn't include flu and it may have limited interest/participation)

**Check if any of the following are being submitted to complement your submission:**

*(All materials will be posted on the AIM website)*

- |   |  |
|---|--|
| <input type="checkbox"/> Testimonials                   | <input type="checkbox"/> Project photo(s)  |
| <input type="checkbox"/> Quote from partner/participant | <input type="checkbox"/> Publication (e.g., news story, journal article)                           |
| <input type="checkbox"/> Sample of materials produced   | <input type="checkbox"/> Video/audio clip  |
| <input type="checkbox"/> Press release                  | <input checked="" type="checkbox"/> Website URL  |
| <input type="checkbox"/> Promotional materials          | <input type="checkbox"/> Tables or graphs  |
|   | <input type="checkbox"/> Other — Explain: <a href="http://www.VTvaccine.org">www.VTvaccine.org</a> |

**\*\*Email the completed form to Mary Waterman ([mwaterman@immunizationmanagers.org](mailto:mwaterman@immunizationmanagers.org)) with the subject line "Program Practices Submission."**