

# Adult Immunizations: A Map Towards the Future

## 2023 AIM Leadership in Action Conference


Wednesday, December 6, 2023



Association of  
Immunization  
Managers

# Recent Policy Changes to Advance Access

Abby Bownas, AVAC Manager

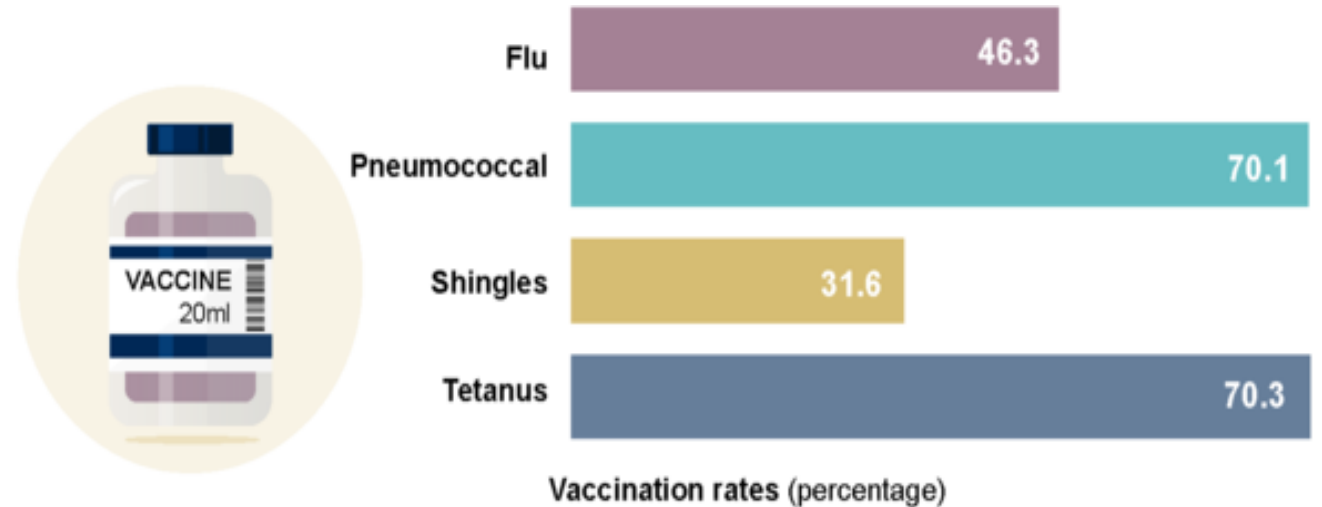


**AVAC is fighting to make necessary policy changes to increase vaccination rates — saving lives and money.**

# Adult Vaccine Access Coalition (AVAC)

- Established in 2015 to strengthen and enhance access to and increase utilization of vaccines among adults.
- AVAC is made up of a diverse group of health care providers, vaccine innovators, public health organizations, patient and consumer groups.

## Estimated Adult Vaccination Rates for Four Vaccines, 2020



Source: GAO analysis of Behavioral Risk Factor Surveillance System data. | GAO-22-105334

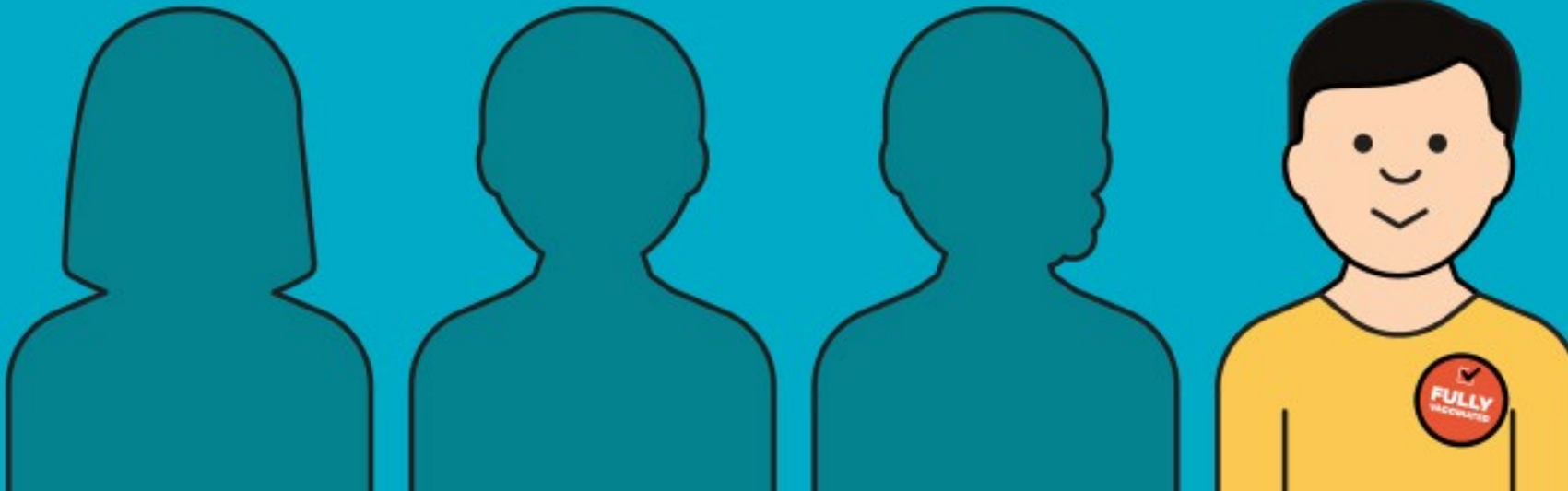
**AVAC is fighting to make necessary policy changes to increase vaccination rates — saving lives and money.**

# The Adult Vaccine Challenge

3 OUT OF 4

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

<http://dx.doi.org/10.15585/mmwr.ss7003a1>







healthywomen



VACCINATE YOUR FAMILY



WOMENHEART  
THE NATIONAL COALITION FOR WOMEN WITH HEART DISEASE



American Heart Association



HEALTHY MOMS. STRONG BABIES.



National Association of School Nurses

American College of Preventive Medicine



Association of Immunization Managers



FAMILIES FIGHTING FLU, INC.



THE AIDS INSTITUTE



[www.adultvaccinesnow.org/our-membership/](http://www.adultvaccinesnow.org/our-membership/)

# Barriers to Adult Immunizations

<b>Financial</b>	Inability for individuals to pay due to co-pays / gaps in coverage
<b>Hesitancy</b>	Regarding vaccine safety and effectiveness among patients
<b>Provider</b>	Financial barriers for health care providers to stock and administer vaccines
<b>Lack of awareness</b>	Regarding recommended vaccines and the risk/consequences of vaccine-preventable diseases
<b>Coordination</b>	Lack of coordination among health care providers – many adults see multiple providers – and across the health care system
<b>Legal/Policy</b>	Systematic at the federal and state levels restricting which providers can immunize
<b>Missed Opportunities</b>	For immunization assessment, counseling and recommendations by health care providers
<b>Infrastructure</b>	Lack of or underuse of immunization data systems that document vaccination histories

# Policy Goals to Improve Adult Vaccination Rates

1. Strengthening Vaccine Infrastructure
2. Creating Equity in Vaccine Access
3. Promoting High Immunization Rates
4. Eliminating Financial Barriers

Vaccine-Preventable Diseases Cost the U.S. Billions Each Year

Source: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4486398/>

The U.S. spends about \$26.5 billion annually treating four major vaccine-preventable diseases among US adults ( $\geq 50$  years).



# Vaccine Coverage Landscape

Insurance Type	Age	What Vaccines are Covered?	Zero Out of Pocket Cost for Patients
Private Insurance	0-64 years old	All ACIP-recommended vaccines	✓
Medicare Part B	65+	Influenza, Pneumonia, Hepatitis B and Covid-19 vaccines	✓
Medicare Part D	65+	All other ACIP-recommended vaccines	✓
Medicaid VFC	0-18 years old	All ACIP-recommended vaccines through the federal Vaccines for Children Program (VFC)	✓
Medicaid Adults	19-64 years old	All other ACIP-recommended vaccines (begins Oct 2023)	✓
Uninsured	0-18 years old	All ACIP-recommended vaccines through the federal Vaccines for Children Program (VFC)	✓
Uninsured Adults	19 – 64 years old	Covid 19, limited other vaccine through Immunization Programs	



# Private Sector: Insurance Coverage of Vaccines

- The Affordable Care Act or “ACA” was the comprehensive health care reform law enacted in March 2010
  - Makes affordable health insurance available to more people.
  - Expands the Medicaid program to cover all adults with income below 138% of the FPL. Not all states have expanded their Medicaid programs. **ACIP-recommended vaccines were included in the Expansion populations**
- As part of the ACA (Sec. 2713), most\* private health plans must provide coverage for a range of recommended preventive services to individuals without cost-sharing (such as copayments, deductibles, or co-insurance). **All ACIP-recommended vaccines are covered under this section**

*\*A few “grandfathered” plans are still in the marketplace*

# Medicare & Medicaid

## Recent Changes Expand Vaccination Coverage

### IRA Sec 11401

Eliminates copays/out of pocket expenses for ACIP-recommended vaccines under Medicare Part D

### IRA Sec 11405

Requires coverage for ACIP recommended adult vaccines in traditional Medicaid and CHIP programs.

## Cost Sharing and Vaccines



With the new Inflation Reduction Law, now Medicare Part D beneficiaries won't face high out-of-pocket costs for their vaccines.



MARKET	VACCINES	OUT-OF-POCKET
Commercial	All CDC-Recommended	<del>\$0</del>
Medicaid Expansion	All CDC-Recommended	<del>\$0</del>
Traditional Medicaid	Determined by state	<del>\$ 50 - \$3.40</del>
Medicare Part B	Pneumococcal, influenza, hepatitis B	<del>\$0</del>
Medicare Part D	All other CDC recommended vaccines, shingles, Tdap, future vaccines	<del>\$0 - \$160</del>

Source: Alexandra Stewart, <https://doi.org/10.1016/j.vaccine.2013.11.050>  
Mannett, <https://www.manett.com/Insights/White-Papers/2018/Medicare-Part-D-Cost-Sharing-Trends-for-Adult-Vacc>

# Medicare

## Previously:

- Medicare Part B
  - Covered certain vaccines at no cost:
    - Influenza, Pneumonia and Hepatitis B vaccines
    - Covid-19 added during Pandemic
- Medicare Part D
  - All other vaccines had cost sharing

## Now:

- **January 1, 2023**
- Adult vaccines recommended by the CDC/ACIP are now available to people with Medicare Prescription Drug Coverage (Part D) at no cost (\$0)
- Includes: Shingles, Tetanus-Diphtheria-Whooping Cough, RSV, future vaccines

# NEW Health Care Savings for Older Adults

**AVAC**  
ADULT VACCINE  
ACCESS COALITION

@AVACNow

In 2021, 3.4 million older adults paid **\$234 million** in out-of-pocket costs for vaccines. Thanks to Congressional action, Medicare Part D enrollees can now get those vaccines for **free**.



2021



2023  
and beyond

Source: <https://aspe.hhs.gov/topics/aging-disability/healthy-aging>

# Medicaid

## Previously:

- Vaccine coverage (and cost sharing) differed based on state

## Now:

- **October 1, 2023**
- Adult vaccines recommended by the CDC/ACIP are now available at no cost (\$0) across all Medicaid programs and populations.
- Similar to commercial insurance market.

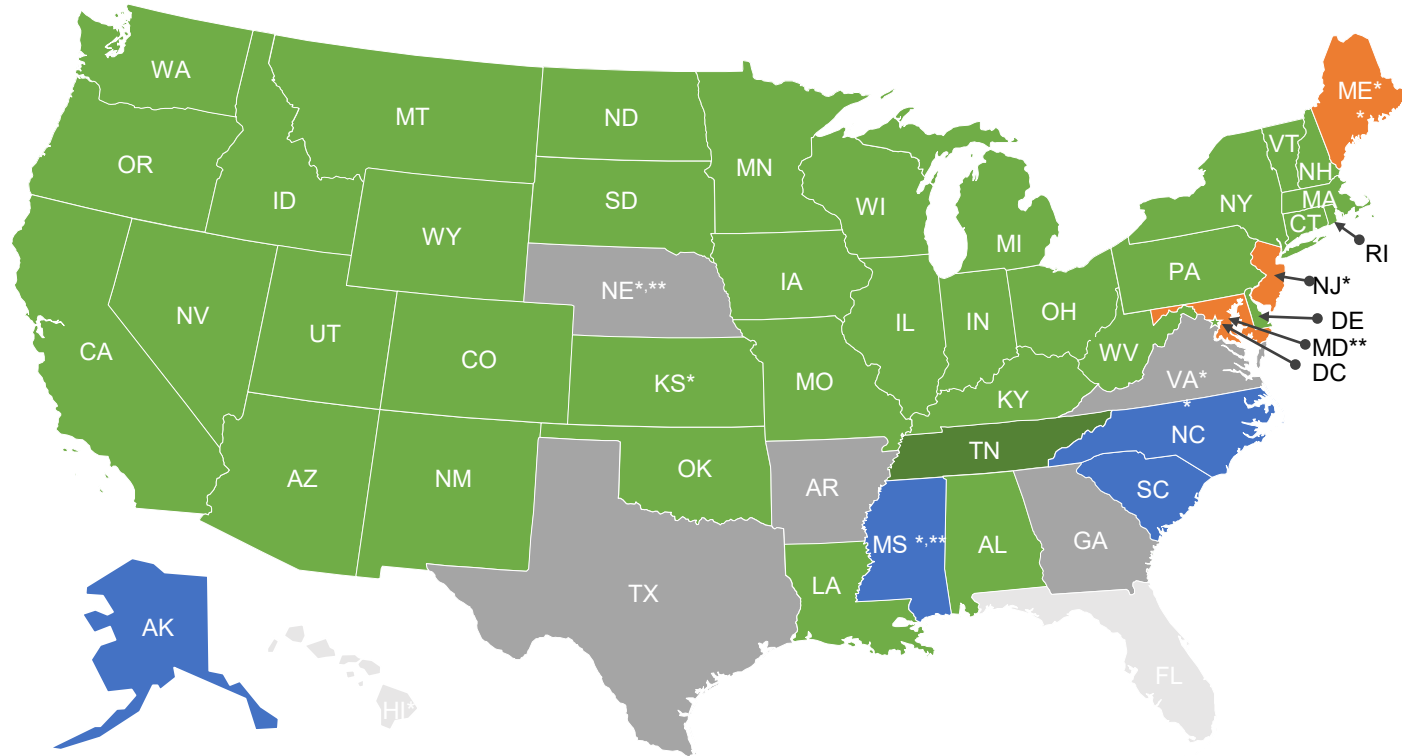


- **ACIP.** Makes recommendation to follow ACIP recommended vaccines.
- **FMAP.** States that currently provide Medicaid coverage for immunization without cost sharing, receive a one percentage point increase in their FMAP for their Medicaid expenditures for these services.
- **Providers.** Encourages broad array of providers
- **Payment.** Encourages states to consider setting payment rates at actual acquisition cost and adequate professional fee for admin to incentivize access/availability.
- **State Plan Amendments.** Details that states must submit SPA by October 1.



# Vaccine Coverage & Cost Sharing Pre-IRA

States with Medicaid FFS Programs that Do Not Cover One or More Assessed Vaccines for All ACIP-Recommended Populations, 2021



**In 2021: 11 Fee for Service States & 6 Medicaid Managed Care do NOT cover one or more ACIP recommended vaccines.**

Avalere Insights Report  
Adult Vaccine Coverage in Medicaid

<https://avalere.com/wp-content/uploads/2022/12/Medicaid-and-IRA-White-Paper.pdf>

● All Assessed Vaccines Covered for All ACIP Recommended Populations (35 States)

● 3+ Assessed Vaccines Not Covered (2 States)

● Unable to Determine All Assessed Vaccines (3 States)

● 1 Assessed Vaccine Not Covered (4 States)

● 2 Assessed Vaccines Not Covered (5 States)

● State Does Not Have FFS (1 State)

\*FFS programs contain less than 2% of state Medicaid beneficiaries; most Medicaid beneficiaries in these states are enrolled in a MMC plan.

\*\*Avalere was unable to determine if a coverage policy aligned with ACIP recommendation for one or more assessed vaccines

# Medicaid Implementation Progress

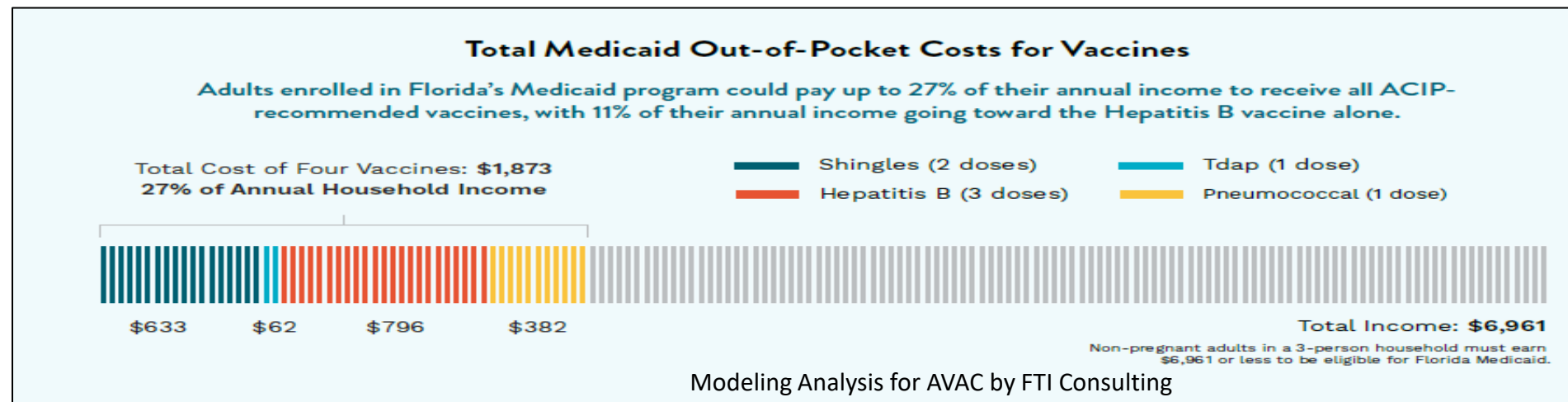
## Previously:

- **16 States** that did not cover 1 or more vaccines (as of 2021): AK, AR\*, DC, FL, GA, HI, MD, ME, MS, NE, NJ, NC, SC, TN, TX, VA

## Now:

- **15 states** and Puerto Rico have received CMS approval for their SPAs attesting to the coverage of all ACIP recommended vaccines: AL, CA, KS, KY, MA, MI, MO, **MS**, **NC**, NM, OK, **TN**, **VA**, WA, WI
- **11 states** have not yet submitted a SPA attest their compliance: AK, AR, FL, GA, HI, ME, MN, NE, NV, SC, and TX
- *Most remaining states have either begun covering all ACIP-recommended vaccines without cost sharing without submitting a SPA to CMS or are actively pursuing a SPA.*

Closing the gaps in vaccination coverage makes financial sense



# Looking Ahead: Vaccines for Uninsured Adults

- The President's FY2024 Budget Proposal includes an idea for a new **Vaccines for Adults Program**
- The Proposal seeks to build off the successes of Vaccines for Children's Program and 317 Vaccines Program
- Components:
  - Vaccine Purchase
  - Provider Fees
  - Program Operations
  - Vaccine safety and distribution
- Congressional action will be needed to create this program



# Short Term: CDC Bridge Access Program for Covid-19 Vaccines

- Program provides free COVID-19 vaccines Fall 2023 through December 2024
- Seeks to cover the 25-30 million adults without vaccine coverage
- Distribution through:
  - **State and local health departments** - distribute vaccines through providers in networks
  - **Federally qualified health centers** - partner with state and local immunization programs. Health Resources & Services Administration provides the funding
  - **Retail pharmacy**

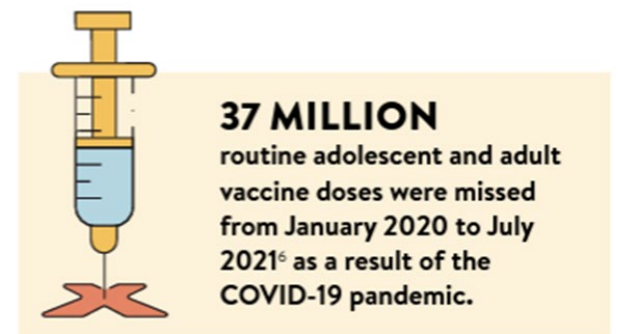
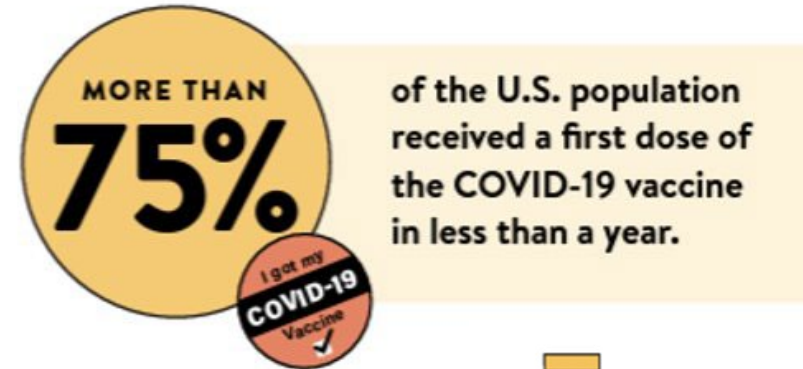
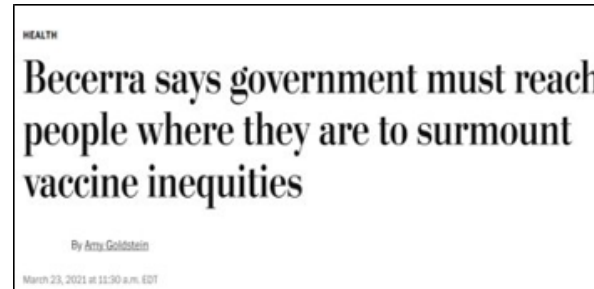


CDC Bridge Access

<https://www.cdc.gov/vaccines/programs/bridge/index.html>

# What It Will Take: Partnerships

- A variety of immunizers and community partners play an essential role in getting vaccines into arms
- Partnering with community leaders is key to addressing misinformation and helping the vaccine hesitant, which was a third of the population at the outset of the pandemic, higher for minority communities
- To catch up on missed vaccination doses and to promote upcoming vaccines (Flu, Covid-19, RSV) we will all need to work together on education and outreach





# What It Will Take: Policy

## A Map To The Future

Strengthening Vaccine Infrastructure	Eliminating Financial Barriers	Creating Equity in Immunization	Promoting High Immunization Rates
FY24 Appropriations	Medicaid IRA Implementation	Catching Up on Missed Vaccines	Enhanced Reimbursement policies for vaccinations, counseling, and administration
Pandemic Preparedness	Vaccines for Uninsured Adults	Education and Outreach	Adoption of AIS and Prenatal Status Measure
Immunization Data Interoperability			Support for FQHCs & Continuation of PREP Act Flexibilities

## Questions/Discussion

**Adult Vaccine Access Coalition**

**Abby Bownas**

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**www.adultvaccinesnow.org**



# **AIM Leadership in Action Conference:**

## **The Adult Immunization Program Framework- CDC Perspective**

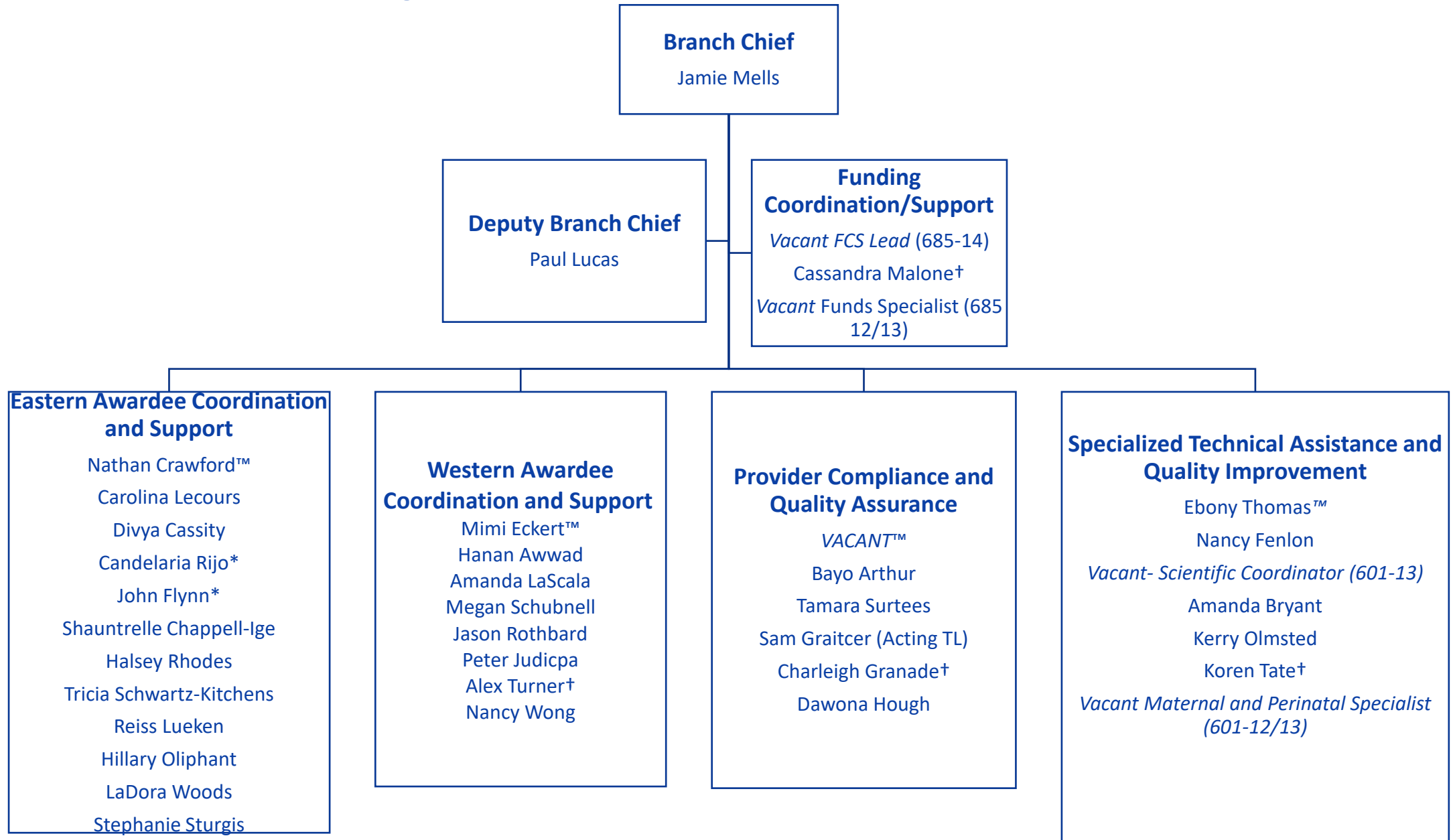
Jamie Mells, PhD, MS

Lieutenant Commander, USPHS

IOSB Branch Chief

December 2023

# Immunization Operations and Services Branch



# Limited infrastructure to support adult immunization

- Unlike, pediatric vaccination which is supported by ~30 years of Vaccines for Children (VFC) entitlement funding, no similar mandatory funds are available to support adult vaccination.
- Further, no comprehensive guidance is available for immunization program awardees with existing adult immunization programs supported using 317 funds.
  - Operational/Technical guidance to support implementation
  - Roadmap for adult immunization program planning
- **The Adult Immunization Program Framework (the Framework) was developed to support awardees:**
  - Meet community needs by setting and communicating program goals
  - Maintain adult provider networks
  - Monitor immunization data
  - Coordinate with community partners



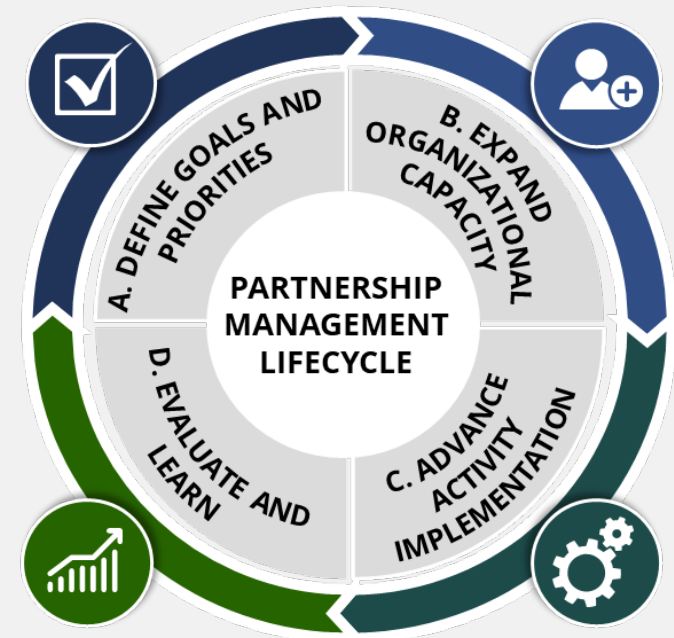
# What is the Adult Immunization Program Framework?

- **The Framework is a question-based guide intended to help immunization program managers and staff accomplish two primary tasks:**
  1. Assess the development of their adult immunization programs.
  2. Focus resources on activities that can advance their program's development and capacity.
- **At a minimum, the Framework can support annual planning purposes.**
  - Awardees may choose to use the Framework more frequently at critical junctures in their program, such as changes to leadership, priorities, and funding.
  - Completed awardee assessments can also help communicate to CDC program staff areas of technical assistance needed.
- **The Framework was inspired by similar evidence-based public health tools:**
  - [The Success Framework for Healthcare-associated infections \(HAI/AR\) Partner Networks](#)
  - [The Success Framework for Adult Immunization Partner Networks](#)

# Success Framework for Adult Immunization Partner Networks (PSF)

- Developed the Success Framework for Adult Immunization Partner Networks (Success Framework) – a **tool designed to help for awardees manage and grow partnerships** that support adult immunization goals.
- The framework **guides users through a series of key questions that are aligned to the four phases** of the partnership management lifecycle. These phases are labeled A-D:
  - **Phase A** is Defining Goals and Priorities
  - **Phase B** is Expanding Organizational Capacity
  - **Phase C** is Advanced Activity Implementation
  - **Phase D** is Evaluate and Learn.

## *Success Framework for Adult Immunization Partner Networks*

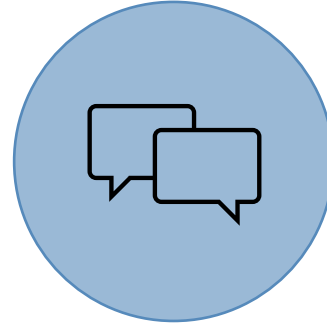


# How was the Framework developed?



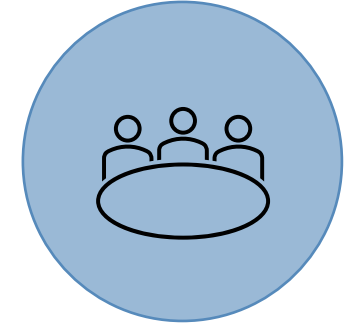
## Literature Review

- CDC VFC Operations Guide
- CDC IQIP Operations Guide
- CDC Success Framework for Adult Immunization Partner Networks
- CDC IIS Data Quality Blueprint
- HHS Vaccines National Strategic Plan (2021-2025)



## Awardee Feedback

- Adult Immunization Survey with 62 of 64 awardees responding
- Key Informant Interviews with 12 immunization programs
- Eight AIM-led Feedback Sessions with >30 awardees



## SME Input

- CDC Immunization Services Division (e.g., IOSB, IDAB, PHEB)

# Adult Immunization Program Framework

**Instructions:** The framework guides users through a series of key questions that are aligned to six domains. Read the questions in order within each domain, starting with “1. Establish Organizational Goals and Priorities,” then move clockwise to the next domain. Finally, review the recommended actions by domain on the slides that follow.

- 1A. Do you have a **defined mission statement** specific to adult immunization?
- 1B. Does your program have **defined adult immunization program goals**, objectives, performance indicators, and activities?
- 1C. Does your program **work with policymakers** to support adult immunization goals, objectives, performance indicators, and activities?

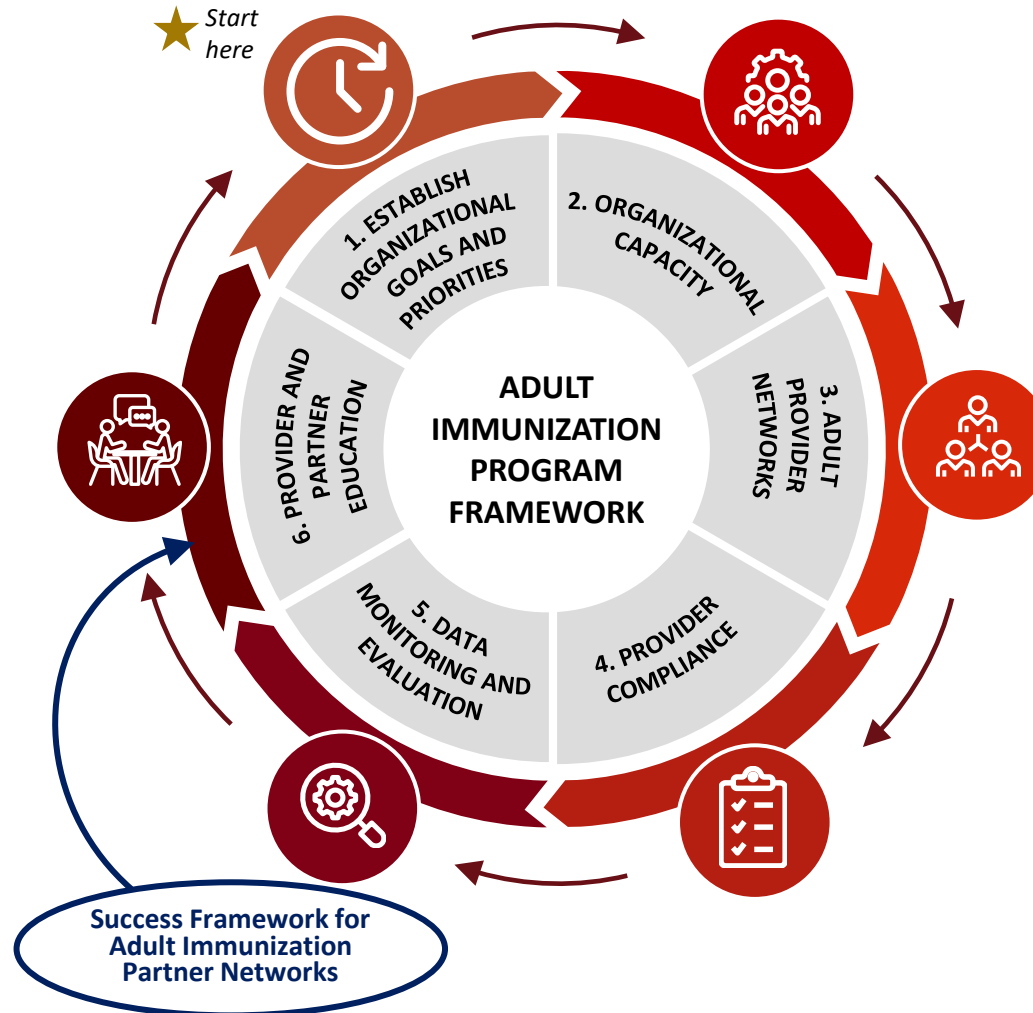
For recommended actions, see [Slide 9](#).

- 6A. Do you provide **resources or training opportunities** to adult vaccine providers?
- 6B. Do you support **training opportunities for providers** on how to use the IIS?
- 6C. Do you work with **provider organizations and coalitions** to amplify messaging to adults about the importance of vaccination and how to access vaccines?

For recommended actions, see [Slide 18](#).

- 5A. Do you have processes in place to **strengthen adult vaccine provider onboarding** to the IIS?
- 5B. Do you have a plan to **increase provider reporting** of adult vaccines to the IIS?
- 5C. Do you have an **IIS data quality plan** specific to adult populations?
- 5D. Do you have **systems to monitor the overall adult vaccine program** including adult vaccine providers?

For recommended actions, see [Slide 16](#).



- 2A. Do you have an **organizational structure** to support an adult immunization program?
- 2B. Do you provide **internal capacity-building opportunities** for adult immunization program staff?
- 2C. Do you **leverage and diversify Federal, State/Local, and/or other funds** to support adult immunization work?

For recommended actions, see [Slide 10](#).

- 3A. Has your program **enumerated the number of adult providers and adult patients** in your jurisdiction?
- 3B. Do you have **formal agreements and/or provider enrollment forms** with adult vaccine providers?
- 3C. Do you have systems in place for adult providers to **order adult vaccines, report inventory, and track returns/wastage** as part of the adult program?

For recommended actions, see [Slide 12](#).

- 4A. Do you **conduct enrollment site visits** with adult vaccine providers?
- 4B. Do you **conduct compliance site visits** with adult vaccine providers?
- 4C. Do you **monitor the storage and handling** of adult vaccines?
- 4D. Do you implement **quality improvement initiatives** for your adult vaccine providers?

For recommended actions, see [Slide 14](#).

# How many levels of maturity are assessed?

1

## Level 1

- Ground level
- Planning
- This is a level where you define, compile, and share information

2

## Level 2

- Ad Hoc level
- Early implementation
- A level that requires assessing, exploring and development

3

## Level 3

- Operational level
- Growing
- Typically where implementation is recommended

4

## Level 4

- Organizational level
- Maintaining
- Expansion, evaluation and further development

# Putting it all together...

1.

Each of the 6 domains is defined by a set of related key questions

2.

Levels reflect progressive stages of development within each domain

## [Domain] 1. Establish Organizational Goals and Priorities

Key Questions	Level 1 Recommended Actions	Level 2 Recommended Actions	Level 3 Recommended Actions	Level 4 Recommended Actions
<b>A. Do you have a defined mission statement to guide adult immunization program goals, objectives, performance indicators, and activities?</b>	<input type="checkbox"/> Review the existing mission statement for adult immunization work and update it as needed. <input type="checkbox"/> Commit Immunization Program leadership to prioritize adult immunization efforts.	<input type="checkbox"/> Publicly share the mission statement with internal and external stakeholders to align strategic planning.	<input type="checkbox"/> Exercise mission statement to inform long-term adult immunization program strategic planning and development.	<input type="checkbox"/> Integrate population, vaccine type, and region-specific mission statements with the overall mission. <input type="checkbox"/> Routinely assess and update the mission statement to reflect changes in the adult immunization program.

3.

Each level includes recommended actions to advance to the next level



# Complementary framework materials

- To support immunization programs in using the Framework to establish or enhance their adult immunization activities, optional materials\* will also be developed:
  1. **Framework Checklist** - provides a way to assess, document, and track what domains/recommended actions within the Framework would be of most benefit to apply to your jurisdiction.
  2. **Framework Assessment Workspace (pilot work plan)**– an Excel-based resource that can be used to review recommended actions, plan for next steps, and track implementation for each phase of the Framework.

# Piloting the Framework with awardees

<p>Unfunded but with potential for FIA funds in mid-2024</p>	<p>Sample of ten (10) immunization program awardees</p>	<ul style="list-style-type: none"><li>▪ <b>Consultative sessions and targeted workshops</b> facilitated by staff from across the Immunization Services Division <b>focused on implementation and goal setting.</b></li><li>▪ <b>Communities of Practice and peer-to-peer sessions</b> to provide an avenue for information sharing between awardees, including discussion of successes and challenges.</li><li>▪ <b>Analysis and evaluation of data capturing on the use of the Framework and the quality of technical assistance.</b><ul style="list-style-type: none"><li>– Participants will also engage in a close-out meeting to discuss <b>progress to date and integration of Framework activities into the next iteration of the IPOM.</b></li></ul></li></ul>
<p>Minimum of six (6) months timeline for implementation</p>	<p>Opportunity for cross-division coordination</p>	

# What are the anticipated outcomes of piloting the Framework?

1. Assessment of the real-world application of the Framework.
2. Identification of opportunities for integrating the Framework into the Immunization Program Operations Manual (IPOM).
3. Development of technical assistance opportunities for the 64 CDC-funded immunization program awardees.

**Piloting the Framework could support efforts to define standards for a comprehensive adult immunization program.**



Support the development of operational guidance (e.g., 317 Ops guide)

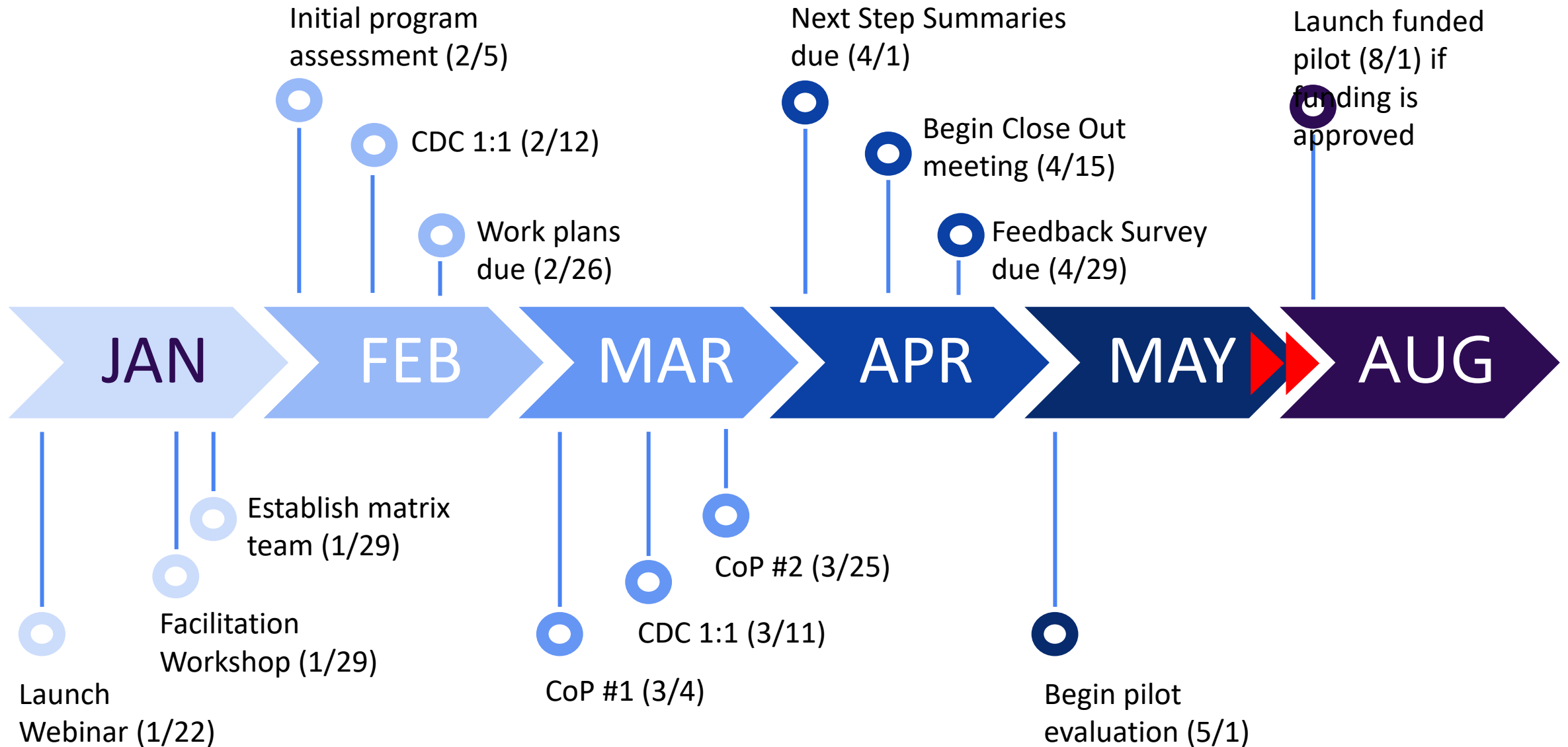


Serve as a template to assess program maturity across immunization program awardees



Enhance programmatic support provided to awardees

# Proposed pilot timeline



# Next steps

- **Disseminate an informal survey among immunization program awardees to quantify interest and ability to participate in CDC-led pilot of the Framework.**
- **Establish a matrix team/work group to support cross-division coordination and support for implementing the Framework pilot, including representation from:**
  - PHEB
  - IDAB
  - ARISE
  - HECB
- **Finalize supporting pilot materials (e.g., slides, discussion guides, survey).**
- **Track approval of Fund if Available (FIA) proposal.**
  - Draft and submit necessary funding package documents (i.e., CIO Project Plan, NOFO language, etc.) if the FIA proposal is approved.

# Questions?

For more information, contact CDC  
1-800-CDC-INFO (232-4636)  
TTY: 1-888-232-6348 [www.cdc.gov](http://www.cdc.gov)

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# AIM's Member Assistance Program (MAP): Advancing Adult Immunization Programs 2023 AIM Leadership in Action Conference

Diadra Biles, DPM, MPH, CPH  
MAP Associate Director



Association of  
Immunization  
Managers

# Member Assistance Program (MAP) Objectives

1. Improve vaccine confidence
2. Increase uptake of routine adult immunizations
3. Advance vaccine equity
4. Support awardee implementation of adult programmatic activities



# 2022-2023 MAP Highlights

3 Shared Learning Webinars

3 DAAP Spotlight Webinars

2 new resources for the Adult Immunization Business Operations Toolkit

2 new resources for the Health Equity Toolkit

11 Feedback Sessions

6 Affinity Group meetings

3 Action Group meetings with 3 optional office hours

Annual Needs Assessment





# DAAP Spotlight Series

*A series of webinars focused on successful immunization outreach strategies for disproportionately affected adult populations (DAAPs)*

[Webinar 1: Conducting Vaccine Outreach to People Who Are Homebound](#)



[Webinar 2: Conducting Immunization Outreach to People Who Are Refugees, Immigrants, and Migrants](#)



[Webinar 3: Conducting Immunization Outreach to People who are Unhoused](#)



# Affinity Groups

*A forum for a small group of people (5-10) with mutual interests to share challenges and promising practices on a given topic*

## Series 1: Capacity Building for Adult Immunization Programs

1. [Staff Onboarding and Retention](#)
2. [Using CQI to Achieve Program Goals](#)
3. [Building Sustainable Processes in a Constantly Changing Environment](#)

## Series 2: National Immunization Programs and Resources

1. [Adult Programs' Experiences Using CDC's Success Framework](#)
2. [P4VE Presents Key Equity Resources for Adult Immunization Programs](#)
3. [Immunize.org Presents Key Resources for Adult Immunization Programs](#)

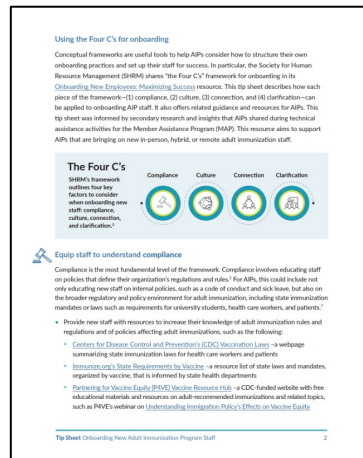




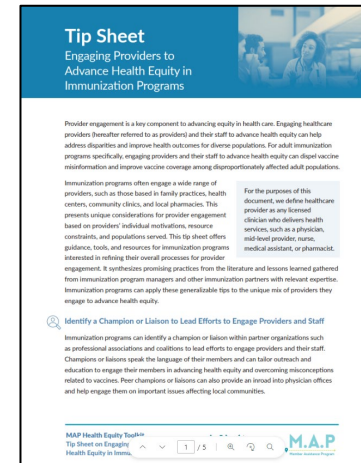
# Toolkits

Resources program managers can use to address programmatic challenges, consolidated in toolkits for easy reference.

## New resources developed, 2022-2023



1. [Onboarding New AIP Staff](#)
2. [AIP Goal Tracking Tool](#) \*



1. [Engaging Providers to Advance Health Equity](#)
2. [Health Equity Statements](#)

\* - Goal Tracker to be piloted 2023-2024



# Evaluation

*A comprehensive evaluation plan to assess MAP TA activities as they relate to immunization programs' progress toward meeting program goals*

## Annual Needs Assessment

27 Survey participants

6 Focus group participants

1 Key informant interview



Ongoing Event Monitoring: attendance data, post-event surveys, polling and chats from all MAP activities



# The State of Adult Immunization Programmatic Activity

## IPOM Current Requirements

- Work with partners (L1a)
- Conduct quality improvement activities (L1c)
- Increase adult vaccination coverage (L1c)
- Staff an adult coordinator (L1d)

## Activities In Progress

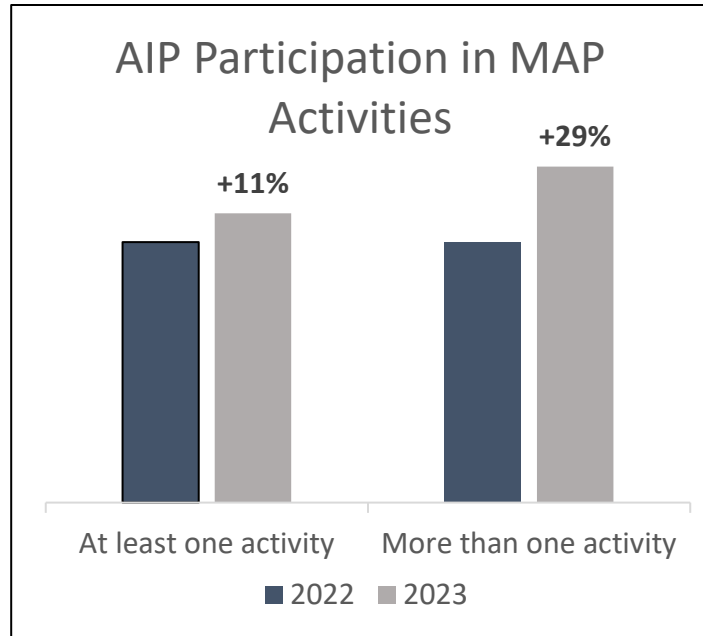
- Supported CDC in framework and guidance development for adult programs
- AIM Member Assistance Program (MAP) supporting awardees to grow their adult immunization programs
- AIM Adult Immunization Committee discussing adult policy and programmatic issues

## Future Plans

- Use data from MAP needs assessment survey to:
  - Assess programmatic needs and guide activities (L1b)
  - Inform MAP's plan for the upcoming year (L1b)



# MAP Needs Assessment Key Findings



## What AIPs found most helpful:

### MAP Activities

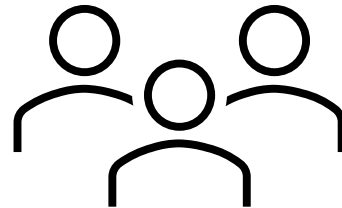
- Health Equity Toolkit
- Affinity Groups

### Discussion Topics

- How to include community partners in program planning and implementation
- How to collaborate with new partners
- Hiring and managing staff

98

different staff roles were represented at MAP events in 2023



## New Attendees

Across MAP activities, **webinars** had the highest rate of new attendees.



# Priority Populations



## Challenges

Reaching people who are:

- Unhoused
- Refugees, immigrants, and migrants
- Living in rural communities
- Living in high social vulnerability index communities
- Uninsured/underinsured



## Promising Practices

- For homebound populations, one jurisdiction partnered with the council on developmental disabilities to arrange transportation to support access to COVID-19 vaccines
- Deployed mobile nurse teams to homebound, unhoused and hard to reach populations
- Partnered with CBOs, coalitions, intra- and inter-agencies, and community to extend reach into the community, building on relationships established during COVID-19 response

The challenges and promising practices reflected on this slide were gathered from jurisdictions via the needs assessment survey, needs assessment qualitative data collection activities, and ongoing event monitoring data (such as event polls, chats, and post-event surveys).



# Health Equity



## Challenges

- Recruiting and retaining a workforce that represents the community
- Offering access points that meet people where they are, such as satellite, temporary or off-site locations
- Engaging with policymakers to advance policies that improve equity in immunization access
- Documenting and tracking coverage data to identify people who are at higher risk of being unvaccinated
- Tracking health equity goals



## Promising Practices

- Developed pharmacy partnerships to reach long-term care facility residents and homebound populations
- Designed an internal dashboard to track provider participation and utilization to support documentation and tracking coverage
- Created an “Immunization Roadshow” for providers focused on strategies/tools on cultivating vaccine uptake

The challenges and promising practices reflected on this slide were gathered from jurisdictions via the needs assessment survey, needs assessment qualitative data collection activities, and ongoing event monitoring data (such as event polls, chats, and post-event surveys).





# Strategic Partners



## Challenges

- Securing funding to support strategic partnerships, such as those established during COVID-19
- Collaborating with policymakers to improve immunization rates
- Coordinating with non-traditional partners to reach specific adult populations
- Leveraging community partners to address misinformation and disinformation
- Ensuring staffing to manage partner relationships



## Promising Practices

- Developed media campaigns for local sporting events to educate communities
- Working with pharmacies and community-based organizations to address misinformation and disinformation
- Working with local faith groups to educate people who are refugees, immigrants, and migrants
- Conducted Community Immunization Connection meetings to engage CBOs and share information on identified ways organizations can get support from AIPs

The challenges and promising practices reflected on this slide were gathered from jurisdictions via the needs assessment survey, needs assessment qualitative data collection activities, and ongoing event monitoring data (such as event polls, chats, and post-event surveys).



# Business Operations



## Challenges

- Retaining staff
- Hiring new staff members to support AIPs
- Securing sustainable revenue streams supporting AIPS
- Succession planning and promoting existing staff
- Managing and tracking adult immunization program data (e.g., community demographics, vaccination events, vaccination history, and data related to tracking health equity)



## Promising Practices

- Transitioned revenue streams to the bridge access program to sustain programs
- Revised enrollment cap for COVID vaccines so more providers partners can provide vaccines
- Reviewed roles and feedback from staff to support restructuring of role to support retention
- Offered staff trainings through online evidence-based courses in public health as well as other creative activities

The challenges and promising practices reflected on this slide were gathered from jurisdictions via the needs assessment survey, needs assessment qualitative data collection activities, and ongoing event monitoring data (such as event polls, chats, and post-event surveys).



In conclusion...



## Peer-to-peer sharing

A series of four 60-minute virtual forums for jurisdictions to share their program challenges and insights and offer strategies to their peers.



## Webinar

Highlight promising practices that align with the most common challenges.



## Written Resources

Build on existing business operations and health equity toolkits with actionable summaries and tools.

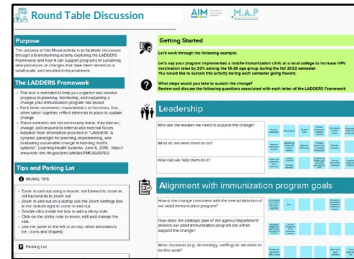


# MAP 2023-2024



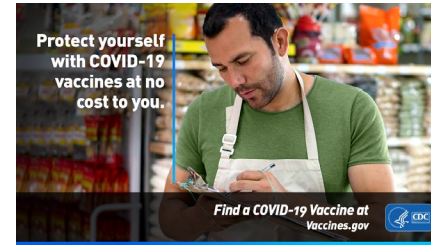
## Webinars

3 webinars focused on outreach to DAAP



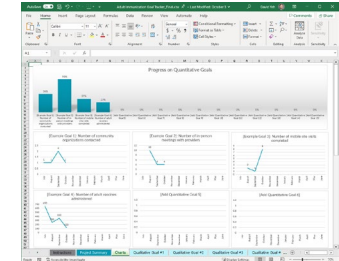
## Round Tables

2 discussions to promote peer to peer learning on topics of shared interest



## Case Study

Publication examining lessons learned from Bridge Program implementation



## Goal-Tracking Tool

Structured pilot of goal-tracking tool



# Thank you!

- Diadra Biles, DPM, MPH, CPH, MAP Associate Director
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