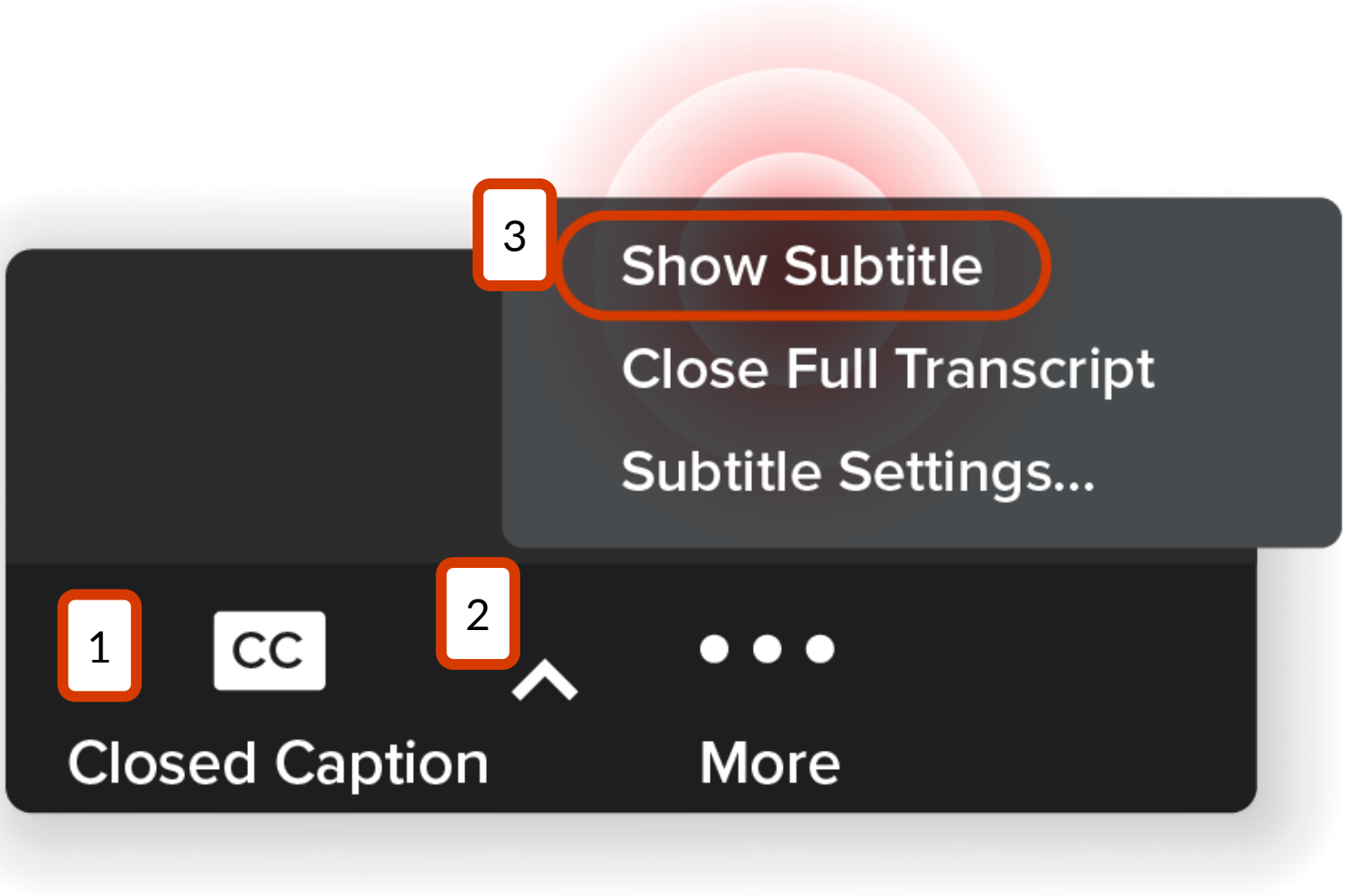
Adults Need Vaccines Too: Strategies to Support and Improve Adult Vaccination Efforts Through Addressing Medicaid and Medicare Challenges

July 14, 2026

AIM
Association of Immunization Managers

Closed Captions



Housekeeping

All registrants will receive an email shortly after the event with today's webinar slides and resources.

The recording, resources, and slides from today's webinar will be available on AIM's website in the coming weeks.

Add any questions you have for our panelists to the Q&A box, and they will be addressed at the end.

Take a few moments to answer the survey questions that pop up in your browser after the webinar.

Speaker Introductions

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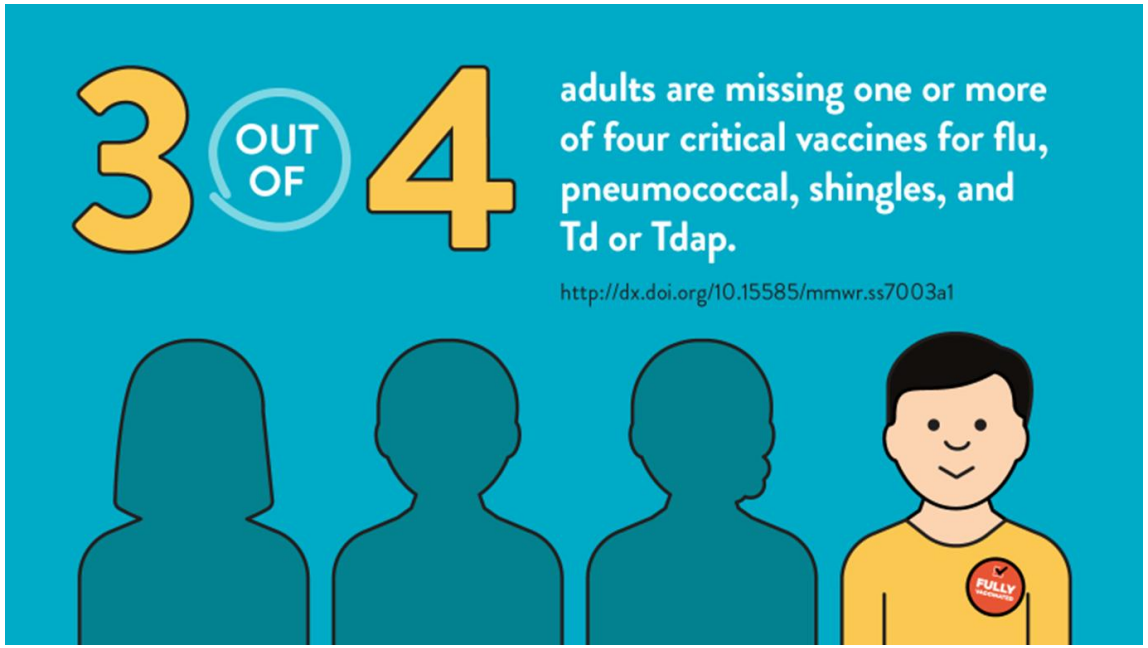
Adult Vaccine Access Coalition (AVAC)

- 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.

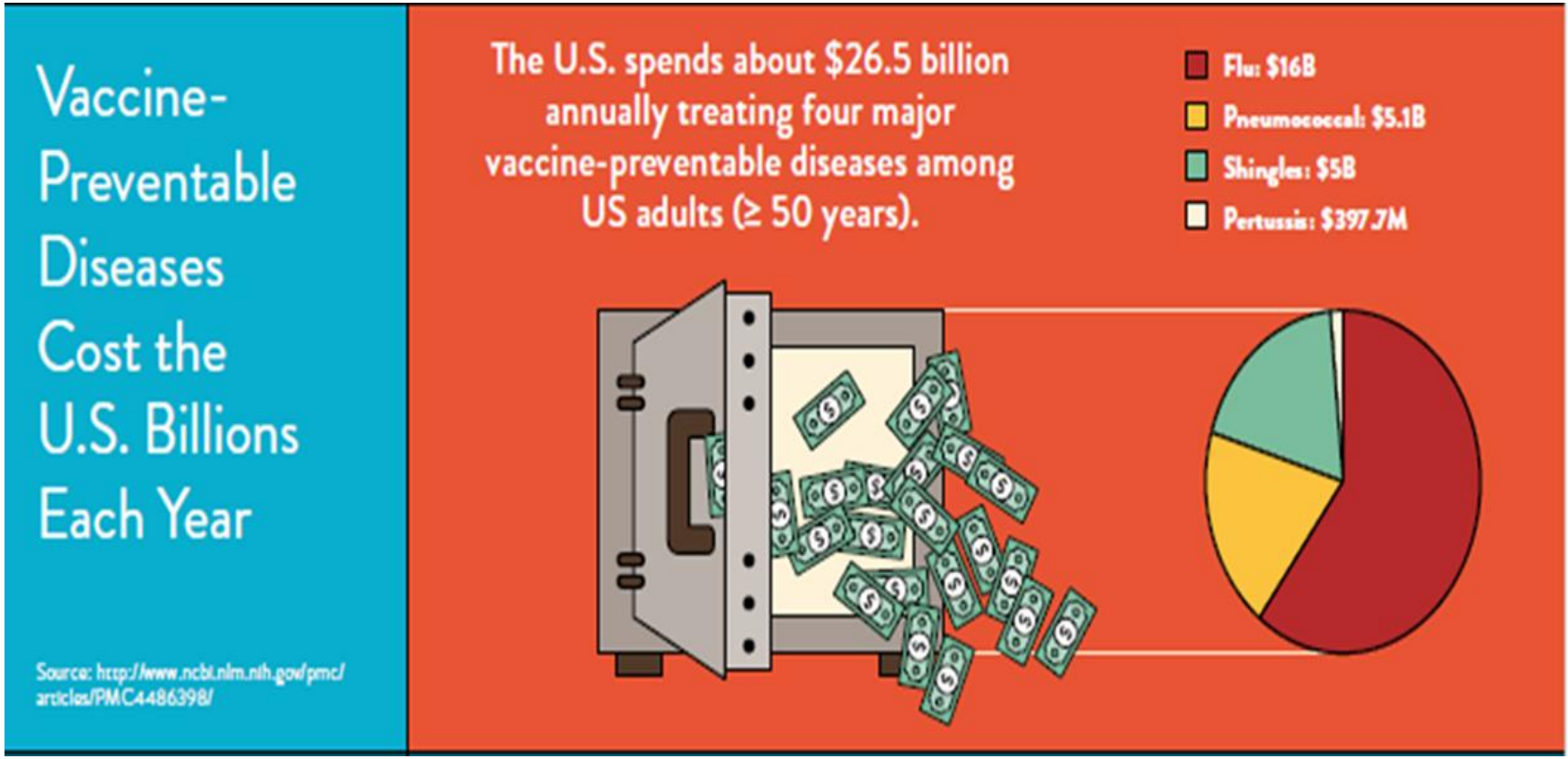


AVAC is fighting to make necessary policy changes to increase vaccination rates — saving lives and money.

www.adultvaccinesnow.org/our-membership/

Policy Goals to Improve Adult Vaccination Rates

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



AVAC
ADULT VACCINE ACCESS COALITION

Administration: 2026 At A Glance

Jan

- Presidential Memo on Vaccine Schedule Signed
- CMS Medicaid Core Set Review

Feb

- NIH Director Bhattacharya named acting CDC Director
- Jim O'Neill's Exit from HHS and CDC
- Principal Deputy Director Ralph Abraham steps down
- Calley Means detailed to the White House from HHS
- Dr. Oz and Bhattacharya speak out to address measles

Mar

- Dr. Robert Malone resigns
- Federal Judge rules on AAP vs. Kennedy
- ACIP canceled
- ICD-10 Coordinating Committee meets
- FDA approves 2026-27 influenza strains
- FDA releases Adverse Event Monitoring System "tool"

Apr

- President's FY27 Budget Released
- ACIP Charter revised/ renewed, then pulled
- Kennedy Budget Hearings
- Erica Schartz, MD, JD, MPH nominated CDC Director

May

- FDA Changes: Makary steps down, Hoeg exits
- Casey Means nomination pulled, Nicole Saphier, MD nominated to be Surgeon General
- DOD Hegseth rescinds flu vaccine requirement
- USPSTF call for new members
- FDA VRBPAC meeting (May 28)

June

- ACIP – no meeting
- Covid-19 study in JAMA
- VRPAC meets on mRNA flu
- DOW reverses course on flu
- OMB rule

Staff Changes

On the Horizon: USPTF, CMS Regulatory, Aggressive Approaches to Fraud, HR1 Implementation, Robust Regulatory landscape/proposed Regs

Congress: 2026 At A Glance

Axios

Healthcare Discussions in the 119th Congress:

- Affordability/Lowering Health Care Costs
- Waste, Fraud, Abuse
- MAHA/Chronic Disease
- Price Transparency

Where Vaccine Policy Has Come Up:

- FY27 Appropriations Process
  - HHS Secretary Kennedy Budget Hearings x7
  - Mark ups House/Senate (ongoing through July)
- Hearings
  - Senate Nominations (Surgeon General, CDC Director)
  - Healthcare workforce
  - Lowering Healthcare Costs
  - Healthcare Affordability (Drs/hospitals)
  - Covid-19 / Vaccine Safety
- Requests for Information (i.e. PAHPA)
- Legislation (VICP, VFC, flu)
- Letters requesting information
  - Examples: GAO on Hep B; CBO on healthcare costs arising from VPD; Request for info on vaccine cases and religious freedom; Letter on Release of Covid-19 Study; Hep B study in Guinea-Bisseau

npr

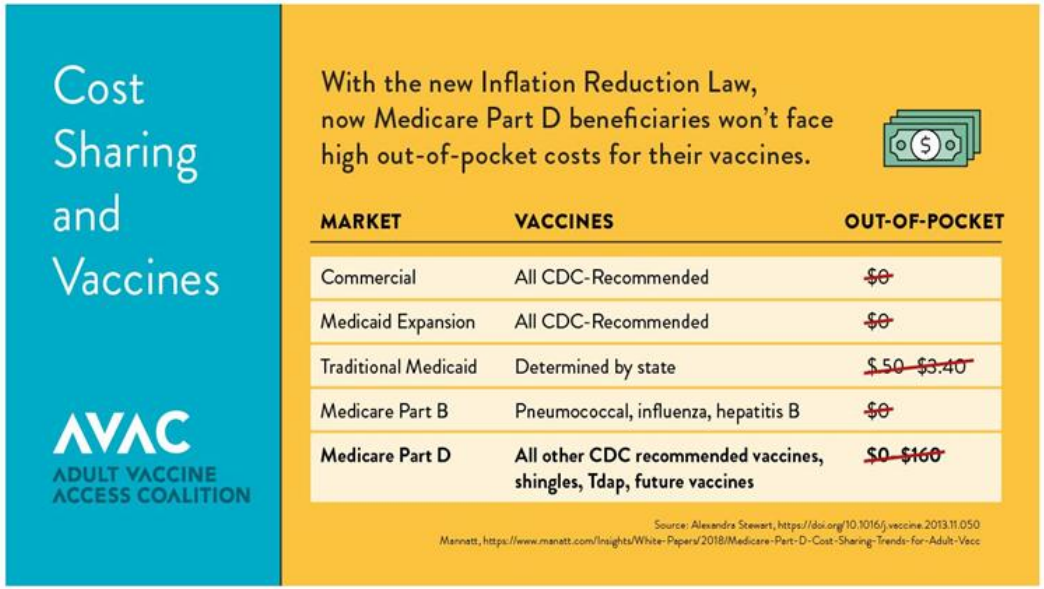
Coverage of Vaccines: Commercial

- **The Affordable Care Act or "ACA" was the comprehensive health care reform law enacted (March 2010)**
  - Mades affordable health insurance available to more people.
  - 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*

What this means today?

- Currently, all votes made by ACIP members, including those in June, September, and December 2025, have been stayed.
- AHIP and many insurers have committed to covering pre-September 2025 recommendations without cost-sharing through 2027.



Coverage of Vaccines: Medicare (A, B, D)

Medicare Part A (hospital setting)

- Part A only covers care you receive while admitted as an **inpatient in a hospital**

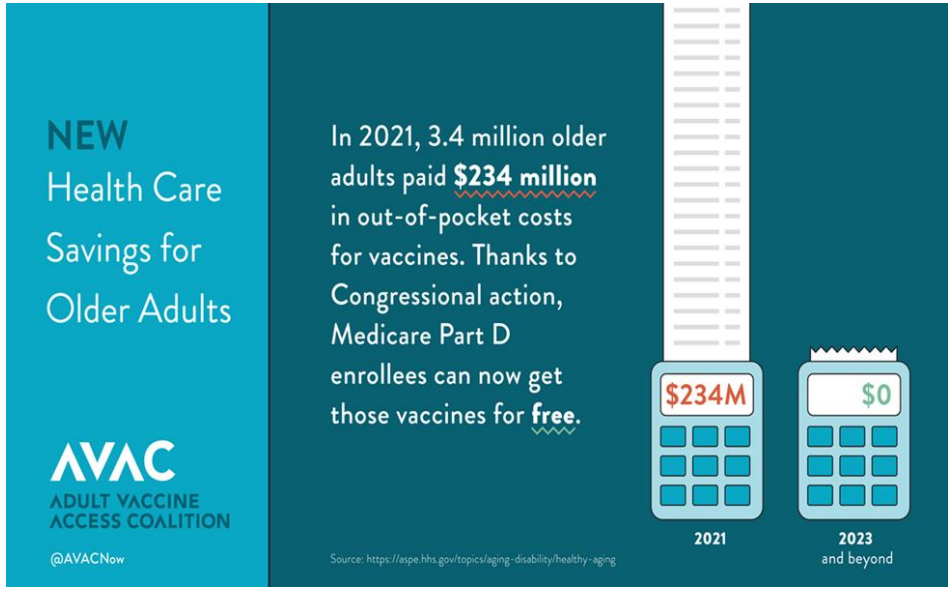
Medicare Part B (physician billing)

- Vaccines written into Social Security Act. No cost.
- Covid-19, Influenza, Pneumonia and Hepatitis B vaccines

Medicare Part D (pharmacy billing)

- **Medicare Modernization Act (2003)**
  - Created Medicare Prescription Drug Coverage.
  - Vaccines post 2005 are covered under D (Shingles, Tetanus-Diphtheria-Whooping Cough, RSV, etc.) unless added to SSA (ex. Covid-19)
- **Inflation Reduction Act (2022)**
  - Eliminated cost sharing for ACIP-recommended vaccines under Medicare Part D.

What this means today?



Coverage of Vaccines: Medicaid

The Affordable Care Act or "ACA" was the comprehensive health care reform law enacted (2010)

- Expanded the Medicaid program to cover all adults with income below 138% of the FPL.
- Not all states expanded their Medicaid programs.
- ACIP-recommended vaccines were included in the expansion populations

Inflation Reduction Act (2022)

- States expanded coverage for all ACIP Recommended adult vaccines in traditional Medicaid and CHIP programs.
- ACIP recommended vaccines available with no out-of-pocket cost. Prior to 2023, vaccine coverage and cost sharing differed based on state.

H.R. 1 (2025)

- $1.2 trillion package of federal spending cuts, with more than $700 billion in cuts coming from Medicaid. CBO estimate the number of newly uninsured people at 11 million.
- Key Medicaid/Health provisions:
  - Enhanced premium tax credits for ACA marketplace coverage (expired Dec 2025).
  - Federal Medicaid work requirements (Dec 2026)
  - More frequent eligibility redeterminations (Jan 2027)

What this means today?

Coverage of Vaccines: Uninsured

Adults without insurance may be able to access vaccines through:

- Patient assistance programs
- State/Local Health Departments
  - The CDC Immunization Program (Section 317) funding provides dollars to state and local health for many elements of immunization Infrastructure.
    - Allows for adult purchase but funding is limited

What this means today?

- Appropriations Fiscal Year 2026 $682M
- Appropriations Fiscal Year 2027 – process underway (House $696M)

What It Will Take:
A Policy Map To The Future

Rebuild & Strength Vaccine Infrastructure	Protect Access Address Financial Barriers	Education/Confidence	Promoting High Immunization Rates
Infrastructure funding	Protect access to vaccines in Medicare, Medicaid, Commercial	Supporting public confidence	Enhanced provider Support (vaccines, counseling, and administration)
Preparedness/PAHPA	Vaccines for uninsured adults, travel, occupational	Educating Members of Congress & staff	Adoption of quality measures
Immunization data & interoperability	ACIP 2.0	Education to Administration	Remove barriers for vaccination at provider sites

Engaging in Federal Advocacy

- **Support for FY27 Appropriations toplines**
- **Advocate for various legislative opportunities:**
  - Strengthening data systems - Pandemic Preparedness
  - Protect provider vaccine choice and patient access to recommended vaccines at no cost.
  - Protect vaccinating provider reimbursement in Medicare.
  - Allow pharmacists to immunize and bill within the long-term care (LTC) setting for all vaccines in Medicare Part B and Part D.
  - Support Federal Qualified Health Centers (FQHCs) as vaccination sites.
  - VICP
  - Maternal vaccination access

- **Administration Engagement:**
  - Advisory Comments (ACIP, VRPAC)
  - Regulatory Comment (CMS, CDC, HRSA)

Learn More

Join on the Core Values

Learn More:
abownas@adultvaccinesnow.org
www.adultvaccinesnow.org

Follow Us:
www.linkedin.com/company/avacoalition

@AVACNow

Merideth Plumpton, RN
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Vermont Department of Health

Katie Mahuron, RN
Adult Coordinator
Vermont Department of Health

Leveraging Partnerships and Policy to Increase Immunizations Among Medicare Population

Merideth Plumpton, RN – Immunization Program Manager
Katie Mahuron, RN – Adult Coordinator

July 14, 2026

VERMONT
DEPARTMENT OF HEALTH

Vermont Immunization Program Background

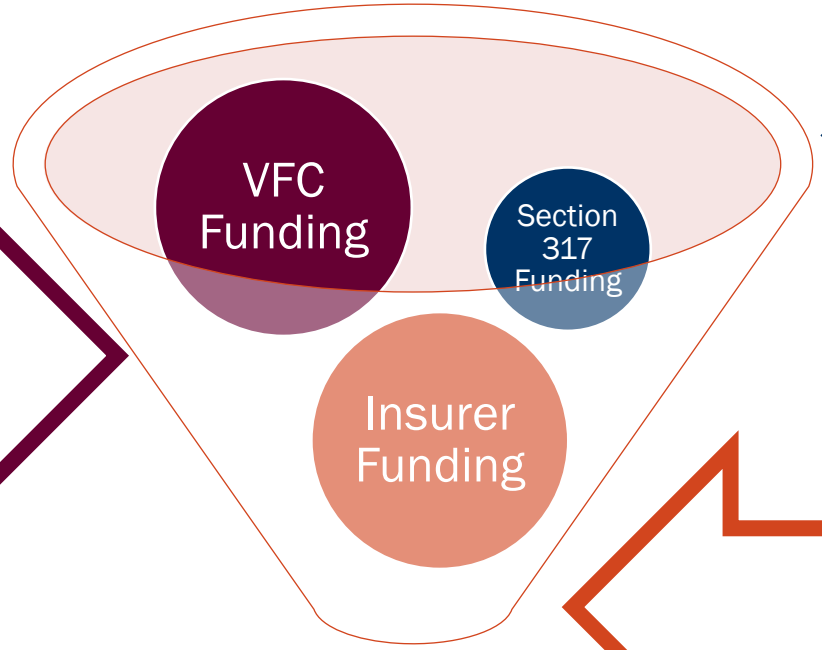
Vermont's Universal Vaccine Program

Vermont is a universal vaccine state, providing vaccines to enrolled providers at no cost for use with all patients birth through age 64, regardless of insurance status

- Made possible by the Vermont Vaccine Purchasing Program (VVPP)
  - Insurers pay into a fund (vaccine purchase and operational costs)
- Currently do not provide vaccines for patients 65+

Vermont Vaccine Purchasing Program (VVPP)

- VFC - vaccines currently provided through CDC
- Allocated based on number of children who are uninsured, enrolled in Medicaid, AI/AN, underinsured



- Vaccines provided by CDC for use in uninsured adults

- Insurers pay an assessment fee for each “covered life” for individuals up to 65 years
- All private medical insurers and Medicaid pay into our program
- Vaccines currently purchased through CDC

Vermont Vaccine Purchasing Program vaccines

Immunizations & Medicare

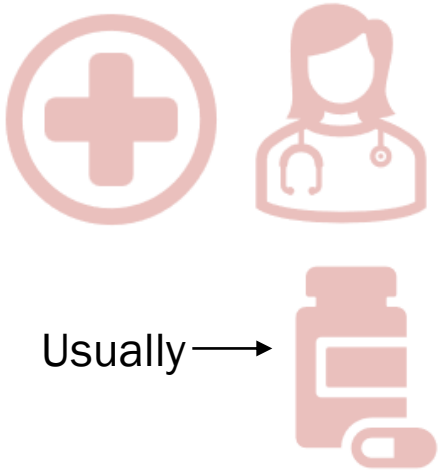
Medicare is complex

Medicare Part A

‘hospital insurance’

Medicare Part B

‘medical insurance’



Medicare Part C

Medicare Advantage plan

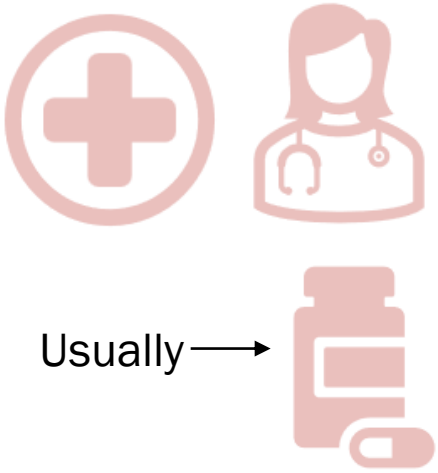
Medicare Part D

Prescription drug coverage

Medicare Vaccine Coverage in the Outpatient Setting

Medicare Part B

'medical insurance'



Medicare Part C

Medicare Advantage plan

Medicare Part D

Prescription drug coverage

Knowing the Coverage

PART B

- COVID-19
- Flu
- Pneumococcal
- Hepatitis B (intermediate & high-risk only)
- Tdap/Td for wound management

PART C

- All vaccines if have prescription drug coverage.
- If don't have prescription drug coverage, can select Medicare Part D plan.

PART D

- RZV/Shingrix
- Routine Tdap/Td (non-wound)
- RSV
- Travel vaccines
- All other ACIP recommended vaccines (MMR, etc.)

Inflation Reduction Act

Pre-Inflation Reduction Act

Patient responsible for co-pays, coinsurance and/or deductible

Private sector cost for Shingrix: $240/dose

Inflation Reduction Act (IRA) signed into law

August 16, 2022

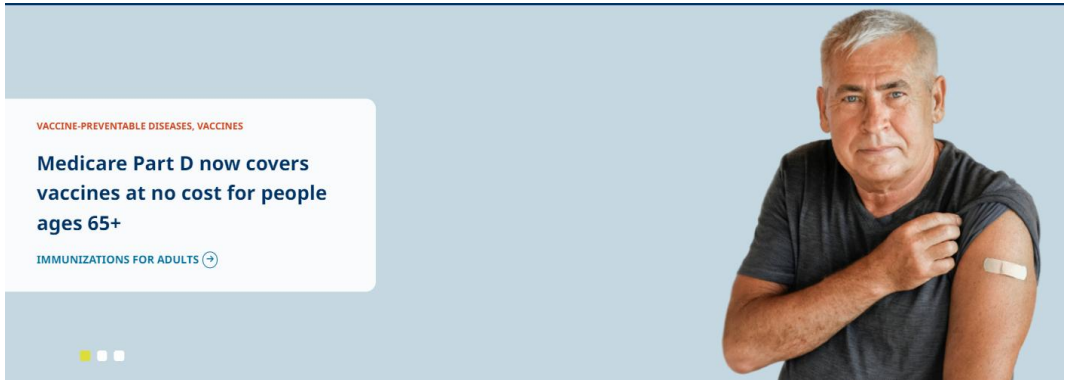
Elimination of cost sharing & deductibles for vaccines covered under Part D through IRA

Effective January 1, 2023

Cost for Shingrix (w/ Part D): $0

Inflation Reduction Act Initiatives

Public Messaging: Department of Health Resources

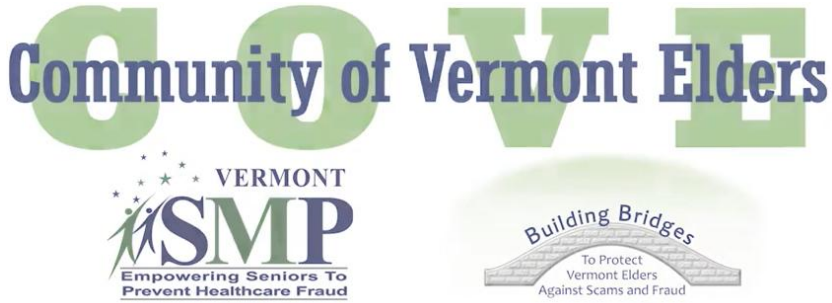


Homepage slider on our Department of Health website

Flyer that was used digitally as well as distributed to community partners to print

Community Partners as Trusted Messengers

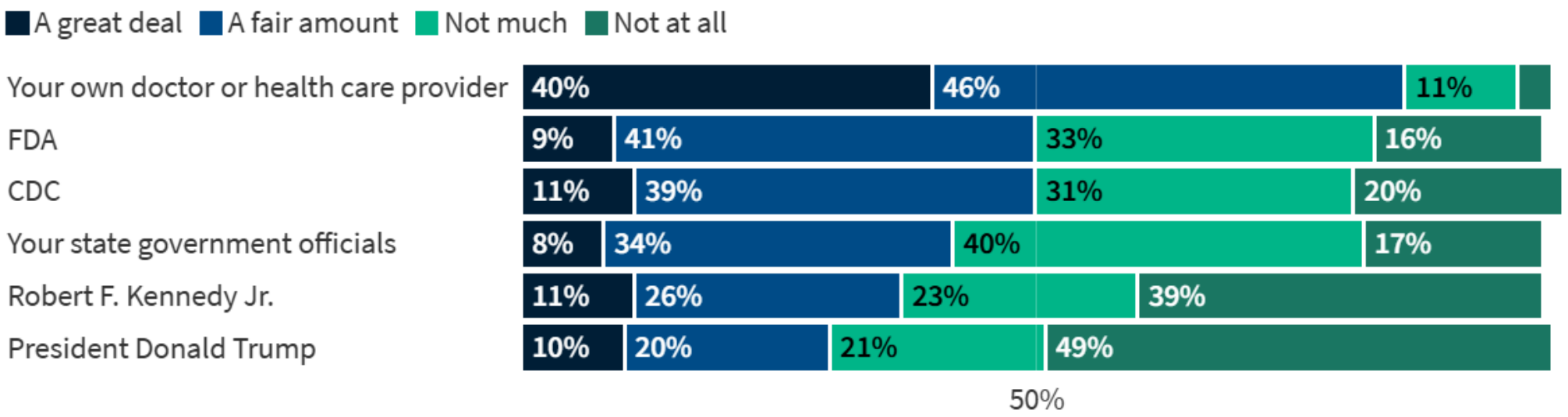
- Shared social media posts and/or poster:
  - AgeWell
  - Senior Solutions, Council on Aging for Southeastern Vermont
  - NEK Council on Aging
  - Central Vermont Council on Aging
- Presentations at community-based organizations (i.e. senior centers)
- Newsletter/Blog post:
  - Community of Vermont Elders (COVE) “Medicare Part D: Increased access to immunizations”



Healthcare Providers are Trusted Messengers

U.S. Adults Are Most Trusting of Their Own Doctors for Health Information; Fewer Trust Government Health Authorities

How much do you trust each of the following for reliable information about **health issues**?



Note: See topline for full question wording.

Source: KFF Tracking Poll on Health Information and Trust (Jan. 13-20, 2026) • Get the data • Download PNG

KFF

Trust in Social Media for Health Information - KFF Polling on Health Information and Trust | KFF

How do we empower HCPs as trusted messengers?

Listen

Share information

Filter resources through providers

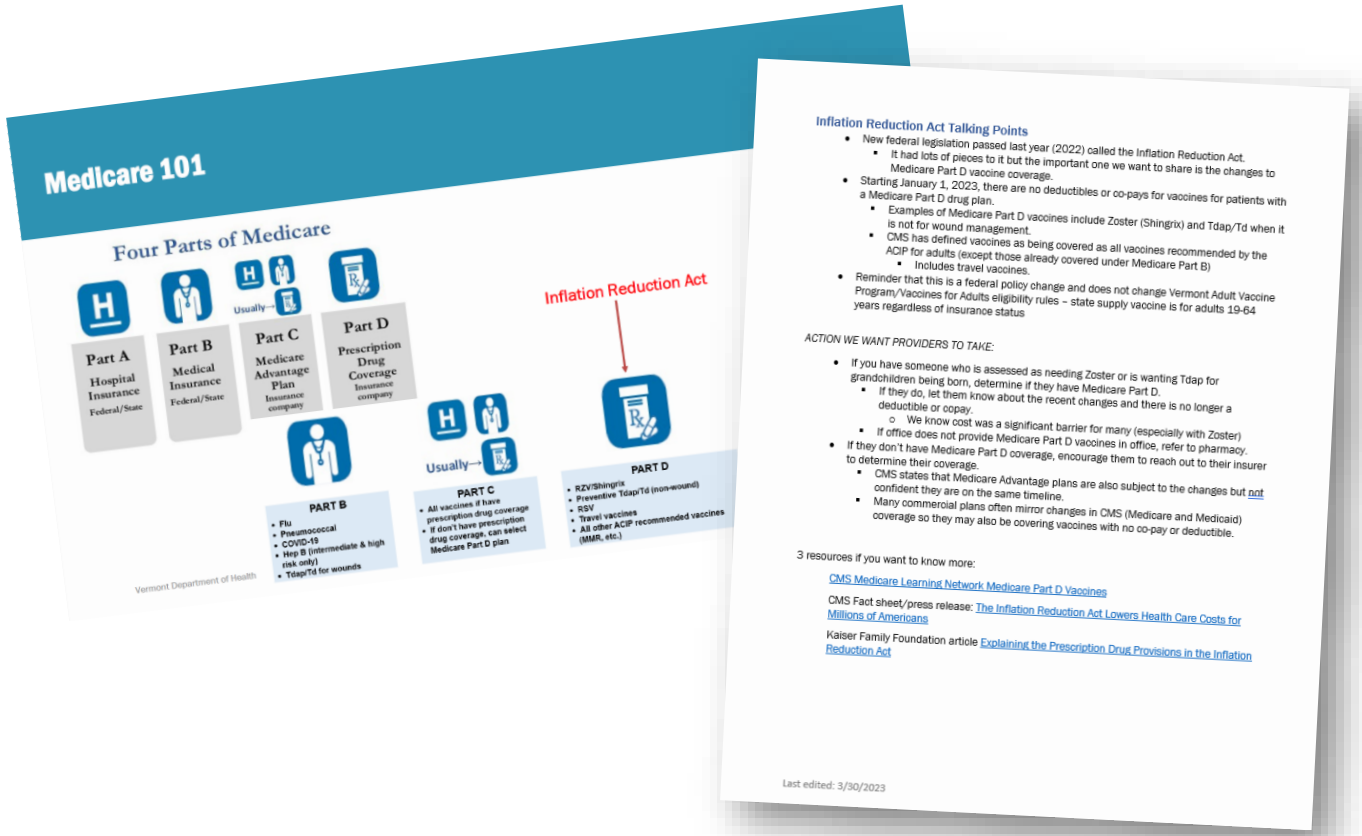
Collaborate

Pass the mic

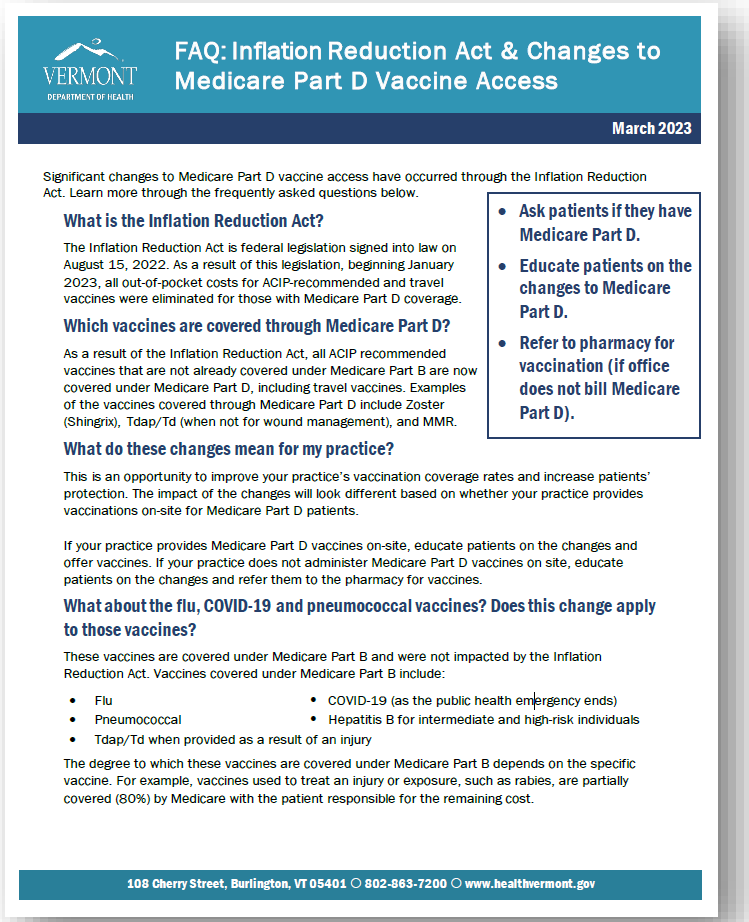
Increasing Internal Staff Capacity

Trained 12 public health immunization nurses on Medicare coverage of vaccines

- Talking points document available for reference/retraining
- Tasked with sharing FAQ and information to provider offices at IQIP site visits with particular emphasis on adult IQIPs



Provider Education FAQ



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FAQ: Inflation Reduction Act & Changes to Medicare Part D Vaccine Access

March 2023

Significant changes to Medicare Part D vaccine access have occurred through the Inflation Reduction Act. Learn more through the frequently asked questions below.

What is the Inflation Reduction Act?

The Inflation Reduction Act is federal legislation signed into law on August 15, 2022. As a result of this legislation, beginning January 2023, all out-of-pocket costs for ACIP-recommended and travel vaccines were eliminated for those with Medicare Part D coverage.

Which vaccines are covered through Medicare Part D?

As a result of the Inflation Reduction Act, all ACIP recommended vaccines that are not already covered under Medicare Part B are now covered under Medicare Part D, including travel vaccines. Examples of the vaccines covered through Medicare Part D include Zoster (Shingrix), Tdap/Td (when not for wound management), and MMR.

- **Ask patients if they have Medicare Part D.**
- **Educate patients on the changes to Medicare Part D.**
- **Refer to pharmacy for vaccination (if office does not bill Medicare Part D).**

What do these changes mean for my practice?

This is an opportunity to improve your practice's vaccination coverage rates and increase patients' protection. The impact of the changes will look different based on whether your practice provides vaccinations on-site for Medicare Part D patients.

If your practice provides Medicare Part D vaccines on-site, educate patients on the changes and offer vaccines. If your practice does not administer Medicare Part D vaccines on site, educate patients on the changes and refer them to the pharmacy for vaccines.

What about the flu, COVID-19 and pneumococcal vaccines? Does this change apply to those vaccines?

These vaccines are covered under Medicare Part B and were not impacted by the Inflation Reduction Act. Vaccines covered under Medicare Part B include:

- Flu
- Pneumococcal
- Tdap/Td when provided as a result of an injury
- COVID-19 (as the public health emergency ends)
- Hepatitis B for intermediate and high-risk individuals

The degree to which these vaccines are covered under Medicare Part B depends on the specific vaccine. For example, vaccines used to treat an injury or exposure, such as rabies, are partially covered (80%) by Medicare with the patient responsible for the remaining cost.

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- Distributed through VFC/VFA compliance visits and IQIP visits
- Distributed information through monthly provider newsletter
- FAQ had call to action with 4 key steps for providers:

What actions should I take?

1. Continue to assess patients for their vaccination needs.
2. If a patient is missing vaccinations, determine what prescription drug coverage they have.
3. **If a patient has Medicare Part D coverage, educate them on changes. Ensure patient understands there is no copay or deductible for the vaccines.** If patient does not have Medicare Part D coverage, encourage them to reach out to their drug plan insurer to determine coverage for vaccines.
4. Vaccinate patients onsite or refer them to pharmacy (based on office policy).

Resources

Inflation Reduction Act

- How Will the Prescription Drug Provisions in the Inflation Reduction Act Affect Medicare Beneficiaries? | KFF
- Fact Sheet: Inflation Reduction Act changes to Medicaid & Children's Health Insurance Program (CHIP) Adult Vaccine Coverage
- Inflation Reduction Act Research Series-Medicare Part D Enrollee Vaccine Use After Elimination of Cost Sharing for Recommended Vaccines in 2023

LTCF & Medicare Part A resources:

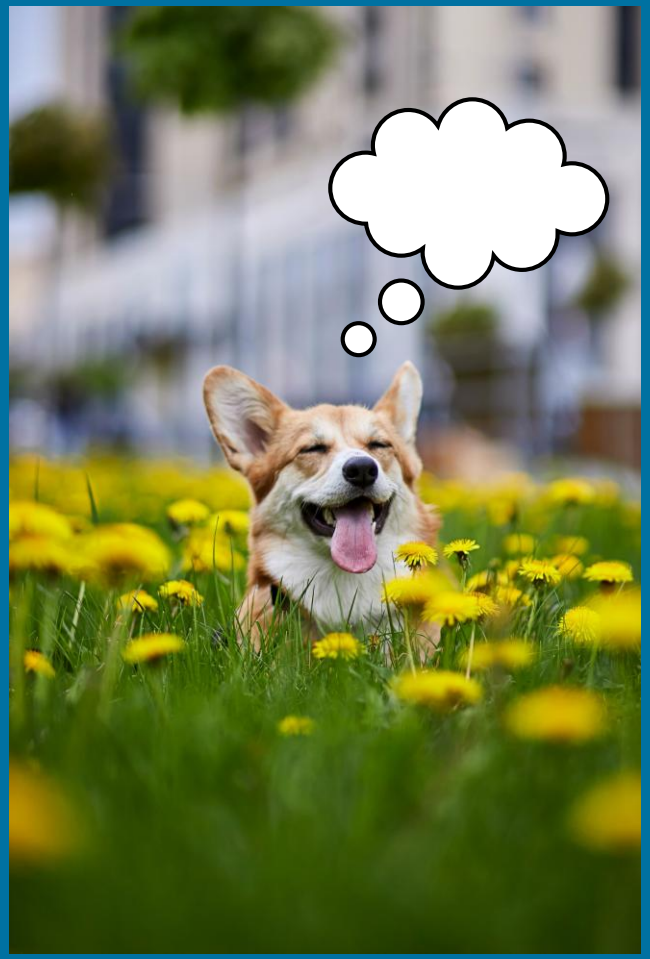
- AMDA | Billing Vaccines Guide for Skilled Nursing Facilities
- CMS | Billing Medicare for Respiratory Vaccines
- AHCA | NCAL | Medicare Billing Guidance Resp Vax in LTC.pdf

Resources

Other Medicare Resources:

- NAIIS_Vaccine-insurance-coverage-2024-2025.pdf
- Vermont_IRA_Medicare_Part_D_FAQ.pdf
- MLN908764 – Medicare Part D Vaccines
- Medicare Vaccine Coverage: Part B And D Coding Guide | AAFP
- Billing, Coding, and Payment - National Adult and Influenza Immunization Summit

Questions?



Thank you!

Let’s stay in touch.

Email: AHS.VDHImmunizationProgram@vermont.gov

Web: healthvermont.gov

Social: @HealthVermont.gov

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Q
A

AIM & Partner Resources

AIM

- Vaccine Implementation Project
- Adult Vaccine Access Cooperative (VAC) Meetings Final Report
- Medicaid and Immunization Programs Collaboration Toolkit

Partners

- Resources | Adult Vaccine Access Coalition
- Concentric Value of Vaccination | Gerontological Society of America
- VaxTrack | GSK

Upcoming Adult Immunization Webinars

Adults Need Vaccines Too: Strategies to Support and Improve Adult Vaccination Efforts Through Data Use and Transparency

- Details announced soon!

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Thank you!

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