

March 9, 2023

Alissa Deboy
Director, Disabled and Elderly Health Programs Group
Center for Medicaid and CHIP Services
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Director Deboy,

On behalf of the Adult Vaccine Access Coalition (AVAC) and partner organizations, we write to express our strong support for the Centers for Medicare and Medicaid Services' (CMS) work to date around implementation of the Inflation Reduction Act (IRA) immunization provisions, Section 11401 (Medicare) and Section 11405 (Medicaid and CHIP). Together, these provisions will ensure access to life-saving vaccinations for Medicare and Medicaid beneficiaries without out-of-pocket costs. We urge CMS to extend the additional one percent Federal Matching Percentage (FMAP) to as many states as permissible by law, cover the full list of vaccines recommended by the Advisory Committee on Immunization Practices, encourage states to strengthen Medicaid immunization data systems and interoperability, and support states' ability to continue to partner with community-based organizations on immunization activities.

Vaccines are vital to protecting and preserving the health and economic wellbeing of older adults, the chronically ill, and entire communities. Every year, thousands of adults die and thousands more suffer serious health problems from vaccine-preventable diseases—due in part to the complicated and costly coverage landscape for vaccines under Medicare and Medicaid. These longstanding inequities in vaccine coverage have hindered our nation's disease prevention efforts and put millions of Americans needlessly at risk of becoming sick or dying from vaccine-preventable diseases. Health equity depends on vaccine access—and thankfully, the IRA provisions will soon bring us another step closer.

We were pleased to see the timely implementation of Section 11401 in January 2023. As CMS works to implement Section 11405 for October 1, 2023, we hope you will consider including the following recommendations to help states as they move to eliminate cost sharing and cover all recommended vaccines.

Apply Flexibility in Implementation of the Federal Medical Assistance Percentage (FMAP) Increase.

We are pleased that the IRA provision includes a one percentage point increase in the Federal Medical Assistance Percentage (FMAP) for states that offer recommended adult vaccines with no cost sharing to all Medicaid populations. We strongly encourage CMS to interpret the statutory language as broadly as possible so that the maximum number of states can access all eight quarters of the one percentage point FMAP increase. For example, all states that offered at least one adult vaccine with no out-of-

pocket costs upon the IRA date of enactment should be eligible to receive additional federal support to ensure equity in implementation of the law. So too should any state that extended first dollar coverage of vaccines to any segment of the Medicaid population, including traditionally eligible enrollees, be able to access the enhanced FMAP. Access to the enhanced FMAP will be crucial to the success of Section 11405 as states work over the coming months to expand access to cost effective and lifesaving adult vaccines to traditional Medicaid adult populations.

Timely Coverage of All ACIP-Recommended Vaccines at All Medicaid Eligible Points of Care.

As CMS provides direction to states implementing the new Medicaid adult vaccine coverage provision, it will be vitally important to provide clear guidance to ensure that traditional Medicaid adult populations have access to all ACIP recommended adult vaccines at all eligible points of care.

On September 26, the Center for Medicare issued guidance to plans in advance of the prohibition of cost sharing for adult vaccines under the Medicare Part D benefit taking effect on January 1. The guidance directs plans to follow the statute, which provides access to “all ACIP-recommended vaccines.” The guidance also noted that several important vaccines are under a “shared clinical decision making” recommendation and other vaccines are essential for individuals in certain occupations or who travel to certain parts of the world. We encourage the Medicaid implementation team to issue equally clear guidance to states to ensure that Medicaid populations have access to all ACIP-recommended vaccines that are appropriate and recommended for that individual by their provider.

Additionally, we encourage CMS to apply the same standards as the Part D guidance related to the timing of the new vaccine coverage. If ACIP issues a new vaccine recommendation for use in adults mid-year, Medicaid plans must apply the coverage and cost sharing requirements of IRA Section 11405 immediately after the ACIP vote. This will ensure that all Medicaid-enrolled adults will have access to recommended vaccines. At the same time, it is critical that individuals with Medicaid have access to vaccines at all eligible points of care without any form of prior authorization or utilization management tools. Vaccination is the bedrock of public health – they prevent disease and the associated cost of illness. As we learned through COVID, making vaccines available in a variety of settings helps to reach the public where they seek care and improve immunization rates. Reaching Medicaid adults at all eligible points of care will help reduce access barriers and have consistent payments to ensure access through as many different avenues as possible.

Enhancing Provider Reimbursement.

Access to providers is a critical aspect in successful adult vaccine coverage in Medicaid. As CMS works with states to implement the expanded vaccine benefit to adult populations, we urge CMS to include in its guidance to states information related to best practices for provider reimbursement that will enhance and improve access to this important preventive health care service. CMS guidance should include the following elements: 1) provider reimbursement for vaccine standalone counseling; 2) provider reimbursement for vaccine administration at a rate comparable to the Medicare rate (~\$30); and 3) reimbursement for vaccine supply based on provider acquisition cost for the product and ancillary supplies. Ensuring that states provide adequate reimbursement for vaccine supplies and the time providers spend with patients for vaccine counseling and administration will go a long way toward successful implementation of the benefit.

Immunization Data Guidance.

Consistent provider reporting of immunization data is essential to ensuring that vaccinations are directed to communities where they are most needed and in supporting outbreak response. We encourage CMS to take this opportunity to enhance Medicaid vaccine data quality and completeness. Specifically, CMS should provide guidance to states on strategies to improve interoperability between Medicaid Management Information Systems (MMIS), and electronic health records. This would additionally help advance Medicaid electronic quality measurement around vaccination. To enable this, we also encourage CMS to re-launch the 90 percent match program as recommended by MACPAC last June that “CMS provide guidance on matching rates and ways to integrate IIS and MMIS through the 90 percent match for the design, development, installation, or enhancement of MMIS and the 75% match for ongoing operation of MMIS.”

State Medicaid Program Partnerships with Community-based Organizations.

State implementation of vaccine coverage for traditional adult Medicaid populations comes during a critical time. With the COVID-19 public health emergency winding down, states and Medicaid populations will be forced to deal with redeterminations and millions of individuals consequently losing access to this important coverage. The COVID-19 pandemic demonstrated the importance of equitable access to lifesaving preventative vaccines and therapeutics. As CMS provides guidance to states, we encourage the agency to direct state Medicaid programs to partner with community-based organizations to support implementation of the new benefit through programs to increase beneficiary awareness and support programs that facilitate access to vaccination. Many community-based organizations stepped up to support during the rollout of the COVID vaccine and stand ready to support efforts to inform eligible adult Medicaid populations about the importance of routinely recommended vaccines and the availability of this important new benefit.

Again, thank you and the Administration for its strong support and leadership in improving access to vaccines for low-income adults who rely on these vital safety net programs for health care coverage. We are pleased to work with you to support implementation and education around this new vaccine benefit.

We are sincerely grateful for your continued partnership and your commitment to improving the landscape for vaccines.

Sincerely,

Adult Vaccine Access Coalition (AVAC)
Albertsons Companies
Alliance for Aging Research
Alliance for Immunizations in Michigan (AIM)
Alvernia University
AMDA - The Society for Post-Acute and Long-Term Care Medicine
American Academy of Family Physicians
American Cancer Society Cancer Action Network
American College Health Association (ACHA)
American College of Physicians
American Lung Association

American Public Health Association
Asian & Pacific Islander American Health Forum (APIAHF)
Association of Immunization Managers
Biotechnology Innovation Organization (BIO)
CDC Foundation
Chester County Health Department/Chester County Immunization Coalition
CSL Seqirus
Dynavax
Emory University
GSK
Healthcentric Advisors
HealthyWomen
Henderson County Department of Public Health
Hep B United
Hepatitis B Foundation
Immunize Arkansas
Immunize South Dakota
Immunize.org
Indiana Immunization Coalition
IDSA
Kimberly Coffey Foundation
Langlade County Immunization Coalition
Louisiana Families for Vaccines
March of Dimes
National Foundation for Infectious Diseases (NFID)
National Viral Hepatitis Roundtable (NVHR)
Novavax
PriMed Physicians
SELAHEC
STChealth
The American College of Obstetricians and Gynecologists
The Gerontological Society of America
Three-C Consulting Group, LLC
Trust for America's Health
UnidosUS
Valneva USA Inc
VaxCare
West Chester University

Cc:

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