Immunization Barriers in the United States: Targeting Medicaid Partnerships through Community of Practice

Project Overview

Disparities in vaccination coverage are significantly greater for pregnant women and children on Medicaid compared to those with private insurance, with rates 2.5% to 15% lower among children covered by Medicaid, depending on the vaccine (CDC). AcademyHealth (AH), Immunize Colorado (IC), and the National Academy for State Health Policy (NASHP) coordinated efforts for a three-year CDC funded cooperative agreement to implement new state-based strategies and policies to address immunization gaps among low-income pregnant women and children.

Partnerships between Medicaid and immunization programs are critical to improving immunization rates for children and pregnant women with Medicaid coverage. This initiative specifically engaged Medicaid program leadership and enhanced collaborative efforts across state agencies and the CDC to identify shared priorities, best practices and strategies to make progress towards national immunization program goals. The project's objectives were to support states in their Medicaid policies or outreach procedures to facilitate vaccination of children living in poverty, implement policies that include providers caring for pregnant women and/or adults as covered vaccinators, and increase utilization of Medicaid resources for immunization information system (IIS) sustainability.

To facilitate this, the project team solicited state participation in a Community of Practice (CoP) comprised of Medicaid agency, Immunization Program, and IIS staff. Participating states include Colorado, Hawaii, Kentucky, Montana and New Mexico. A steering committee of state Medicaid and public health leaders, immunization-focused national organizations, and subject matter experts provided expertise and guides efforts.

Project Goals

The project's success was measured by the Community of Practices states ability to achieve the following goals:

- At least four states will make changes to their Medicaid policies or outreach procedures to facilitate vaccination of children living in poverty

- At least four states will implement policies that include providers caring for pregnant women and/or adults as covered vaccinators

- At least four states will increase utilization of Medicaid resources for IIS sustainability

Overall Project Successes:

- Added immunization measures to state Medicaid value-based programs

- Strengthened IIS infrastructure in the following ways:

  ○ Applied for and received CMS funding

  ○ Added pharmacies and non-pediatric immunizing healthcare practices to IIS

    – Improved data sharing and data analysis capabilities between IIS and Medicaid data systems

- Increased patient and provider education and outreach through targeted campaigns

- Improved partnerships between Medicaid and public health agencies, and increased collaborations with providers

- Enacted legislation to require vaccination uptake

Project Contact

AcademyHealth: Sunita Krishnan (sunita.krishnan@academyhealth.org), Senior Associate.

Immunize Colorado: Katie Waters (Katherine.waters@childrenscolorado.org), Program Director.

National Academy for State Health Policy: Rebecca Cooper (rcooper@nashp.org), Policy Associate.

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AcademyHealth

Improving Medicaid Immunization Rates through a Community of Practice

Project Overview & Goals

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Kentucky's individual goals for this project were:

1. Increase immunization rates for pregnant women

2. Increase adolescent HPV rates

3. Establish the IIS as the source for quality data on immunizations

Project Successes

Funding

- KY Health Information Exchange (KHIE) requested approval from the Centers for Medicare and Medicaid Services (CMS) to provide mini-grants to providers for immunization registry integration;

- KHIE allocated $1.5 million for this effort through September 2020 and has asked for an extension through September 2021.

IIS Infrastructure

- Integrated Medicaid claims data with the Kentucky Immunization Registry (KYIR).

- Improved processes for provider enrollment to KYIR, including enrollment of pharmacies.

Data Analysis

- Monitored immunization trends within claims systems for decreased scheduled immunization rates in the state.

Public Health

- Altered school regulations to require:
  - Two Doses of Hepatitis A
  - MenACWY Booster at 16
  - Survey at kindergarten, 7th and 11th grades

Patient & Provider Engagement/Education

- Created an immunization information dashboard focused on adolescent and pregnant women in Medicaid as a tool for providers and other stakeholders.

- Created and distributed resources to family practice physicians to ensure pregnant women are aware of the closest place to go for vaccines, if not offered at the prenatal clinic, and to certify that these women have an established medical home.

- Established multiple mobile immunization clinics in areas with high Hispanic populations to encourage immunizations.

Stakeholder Collaboration

- Established partnerships between the Kentucky Provider Outreach Coordinator and key stakeholders and organizations to promote increased immunization coverage, offer education and provide advocacy.

- Created a partnership with Jefferson County Schools in order to conduct in-school immunization clinics and foster collaborative efforts between community partners to reach vulnerable populations (both of which will help increase HPV vaccine uptake among school children).

- Solidified a working relationship with hospital systems to offer Tdap on hospital obstetric floors to vaccinate any women who may not have been vaccinated prior to delivery, and to vaccinate those who will be around the newborn (siblings, father, grandparents, etc.).

For more information, please contact Lucy Senters (Medicaid Specialist, VFC Program Coordinator) at lucy.senters@ky.gov.

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Colorado's individual goals for this project were:

1. Perform data analysis to identify pockets of need

2. Engage partners (Healthy Communities and Regional Accountable Entities (RAEs)) in improving member education and messaging around immunization and well-child visits.

3. Develop provider strategies based on project outcomes

4. Increase resources for IIS sustainability

Project Successes

Data Analysis

- Obtained a high match rate between Medicaid and IIS data sources (98%)

- Fostered relationships with Medicaid vendors which created strong data capabilities

- Provided immunization data by RAE region

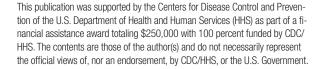- Improved vaccination coverage rates from 2017/ 2018 to 2019

Stakeholder Collaboration

- Built an ongoing partnership between Public Health and Medicaid agencies

- Engaged with RAEs

- Built stronger capacity with the Colorado ACOG Chapter

COVID-19-related Immunization Responses

- Covid-19 And Well-Child Checkups **Webpage**

- Pediatric Provider Toolkit – Caring For Children During Covid-19 Pandemic

- Interagency Influenza Task Force

For more information, please contact Heather Roth (Colorado Immunization Branch Chief) at heather.roth@state.co.us.

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Montana's individual goals for this project were:

1. Evaluate the quality of data available for immunization decision making

2. Ensure stable funding for the Montana IIS

3. Enact interventions for immunization improvement

Project Successes

IIS Infrastructure

- Established multiple immunization interface connections since June 2018, including 4 large national pharmacy chains and 54 additional pharmacy locations actively submitting immunization data to the IIS as well as, 12 non-pediatric immunizing healthcare practices were also added.

Data Analysis

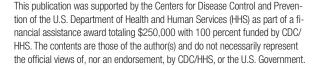- Increased state Tdap rates for children from 55.3% to 66.4% between 2016 and 2018.

Medicaid

- Enacted legislation that changed the age of children that pharmacists can vaccinate from 12 to 7 with a collaborative practice agreement, increasing access to services.

- Added childhood immunization rates (ages 19-35 months) as a measure to Medicaid Value-Based Purchasing (VBP).

Patient & Provider Engagement/Education

- Verified that all Vaccine for Children (VFC) providers are enrolled in Medicaid.

For more information, please contact Elizabeth LeLacheur (Healthy Montana Kids Program Officer) at elelacheur@mt.gov.

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New Mexico's individual goals for this project were:

1. Execute a successful interface between the Human Services Department (HSD) MMIS (Omnicaid) and NMDOH Immunization Registry (NMSIIS)

2. Identify strategies in an effort to increase overall immunization rates in Medicaid and low-income populations, specifically in children and pregnant women

3. Increase utilization of Medicaid resources for IIS sustainability by submitting an Implementation Advanced Planning Document (IAPD) to the Centers for Medicare and Medicaid Services (CMS) for approval

Project Successes

Funding
- Approved for a federal Health Information Technology (HITECH) administrative funding request that will support IIS infrastructure development.

IIS Infrastructure
- Executed General Services Agreement (GSA) between NMDOH and HSD related to NMSIIS upgrade.
- Contract between IIS contractor, Envision, and NMDOH, is pending an approval from CMS and State Purchasing.

Data Analysis
- Collected Medicaid data for children 0-3 years and imported that data into NMSIIS to address data gaps.

Public Health
- Encouraged providers to reach out to patients with information about the safety measures being taken to protect against COVID-19 (see COVID–19 related immunization responses).
- Used reminder/recall tools, such as text messaging, to reiterate the importance of well visits and staying up to date on vaccines.

Patient & Provider Engagement/Education
- Created a community health worker curriculum and developed immunization training provisions.

COVID-19-related Immunization Responses

MEDICAID CAMPAIGN:
via text, call and letter

"Call, don't cancel"
Encourage parents, guardians and patients to contact their provider's office to talk about the best, safest way to stay up-to-date!

Get rewards for Well-Baby visits!
Member can earn 50 Centennial Reward points for each Well-Baby Check Up

DOH CAMPAIGN:
Creative Dr. Visits
Work with providers to establish safe practices for in-person visits (i.e. sick visits in the morning and well visits in the afternoons)

For more information, please contact Wanicha Burapa (Medicaid Medical Director, NM Human Services Department, Medical Assistance Division) at wanicha.burapa2@state.nm.us.

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Hawaii's individual goals for this project were:

1. Initiate data sharing agreement between the state Medicaid program (MedQuest) and Immunization Registry

2. Stand up a sustainable Hawaii Immunization Registry (HIR)

3. Modernize technology and increase interoperability

Project Successes

Funding

- Approved for a federal Health Information Technology (HITECH) administrative funding request that will support IIS infrastructure development.

IIS Infrastructure

- Approved funding and execution of a technical refresh to restart an existing non-functional IIS.

- Purchased new servers, new and updated software, and new licenses to ensure HIR can perform interoperability/data exchange with provider systems, which have been upgraded.

Data Analysis

- Completed a technical refresh that will allow HIR to become operational and allow for interoperability/data exchange of backlog of immunization data held by providers, pharmacies, and clinics while HIR was non-operational.

- Transitioned data to the upgraded HIR providing the Hawaii Immunization Program the ability to look at provider vaccine ordering and administration to determine trends and help where needed to improve immunization rates.

Medicaid

- Established an Office of Health Analytics within Hawaii MedQuest through Hawaii legislation.

Public Health

- Enacted legislation requiring HPV, Tdap, and Meningococcal vaccination for 7th grade enrollment.

- Updated Hawaii's immunization requirements to conform with the Advisory Committee on Immunization Practices (ACIP) national recommendations.

Patient & Provider Engagement/Education

- Promoted the Hawaii immunization program's annual Stop Flu at School Vaccination Program, providing influenza vaccines for children in Hawaii public schools.

- Vaccinated 25,607 students during the 2019-2020 flu season, of which 47% (12,153 children) were MedQuest (Medicaid) insured or had no insurance.

Stakeholder Collaboration

- Fostered collaboration between Attorneys General with both Hawaii Department of Health and Department of Human Services, with the goal of sharing IIS data with Medicaid to monitor and improve immunization rates.

- Increased collaboration between Hawaii's Medicaid agency, Immunization Program, and IIS staff, which resulted in a request and approval for $4.4 million dollars in administrative funding through HITECH to support Hawai'i IIS infrastructure development.

For more information, please contact Ronald Balajadia (Hawaii Immunization Branch Chief) at Ronald.balajadia@doh.hawaii.gov.

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