

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.

## 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.

- **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).**

## Does this mean I can use state supply vaccine for all Vermonters regardless of age or insurance status?

No, currently the Vermont Adult Vaccine Program (VAVP) does not supply any vaccines to anyone 65 years or older, regardless of Medicare or insurance status. The changes enacted are to Medicare Part D, a federal program, and will not change the eligibility for VAVP supplied vaccines.

## Does this mean all Vermonters 65 years and older have no copays for vaccines?

No, the changes apply for those who have Medicare Part D coverage. For people who do not have Medicare Part D coverage, no changes were required by this legislation.

CMS has stated that people who have drug coverage will also benefit from this new law. Often, commercial plans mirror the Medicare Part D coverage. Patients with Medicare Advantage prescription drug coverage or commercial drug coverage should be encouraged to reach out to their insurers to learn more.

## What if I want to start carrying private purchase supply vaccine and haven't before? How do I bill Medicare Part D?

Additional information on how Medicare Part D works is available in the December 2022 CMS Medicare Learning Network resource identified as MLN908764 titled *Medicare Part D Vaccines*. Medicare Part D is also known as the Medicare drug plan and many provider offices are considered out-of-network; collaborate with your office's billing specialist to determine next steps.

## Was expanded Medicare Part D vaccine access the only policy change through the Inflation Reduction Act?

No, the Inflation Reduction Act was a significant piece of federal legislation that included policy changes and funding for many areas including climate change, tax reform, manufacturing and lowering health care costs. Another important health care change is the cap on insulin cost-sharing to \$35/month.

## 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).