December 20, 2021

The Honorable Xavier Becerra
Secretary
U.S. Department of Health and Human Services

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare and Medicaid Services

Re: Medicare, Medicaid, and Private Payer Coverage and Payment of Vaccine Counseling

On behalf of the American Academy of Family Physicians (AAFP), representing more than 133,500 family physicians and medical students across the country, I write to thank you for taking action to cover and pay for vaccine counseling for children covered by Medicaid and the Children’s Health Insurance Program (CHIP) and urge you to implement similar requirements for adult Medicaid beneficiaries, as well as all individuals enrolled in Medicare and private health plans.

The AAFP applauded President Biden’s announcement that the Centers for Medicare & Medicaid Services (CMS) would require state Medicaid agencies and managed care plans to cover and pay for COVID-19 vaccine counseling for children up to age 21 when it is provided separately from vaccine administration. The AAFP advocated for separate, appropriate payment for vaccine counseling because it will support family physicians and other trusted clinicians that patients have turned to for vaccine information and ultimately bolster vaccine confidence. To optimize the benefits of this important policy change and ensure families have equitable access to vaccine counseling, we recommend CMS release guidance to states detailing how to implement separate coverage and payment for counseling.

Family physicians have been on the frontlines of the COVID-19 pandemic and they have played an enormous role in achieving the progress we have collectively made in vaccinating Americans against COVID-19. However, much of this work has been uncompensated since Medicare and Medicaid historically do not pay clinicians for counseling patients about vaccines if that counseling is not part of a visit where the vaccine is administered.

Primary care physicians are regularly providing separate vaccine counseling because they are the public’s most trusted source of vaccine-related information. When individuals are asked who they trust to provide reliable information about the COVID-19 vaccines, personal doctors, including pediatricians, top the list, with 83 percent of adults saying they trust their own doctor a great deal or a fair amount and 85 percent of parents saying the same about their child’s pediatrician.1

For some patients and families, deciding to receive a COVID-19 vaccine requires lengthy and repeated conversations with their trusted clinician to fully address their questions and concerns. Many patients need several counseling sessions before they decide to get themselves or their family
members vaccinated. In addition, physicians have and will be called upon to counsel patients about vaccines offered in other settings outside the medical home, such as pharmacies and schools. Inability to receive counseling payment for vaccines given at other sites has been particularly problematic in jurisdictions that have not prioritized vaccine access in primary care clinics.

The President’s announcement confirmed that more than two in three vaccinations are happening at local pharmacies but many patients only book a pharmacy appointment after they have consulted their trusted primary care physician.

Appropriately paying for vaccine counseling will help achieve the President’s goals of improving child COVID-19 vaccination rates and booster vaccination rates for adults. Families rely on their primary care physicians for the latest information on the safety and effectiveness of vaccines against emerging variants and in light of new scientific evidence. However, these uncompensated services are exacerbating practices’ persistent financial strain. Primary care clinicians must be fairly paid for providing these services, including when they are provided via a telehealth or audio-only visit, to ensure patients can continue accessing the level of counseling they need to become vaccinated.

In order to increase vaccine confidence, promote wider uptake of vaccines, and end the COVID-19 pandemic, the AAFP urges CMS to require coverage and payment for separate vaccine counseling for all Medicare and Medicaid beneficiaries, as well as individuals enrolled in group health plans and qualified health plans. CMS should also ensure that this coverage extends to telehealth and audio-only visits to facilitate equitable access to counseling. Covering standalone vaccine counseling will ensure physicians are appropriately compensated for the time they spend support their patients in making important immunization decisions.

Thank you for your attention to this important issue. Should you have any questions, please contact Meredith Yinger, Senior Regulatory Strategist, at myinger@aafp.org or 202-235-5126.

Sincerely,

Ada D. Stewart, MD, FAAFP
Board Chair, American Academy of Family Physicians

Cc: Department of Treasury
    Department of Labor

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