

June 14, 2021

The Honorable Frank Pallone, Jr.  
Chair  
House Committee on Energy and Commerce  
2125 Rayburn House Office Building  
Washington, DC 20515

The Honorable Anna Eshoo  
Chair  
House Subcommittee on Health  
2125 Rayburn House Office Building  
Washington, DC 20515

The Honorable Cathy McMorris Rodgers  
Ranking Member  
House Committee on Energy and Commerce  
2322-A Rayburn House Office Building  
Washington, DC 20515

The Honorable Brett Guthrie  
Ranking Member  
House Subcommittee on Health  
2322-A Rayburn House Office Building  
Washington, DC 20515

**RE: House Committee on Energy and Commerce Subcommittee on Health Hearing on Booster Shot: Enhancing Public Health Through Vaccine Legislation**

Dear Chairs Pallone and Eshoo and Ranking Members McMorris Rodgers and Guthrie:

On behalf of the Patient Access Network (PAN) Foundation, we appreciate the opportunity to submit testimony for the record for the June 15 hearing in support of the *Protecting Seniors Through Immunization Act* (H.R. 1978). PAN lauds your leadership for holding a hearing on increasing access to vaccines and including this important legislation for seniors and the disabled that would address a long-standing structural inequity that hinders immunization opportunities for Medicare beneficiaries.

Founded in 2004, PAN is a non-profit organization whose mission is to help underinsured people with life-threatening, chronic, and rare diseases get the medications and treatments their physicians prescribe for them by providing financial assistance for their out-of-pocket costs and by advocating for improved access and affordability. PAN provides patients with direct assistance through nearly 70 disease-specific programs and also collaborates with national patient advocacy organizations to provide patients with education and additional support. Since 2004, nearly one million underinsured patients have received financial assistance from the Foundation.

As the COVID-19 pandemic has made all too clear, seniors are vulnerable when they are not fully vaccinated. Unfortunately, older adult vaccination rates remain low. According to the Centers for Disease Control and Prevention, more than 50,000 adults die annually from vaccine-preventable diseases.<sup>1,2</sup> Treatment for these preventable illnesses is estimated to have cost the Medicare program \$106 billion from 2016 to 2018.<sup>3</sup>

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<sup>1</sup> National Foundation for Infectious Diseases. 10 Reasons to Get Vaccinated. November 2019. Available at: <https://www.nfid.org/%20immunization/10-reasons-to-get-vaccinated/>.

<sup>2</sup> CDC. Vaccine Preventable Diseases. Available at: <https://www.cdc.gov/vaccines/adults/vpd.html>.

<sup>3</sup> Liow C, Hughes R, Petrilla A, Kumar S, Trost A, Shaw M, Cole M, Kornfield T. Medicare Spent \$106B on Vaccine-Preventable Diseases Over 3 Years. Avalere. June 2, 2020. Available at: <https://avalere.com/insights/medicare-spent-106b-on-vaccine-preventable-diseases-over-3-years>.

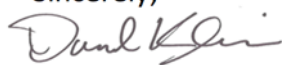
Although many Part D plans cover vaccines, they usually require co-pays. The higher the co-pays, the more likely it is that patients will forgo the vaccine. An analysis of 2020 Part D plans found that plans require copayments for Part D-covered vaccines 87% of the time, and allow \$0 cost-sharing for select Part D vaccines only 4% of the time.<sup>4</sup> Consequently, the higher the cost sharing, the more likely it is that the beneficiary will not elect to receive the vaccine. One study found that immunization rates are higher for vaccines covered by Part D plans with lower cost sharing, with a 40-60% higher uptake for the shingles vaccine among enrollees in Part D plans that offered \$0 cost sharing.<sup>5</sup> Another study found that there was a 38.9 percent abandonment rate for the shingles vaccine at the pharmacy counter with patient OOP costs the most significant predictor of abandonment.<sup>6</sup>

Copayments apply to vaccines covered under Medicare Part D (tetanus-diphtheria-acellular pertussis (Tdap) and varicella zoster (shingles)) but not vaccines under Part B (flu, pneumococcal), which are available with no cost to the beneficiary. The *Protecting Seniors Through Immunization Act* would remove cost as a barrier by mandating no cost-sharing in Part D for any vaccines recommended by the CDC's Advisory Committee on Immunization Practices. The bill would also improve education and access to recommended vaccines for Medicare beneficiaries, with the goal of helping to increase vaccination rates.

The PAN Foundation appreciates your leadership in seeking solutions to increase access to and affordability of health care for more Americans. Providing first dollar coverage for all vaccines under Medicare by eliminating vaccine copays under Medicare Part D is an important step in preventing illness for seniors and the disabled. We hope Congress will pass this legislation this year and remove a key barrier to vaccine uptake.

If you would like further information or have questions, please contact Amy Niles, Executive Vice President at [aniles@panfoundation.org](mailto:aniles@panfoundation.org).

Sincerely,



Dan Klein, MHS  
President and Chief Executive Officer

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<sup>4</sup> Hughes R, Avina M, Francis M, Dagne H, OLaughlin C, Diamond N. Medicare Part D Plans Continue to Require Cost Sharing for Vaccines. Avalere. April 16, 2020. Available at: <https://avalere.com/insights/medicare-part-d-plans-continue-to-require-cost-sharing-for-vaccines>

<sup>5</sup> Hughes R, Dagne H, Diamond N. Fewer Seniors Get Vaccinated as Their Out-of-Pocket Costs Increase. Avalere. July 19, 2018. Available at: [https://avalere.com/insights/fewer-seniors-get-vaccinated-as-their-out-of-pocket-costs-increase#:~:text=Part%20D%20beneficiaries%20encounter%20substantial,prescription%20drug%20plans%20\(PDPs\).](https://avalere.com/insights/fewer-seniors-get-vaccinated-as-their-out-of-pocket-costs-increase#:~:text=Part%20D%20beneficiaries%20encounter%20substantial,prescription%20drug%20plans%20(PDPs).)

<sup>6</sup> Akinbosoye OE, Taitel MS, Grana J, Macpherson C. Factors Associated with Zostavax Abandonment. American Journal of Pharmacy Benefits. Am J Pharm Benefits. 2016;8(4):84-89. Available at: [https://ajpblive.s3.amazonaws.com/media/pdf/AJPB\\_0708\\_2016\\_Akinbosoye.pdf](https://ajpblive.s3.amazonaws.com/media/pdf/AJPB_0708_2016_Akinbosoye.pdf)