

Vaccination Programs: Reducing Client Out-of-Pocket-Costs

Summary Evidence Tables - Updated Evidence (search period: 1997-2012)

Study	Location and Intervention	Study Population and Sample	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow-up time
<p>Author (Year): Andrews (2005)</p> <p>Study Period: (2000-2002)</p> <p>Design Suitability (Design): Least (cross sectional)</p> <p>Outcome Measure: Pneumococcal</p>	<p>Location: Victoria, Australia</p> <p>Intervention: Reduced Out-of-Pocket Cost (free pneumococcal vaccine)</p>	<p>Telephone survey of 385 persons were eligible and 326 (85%) completed the survey. Median age of a validated sample was 73 years (range: 66-93 years)</p> <p>Persons older than 65</p>	<p>Proportion of persons that received a vaccination for Pneumococcal.</p> <p>Medical records were reviewed to validate vaccination</p>	<p>10% in 1998</p>	<p>50% in 2000.</p> <p>50-10= 40%</p>	<p>40%</p>	<p>2 years</p>
<p>Author (Year): Florida Medical Quality Assurance (1998)</p> <p>Design Suitability (Design): Least (before and after)</p> <p>Outcome Measure: Influenza</p>	<p>Location: Florida USA</p> <p>Intervention: Reduced Out-of-Pocket Cost (free influenza vaccine and NO patient co-pay) + Provider education + Client education</p> <p>Time: 1992 before free vaccines and 1994 after free vaccines.</p>	<p>Study Population: 383 patients enrolled for at least one year before 1992</p> <p>378 patients enrolled continuously in 1994</p> <p>Persons older than 65</p> <p>HMO: primary care, skilled nursing facility.</p> <p>Providers: physicians and nurses</p>	<p>The rate of influenza immunization</p>	<p>Rate before 1992 was 28%.</p> <p>Market A 15%</p> <p>Market B 27%</p> <p>Market C 24%</p> <p>Market D 32%</p>	<p>Rate after 1994 was 55%</p> <p>Market A 66%</p> <p>Market B 48%</p> <p>Market C 45%</p> <p>Market D 59%</p> <p>The program increased the percentage of influenza immunization among the Medicare beneficiaries. They concluded that removing the cost of vaccines was important to improving coverage.</p>	<p>55-28=27% increase. 95% CI[20 to 33%]</p>	<p>2 year interval</p>

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<p>Author (Year): Freed (1999)</p> <p>Design Suitability (Design): Least (before and after)</p> <p>Outcome Measure: Childhood immunizations</p>	<p>Location: North Carolina</p> <p>Intervention: Reduced Out-of-Pocket Cost</p> <p>State of North Carolina provides free vaccines to providers.</p> <p>Evaluation to determine the impact of a free vaccine program in North Carolina.</p>	<p>Study Population: Population level data Children: birth to 24 months Private practice, community health centers, hospital affiliated clinics, health departments</p> <p>Providers not identified</p> <p>January –February 1994 N=1241; 45% of sample</p> <p>January –February 1995 N=1526; 55%</p> <p>Surveys given to 143 parents.</p> <p>White 68%; Black 27%; His 5%</p>	<p>Childhood immunization series 7 months to 24 months.</p>	<p>age group 15 months: Up to date immunization 1994= 80%;</p> <p>Age group 24 months; 1994= 79% (n=980)</p>	<p>age group 15 months: Up to date 1995= 95%</p> <p>Age group 24 months; 1995= 84% (n=1281)</p>	<p>Age group 24 months; 5% difference 95% CI [2 to 8]</p>	<p>1 year</p>
<p>Author (Year): Kleschen (2000)</p> <p>Design Suitability (Design): Least (before-after)</p> <p>Outcome Measure: pneumococcal (PPV)</p>	<p>Location: Guam</p> <p>Intervention: Multicomponent program Provider reminder (blue sheet for chart) + Prov Education + Standing Orders + Enhanced Access + Reduced client out-of-pocket costs- (waived the usual co-payment of \$10) + Client Reminders + Monitoring Database</p> <p>Comparison: Before-after</p>	<p>Study Population: Actively enrolled patients with confirmed diagnosis of diabetes</p> <p>Adults with diabetes Outpatients</p> <p>Provider: Physicians</p> <p>N=1278</p>	<p>Change in pneumococcal vaccination coverage of diabetic patients</p>	<p>Pre 42%</p>	<p>Post 62%</p>	<p>+ 20 pct points [16, 23]</p>	<p>4 months (Oct-Jan)</p>

Study	Location and Intervention	Study Population and Sample	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow-up time								
<p>Author (Year): Weir (2000)</p> <p>Design Suitability (Design): Least (before and after)</p> <p>Outcome Measure: Influenza vaccination</p>	<p>Location: Canterbury, New Zealand</p> <p>Intervention: Reduced Out-of-Pocket Cost</p> <p>Free Vaccines for people 65 and older in rest homes (nursing homes) and for staff</p>	<p>Setting: Nursing homes</p> <p>Study Population: Persons 65 and older</p> <p>(N)</p> <table border="0"> <tr> <td>1996</td> <td>1340</td> </tr> <tr> <td>1997</td> <td>1973</td> </tr> <tr> <td>1997 (A)</td> <td>891</td> </tr> <tr> <td>1997 (B)</td> <td>1082</td> </tr> </table>	1996	1340	1997	1973	1997 (A)	891	1997 (B)	1082	<p>Percentage of persons vaccinated for influenza</p>	<p>1996 survey (48 homes); n= 1005 (74% vaccinated) Staff: 15% vaccinated in homes that did not offer free vaccines</p>	<p>1997 Cohort A and B; N= 3472 (76%)</p> <p>Staff: 35% vaccinated in homes that offered free vaccines Staff in homes that provided free vaccines had a higher vaccination rate. OR 3.2 (95% CI 1.8-5.6)</p>	<p>Change 2%; 95% CI (-1 to 5)</p>	<p>1996 and 1997</p>
1996	1340														
1997	1973														
1997 (A)	891														
1997 (B)	1082														
<p>Author (Year): Humair (2002)</p> <p>Design Suitability (Design): Least (Before- after)</p> <p>Outcome Measure: Influenza</p>	<p>Location: Geneva, Switzerland</p> <p>Intervention: Multi-component: Client education+ Access+ Provider education+ assessment and feedback (PAF) + ROPC: Free vaccines</p>	<p>Setting: University based public primary care clinic</p> <p>Study Population: Control (historical): 318 patients >64 years who visited clinic in 1995</p> <p>Adult 65 and older</p> <p>Intervention: 346 patients >64 years who visited clinic in 1996</p> <p>Note: 144 patients, visited in both phases; 376 visited in one phase only. Analysis conducted separately</p>	<p>Influenza vaccination coverage levels among patients in 1995 compared to 1996 (pre and post intervention)</p>	<p>Pre-intervention: 21.7% <u>Both phases (n=144)</u> Pre: 29.2% One phase (n=174) Pre: 15.5%</p>	<p>Post- Intervention: 51.7%</p> <p><u>Both phases</u> Post: 69.4%</p> <p>One phase(n=202) Post: 39.1%</p>	<p>+30 pct pts [CI: 23, 37] Relative +138%</p>	<p>12 months</p>								

Study	Location and Intervention	Study Population and Sample	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow-up time
<p>Author (Year): Zimmerman (2003)</p> <p>Design Suitability (Design): Least (before-after)</p> <p>Outcome Measure: Influenza</p>	<p>Location: Pittsburgh, PA</p> <p>Intervention: Multi-component Provider Education + Standing Orders + Provider Reminder + Reduced Out-of-Pocket Cost + Client Education + Expanding Access + Client Reminder</p>	<p>Setting: (Health Center A&B)</p> <p>Study Population: Patients were randomly recruited from both health centers billing records</p> <p>Adults 50 yrs of age and older</p> <p>N = 648 eligible patients 154 could not be reached <u>119 refused</u> Response rate= 58% Refusal rate=18%</p> <p>N = 375 (included in analysis)</p>	<p>Immunization rates of influenza defined by:</p> <ul style="list-style-type: none"> self-reported survey administratio n rate from EMRs total doses 	<p>Vaccination-EMRs (medical records)</p> <p>01-02 30%</p> <p>00-01 24%</p>	<p>01-02 30%</p>	<p>Pct pt Δ+6</p> <p>Relative Change: +25%</p>	<p>2 years</p>
<p>Author (Year): Middleman (2004)</p> <p>Design Suitability (Design): Least (before and after)</p> <p>Outcome Measure: Hepatitis B</p>	<p>Location: Houston, TX</p> <p>Intervention: Multicomponent, Reduced Out-of-Pocket Cost: free vaccines + Provider education</p>	<p>Study Population: Fifth grade and middle school students</p> <p>1998-1999 65 schools Female 1900 (52%), male 1773 Hispanic 61%, African American 25%, White 4%, Asian 2%, Other/no response 9%</p> <p>1999-2000 75 schools Female 2825 (52%) male 2648 Hispanic 61%, African American 30%, White 4%, Asian 2%, Other/no response 3%</p>	<p>Completion of the hepatitis B Immunization series at 0, 1 and 4 months.</p>	<p>NA</p>	<p>1dose 98-99 3673 (54%) 99-00 4200 (77%)</p> <p>3 doses 98-99 1996 (61%) 99-00 3234 (59%)</p> <p>Females students and students with insurance were significantly more likely to receive the first dose.</p> <p>Females were more likely to be vaccinated even if they did not have insurance.</p>		

Study	Location and Intervention	Study Population and Sample	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow-up time								
<p>Author (Year): Chen (2005)</p> <p>Design Suitability (Design): Least (before and after)</p>	<p>Location: Taiwan</p> <p>Intervention: Reduced Out-of-Pocket Cost: free childhood vaccinations</p> <p>Compared two points in time: 1989 vs 1996</p>	<p>Study Population: 1 year old Infants born in Taiwan</p> <p>1989 (N = 1926); 86% completed the interview (N = 1656) Final N = 1398</p> <p>1996 (N = 3998); 90% completed interview (N = 3598) Final N = 3185</p>	<p>Rate of immunization coverage: BCG; Hep B; oral polio; diphtheria, tetanus and pertussis; Measles;</p>	<table border="0"> <tr> <td><u>Period</u></td> <td><u>Rate</u></td> </tr> <tr> <td>Pre:</td> <td>66%</td> </tr> </table>	<u>Period</u>	<u>Rate</u>	Pre:	66%	<table border="0"> <tr> <td><u>Period</u></td> <td><u>Rate</u></td> </tr> <tr> <td>Post</td> <td>88%</td> </tr> </table>	<u>Period</u>	<u>Rate</u>	Post	88%	<p>22% [19 to 25]</p>	
<u>Period</u>	<u>Rate</u>														
Pre:	66%														
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Post	88%														
<p>Author (Year): Vila-Corcoles (2006)</p> <p>Design Suitability (Design): Least (Before-after study)</p> <p>Outcome Measure: Pneumococcal vaccine</p>	<p>Location: Catalonia, Spain</p> <p>Intervention: Reduced Out-of-Pocket Cost: free pneumococcal vaccine and medical visit</p>	<p>Study Population: Setting: Community health centers: Outpatient</p> <p>Study Population: Persons older than 65 years of age that had at least one year of medical records data. Providers: Primary care physicians</p> <p>Patients: 10,410 (4481 male and 5929 female)</p> <p>Characteristics: Age: Mean age 74 to 76 years</p>	<p>Pneumococcal vaccination rate</p>	<p>Vaccination rate before the program: 2000-6%</p>	<p>After program implemented 2001-44% 2002-51% 2003-53%</p> <p>Higher rates of vaccination in high risk groups: diabetes (66%); active malignancy (65%); history of stroke (64%); chronic lung disease (64%).</p>	<p>47%</p>	<p>3 years</p>								

Study	Location and Intervention	Study Population and Sample	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow-up time
<p>Author (Year): Wiggs-Stayner (2006)</p> <p>Design Suitability (Design): Greatest (Other design w/concurrent comparison)</p> <p>Outcome Measure: Free Influenza (flu mist)</p>	<p>Location: Indiana, USA</p> <p>Intervention: Reduced Out-of-Pocket Cost: Free influenza vaccine + client education(informational flyer)</p> <p>Two schools received the vaccine and two control schools did not.</p> <p>Providers: nurses</p>	<p>Study Population: elementary school children 5-8 years 2 doses If 9-49 then 1 dose.</p> <p><u>Intervention</u> School #1 264 students School #2 287 students</p> <p><u>Control</u> School #1 392 students School #2 349 students</p>	<p>Vaccination rate and attendance.</p>	<p>NA</p>	<p>School #1. 222 eligible; 143 (64%) vaccinated.</p> <p>School #2. 273 eligible; 134 (49%) vaccinated</p> <p>Average increase of 57%</p>		<p>2 years</p>

Study	Location and Intervention	Study Population and Sample	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow-up time
<p>Author (Year): Carpenter (2007)</p> <p>Design Suitability (Design): Least (Before-after study)</p> <p>Outcome Measure: Influenza</p>	<p>Location: Knox county, Tennessee</p> <p>Intervention: Multicomponent Reduced Out-of-Pocket Cost: Free vaccine Influenza (live attenuated) + Client education</p>	<p>Study Population: Students and adults from 5 to 49 years of age. 81 schools with 53 420 students. 50 elementary schools, 14 middle schools, and 12 high schools.</p> <p>Providers: nurse, physicians and others Characteristics: 48% on free/reduced lunch</p> <p>Gender: 53% female</p> <p>SES: not reported</p>	<p>Number and (%) vaccinated</p>	<p>NA</p>	<p>No (%) vaccinated # schools Elementary 13,809 (56%) 50</p> <p>Middle 5576 (45%) 14</p> <p>High 4813 (12%) 12</p> <p>Total 24198 (76%) 76</p> <p>47% of elementary students fully vaccinated. 3626 (62%) of staff were vaccinated.</p>		<p>6 months</p>

Study	Location and Intervention	Study Population and Sample	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow-up time
<p>Author (Year): Malmvall (2007)</p> <p>Design Suitability (Design): Least (Before and after)</p> <p>Outcome Measure: Influenza and pneumococcal</p>	<p>Location: Sweden</p> <p>Intervention: Multicomponent (Web based registry monitoring system) + Provider Education + Reduced Out-of-Pocket Cost-free vaccines + Provider assessment and feedback (via web registry) + Media campaign to let people know the vaccine was free</p>	<p>Study Population: All persons 65 and older that lived in Jonkoping county (Sweden).</p> <p>Aged 65 years and older and people with chronic diseases</p> <p>Health center Providers: Primary care physicians and nurses</p> <p>Note: vaccination rate was lower than 50% in the general population.</p>	<p>Pre: 2001 and before: # of doses delivered to the county.</p> <p>Post: Documented Influenza and pneumococcal vaccinations after 2002</p>	<p>1999 39% 2000 45% 2001 52%</p>	<p>2002 59% 2003 66% 2004 68% 2005 70%</p>	<p>18%</p>	<p>2002 to 2005</p>
<p>Author (Year): Ridda (2007)</p> <p>Design Suitability (Design): Least (Before and after)</p> <p>Outcome Measure: Pneumococcal vaccine</p>	<p>Location: Sydney, Australia</p> <p>Intervention: Reduced Out-of-Pocket Cost</p> <p>Assessment of a publically funded vaccine program.</p>	<p>Study Population: A convenience sample of 833 of persons older than 65 years of age (653 records were validated). Persons older than 65</p> <p>Inpatient setting Providers: Physicians</p> <p>Gender: 56% female (validated group)</p>	<p>Percentage of pneumococcal vaccinations after 2005</p>	<p>Authors report 39%.</p>	<p>2005 N= 210 73% vaccinated for pneumococcal</p>	<p>72- 39 = 34%</p>	<p>1 year</p>

Study	Location and Intervention	Study Population and Sample	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow-up time								
<p>Author (Year): Racine (2007)</p> <p>Study Period: 1995-2003</p> <p>Design Suitability (Design): Least (Cross-sectional)</p> <p>Outcome Measure: Childhood series PCV</p>	<p>Location: United States</p> <p>Intervention: Reduced Out-of-Pocket Costs (Universal: states that provide free vaccines to all residents vs Non-universal states)</p>	<p>Settings: Nationwide (State-level)</p> <p>Providers: Not reported</p> <p>Study Population:</p> <ul style="list-style-type: none"> • Children • 19-35 months of age 	<p>Compared respondents in states with and without universal purchase of vaccines</p>			<p>Universal purchase moderated the effect of maternal education and was associated with higher vaccination coverage</p>									
<p>Author (Year): Al-Suhkni (2008)</p> <p>Study Period: 1999-2000 and 2002</p> <p>Design Suitability (Design): Least (Before-after)</p> <p>Pneumococcal Influenza</p>	<p>Location: Ontario, Canada (Metropolitan Toronto/ Peel Region)</p> <p>Intervention: Reduced Out-of-Pocket Cost (publicly funded vaccine program)</p>	<p>Setting: 13 provinces and territories</p> <p>Providers: Not reported</p> <p>Study Population: Adults</p> <table border="1" data-bbox="596 893 966 1023"> <thead> <tr> <th>Group</th> <th>N</th> </tr> </thead> <tbody> <tr> <td><65 yrs at risk</td> <td>188</td> </tr> <tr> <td>≥65 yrs at risk</td> <td>154</td> </tr> <tr> <td>≥65 yrs healthy</td> <td>187</td> </tr> </tbody> </table>	Group	N	<65 yrs at risk	188	≥65 yrs at risk	154	≥65 yrs healthy	187	<p>Proportion of respondents reporting influenza vaccination</p> <p>Influenza</p> <p><65 yrs at risk ≥65 yrs at risk ≥65 yrs healthy</p> <p>Pneumococcal</p> <p><65 yrs at risk ≥65 yrs at risk ≥65 yrs healthy</p>	<p>40%</p> <p>86%</p> <p>67%</p> <p>2%</p> <p>1%</p> <p>0%</p>	<p>59%</p> <p>88%</p> <p>80%</p> <p>14%</p> <p>49%</p> <p>39%</p>		
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<p>Author (Year): Chang (2009)</p> <p>Study Period: 2004-2005</p> <p>Design Suitability (Design): Least (Post only)</p> <p>Outcome Measure: HAV, HBV</p>	<p>Location: San Francisco, CA</p> <p>Intervention: Reduced Out-of-Pocket Cost (reduced fee) + Expanded Access</p>	<p>Setting: Community-based clinic</p> <p>Providers: Not reported</p> <p>Study Population: Foreign-born Chinese adults</p> <p>N=586 adults (unprotected)</p>	<p>Completion of HBV and HAV Vaccine series among 3 for Life participants</p> <p>HBV+HAV HBV HAV</p>		<p>74%</p> <p>11%</p> <p>11%</p>		1 year									
<p>Author (Year): Durando (2009)</p> <p>Study Period: 2000-2005</p> <p>Design Suitability (Design): Least (Before-after)</p> <p>Outcome Measure: PCV-7</p>	<p>Location: Italy, Liguria Region</p> <p>Intervention: Reduced Out-of-Pocket Cost (universal)</p>	<p>Setting: Region-wide</p> <p>Providers: Not reported</p> <p>Study Population: Children: aged < 24 months</p> <table border="1"> <thead> <tr> <th>Group</th> <th>N</th> </tr> </thead> <tbody> <tr> <td>Pre (00-02)</td> <td>33946</td> </tr> <tr> <td>Post (03-05)</td> <td>35452</td> </tr> </tbody> </table>	Group	N	Pre (00-02)	33946	Post (03-05)	35452	<p>Impact of the immunization campaign on hospitalization rates attributable to <i>Streptococcus pneumoniae</i></p> <p>All cause</p>	<p>64.22 (58.4-70.46) per 10,000 person-years</p>	<p>54.44 (49.21-60) per 10,000 person-years</p>		5 years			
Group	N															
Pre (00-02)	33946															
Post (03-05)	35452															
<p>Author (Year): Crosby (2011)</p> <p>Study Period: 2007-2009</p> <p>Design Suitability (Design): Least (Cross-sectional)</p> <p>Outcome Measure: HPV vaccine</p>	<p>Location: USA, Kentucky</p> <p>Intervention: Reduced out-of-pocket costs (voucher to receive Gardasil)</p> <p>Comparison: cross-sectional</p>	<p>Clinics: N=2 rural clinics 1 urban clinic</p> <p>Young women</p> <ul style="list-style-type: none"> Aged 18-26 years Attending university rural clinic, rural community college clinic or urban university health clinic <table border="1"> <thead> <tr> <th>Group</th> <th>Neligible</th> <th>Nparticipated</th> </tr> </thead> <tbody> <tr> <td>Urban</td> <td>231</td> <td>209</td> </tr> <tr> <td>Rural</td> <td>505</td> <td>495</td> </tr> </tbody> </table>	Group	Neligible	Nparticipated	Urban	231	209	Rural	505	495	<p>HPV vaccine uptake rates (Dose 3)</p> <p>Urban</p> <p>Rural-a</p> <p>Rural-b</p>		<p>28.2%</p> <p>4.5%</p> <p>1.6%</p>		N/A
Group	Neligible	Nparticipated														
Urban	231	209														
Rural	505	495														

Study	Location and Intervention	Study Population and Sample	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow-up time
<p>Author (Year): Banach (2012)</p> <p>Study Period: 2008-2009</p> <p>Design Suitability (Design): Least (Cross-sectional)</p> <p>Quality of Execution: Fair (2 limitations)</p> <p>Outcome Measure: Influenza</p>	<p>Location: USA, New York City</p> <p>Intervention: Home visits + reduced out-of-pocket costs</p> <p>Comparison: Cross-sectional</p>	<p>To assess seasonal influenza vaccination coverage within an urban home-based primary care (HBPC) program</p> <p>Study population: All home-bound patients older than 65 years of age who received routine care from MSVD</p> <p>n=689 eligible adults</p>	<p>Receipt of influenza vaccination through the MSVD program</p>			<p>508 patients (689 eligible patients): 74% vaccination coverage</p>	<p>N/A</p>