

Annual Influenza Vaccination Disparities in Medicare Beneficiaries

Why should people get vaccinated against influenza?

Influenza (flu) is a potentially serious disease that can lead to hospitalization and in some cases, death. Every flu season is different, and influenza infection can affect people differently. Millions of people get the flu every year, hundreds of thousands of people are hospitalized, and thousands to tens of thousands of people die from flu-related causes every year. An annual seasonal flu vaccine is the best way to help protect against the flu. Vaccination has been shown to have many benefits including reducing the risk of flu illnesses, hospitalizations, and even the risk of flu-related death in children.¹

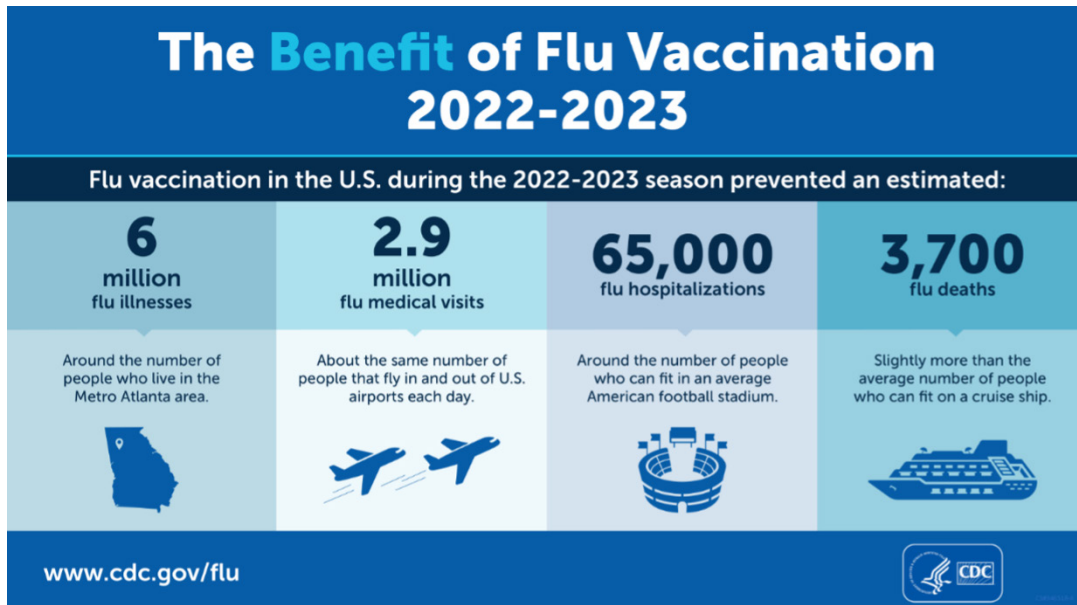
Who should get vaccinated this season?

Everyone 6 months and older should get a flu vaccine every season with rare exception. Vaccination to prevent flu is particularly important for people who are at higher risk of developing serious flu complications. It has been recognized for many years that people 65 years and older are at higher risk of developing serious complications from the flu compared with young, healthy adults.² This is in part because human immune defenses become weaker with increasing age. While flu seasons can vary in severity, during most seasons, people 65 years and older bear the greatest burden of severe flu disease. In recent years, for example, it is estimated that between about 70 percent and 85 percent of seasonal flu-related deaths have occurred in people 65 years and older, and between 50 percent and 70 percent of seasonal flu-related hospitalizations have occurred among people in this age group. Thus, influenza is often quite serious for people 65 and older.³

What are the benefits of the flu vaccine?

As shown in Figure 1, it is important that individuals get a flu vaccine, especially those who are in the higher risk bracket. CDC estimates that during the 2022-2023 season, flu vaccination prevented 6.0 million flu-related illnesses, 2.9 million medical visits, 65,000 hospitalizations, and 3,700 deaths.⁴

Figure 1. The Benefits of Flu Vaccination, 2022-2023



Are there any disparities in Medicare enrollees who are getting the flu vaccine?

Inequities in flu vaccination among people enrolled in Medicare persist. The Mapping Medicare Disparities Tool (MMD Tool)⁵ developed by Centers for Medicare & Medicaid Services (CMS) indicates, since 2012, flu vaccination coverage has been consistently lower among Black, Hispanic, and American Indian/Alaska Native (AI/AN) individuals enrolled in Medicare fee-for-service (FFS) as shown in Figure 2. Figure 3 presents, the flu vaccination rate among FFS enrollees varied by sociodemographic characteristics (i.e. sex, age, dual Medicare and Medicaid eligibility, original reason for Medicare entitlement groups). In 2022, the rate (age standardized) of FFS enrollees who received the flu vaccine was higher among White (50%) and Asian/Pacific Islander (API) individuals (49%). The rate among AI/AN enrollees was 37% followed by Black enrollees at 36%, and the Hispanic enrollees had the lowest rate of flu vaccination rate at 33%. FFS enrollees who were male (compared to female), age <64 (compared to 65+), dual eligible for Medicare and Medicaid (compared to Medicare only), and those whose original reason for entitlement was Disability Insurance Benefits had lower flu vaccination rates.

Figure 2. Age standardized Flu Vaccination Rate among Medicare FFS Enrollees by Race and Ethnicity, 2012 - 2022

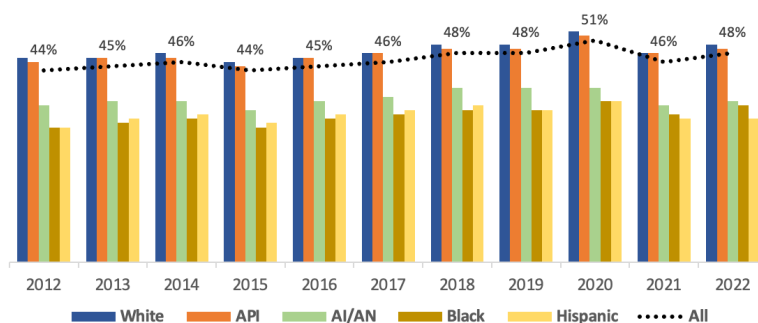
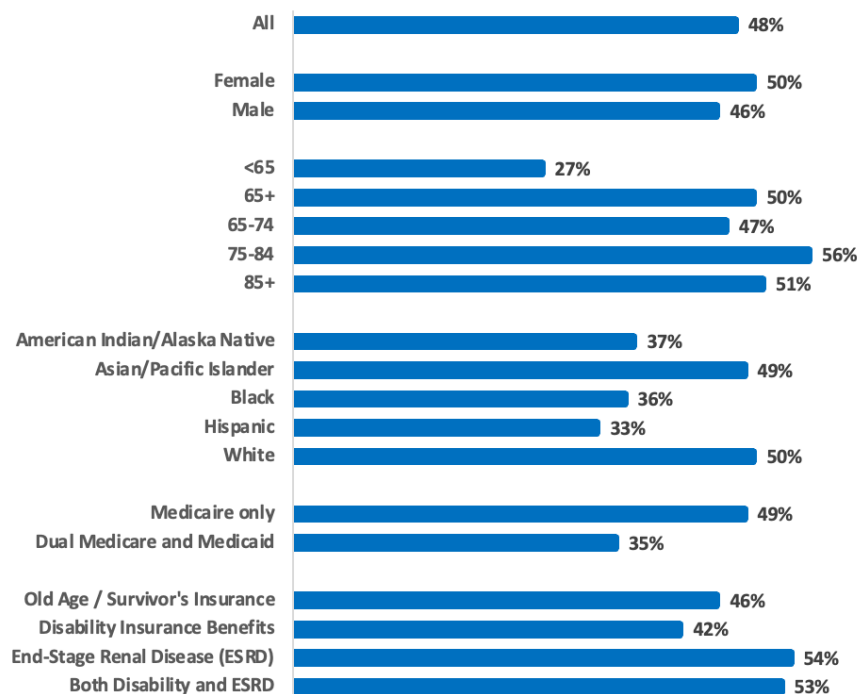


Figure 3. Flu Vaccination Rate among Medicare FFS Enrollees by Enrollee Characteristics, 2022



Note: Prevalence rates for sex, race and ethnicity, dual Medicare and Medicaid eligibility, and original reason for entitlement were age standardized rate.

The MMD Tool also presents the flu vaccination rate by geography across the minority groups. Figure 4 shows, in 2022, the flu vaccination rate among Medicare FFS enrollees were higher in Massachusetts, Connecticut, Delaware, Iowa, and Pennsylvania at 57, 56, 56, 55, and 55 percent, respectively. American Samoa, Northern Marianas, US Virgin Islands, and Puerto Rico had the lowest vaccination rates at 6, 11, 13, and 26 percent, respectively. The flu vaccination rate among minority racial and ethnic groups were different by geographic areas as shown in Figure 5. The darker the shade the higher the rate of vaccination. (For further details see the MMD Tool).

Figure 4. Flu Vaccine Rate among Medicare FFS enrollees by State/Territory and County, 2022

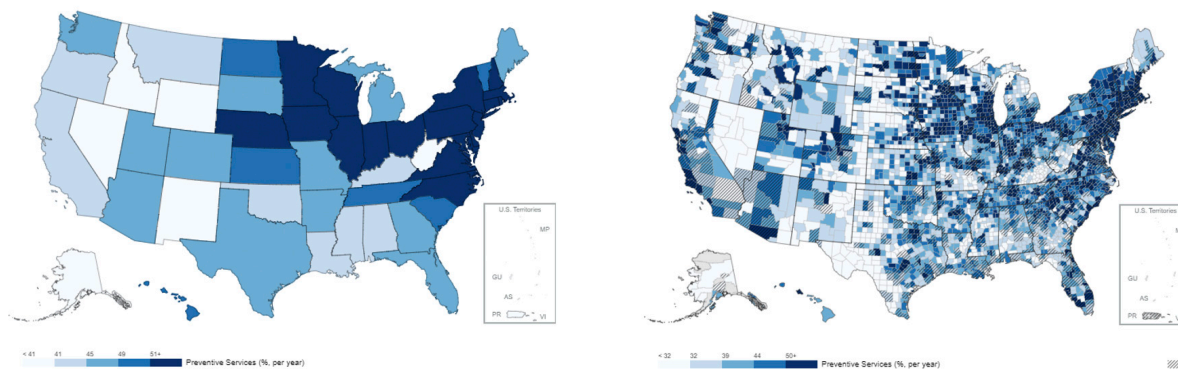
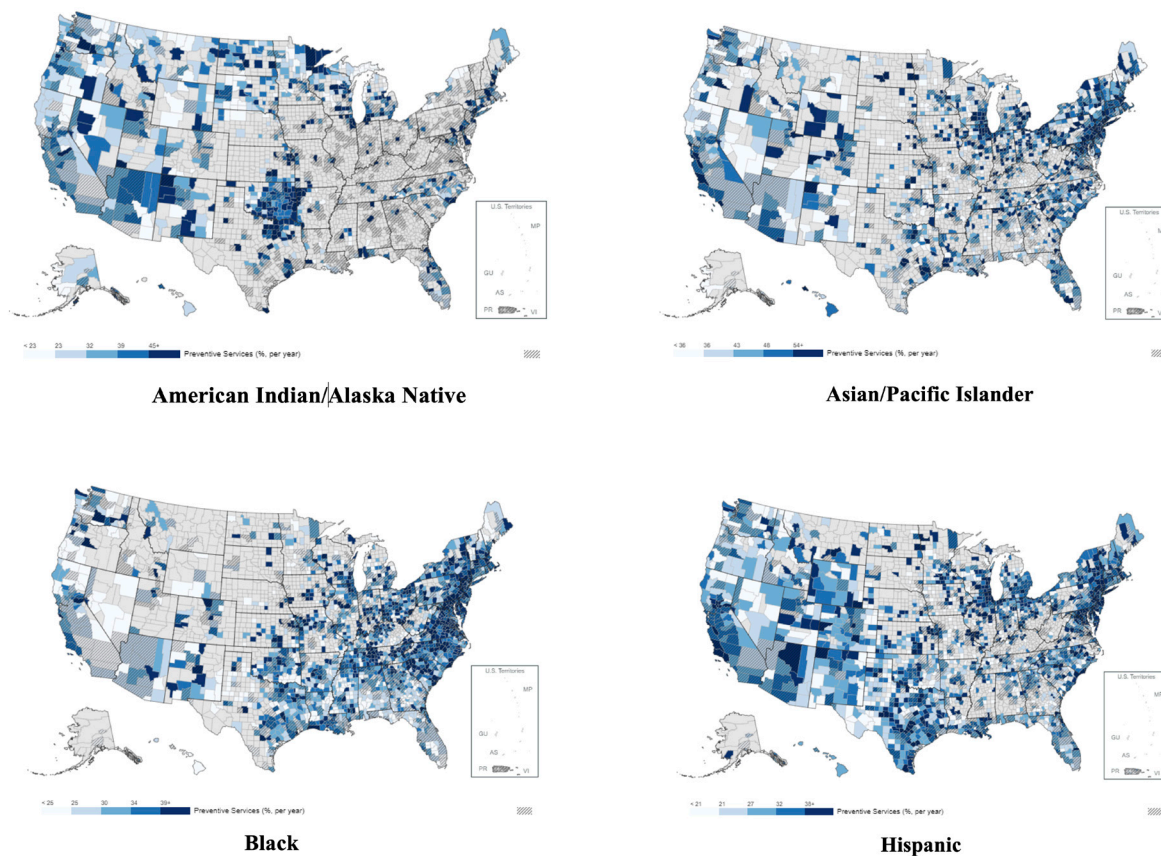


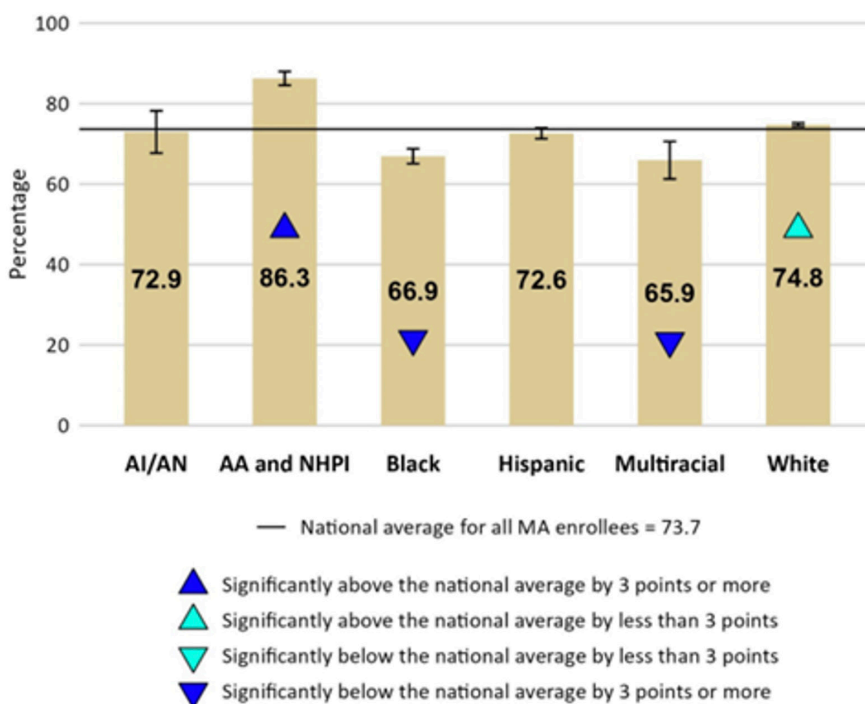
Figure 5. Flu Vaccine Rate among Minority Racial/Ethnic groups of FFS enrollees by County, 2022



In addition to disparities in who gets the flu vaccine in Medicare FFS, racial, ethnic, sex, and rural-urban disparities in flu vaccination exist for Medicare Advantage (MA) plan enrollees. The Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey results reported that Black, Hispanic, and Multiracial MA enrollees had annual flu vaccine rates below the national average.⁶

The data in Figure 6 below illustrates that the percentage of Black and Multiracial MA enrollees who received the flu vaccine were significantly below the national average in 2023. The percentage was above the national average for Asian American and Native Hawaiian or other Pacific Islander (AA and NHPI) and White MA enrollees, and it was similar to the national average for AI/AN and Hispanic MA enrollees.

Figure 6. Percentage of MA enrollees who got flu vaccine, by race and ethnicity, 2023

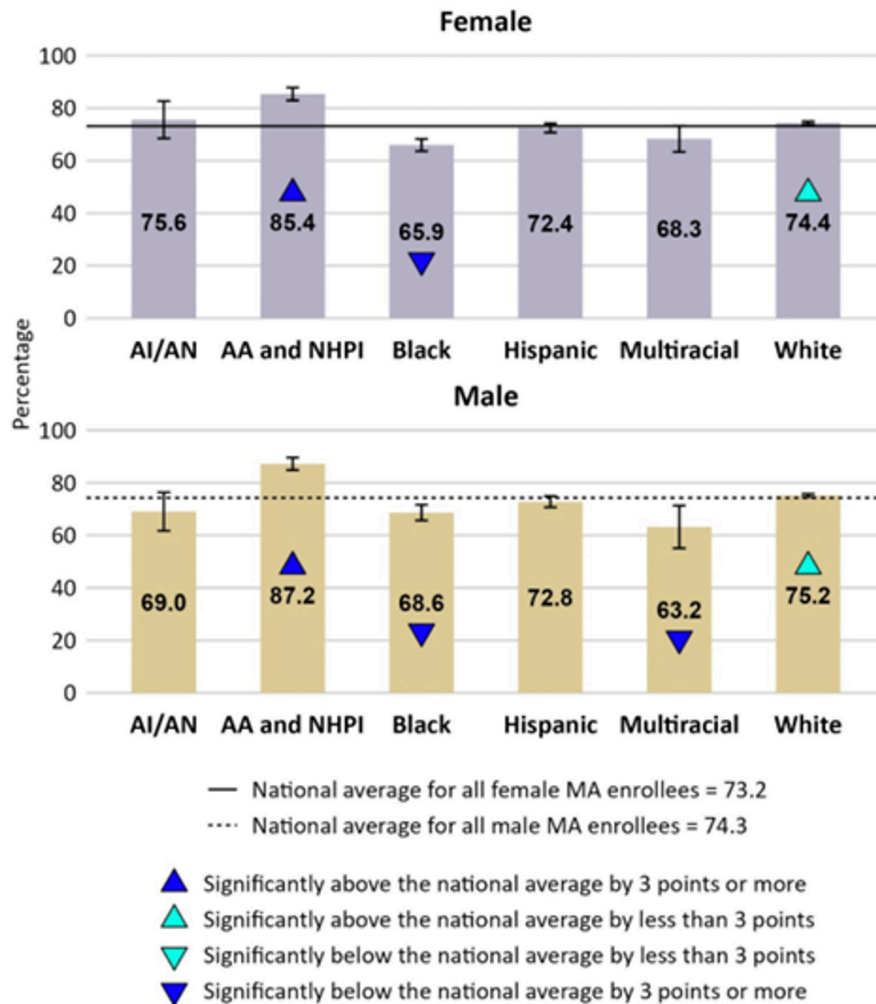


SOURCE: Data are from the 2023 MA CAHPS surveys.

NOTES: AI/AN = American Indian and Alaska Native. AA and NHPI = Asian American and Native Hawaiian or other Pacific Islander. Racial groups, such as Black and White, are non-Hispanic. Those who endorsed Hispanic ethnicity were classified as Hispanic regardless of race.

The annual flu vaccination rate among female MA enrollees was lower than male enrollees as shown in Figure 7. Among both women and men, the flu vaccination rates were below the national level for Black and Multiracial MA enrollees, and above for AA and NHPI, and White enrollees.

Figure 7. Percentage of MA enrollees who got flu vaccine, by race and ethnicity within sex, 2023

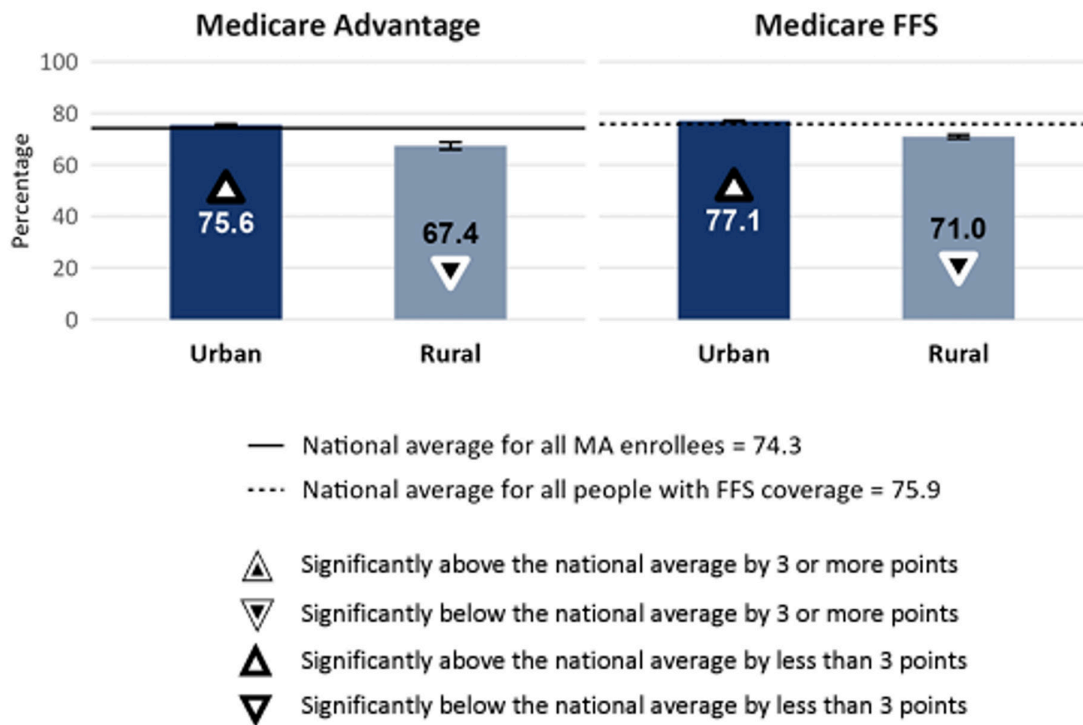


SOURCE: Data are from the 2023 MA CAHPS surveys.

NOTES: AI/AN = American Indian and Alaska Native. AA and NHPI = Asian American and Native Hawaiian or other Pacific Islander. Racial groups, such as Black and White, are non-Hispanic. Those who endorsed Hispanic ethnicity were classified as Hispanic regardless of race.

We also compared annual flu vaccination among both Medicare MA and FFS beneficiaries for 2022 by geography as seen in Figure 8 and 9 below. Figure 8 shows that rural residents were less likely than urban residents to have received the flu vaccine.⁷

Figure 8. Percentage of Medicare enrollees who got flu vaccine, by geography within coverage type, 2022

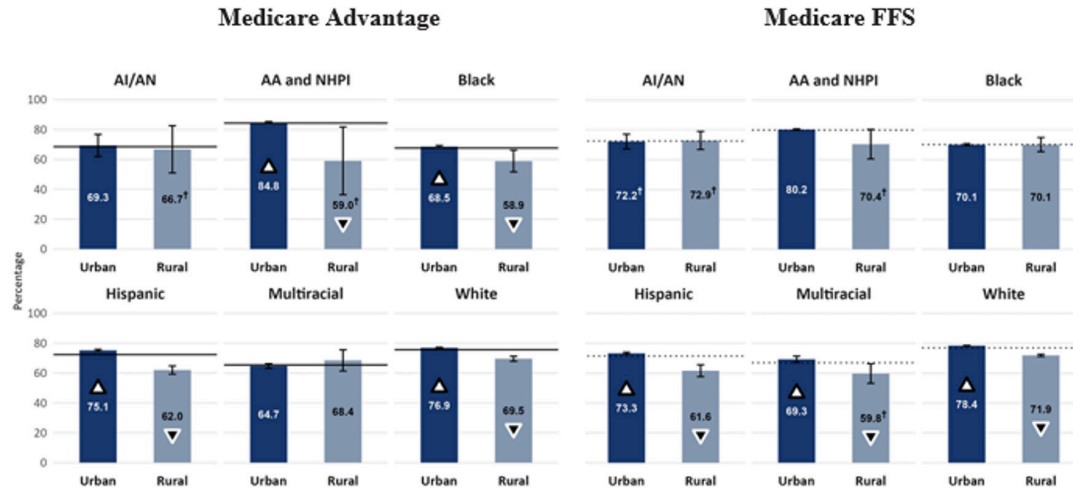


SOURCE: Data are from the 2022 MA and FFS CAHPS surveys.

In looking at MA and FFS enrollees who got a flu vaccine by geography, broken down by race and ethnicity, Figure 9 below illustrates that in 2022 all racial and ethnic group Medicare enrollees residing in rural areas, except multiracial MA enrollees and AI/AN FFS enrollees, were less likely than enrollees residing in urban areas to have received the flu vaccine.

The percentage of flu vaccination rates among AA and NHPI, Black, Hispanic and White enrollees in MA, and Hispanic, Multiracial and White enrollees in FFS, living in urban areas were significantly above the national average, while those living in rural areas were significantly below the national average.

Figure 9. Percentage of Medicare enrollees who got flu vaccine, by geography within racial and ethnic group 2022



SOURCE: Data are from the 2022 MA CAHPS surveys.

NOTES: AI/AN = American Indian and Alaska Native. AA and NHPI = Asian American and Native Hawaiian or other Pacific Islander. Racial groups such as Black and White are non-Hispanic. Those who endorsed Hispanic ethnicity were classified as Hispanic regardless of races selected.

† This score is based on fewer than 400 completed measures, and thus its precision might be low.

Although there are still disparities by race and ethnicity and by geography for flu vaccination, it is important to remember that Medicare Part B does cover one flu shot per flu season for Medicare enrollees. Individuals pay nothing for a flu shot if the doctor or other qualified health care provider accepts assignment for giving the shot.⁸ In general, most health insurance plans cover recommended vaccines for both children and adults at little or no cost. Medicaid covers all of the recommended vaccines, including the flu shot for children and some vaccines for adults. There may be a copay or fee for getting vaccinated, depending on what state you live in and the doctor you see to get vaccinated.⁹

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