

December 2024

1H 2024 Claims Contribute to Long-Term Trends Revealing Post-Pandemic Stabilization

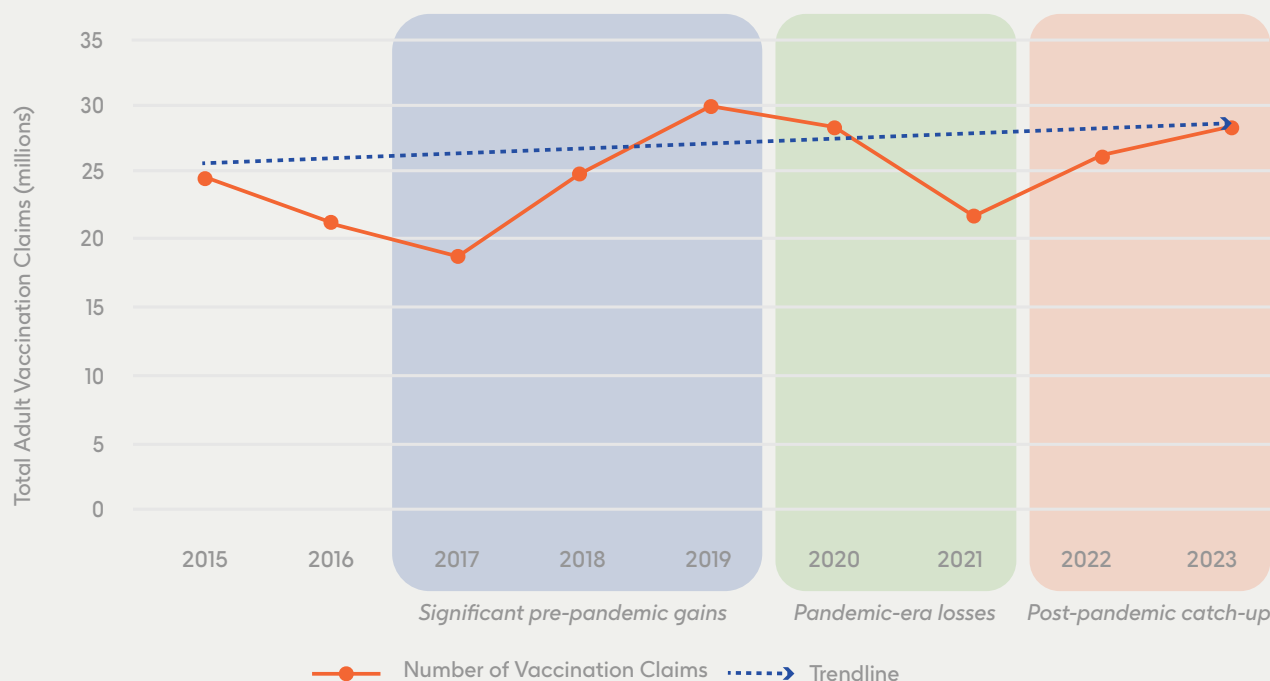
Nationwide, average monthly adult vaccination claims (excluding flu, RSV, and COVID-19) increased 10% from Q1 to Q2 2024. This was true for all categories:

- **Insurance Market:** Medicaid claims increased the most (+28%). Within Medicare, Part B claims increased 9% and Part D claims increased 3%.
- **Race/Ethnicity:** Claims for Hispanic/Latino adults increased the most (+15%). Claims for white adults increased the least (+2%).
- **Point of Access:** Medical claims increased more than retail claims (+13% vs. +7%, respectively)

Yearly Data Show General Upward Trajectory

While adult vaccination claims before, during and after the pandemic reflect significant fluctuations, overall claims have risen over time.

Adult Vaccination Claims by Year, 2015-2024

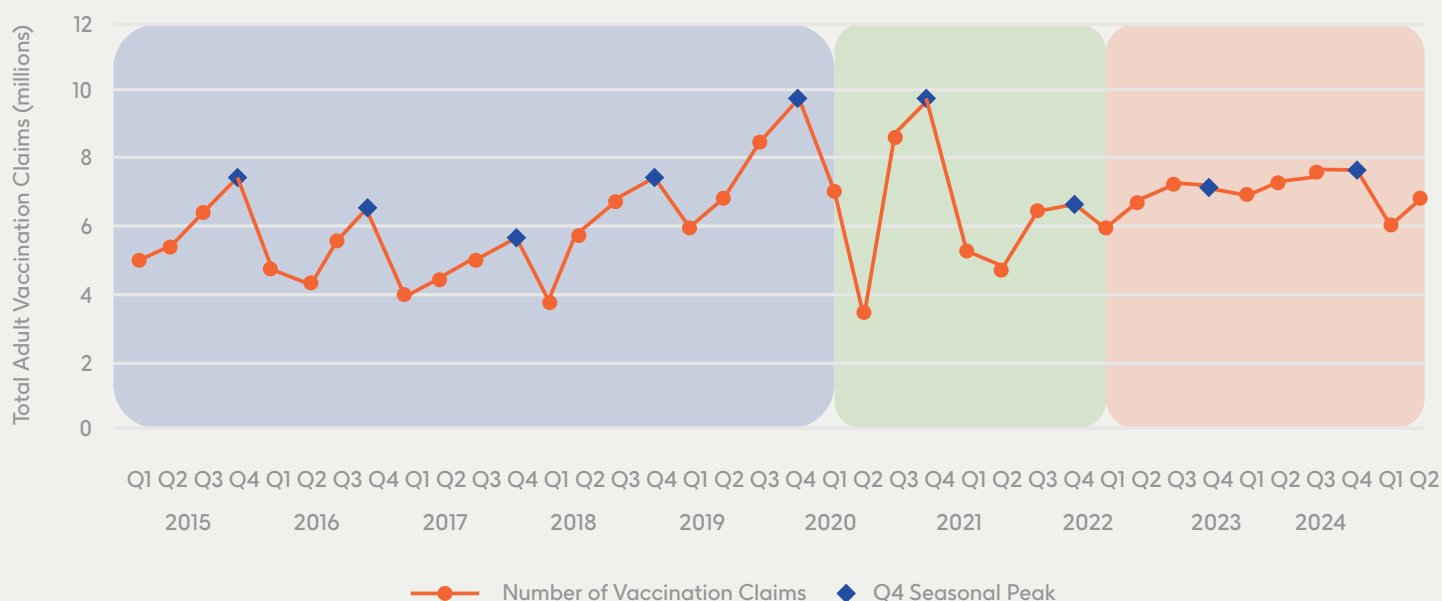


Several key milestones may have played a role in claims fluctuations over time. Increases in adult vaccination claims from 2017-2019 and 2021-2023 may be partially attributed to preferential recommendations from the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) issued during these time periods. Additionally, a separate [analysis](#) of flu vaccination trends showed that preferential recommendation could increase uptake.

Quarterly Trends Potentially Indicate Shift Toward Year-Round Vaccination

Looking at quarterly variations in Vaccine Track's national claims data reveals smaller seasonal swings in the post-pandemic period compared to the years before and during the pandemic. Specifically, Q4 peaks appear to flatten relative to the rest of the year, potentially illustrating a shift toward year-round vaccination.

Adult Vaccination Claims by Quarter, 2015-2024



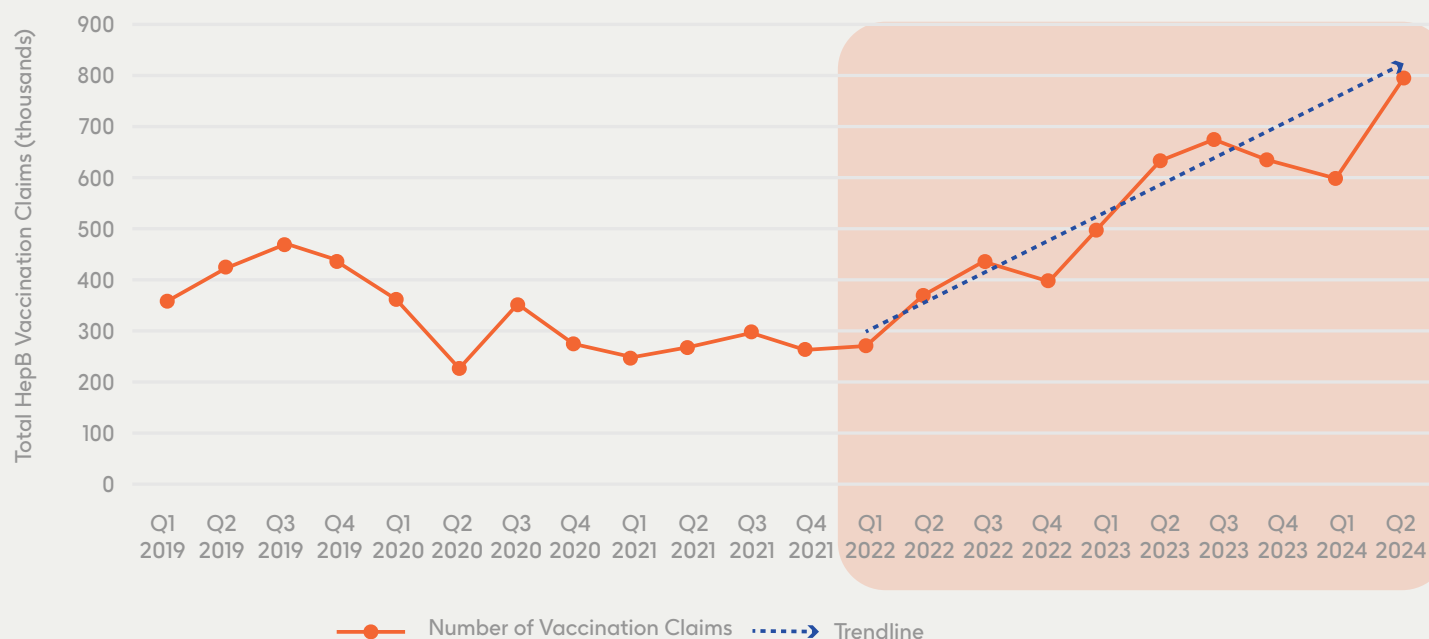
Trends by Vaccine Type Reveal Greatest Gains for Hepatitis B Vaccination

Of the vaccine types assessed for 2024, hepatitis B adult vaccination claims were significantly higher than in 2019 (+74%) while hepatitis A claims were significantly lower (-50%).

Hepatitis B Vaccination May Have Benefited from Universal Recommendation

Adult hepatitis B vaccination claims have been rising since early 2022. This trend could be attributed in part to an ACIP recommendation for [universal hepatitis B vaccination](#) in adults aged 19-59 years. Previously, ACIP only recommended hepatitis B vaccination for adults at high risk for infection, those in settings where a high proportion have risk factors for infection and adults specifically requesting vaccination.

Hepatitis B Vaccination Claims by Quarter, 2019-2024

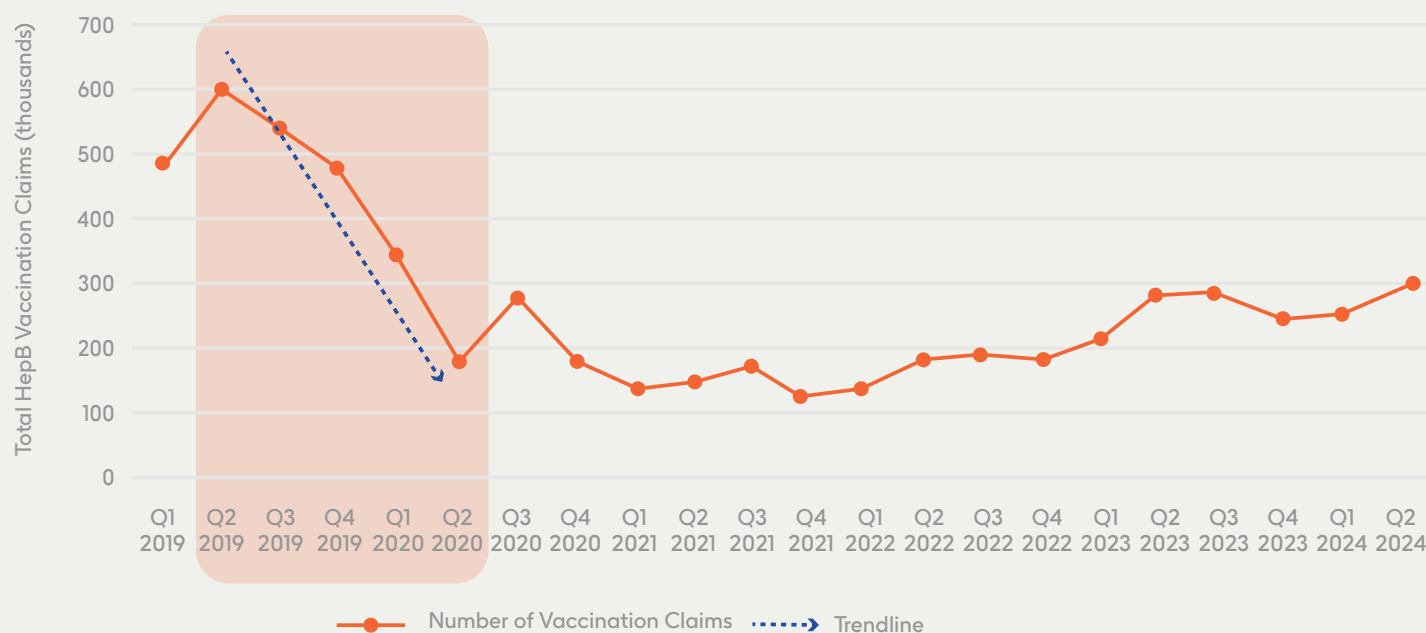


Hepatitis A Vaccination Declined Following US Outbreak Peak

In the first half of 2024, hepatitis A vaccination claims were 50% lower than during the same period in 2019. This decline primarily occurred between Q2 2019 and Q2 2020, potentially reflecting two historical events:

- Hepatitis A Outbreaks:** CDC notes that hepatitis A [outbreaks](#) began spreading across the US in 2016 and peaked in 2019. Vaccination is a key component of state health department outbreak response strategy, and CDC supports state response capabilities with services like vaccine distribution, education, and outreach. As states declared the end of their respective outbreaks, their priorities likely shifted to address other pressing public health issues. Further, declaring the end of an outbreak may have resulted in reduced public perception of hepatitis A as an immediate threat.
- COVID-19 Pandemic:** As seen with other vaccines, the beginning of the COVID-19 pandemic disrupted various healthcare services, including routine vaccination. Hepatitis A vaccination is also [recommended for travel](#); as such, limited pandemic-era international travel may have played a key role.

Hepatitis A Vaccination Claims by Quarter, 2019-2024



About Vaccine Track

Vaccine Track was created to visualize changing trends in US adult vaccination claims.

Vaccine Track captures average monthly claims for Advisory Committee on Immunization Practices (ACIP)-recommended adult vaccines. By age group, these vaccines include:

- **≥19 years:** Hepatitis A (HepA); Hepatitis B (HepB); Tetanus and Diphtheria (Td); and Tetanus, Diphtheria, and Acellular Pertussis (Tdap)
- **≥50 years:** Zoster (Shingles)
- **≥65 years:** Pneumococcal

Flu and RSV vaccines are included in Vaccine Track but are not yet included in data analyses. COVID-19 vaccines are currently excluded from Vaccine Track.

Note:

Vaccine Track provides race/ethnicity data stratification. Race/ethnicity data is self-reported and may not be available for all patients that received a vaccination. These data may not be representative of the entire U.S. population.

Medicaid fee-for-service (FFS) data does not include immunization data for Medicaid FFS enrollees that received immunizations at public health departments, federally qualified health centers, or through some state vaccine purchasing programs.

There was a market event in February 2024, where a switch pharmacy and medical claims clearinghouse was affected. Some data volumes may reflect the disruption in the short-term.