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. In 2021-2022, CDC estimates that the flu vaccination prevented 1.8 million flu-related illnesses, 1,000,000 medical visits, 22,000 hospitalizations, and nearly 1,000 deaths.⁴
Figure 1. The Benefits of Flu Vaccination, 2021-2022

Flu vaccination in the U.S. during the 2021-2022 season prevented an estimated:

- **1.8 million** flu illnesses
- **1.0 million** flu medical visits
- **22,000** flu hospitalizations
- **1,000** flu deaths

More than the combined number of people who live in Vermont and Rhode Island

More than the number of people who live in Austin, Texas

Equivalent to preventing about 80 hospitalizations per day over the course of a year

About the number of people it would take to fill two Boeing 747 airplanes

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

Inequities in flu vaccination among Medicare beneficiaries persist. The Mapping Medicare Disparities Tool (MMD Tool) developed by CMS indicates, since 2012, flu vaccination coverage has been consistently lower among Black, Hispanic, and American Indian/Alaska Native (AI/AN) Medicare fee-for-service (FFS) beneficiaries as shown in Figure 2. In 2021, the age standardized rate of FFS beneficiaries who received the flu vaccine was highest among Asian/Pacific Islanders (API) and Whites at 48 percent. AI/AN was at 35 percent followed by Blacks at 34 percent. Hispanics had the lowest rate of flu vaccination at 32 percent as shown in Figure 3.5

Figure 2. Age standardized Flu Vaccine Rate among Medicare FFS Beneficiaries by Race and Ethnicity, 2012 - 2021
Using data from the MMD Tool, we also looked at the flu vaccination rate by geography across the minority groups. Figure 4 shows, in 2021, the flu vaccination rates among Medicare FFS beneficiaries were higher in Massachusetts, Delaware, Iowa, Connecticut, and Pennsylvania at 56, 55, 55, 54, and 53 percent, respectively. American Samoa, US Virgin Islands, Northern Marianas, Puerto Rico, and Guam had the lowest vaccination rates from 6 to 28 percent. 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.
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, Hispanic, and Multiracial MA enrollees who received the flu vaccine were significantly below the national average in 2022. The percentage was above the national average for Asian American and Native Hawaiian or other Pacific Islander (AA and NHPI), and White MA enrollees.
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, Hispanic, and Multiracial MA enrollees, and above for AA and NHPI, and White enrollees.

We also compared annual flu vaccination among both Medicare MA and FFS beneficiaries for 2021 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.  

SOURCE: Data are from the Medicare CAHPS survey, 2022.
In looking at MA and FFS beneficiaries who got a flu vaccine by geography, broken down by race and ethnicity, Figure 9 below illustrates that in 2021 all racial and ethnic group Medicare enrollees residing in rural areas, except multiracial MA enrollees, were less likely than enrollees residing in urban areas to have received the flu vaccine.

The percentage of flu vaccination rates among Hispanics and Whites enrolled in MA or FFS, and AA and NHPI enrolled 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 a vaccine, by geography within racial and ethnic group, 2021**

[Graph showing flu vaccination rates by race, ethnicity, and geographic location for Medicare Advantage and FFS in 2021.]

SOURCE: Data are from the Medicare CAHPS survey, 2021.

† 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 beneficiaries. Individuals pay nothing for a flu shot if your 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.\(^9\)

### References/Sources

   [https://www.cdc.gov/flu/prevent/keyfacts.htm](https://www.cdc.gov/flu/prevent/keyfacts.htm)
   [https://www.cdc.gov/flu/symptoms/symptoms.htm](https://www.cdc.gov/flu/symptoms/symptoms.htm)
   [https://www.cdc.gov/flu/highrisk/index.htm](https://www.cdc.gov/flu/highrisk/index.htm)

CMS Office of Minority Health  
7500 Security Blvd. MS S2-12-17  
Baltimore, MD 21244  

If you have any questions or feedback, please contact HealthEquityTA@cms.hhs.gov.