Supplementary Materials: Assessment of Perceived Barriers to Herpes Zoster Vaccination among Geriatric Primary Care Providers

Katherine Montag Schafer and Shannon Reidt

Geriatric Provider Survey-Herpes Zoster Vaccine

<u>Goal</u>: To assess current vaccination practices, barriers to vaccination, knowledge of vaccination reimbursement and strategies to evaluate for insurance coverage.

<u>Instruction</u>: Please answer the questions in the context of chronic care either in the long term care facility patients or patients seen in the clinics. These questions do not apply to the care provided to TCU patients.

Question 1:

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	rpes Zoster Vaccine Delivery Methods	Agree	Disagree	Don't Know	
Please select <u>one</u> response for each statement.			g		
1.	The vaccine is stocked and administered in my practice setting.				
2.	Patients are referred to an outside pharmacy to purchase the vaccine				
	which is then administered in my practice setting.				
3.	Patients are referred to outside pharmacy to purchase the vaccine which				
	is administered at outside pharmacy.				
4.	Patients are referred to another clinic or practice setting to purchase the				
	vaccine which is administered at that clinic or practice setting.				

Question 2:

Perceived Barriers in the Delive	ry of Herpes Zoster Vaccine				
Please tell us how important the	Major	Somewhat	Minor	Not a	
administering zoster vaccine in y	Barrier	a Barrier	Barrier	Barrier	
Please select one response for each	h statement.				
1. Cost concerns for patients					
2. Reimbursement problems	or my practice site				
3. "Up-front" costs to my pra	ctice site to purchase vaccine				
4. Storage requirements for v	accine (i.e. freezer)				
5. Difficulty obtaining vaccine	2				
6. Concerns about safety of va	accine				
7. Concerns about effectivene	ss of vaccine				
8. More pressing medical issu	es taking priority				

Question 3:

Knowledge of Herpes Zoster Vaccine Reimbursement Please select one response for each statement.		Medicare Part B	Medicare Part D	Not covered by Medicare	Don't Know, Not Sure
1.	Vaccine cost is reimbursed by				
2.	Vaccine administration is reimbursed by				

Question 4:

	tegies to Evaluate for Insurance Coverage for Herpes Zoster Vaccine valuate for insurance coverage in eligible vaccine recipients?	Agree	Disagree
1	Ask patient to check with plan regarding coverage.		
2.	Ask patient to greek with plan regarding everage. Ask patient to pay for vaccine and patient to pursue reimbursement.		
3.	Office staff contacts the patient's plan to identify coverage.		
4.	I assume the vaccine will be reimbursed by the patient's insurance coverage.		
5.	Administer the vaccine and if the patient's plan does not reimburse, the patient is billed.		

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Question 5:

Herpes Zoster Vaccine Current Practice				
How likely are you to recommend the herpes zoster vaccine	Very	Somewhat	Somewhat	Very
to the following, provided no labeled contraindications	Likely	Likely	Unlikely	Unlikely
exist? Please select <u>one</u> response for each statement.				
1. Patients 60–69 years of age				
2. Patients 70–79 years of age				
3. Patients >80 years of age				

Question 6:

Provider Demographics			50%	75%	100%
Plea	Please provide one response for each statement.			7570	100%
1.	How much of your practice is spent providing chronic care in in a long term care				
	facility setting?				
2.	How much of your practice is spent providing chronic care in a primary care				
	clinic setting?				
3.	Please provide the number of different long term care facilities you work in:				
4.	Please provide the number of different primary care clinics you work in:				

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Thank you for participating.