

Fact Sheet**Influenza Vaccinations among Adults 50 and Older: Slow Progress over the Past Decade**

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The flu, the common name for the respiratory illness caused by influenza viruses, infects millions of Americans every year, including more than 12.3 million adults ages 50 and older in 2018.¹ Older adults are among those most at risk of serious illness and death from the flu, due to a decreased immune response associated with aging and a high prevalence of chronic medical issues (e.g., asthma, hypertension, and diabetes). Of the up to 61,000 Americans who die each year from the flu, at least 90 percent are over the age of 50.²

Fortunately, influenza vaccines are widely available each year to help limit infections and deaths and to mitigate the severity of illness.³ In 2018, slightly more than half (56 percent) of adults ages 50 and older received a flu vaccine—an 11 percent increase from 50 percent in 2009.⁴

Nevertheless, flu vaccination rates among older adults still fall well short of the goal (70 percent) of Healthy People 2030.⁵ As discussed below, a range of factors has limited the uptake of the flu vaccine over the past decade and contributed to racial, ethnic, and insurance coverage disparities. Further, the COVID-19 pandemic may create new barriers that challenge vaccination uptake in the 2020–21 flu season and beyond.

Flu Vaccinations among Adults Ages 50+: Background and Where the Numbers Stand

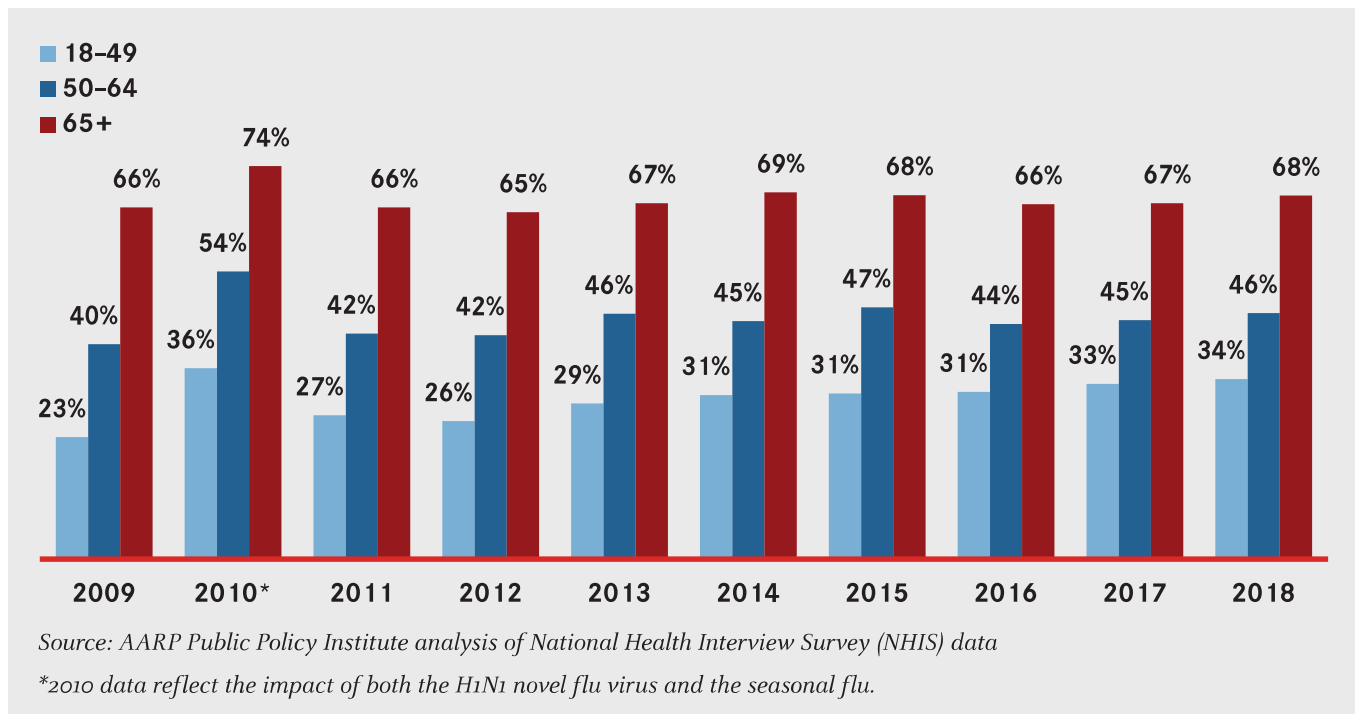
The Centers for Disease Control and Prevention (CDC) began recommending flu vaccinations for persons 65 and older in 1960; in 2010, the CDC expanded the recommendation to include adults 50 and older.⁶ From the time of the first recommendation to the present, flu vaccination has remained voluntary for older adults.⁷

Of all adult age groups, adults 65 and older are the most likely to be vaccinated against the seasonal flu. From 2009 to 2018, flu vaccination among adults ages 65 and older on average was 24 percent higher than among those ages 50 to 64. In 2018, 68 percent of adults ages 65 and older received a flu vaccination, compared with 46 percent of those ages 50 to 64 and 34 percent of adults ages 18 to 49 (figure 1).

Key takeaways:

- ✓ Flu vaccinations among adults ages 50 and older increased slightly over the past decade.
- ✓ Black adults ages 50 to 64 are the least likely to get a flu vaccine.
- ✓ Older adults with Medicare coverage are more likely than adults with other types of insurance to get a flu vaccine.

FIGURE 1
Flu Vaccinations among Adults Ages 18 and Older, 2009–18



Despite higher influenza vaccination rates among older adults, however, their vaccine uptake improved only slightly over the decade.⁸ In 2009, 66 percent of adults ages 65 and older received a vaccination. In 2018, that figure increased moderately to 68 percent. The 50-to-64 age group saw a slightly higher increase, growing from 40 percent in 2009 to 46 percent in 2018.

Racial and Ethnic Disparities

Drilling down deeper into the data reveals disparities by both race and ethnicity, a reality with implications when considering strategies to increase vaccination rates. Over the past decade, older adults identifying as White or non-Hispanic were consistently more likely to be vaccinated against the flu than their Black or Hispanic counterparts. Lower immunization adherence among certain racial and ethnic groups may, in part, be rooted in systemic barriers that prevent some individuals from accessing preventive services and contribute to a lack of trust in the health care system.⁹

Between 2009 and 2018, White adults ages 50 to 64 were consistently more likely to get a flu vaccine

than their Black counterparts, while non-Hispanics were more frequently vaccinated against the flu than Hispanics (figures 2 and 3). In 2018, flu vaccinations in adults ages 50 to 64 were 18 percent higher in Whites than Blacks and 15 percent higher in non-Hispanics than Hispanics.

These racial and ethnic disparities persisted in adults ages 65 and older, with Whites and non-Hispanics more likely to get a flu vaccine than Blacks and non-Hispanics every year over the past decade (figures 4 and 5). In 2018, flu vaccinations in adults ages 65 and older were 17 percent higher in Whites than Blacks and 10 percent higher in non-Hispanics than Hispanics.

Insurance Coverage Disparities

Differences in vaccination rates are also apparent based on insurance coverage. All comprehensive health insurance plans include an annual flu vaccination as a covered benefit. Medicare (both Part B and Medicare Advantage) fully covers one flu shot a year. Under the Affordable Care Act, private insurance plans must cover the influenza vaccine without cost sharing. Medicaid can cover an annual

FIGURE 2
Flu Vaccinations among Black and White Adults Ages 50 to 64, 2009-18

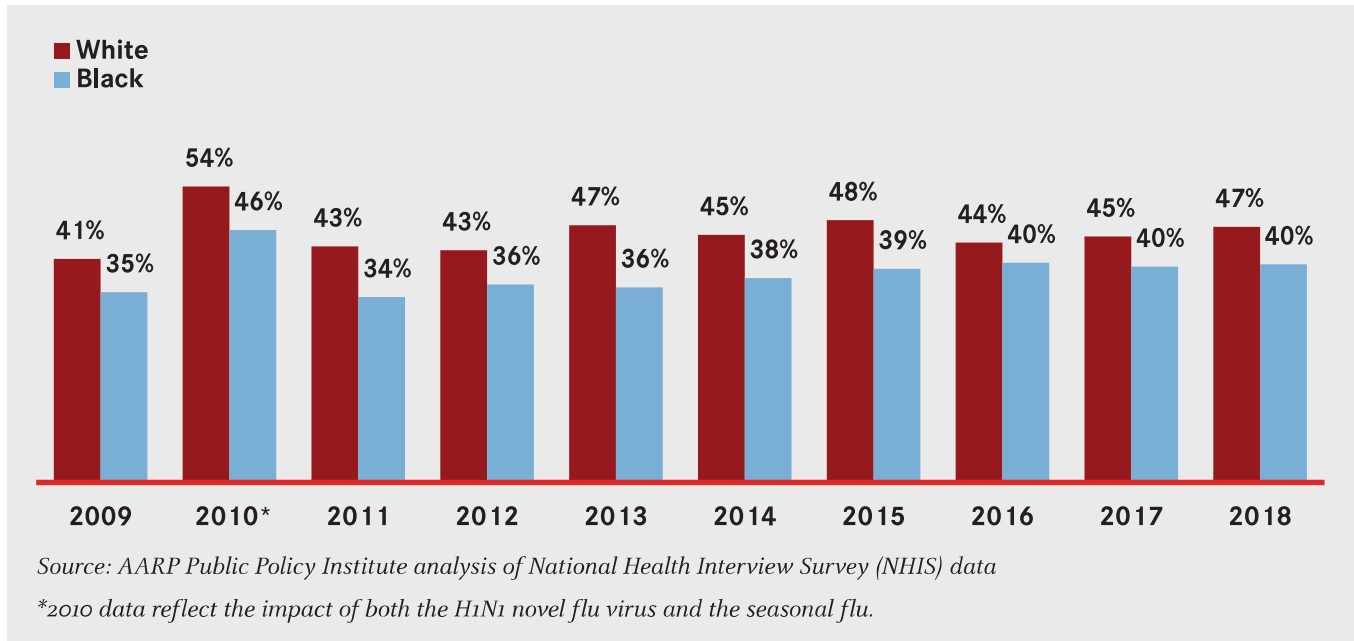


FIGURE 3
Flu Vaccinations among Hispanic and Non-Hispanic Adults Ages 50 to 64, 2009-18

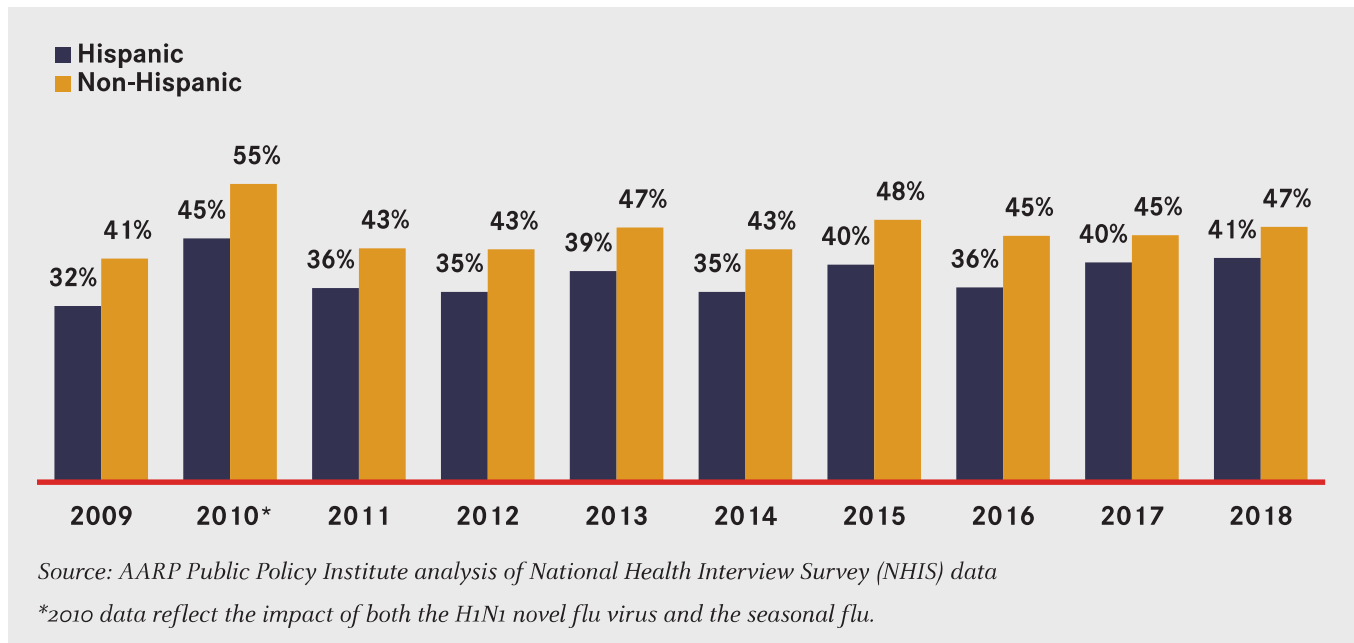


FIGURE 4
Flu Vaccinations among Black and White Adults Ages 65 and Older, 2009–2018

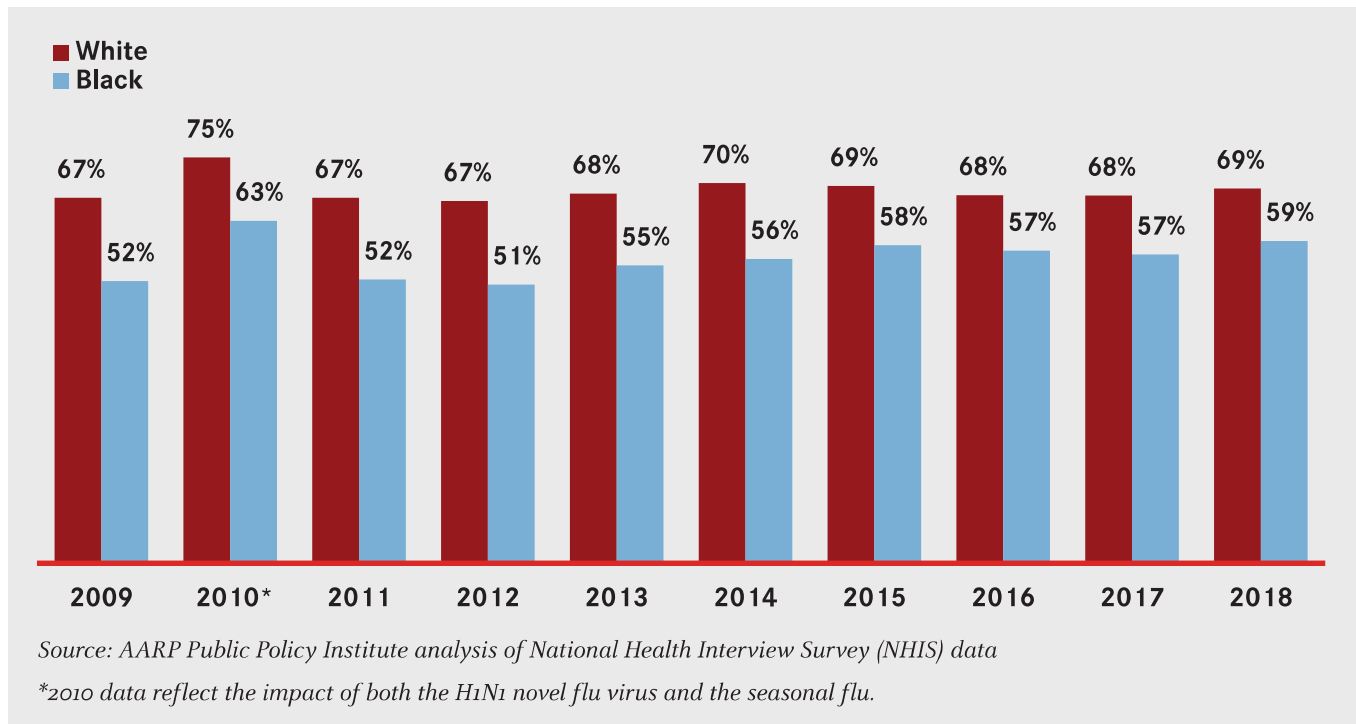
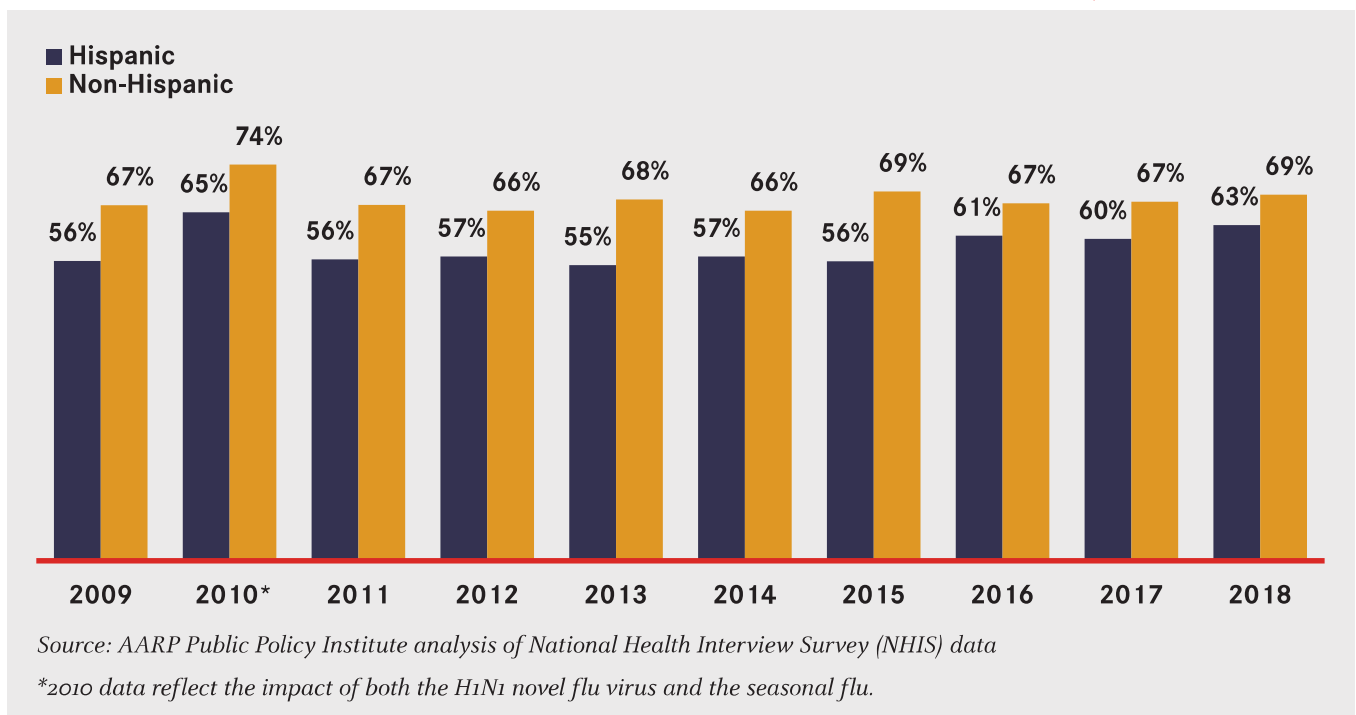


FIGURE 5
Flu Vaccinations among Hispanic and Non-Hispanic Adults Ages 65 and Older, 2009–2018



shot, but coverage and cost sharing for adults depends on state rules.¹⁰

Our analysis suggests that the type of health coverage that older adults have may influence their likelihood of getting a flu vaccine (table). Among adults ages 50 and older, those with private insurance were most likely among their age cohort to receive a vaccine—46 percent for persons ages 50 to 64 and 69 percent for those 65 and older.¹¹ Older adults with Medicaid coverage were overall less likely to receive a vaccine—44 percent for adults ages 50 to 64 and 50 percent for those ages 65 and older.

Medicare coverage is associated with higher vaccination rates among older adults. In 2018, 96 percent of adults ages 65 and older had some form of Medicare coverage.¹² In the same year, adults ages 65 and older received the flu vaccine at a rate nearly 20 percentage points higher than that of adults ages 50 to 64. Our analysis showed that the highest rates of vaccination among adults ages 50 and older are connected to some form of Medicare coverage. Further analysis is needed to understand this relationship, particularly the extent to which Medicare's benefits influence vaccination and the extent to which the 65-and-older population is already more likely to get an annual flu vaccine.

Uninsured older adults are least likely to receive a flu vaccine. Less than a quarter of adults ages 50 to 64 who lacked insurance coverage received vaccines in 2018. This data point is significant, especially for adults ages 50 to 64, because some 9 percent of this

population was uninsured in 2018. Fully 3.8 million uninsured adults ages 50 to 64 went without a vaccine in 2018.¹³

Conclusions, Causes, and Takeaways

Data on influenza vaccination coverage among persons ages 50 and older show that improvements in vaccine adherence have progressed slowly. From 2009 to 2018, the rates for adults ages 50 to 64 and those ages 65 and older increased minimally, and the rates remained below 50 percent and 70 percent for adults ages 50 to 64 and 65 and older, respectively. As such, year after year roughly 50 million older adults go without a flu vaccine.

Multiple factors contribute to flu vaccination rates among older adults failing to grow significantly over the past decade.¹⁴ A recent AARP survey of adults ages 50 and older showed that the attitudes and beliefs that drive personal choice were the highest-ranking factors. Respondents cited as the strongest factors a lack of interest (44 percent), concern about possible side effects (38 percent), concern about safety and efficacy (38 percent), a belief that the flu vaccine isn't needed (31 percent), and previous flu experience as the reasons behind their decision to forgo vaccination (28 percent).¹⁵

Additionally, certain barriers prevent older adults from choosing to get a flu vaccine. Lack of access to health care providers, costs associated with flu vaccines, as well as missing, inconsistent, and/or misleading information have posed significant obstacles to vaccination.¹⁶ Interventions to address these barriers will be necessary to increase uptake and limit the impact of influenza on Americans ages 50 and older.

Such challenges take on added importance in the context of the COVID-19 pandemic, when public health experts are urging everyone to get the flu vaccine for protection and to prevent hospitals from being overwhelmed with sick patients. As older adults, who are particularly vulnerable to adverse health outcomes related to COVID-19, forgo medical visits, shift prescriptions to mail order, and generally limit community activity, they will have fewer opportunities to receive a flu vaccine. Vaccination rates may remain steady or dip during the 2020–21 flu season and beyond unless policy makers take active and concrete measures to address these new challenges as well as the historic barriers that continue to affect flu vaccination rates.

TABLE
Flu Vaccinations among Adults Ages 50 and Older by Insurance Type, 2018

Insurance Coverage	Age	
	50 to 64	65 and Older
Private (65+ includes Medigap)	46%	69%
Medicaid/Dual Eligible	44%	50%
Uninsured	23%	-
Medicare Only	-	56%
Medicare Advantage	-	65%

Source: AARP Public Policy Institute analysis of National Health Interview Survey (NHIS) data

- 1 <https://www.cdc.gov/flu/about/burden/2018-2019.html>
- 2 Ibid. Over the past decade, the estimated number of deaths from the flu has ranged from 12,000 to 61,000. During 2018–19 flu season, 91.4 percent of the persons who died from the flu (34,157) were over the age of 50.
- 3 A high-dose flu vaccine, Fluzone High-Dose, and a trivalent vaccine with adjuvant, FLUAD, are available and specifically designed for adults ages 65 and older. For more information, see https://www.cdc.gov/flu/prevent/qa_fluzone.htm and <https://www.cdc.gov/flu/prevent/adjuvant.htm>.
- 4 We used the National Health Interview Survey (NHIS) Sample Adult files to calculate annual flu vaccination frequencies for adults ages 18 and older from 2009 to 2018, the most recent year for which data are available. The flu vaccine interview questions refer to the previous 12 months, so a “yes” to the vaccine question asked in October 2018, for example, could correspond to vaccine being received in either the 2017–18 flu season or the 2018–19 flu season.
- 5 Healthy People 2030 is a federal initiative designed to improve the health and well-being of Americans. Its flu vaccine target is for 70 percent of persons 6 months and older to get vaccinated annually against the seasonal flu. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/vaccination/increase-proportion-people-who-get-flu-vaccine-every-year-iid-09>
- 6 See CDC’s timeline for the seasonal flu vaccine at <https://www.cdc.gov/flu/pandemic-resources/pandemic-timeline-1930-and-beyond.htm>.
- 7 Mandatory vaccination for adults is limited. Some employers require annual vaccination as a condition for employment and the Centers for Medicare & Medicaid Services requires skilled nursing facilities to offer annual flu vaccination to all residents (42 CFR § 483.80(d)).
- 8 The spike in rates in 2010 is a result of H1N1. In 2010, NHIS fielded supplementary questions about the receipt of the H1N1 flu shot and spray and those data were combined, in our analysis, with responses to the original seasonal flu questions.
- 9 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6067893/>. For more information on state and federal efforts to address the inequities in immunization rates, see L. Flowers, S. Sinclair, and B. Umans, “Racial and Ethnic Disparities in Influenza and Pneumococcal Immunization Rates among Medicare Beneficiaries,” AARP Public Policy Institute, 2008, https://assets.aarp.org/rgcenter/health/i12_flu.pdf.
- 10 For a summary of Immunization Coverage Rules, see <https://www.commonwealthfund.org/blog/2020/why-we-cant-rely-health-insurance-alone-guarantee-universal-immunization-against-covid-19>.
- 11 Private insurance includes different types of private coverage for each age cohort. For adults ages 50 to 64, it includes employer-sponsored or individual market plans. For persons ages 65 and older, it includes these types as well as Medigap, the private plan purchased to provide wraparound coverage for Medicare.
- 12 AARP Public Policy Institute, DataExplorer, <https://policydata.aarp.org/>. Some form of Medicare coverage includes adults ages 65 and older with private insurance who may have Medigap coverage.
- 13 Ibid.
- 14 G. Poland, L. Lee, J. Powell, and the Advisory Group Meeting on Influenza Immunization among Older Adults: Population Health Strategies for Promoting Equity and Achieving Healthy People 2020 Goals, “Effective and Equitable Influenza Vaccine Coverage in Older and Vulnerable Adults: The Need for Evidence-Based Innovation and Transformation,” *Vaccine* 37, no. 16 (2019): 2167–70.
- 15 See AARP survey, “Midlife and Older Adults’ Views on Vaccination,” 2019. <https://www.aarp.org/research/topics/health/info-2019/midlife-older-adults-views-vaccinations.html>
- 16 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5824626/>

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