

Title of Intervention: McFlu

Intervention Strategies: Campaigns and Promotions, Individual Education, Environments and Policies

Purpose of the Intervention: To improve influenza immunization rates among older adults

Population: Older adults aged 65 and above

Setting: A moderate-sized metropolitan area surrounded by small towns and rural areas in upstate New York; community-based

Partners: None mentioned

Intervention Description:

- Campaigns and Promotions: A multi-media public service announcement campaign targeted urban minority communities. Informational letters encouraging vaccines were sent with Social Security mailings to all Medicare enrollees. To encourage competition, each health care provider had a tracking poster to track the number of influenza vaccines delivered.
- Individual Education: Post card reminders were sent to patients informing them about the vaccine.
- Environments and Policies: A multi-level surveillance network was developed to track influenza outbreaks. The local health department implemented a centralized system for reimbursement payments.

Theory: Not mentioned

Resources Required:

- Staff/Volunteers: Public relations person, surveillance staff
- Training: Not mentioned
- Technology: Computer, printer, surveillance system
- Space: Not mentioned
- Budget: Not mentioned
- Intervention: Informational materials, access to social security mailings, surveillance protocol
- Evaluation: Provider questionnaire, access to billing records

Evaluation:

- Design: Randomized control
- Methods and Measures:
 - Provider questionnaires assessed immunization practices, common reasons for refusal by patients and strategies used to increase immunizations.
 - Billing records were audited to assess immunizations rates.

Outcomes:

- Short Term Impact: Not measured
- Long Term Impact: A significant increase in immunization rates was noted.

Maintenance: Not mentioned

Lessons Learned: The success of the program was attributed to the high level of collaboration and community involvement in the program. The centralized system for collecting, checking and submitting all Medicare claims reduced the rejection rate to less than 1%. This reimbursement incentive program was successful in increasing immunization and suggests that further trials linking a financial performance to reimbursement in the delivery of preventive services are warranted. More than half of the health care providers felt that the tracking competition had a moderate to high influence on immunization rates. The postcard reminders were costly, time-consuming and had little added effect in increasing immunization rates.

Citation(s):

Barker, W.H., et al., "McFlu". The Monroe County, New York, Medicare vaccine demonstration. *Am J Prev Med*, 1999. 16(3 Suppl): p. 118-27.

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Kouides, R.W., et al., Performance-based physician reimbursement and influenza immunization rates in the elderly. The Primary-Care Physicians of Monroe County. *Am J Prev Med*, 1998. 14(2): p. 89-95.

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