THE ORGANIZATION AND DELIVERY OF
VACCINATION SERVICES IN THE EUROPEAN UNION

LUXEMBOURG

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Luxembourg

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Governance

In Luxembourg the Ministry of Health is the main agency in charge of developing and overseeing the implementation of national vaccination policies. The Ministry follows the advice and recommendations of a national immunization technical advisory group, formally established in 2011, called the *Conseil supérieur des maladies infectieuses* (CSMI). Composed of civil servants and experts from several scientific societies, this committee enjoys a high level of independence in the choice and the conduct of its mission, despite being attached to the Ministry of Health, and is in charge of setting out and editing vaccine recommendations. The committee has published recommendations for measles and influenza vaccination, but these recommendations are not legally binding.

Relating to the organization and delivery of vaccination services, the Ministry delegates to the Directorate of Health three main functions:

1. Communication

2. Pharmacovigilance

3. Vaccine supply

The first two functions of communication and pharmacovigilance are similar for measles and influenza. The Directorate of Health communicates to health care professionals any amendment to vaccine recommendations published by the *Conseil supérieur des maladies infectieuses*. Professionals are also regularly informed through national

campaigns about vaccination. Furthermore, raising awareness of measles and influenza vaccines among the general public is part of the Ministry's mandate. The Ministry's website includes all information and updates pertaining to vaccine recommendations.

Pharmacovigilance is the second function devolved to the Directorate of Health. Any serious adverse event occurring with measles or influenza vaccines has to be notified to its pharmacy department. Collected data are then analysed and sent to international agencies when appropriate.

For the third function, vaccine supply, the Ministry's role differs for measles and influenza.

For the supply of measles vaccines, the Directorate of Health has several tasks. It is in charge of the public tender for the acquisition of measles vaccines and designates the pharmaceutical wholesaler for vaccine stock logistics. The Directorate then organizes and oversees the vaccine supply. It collects orders from health care providers (professionals and hospital pharmacies) for any vaccines they need, and transmits these orders to the pharmaceutical wholesaler that will dispatch the vaccines to providers. The procedure is completely free of charge for health care professionals and hospital pharmacies, as the Directorate pays the manufacturer for all supplied vaccines according to the contract. Consequently, the vaccine is available at the point of care free of charge.

The organization for the supply of influenza vaccines differs. Indeed, pharmacies contract directly with pharmaceutical wholesalers to buy influenza vaccines (from several manufacturers). Individuals belonging to risk groups entitled to free influenza vaccines need a medical prescription to obtain the flu vaccine from their local pharmacist, where the vaccine is subjected to full reimbursement according to the third-party payment system. A regular convention with the national health insurance system (*Caisse nationale de santé*) establishes the Ministry of Health's contribution to the costs of the influenza vaccines.

In Luxembourg policy design and the implementation of vaccination programmes take place at the national level. There is, however, no written national multi-year vaccination plan.

There are no mandatory vaccinations in Luxembourg but measles and influenza vaccines are recommended. For measles vaccination, the recommendation is universal and therefore applies to everyone. Official guidelines from the *Conseil supérieur des maladies infectieuses* mention that the first vaccine dose against measles should be administered at the age of 12 months, with a booster administered at the age of 15–23 months. Catch-up immunization applies to every individual born after 1970 who is not (or not fully) vaccinated against measles.

For influenza vaccines, recommendations take into account risk. Influenza vaccination is recommended for people aged 65 years and older, pregnant women, people with chronic cardiac and lung conditions, people with metabolic pathologies, people with immunodeficiency, and people with certain blood diseases, among others. Hence, not everyone should be given the influenza vaccine but only people in defined risk groups. In terms of cost coverage, people not included in the risk groups are not covered under the third-party payment system nor under reimbursement from the statutory health insurance.

Population registries are currently not used to support vaccination programmes against measles or influenza.

Targeted measures are in place for measles among refugees. Within three days of their registration, refugees are seen by a medical doctor and those for whom no proof can be found of previous vaccination against measles will receive a dose of the measles vaccine.

Several incentive schemes are in place in Luxembourg for vaccination against influenza and measles. Overall, the general public is informed about all vaccinations from birth (an information brochure about childhood vaccines is distributed to all parents) as well as yearly during the European Immunization Week. For this, the Directorate of Health organizes a yearly national campaign under the auspices of the Ministry and different methods and media are mobilized to inform the public. For measles, there are also financial incentive schemes. Notably, parents are incentivized (family allowance of €580) to visit medical doctors six times during the first two years following their child's birth. These consultations are scheduled around the time of the first measles vaccine dose (9–12 months) and of the booster dose (at 21–24 months). Paediatricians performing these consultations are also financially incentivized, as the tariff of these consultations is higher than a normal one. In the end, parents and professionals are encouraged to achieve optimal vaccination status.

For the influenza vaccine, the Ministry of Health organizes a national campaign every year incentivizing target groups to get vaccinated.

To estimate the measles vaccination coverage rate, a national survey is organized by the Directorate of Health every five years, based on a representative sample of 25–30-month-old children.

To estimate the influenza vaccination coverage rate, the Directorate of Health uses administrative data provided by the national health insurance system. Administrative reimbursement data from people over 65 years old, living and insured in Luxembourg, are collected and analysed for every season.

Provision

In Luxembourg public health services, school health services, community nurses and pharmacies are not involved in administering vaccinations against **measles**. Primary health care professionals such as paediatricians are the principal providers involved in administering childhood vaccinations against measles. These professionals have several roles:

1) informing and counselling patients;

2) administering the measles vaccine (supplied for free by the Directorate of Health);

3) documenting the given vaccine in the patient's vaccination record; and

4) reporting any serious adverse event occurring with the measles vaccine to the pharmacy department of the Directorate of Health – Pharmacovigilance.

Paediatricians are the principal private practice professionals involved in childhood vaccinations. They use and comply with recommendations and guidelines published by the *Conseil supérieur des maladies infectieuses*. The cost of the visit is fully reimbursed for all children up to 18 years old.

In Luxembourg public health services, school health services, community nurses and pharmacies are not involved in administering vaccinations against **influenza**. Primary health care professionals, mainly general practitioners, are the principal providers involved in administering adult vaccinations against influenza. These professionals have several similar roles to paediatricians involved in administering vaccine against measles:

1) informing and counselling patients;

2) prescribing the vaccine against influenza;

3) administering the influenza vaccine (fully covered for patients of certain risk groups through the third-party payment system);

4) documenting the given vaccine in the patient's vaccination record; and

5) reporting any serious adverse event occurring with the influenza vaccine to the pharmacy department of the Directorate of Health – Pharmacovigilance.

General practitioners are the mainly private practice professionals involved in influenza vaccination. Their compliance with the recommendations and guidelines published by the *Conseil supérieur des maladies infectieuses* is variable, and 80% of the cost of a visit to the general practitioner or specialist is reimbursed.

Financing

Childhood vaccinations against measles are free of charge at the point of delivery.

The state budget covers 100% of the cost of measles vaccines; the state budget and statutory health insurance together cover 100% of the cost of influenza vaccines; and vaccination services costs are covered by statutory health insurance at their usual rates: 100% for children and adolescents up to 18 years, 80% for adults.

The Ministry of Health has not identified any major gap in population coverage for the statutory financing system.

Vaccines against influenza are free of charge for some risk groups (notably people aged 65 years and older, pregnant women and people with chronic conditions, among others). Some employers also provide vaccines and vaccination services to their employees, all free of charge.

For high-risk groups covered by social health insurance, vaccine costs are partially covered by the state budget (from the Ministry of Health). For the general population

and for all risk groups, vaccination service costs are covered by the statutory financing system (social health insurance).

The situation is different for employees if their employers provide vaccines and vaccination services free of charge.

Barriers and facilitators

The Ministry of Health has not identified any major gap in population coverage for the statutory financing system.

In Luxembourg the key facilitators for achieving an effective vaccination coverage of **childhood vaccinations against measles** are as follows:

1) a family allowance of €580 for parents whose child attends the six planned medical consultations – each of these visits being an opportunity to inform, counsel and answer questions about immunization, and two of these visits being set according to the measles vaccination schedule;

2) medical doctors are financially incentivized to perform these six planned medical consultations thanks to a special tariff higher than the standard one; and

3) measles vaccines are available free of charge for patients and medical doctors at the point of delivery.

In Luxembourg no key facilitators have been identified for achieving effective vaccination coverage of **adult vaccinations against influenza**. Moreover, several key barriers are present:

1) unlike measles vaccines, influenza vaccines are not available at the point of service and must be collected from a pharmacy by patients with a prescription;

2) the amount to be paid by every covered adult patient after a medical consultation is roughly 20% of the consultation's normal tariff; and

3) some risk groups do not get free of charge influenza vaccines.