

FUNDING AND REIMBURSEMENT MODELS FOR PHARMACY-BASED VACCINATION

This infographic outlines how seven countries finance and reimburse vaccination services in pharmacies. It also highlights the economic and healthcare benefits of pharmacist-led vaccination programmes, including cost-savings, improved coverage, and reduced strain on healthcare systems.



PHARMACY-BASED VACCINATION REIMBURSEMENT MODELS

CANADA

Operates under a **single reimbursement model** for healthcare services, where public (province-run) health systems or insurers handle the reimbursement process.¹

FRANCE

Reimbursement is standardised across the public health system or insurers.¹ Vaccine administration without prescribing by the pharmacist is reimbursed at EUR 7.50, including VAT. Vaccinations that involve prescribing and administration by the pharmacist are reimbursed at EUR 9.60, including VAT.²

USA

Three reimbursement models for healthcare services:¹

- Reimbursement by public (state-run) health systems or insurers.
- Reimbursement by private health systems or insurers.
- Paid for by the patient.

AUSTRALIA

Two reimbursement models for healthcare services:¹

- Reimbursement by public (state-run) health systems or insurers.
- Paid for by the patient.

Under the National Immunisation Programme (NIP), vaccines are provided free of charge, but pharmacies can charge for administering them unless reimbursed by the government.²

Pharmacies administering COVID-19 vaccines receive administration fees of AUD 27.35 (EUR 11.86) (urban) and AUD 30.50 (EUR 18.80) (rural), with extra compensation for off-site visits.³

Additional remuneration is provided for specific state-funded vaccination programmes, such as flu and Japanese encephalitis vaccines.²

Since July 2024, the Australian Government pays AUD 19.32 (EUR 11.84) per NIP vaccine administered.³

IRELAND

Two reimbursement models for vaccination services:¹

- Reimbursement by public (state-run) health systems or insurers.
- Paid for by the patient.

COVID-19 and seasonal flu vaccines are fully reimbursed by the State for community pharmacies.⁴ Free vaccines for at-risk groups.⁵

Additional incentives are provided to increase COVID-19 vaccination rates.²

Both pharmacists and GPs receive equal compensation for administering vaccines, promoting fairness across healthcare professionals.⁴

PORTUGAL

Three reimbursement models for healthcare services:¹

- Reimbursement by public (state-run) health systems for eligible patients
- Reimbursement by private
- Paid for by the patients.

Initially, patients paid for pharmacy-based vaccination services out-of-pocket. Over time, insurance companies and corporations began covering the costs.⁴

Since the 2023-24, the National Health System (NHS) reimburses vaccination services for designated age groups, ensuring broader access to essential vaccines.⁴

National vaccination campaign⁵

- In 2023, the Ministry of Health included community pharmacies in the in the seasonal vaccination campaign.
- Coadministration of Influenza and COVID-19 vaccines is offered.
- Pharmacies are now reimbursed for vaccination services under the national health budget.

UK








Three reimbursement models for healthcare services:¹

- Reimbursement by public (state-run) health systems or insurers.
- Reimbursement by private health systems or insurers.
- Paid for by the patient.








In England, pharmacies receive separate reimbursements for vaccine costs and service fees under NHS-funded vaccination programs.⁴ For the 2024/25 season, pharmacies are paid GBP 9.58 (EUR 11.46) per flu vaccine administered, along with reimbursement for the cost of the vaccine based on its current basic price.^{4,6} Additionally, an extra fee of GBP 2.50 (EUR 2.99) is provided for COVID-19 vaccines administered outside the flu season.⁴



REIMBURSEMENT MODELS ACROSS 7 COUNTRIES¹

							
Reimbursement by public (state-run) health systems or insurers	✓	✓	✓	✓	✓	✓	✓
Reimbursement by private health systems or insurers					✓	✓	✓
Paid for by the patient	✓			✓	✓	✓	✓

PHARMACY PAYMENTS COMPARISON^{2,3,7,8}

COUNTRIES	REIMBURSEMENT
AUSTRALIA 	AUD 27.35 (EUR 16.86) for COVID-19 vaccines (urban) AUD 30.50 (EUR 18.80) for COVID-19 vaccines (rural) AUD 19.32 (EUR 11.84) for NIP vaccines from July 2024
CANADA 	Varies depending on the third-party payer or province
FRANCE 	EUR 7.50 (incl. VAT): Vaccine administration only EUR 9.60 (incl. VAT): Vaccine administration + prescribing
IRELAND 	EUR 15 for the Influenza vaccine
PORTUGAL 	EUR 3 per vaccine administrated, with an additional EUR 0.11 if waste is generated by the pharmacy
UK 	In England, GBP 9.58 (EUR 11.46) per NHS-funded vaccine Additional GBP 2.50 (EUR 2.99) for COVID-19 vaccines outside the flu season
USA 	Varies depending on the third-party payer or state

PHARMACY-DRIVEN VACCINATIONS: BOOSTING HEALTHCARE OUTCOMES AND EFFICIENCY



According to a recent report by the Office of Health Economics, adult vaccination against four diseases (seasonal influenza, pneumococcal disease, herpes zoster, and respiratory syncytial virus (RSV)), can return up to 19 times their initial investment to society, when their benefits beyond the healthcare system are monetised.⁹



Pharmacies can increase vaccination coverage during influenza epidemics, potentially mitigating up to 23.7 million symptomatic cases, saving third-party payers up to USD 2.8bn (EUR 2.65bn), and providing society with USD 99.8bn (EUR 94.32bn) in savings.¹⁰



Global Health benefits of potentially effective vaccines for NCDs: 74% of deaths globally and over 64% of all disability-adjusted life-years (DALYs).¹¹



Pharmacist-led interventions, such as proactive communication and in-pharmacy dialogues, substantially increase vaccination rates compared to standard care.¹²



Shifting vaccination services to pharmacies reduces the burden on traditional healthcare providers, allowing physicians to dedicate more time to critical patient care activities.¹³



Preventing infections through vaccinations helps mitigate the exacerbation of non-communicable diseases (NCDs), reducing the healthcare burden and the social and economic impact of diseases.⁴



Vaccinations reduce hospital emergency visits, ease pressure on healthcare systems, and lower hospitalisation costs.⁴

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