



MA Adult Immunization Update

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Consultant	No relevant conflicts of interest to declare or relevant conflict
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Major Stockholder	No relevant conflicts of interest to declare or relevant conflict
Other Financial or Material Interest	No relevant conflicts of interest to declare or relevant conflict

The speaker may discuss the use of vaccines in a manner not approved by the U.S. Food and Drug Administration, but in accordance with ACIP recommendations



Objectives

- Identify gaps in existing adult vaccination coverage
- Discuss ethnic and racial disparities in adult vaccination rates
- List evidence-based strategies to improve adult vaccination rates

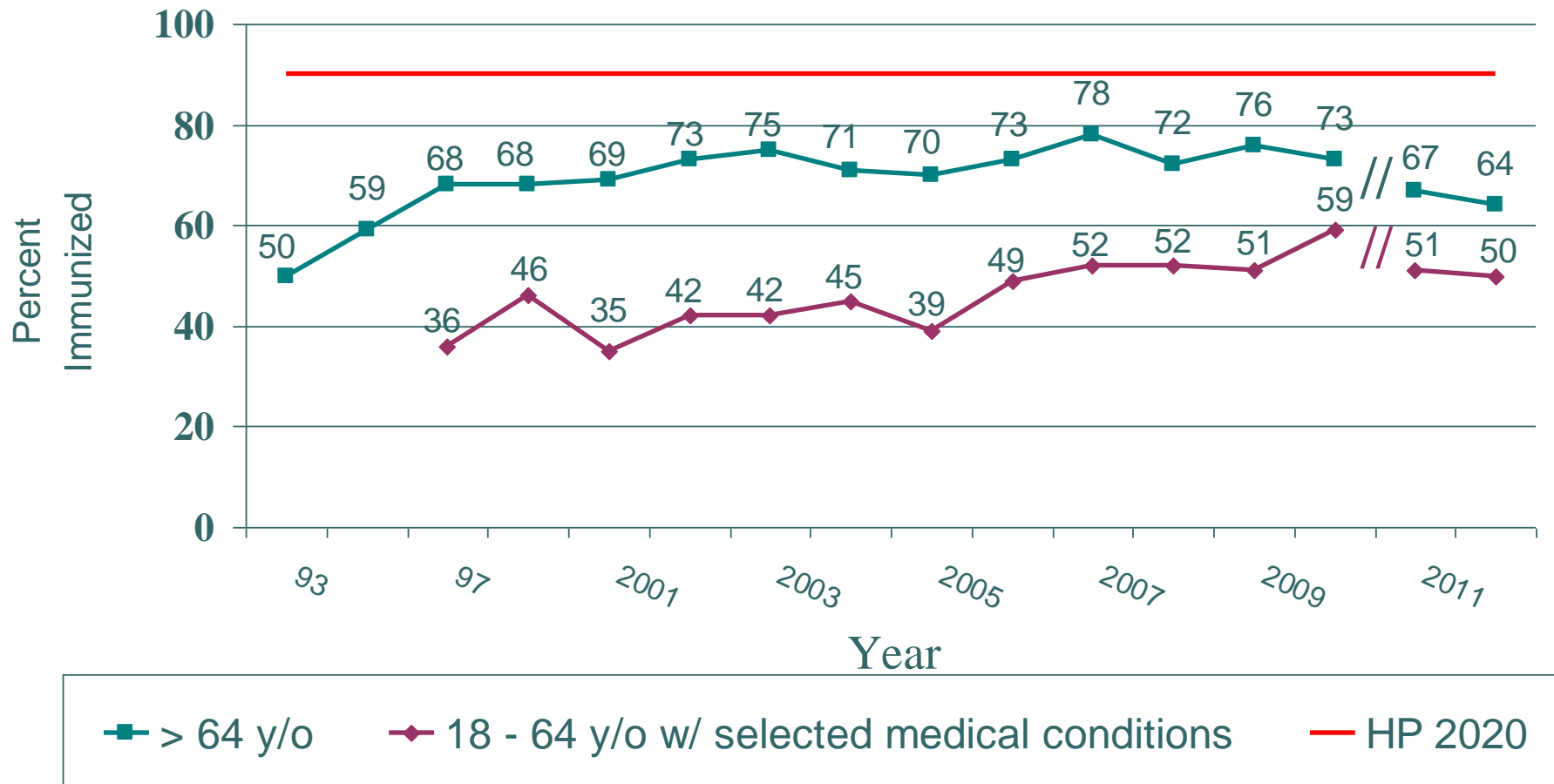


MA flu vaccination rates 2011-12

Everyone 6 mos+	50%
Children 6 mos – 17 yrs	63%
• Children 6 mos – 4 yrs	86%
• Children 5 – 12 yrs	71%
• Adolescents 13 – 17 yrs	39%
Adults 18 +	47%
• HR Adults 18 – 64 y/o	57%
• Healthy Adults 18 – 64 y/o	42%
• Adults 65+	70%

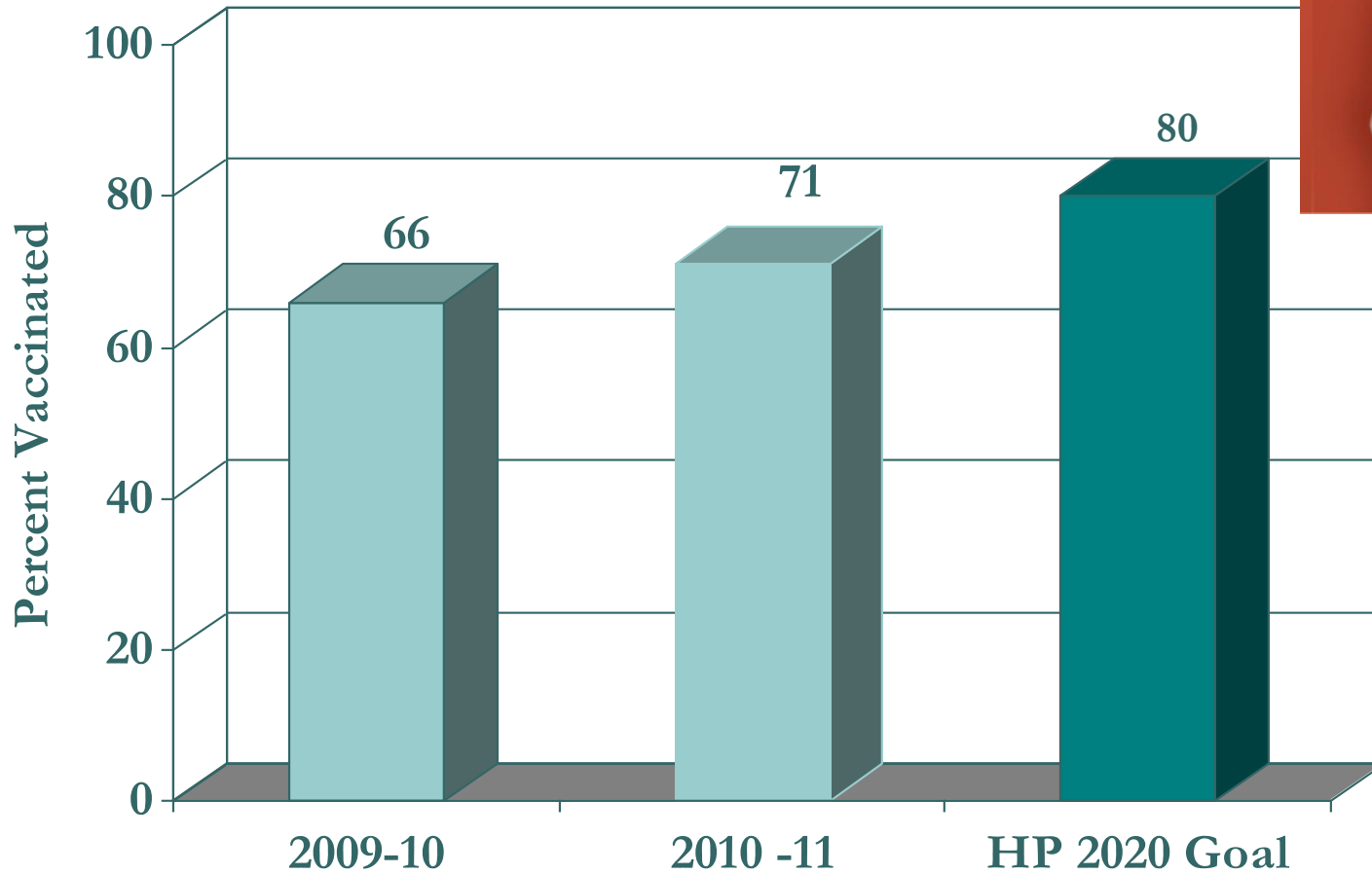
Sources:
BRFSS and NIS

Seasonal flu vaccination rates for MA adults



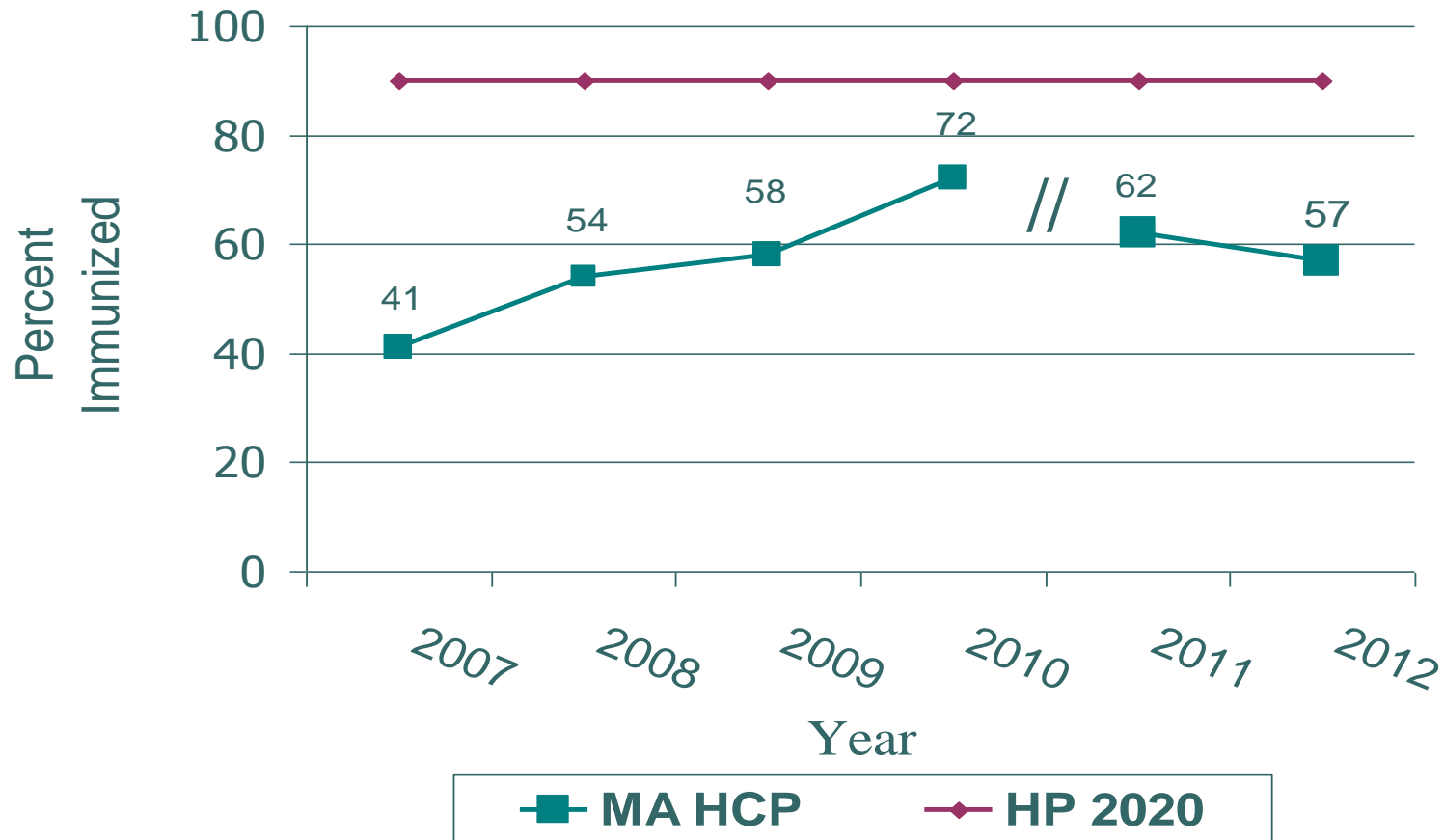
MA BRFSS 2012 data preliminary Data collected methods changed in 2011.

Percent of MA pregnant women who receive seasonal flu vaccine



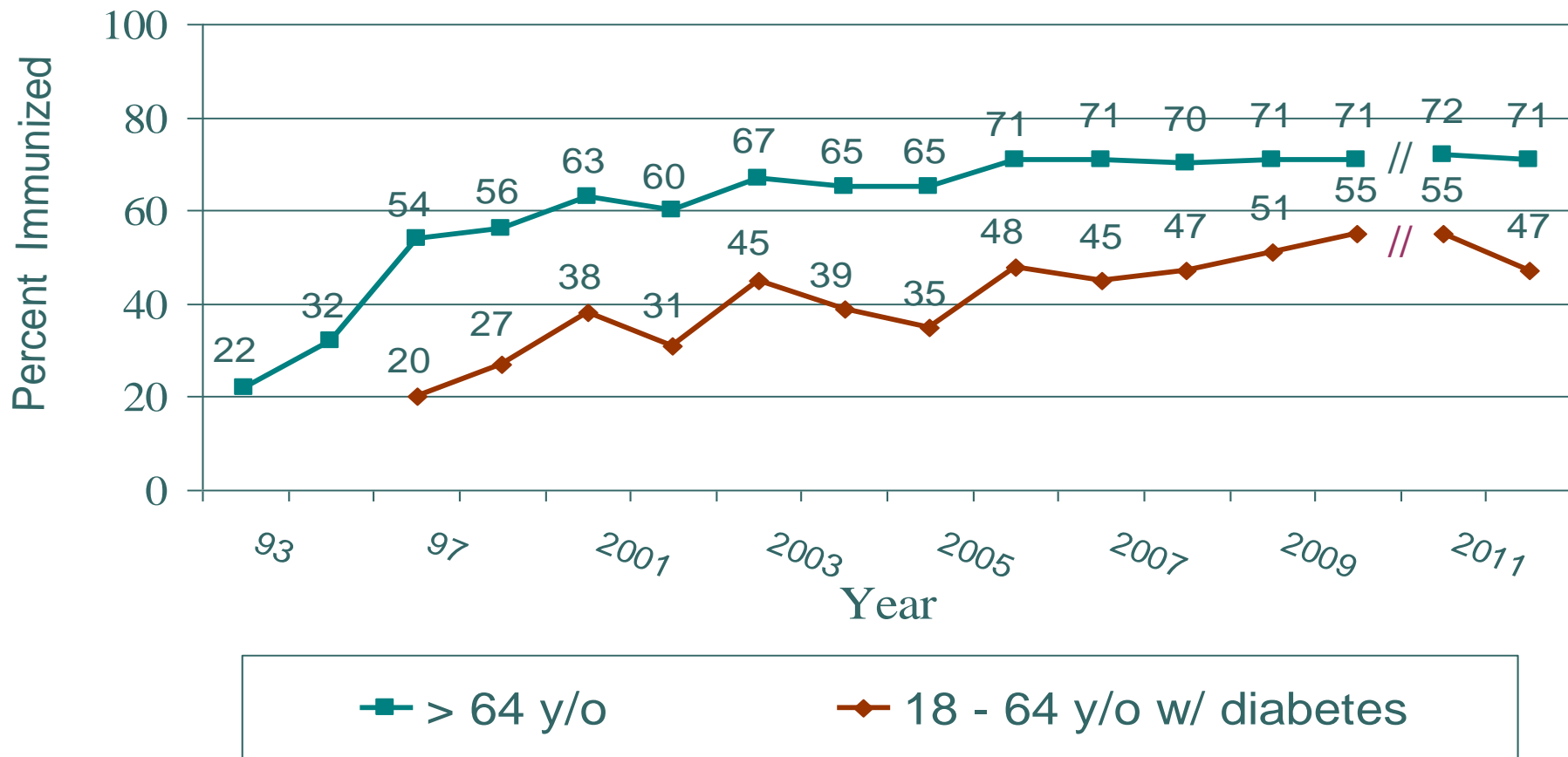
Source: PRAMS 2010-2011 data are preliminary

Flu vaccination rates for MA HCP



MA BRFSS 2012 data preliminary. Data collected methods changed in 2011.

Pneumococcal Vaccination Rates for MA Adults



MA BRFSS 2011 data preliminary Data collected methods changed in 2011.



MA adult vaccination rates

Vaccine/Group	2011	2012
Tdap 18+ y/o	19%	21%
Zoster 60+ yrs	17%	23%
HPV 18-26 y/o (≥ 1 doses)	55%	60%
Heb B HR 18+ y/o	54%	51%

2012 BRFSS preliminary data



↑ increasing adult vaccination rates
WHAT WORKS

TASK FORCE ON COMMUNITY PREVENTIVE SERVICES RECOMMENDATIONS

www.thecommunityguide.org/vaccines/index.html



Client or Family Incentives

- ❑ Monetary or non-monetary awards: e.g. food vouchers, gift cards, lottery prizes
- ❑ For keeping appointment, getting vaccinated, returning for a series dose, or producing documentation of vaccination

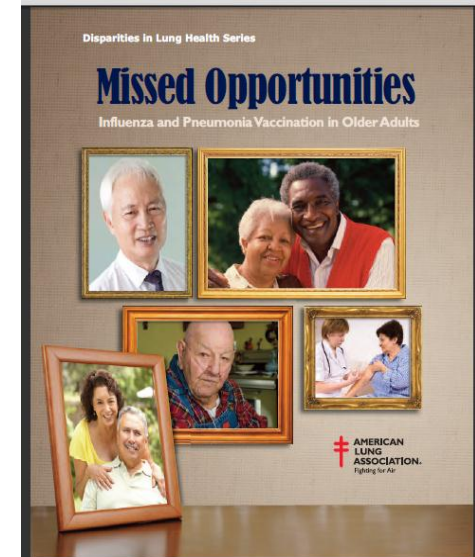


Client Reminder/Recall

- ❑ Reminders (vaccine due) or recalls (vaccine late)
- ❑ Varying content: most involve specific notification for specific client & may include educational message
- ❑ Delivered via telephone, letter, postcard, etc.

Missed Opportunities

- Chronic care visits, no vaccination
- Acute care visits, no vaccination
- Well visits, no vaccination!
- 94% of MSM 23-29 y/o susceptible to hep B had regular source of HC; been tested for HIV; or been treated for STD. (CM Weinbaum, et al. AJHA 2008;98(5)).



● ● ●

Your recommendation and offer of vaccine are the most important determinants of whether or not someone gets vaccinated.





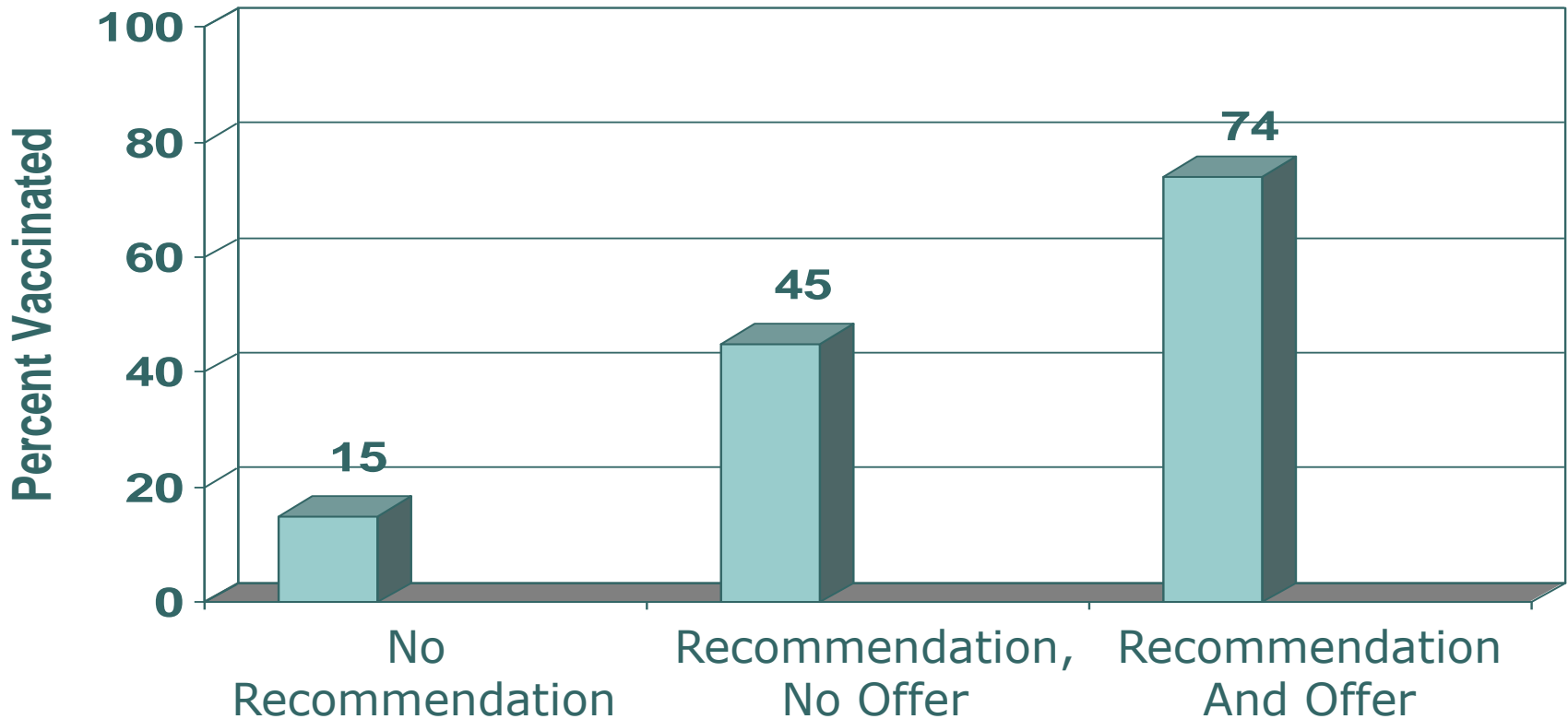
The importance of your recommendation

2008 NFID survey:

- 87% indicated they would be likely to get a vaccine if their provider recommended it
- 55% indicating they would get it *only* if their provider recommended it

NFID. *National survey on adult vaccination reports low consumer awareness of vaccines and the risks of vaccine-preventable diseases.* Bethesda, MD: 9 National Foundation for Infectious Diseases; 2008.

Flu Vaccination Coverage among Pregnant Women by Provider Recommendation and Offer of Flu Vaccine*



*Women Pregnant Any Time Between Jul 1 - Nov 9, 2012, Who Visited a Health Care Provider at Least Once During that Time

<http://www.cdc.gov/flu/fluview/pregnant-women-2012.htm>



Provider Reminder Systems

- ❑ Reminder to provider that an individual client is due for specific vaccinations
- ❑ Variable delivery methods e.g. pre-printed notes in client charts, reminders in EMRs, or mailed letters



Provider Assessment and Feedback

- ❑ Immunization record review
- ❑ Giving feedback
- ❑ Can include incentives or benchmarking

What gets measured gets done...

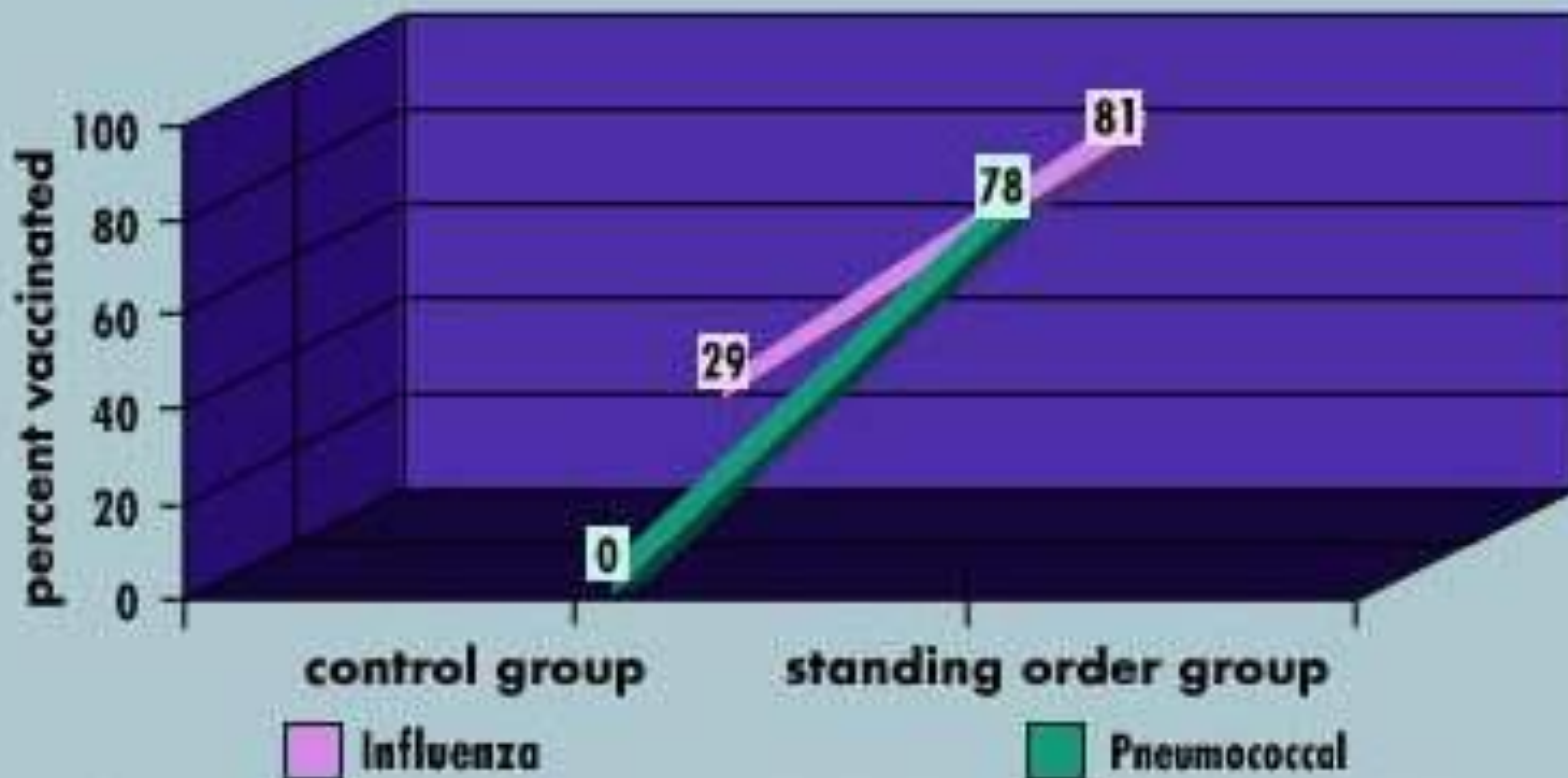


Standing Orders

- ❑ Protocol enabling assessment of vaccination status and vaccine administration w/o direct physician order
- ❑ Can include one or more specific vaccines
- ❑ In MA, licensed nurses can administer vaccines under standing orders
- ❑ Model standing orders for all vaccines available at www.mass.gov/dph/imm

Standing Order

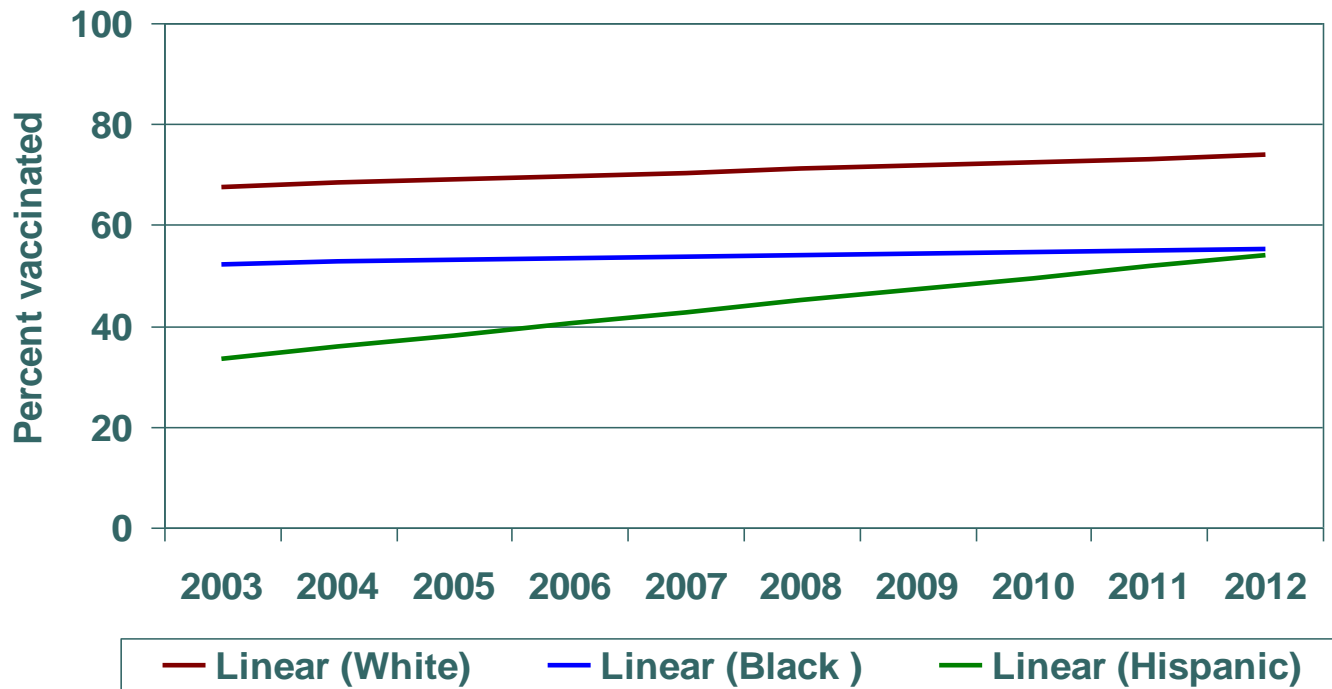
Effectiveness of standing orders



SOURCE: Margolis KL, Lofgren RP, Korn JE. Organizational strategies to improve influenza vaccine delivery. *Archives of Internal Medicine* 1988;148:2205-2207.

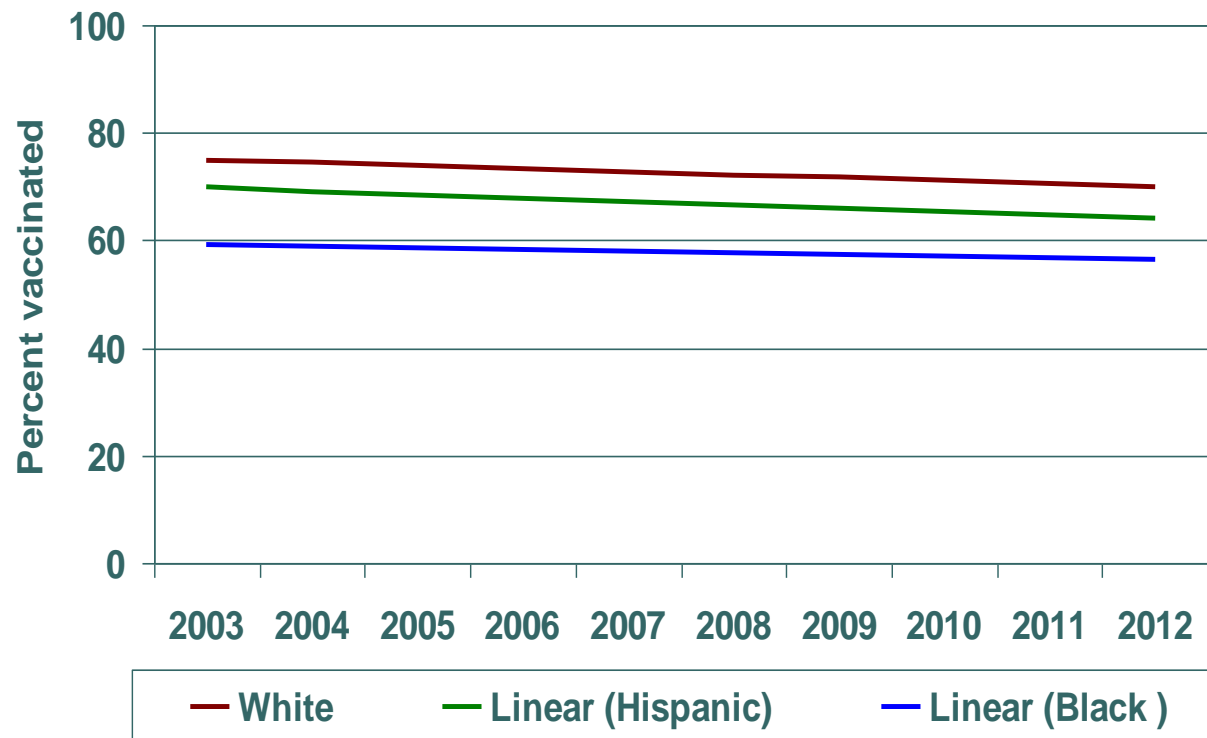
Klein RS, Adachi N. An effective hospital-based pneumococcal immunization program. *Archives of Internal Medicine* 1986;146:327-9.

Trends in PPV23 rates for MA adults \geq 65 y/o, by race/ethnicity



Source: BRFSS 2012 data preliminary

Trends in flu vaccination rates for MA adults ≥ 65 y/o, by race/ethnicity



Source: BRFSS 2012 data preliminary



Flu Vaccine for Everyone!

A Guide to Reaching and Engaging Diverse Communities

Massachusetts Department of Public Health—Office of Health Equity



September 2011

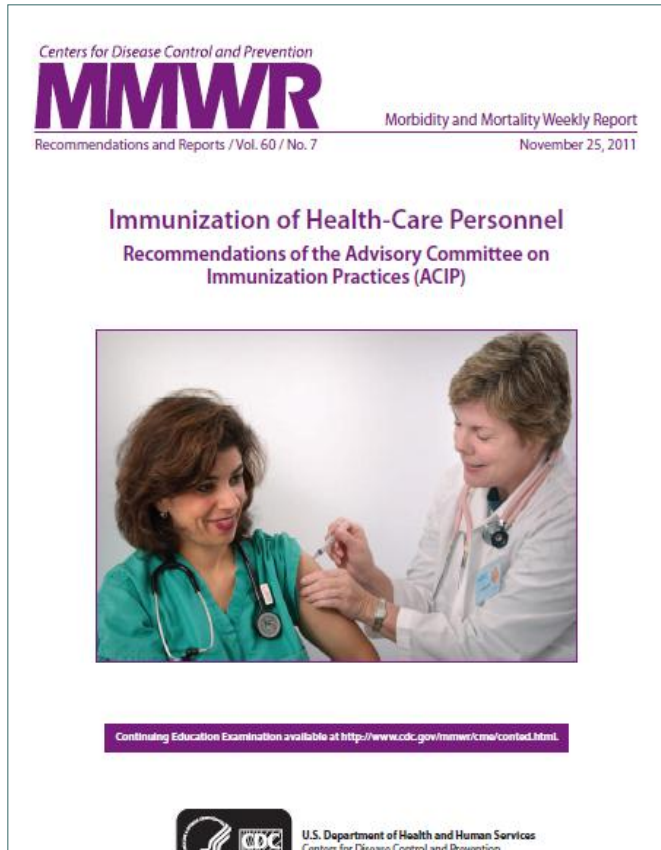
www.mass.gov/dph/flu



MDPH College Immunization Requirements

Phase –In schedule for MMR, Varicella ,Tdap				
		2013	2014	2015
2 MMR		FT	FT	FT
2 Varicella		freshmen -	freshmen-	freshman-
1 Tdap		juniors;	seniors;	graduates;
		all health	all health	all health
		science	science	science

Vaccines for HCP



- Annual flu
 - 1 dose Tdap
 - 3 doses Hep B
 - 2 doses MMR*
 - 2 doses varicella*
- * Or documented immunity

● ● ● | ***Get a dose of Tdap ASAP!***

Get flu vaccine every year!



*It's an
occupational health
and patient safety
issue!*

● ● ● | For more information...

www.mass.gov/dph/imm

www.cdc.gov/vaccines

www.immunize.org

Howard Koh, MD, Assistant Secretary for Health, receiving his flu vaccination.





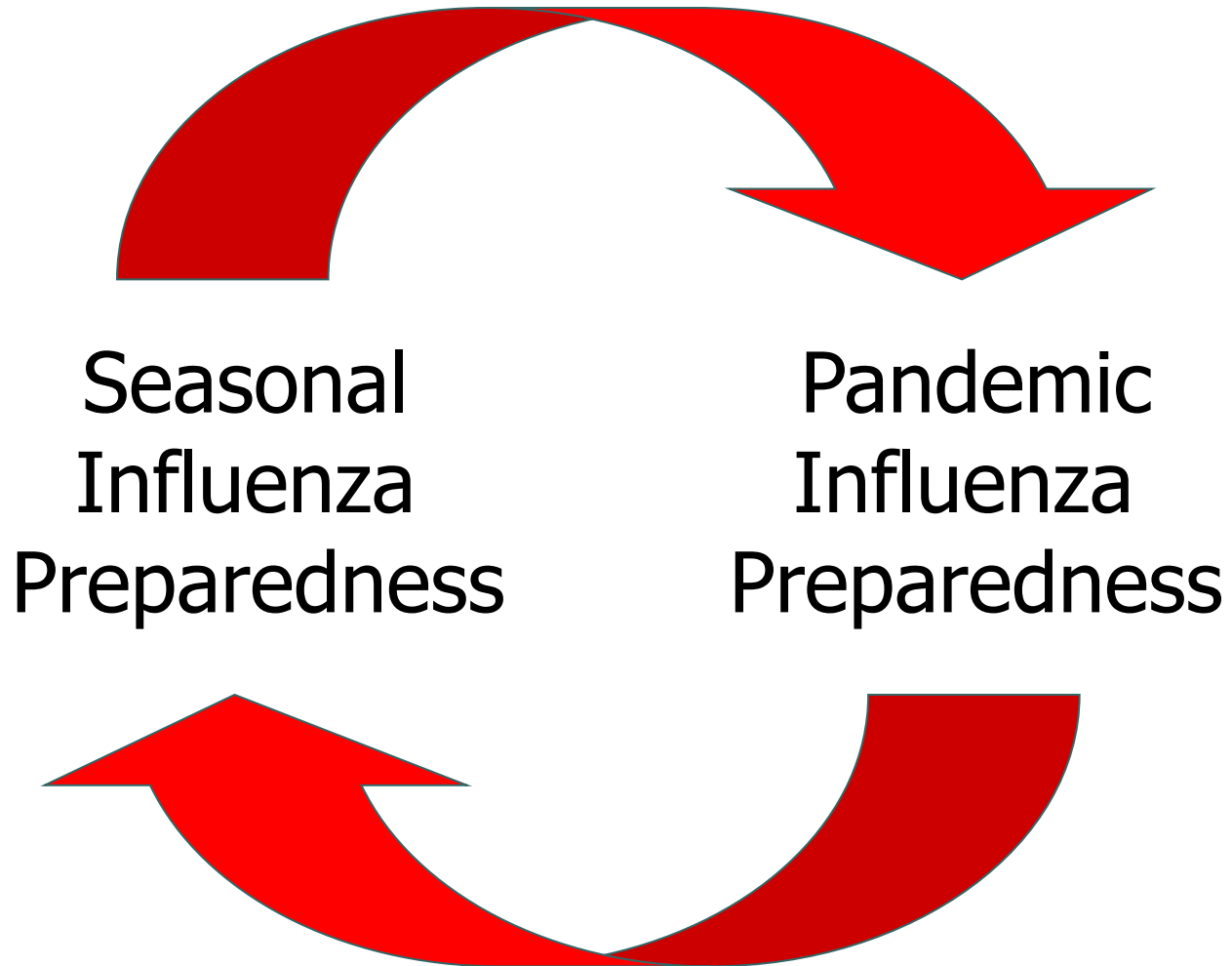
MIIS Update

- Status: 240 live sites; 1.2 M patient records; 4.7 M documented vaccinations
- MIIS Help Desk
 - Phone: 617-983-4335
 - Email: miishelpdesk@state.ma.us
 - www.contactmiis.info | www.mass.gov/dph/miis
- Training Opportunities spring/summer:
 - Regional In-Person and Online Webinars
 - NEW Training Videos and Quick Reference Guides



What You Can Do TODAY!

- **Visit the MIIS Table** to learn about:
 - Next release of the MIIS
 - Training Opportunities
 - Registration
- **Attend the an MIIS Workshop:**
 - Morning or Afternoon Session





MIIS

and Pandemic Preparedness

- Providers will not be able to get pandemic vaccine for their patients unless they are enrolled in the MIIS
- Begin enrolling now!
 - Enrollment can take several weeks
 - Waiting until pandemic vaccine is available is too late



Immunization Legislation Update

Susan M. Lett, MD, MPH



An Act Establishing the MA Childhood Vaccine Program

S.534 Moore
H.2012 Lewis

- **Vaccine Funding:** Establishes a Vaccine Purchase Trust Fund and ensures stable funding for all childhood vaccines
 - Makes line-item assessment language permanent
 - Creates a novel public-private collaboration
 - Assesses health plans (surcharge payers) for childhood vaccines
 - Saves health plans money by purchasing vaccines at a 40% discount on the federal contract
- **Immunization Registry:** Includes assessment for maintenance of registry (MIIS)
- **Reimbursement:** Ensures adequate reimbursement for vaccine administration and for those vaccines not provided by MDPH



Bill Status

S.534 Moore
H.2012 Lewis

- S. 534 is before the Joint Committee on Health Care Financing
- H. 2012 is before the Joint Committee on Public Health