



MA Update

Immunization Coverage, Partnerships & Initiatives

Adult Immunization Conference April 2, 2019

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24 YEARS OF ADULT IMMUNIZATION CONFERENCES

**Thank you for all that you do to
protect Massachusetts from
vaccine-preventable diseases!**





Presenter Disclosure Information

- I, Susan Lett, have been asked to disclose any significant relationships with commercial entities that are either providing financial support for this program or whose products or services are mentioned during our presentations.
 - I have no relationships to disclose.
- I may/will discuss the use of vaccines in a manner not approved by the U.S. Food and Drug Administration.
 - But in accordance with ACIP recommendations.



150 YEARS
OF ADVANCING
PUBLIC
HEALTH



Outline

- The Road to Health
- Immunization Rates
- MIIS
- Vaccine Confidence
- Partnerships & Initiatives





Road to Health



Are we there yet?

Where are we?

We made it!

How are we going to get there?



Immunization Neighborhood It Takes a Team

Collaboration, Coordination, and Communication:

Among immunization stakeholders dedicated to meeting the immunization needs of the patient and protecting the community from vaccine-preventable diseases.



Adapted from :





It Takes a Team

Strategies to Address Immunization Needs

1. Meeting specific needs of targeted populations
2. Supporting the Neighborhood
 - HIT
 - Documentation
 - Standards / Guidelines
 - Consistent Messaging
 - Scope of Authority
 - Referral mechanisms



Adapted from :



American Pharmacists Association
Improving medication use. Advancing patient care.



Where Are We? Immunization Rates



MA Adult Vaccination Rates vs. U.S

Vaccine/Group	MA 2015	MA 2016	MA 2017	US 2016
Tdap \geq 18 yrs	35%	39%	40%	27% [†]
Zoster \geq 60 yrs	44%	44%	46%	33%
HPV females 18-26 yrs (1+ doses)	71%	60%	70%	49% [§]
HPV females 18-26 yrs (3+doses)	78% [*]	84% [*]	N/A	N/A
HPV males 18-26 yrs (1+ doses)	38%	27%	41%	14% [§]
HPV males 18-26 yrs (3+ doses)	47% [*]	N/A	N/A	N/A
Influenza vaccine \geq 65 yrs	61%	57%	58%	70%
Pneumococcal vaccine \geq 65 yrs	73%	76%	76%	67%

*Percent of those who received at least 1 dose.


[†]US NHIS data for Tdap is for adults \geq 19 years old.

[§]US NHIS data for HPV (at least 1 dose) is for adults 19-26 years old.

Source: MA Data: MA BRFSS, US Data: NHIS



MA Flu Vaccination Rates vs U.S.

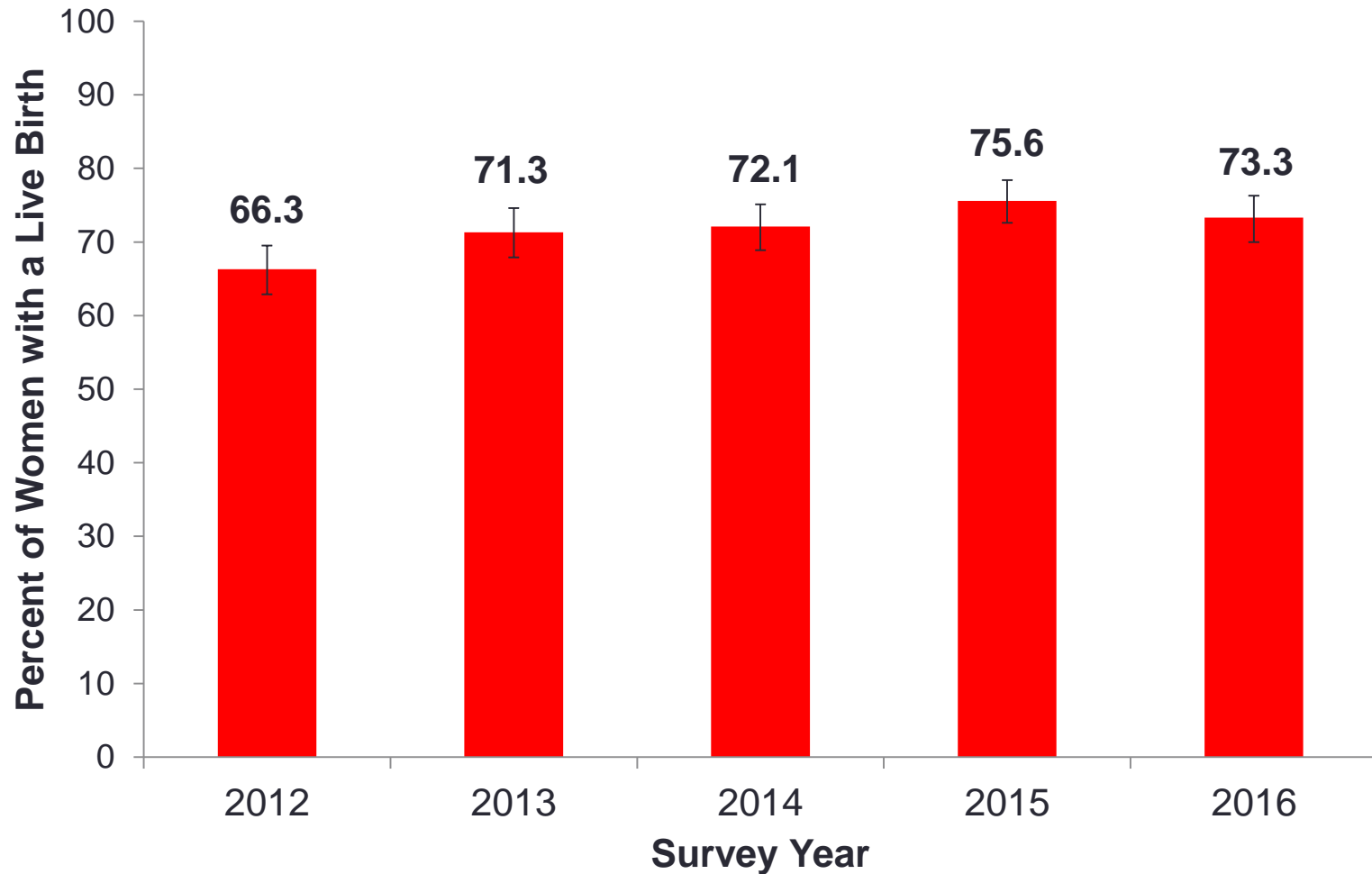


Ahead of Schedule Healthy People 2020	MA 2016-17	MA 2017-18	US 2017-18
Everyone 6 mos+	50%	50%	42%
Children 6 mos – 17 yrs	72%	74%	58%
○ Children 6 mos – 4 yrs	82%	76%	68%
○ Children 5 – 12 yrs	71%	74%	60%
○ Adolescents 13 – 17 yrs	65%	72%	47%
Adults 18 +	45%	44%	37%
○ Adults 18 – 64 yrs	41%	40%	31%
○ Adults HR 18 – 64 yrs	49%	46%	39%
○ Adults 50 – 64 yrs	47%	46%	40%
○ Adults 65+	59%	58%	60%

Source: 2016-17 and 2017-18 National Immunization Survey (NIS) – Flu, and BRFSS



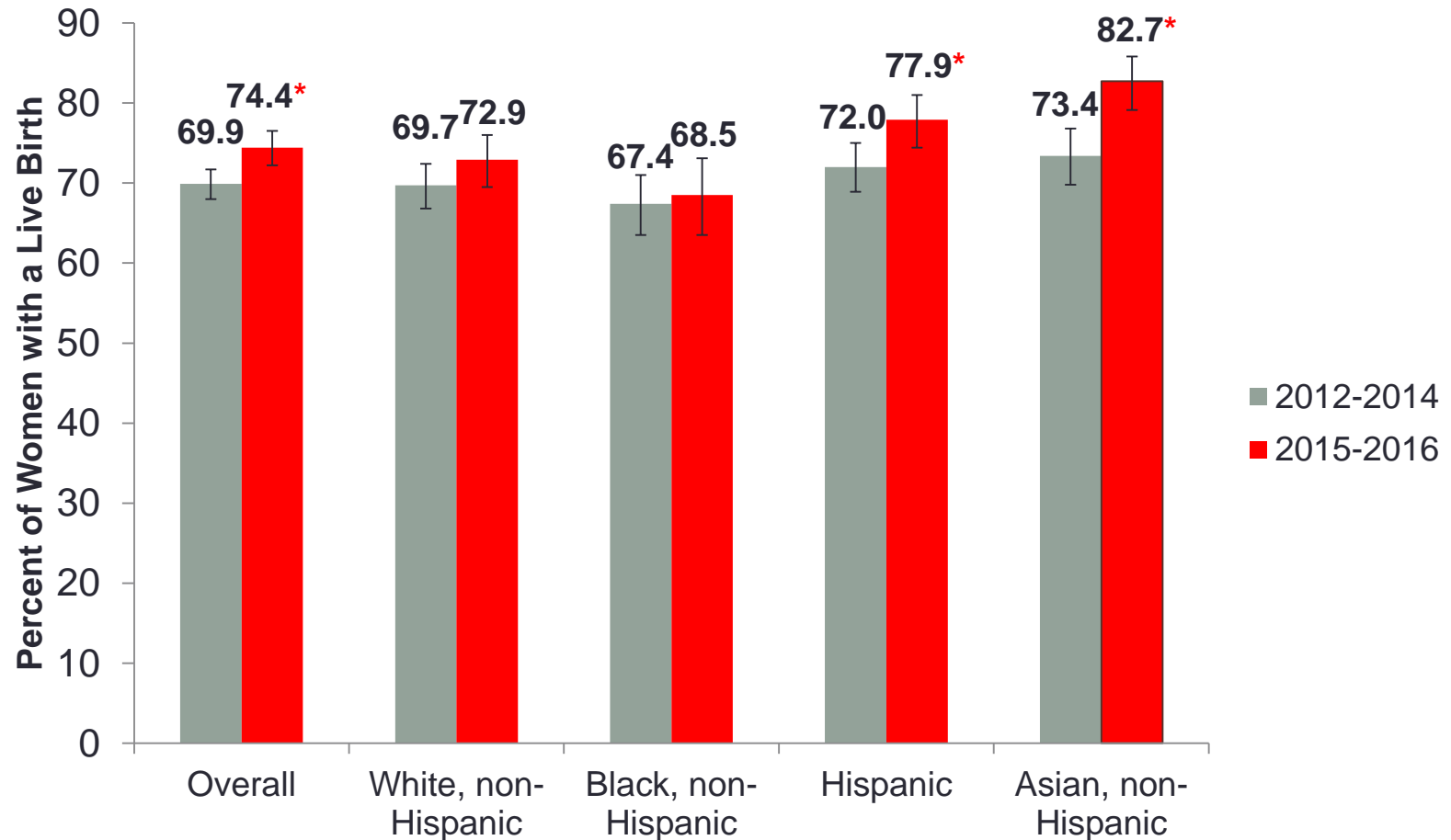
MA Influenza Vaccination in Pregnant Women, 2012-2016



Source: MA Pregnancy Risk Assessment Monitoring System (PRAMS)



MA Influenza Vaccination in Pregnant Women by Race/ Hispanic Ethnicity, 2012-2016



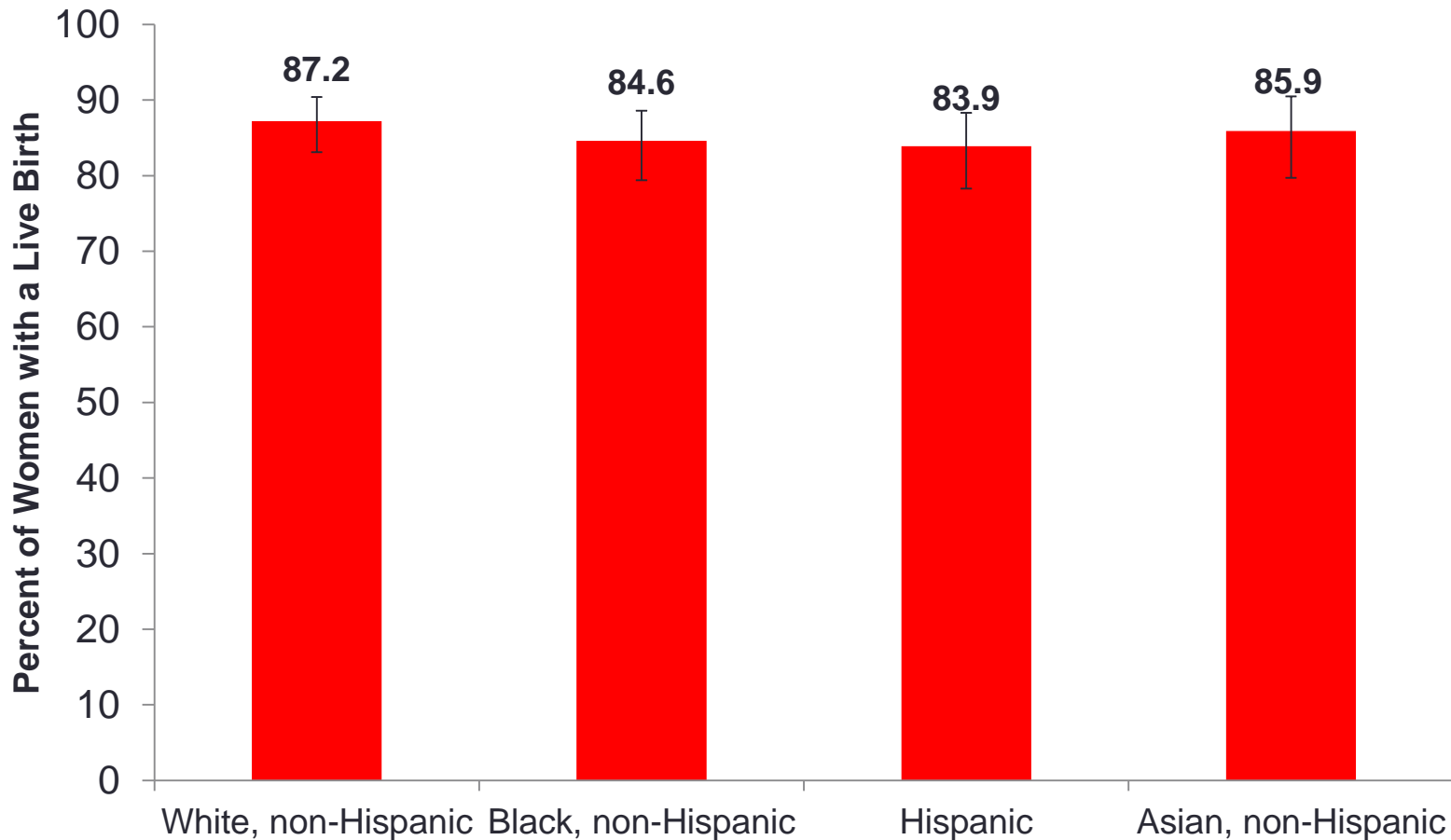
* Denotes statistically significant change

Source: MA Pregnancy Risk Assessment Monitoring System (PRAMS)



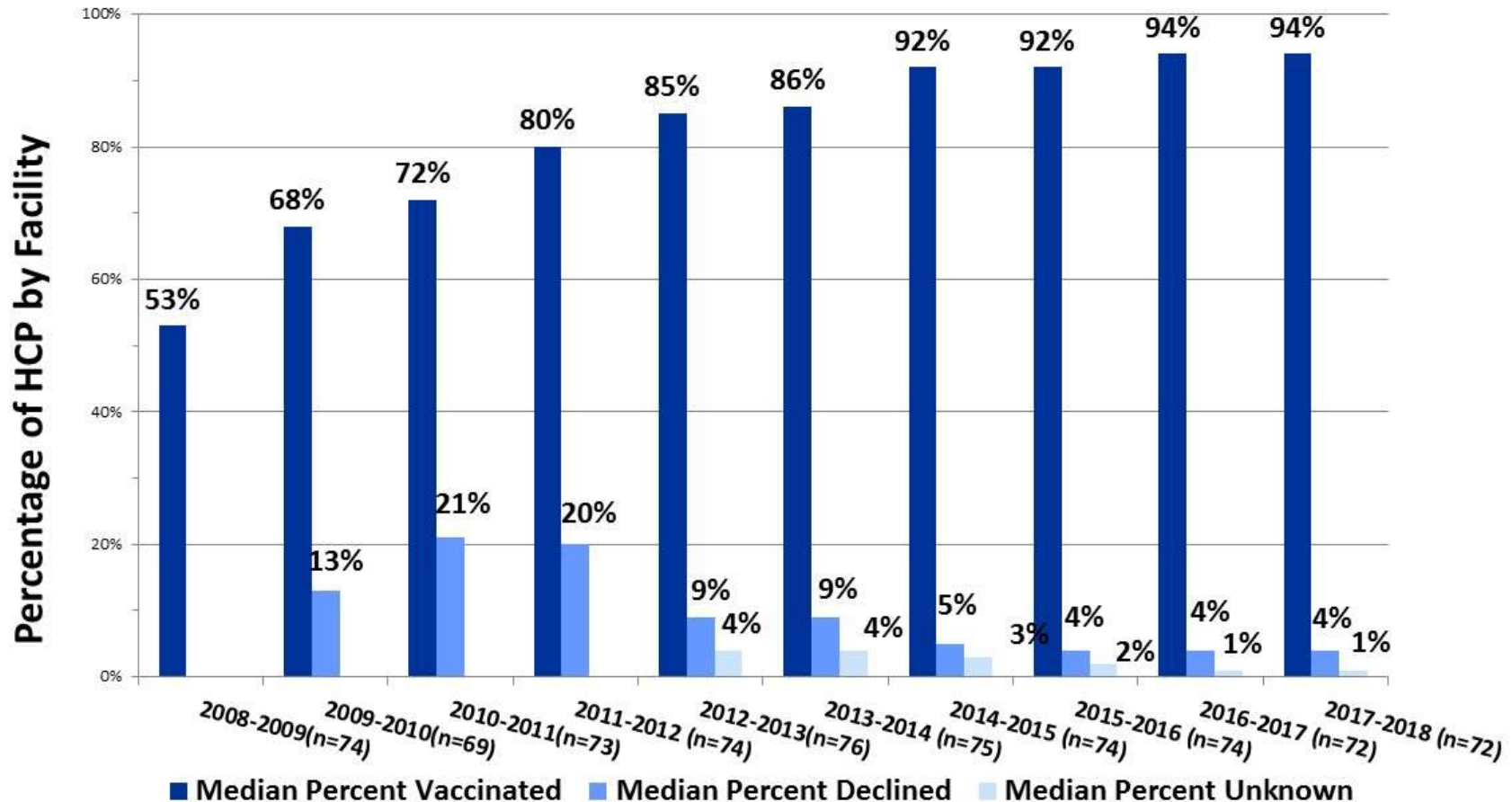
MA Tdap Vaccination in Pregnant Women by Race/ Hispanic Ethnicity, 2016

Tdap rate overall: 86.6%



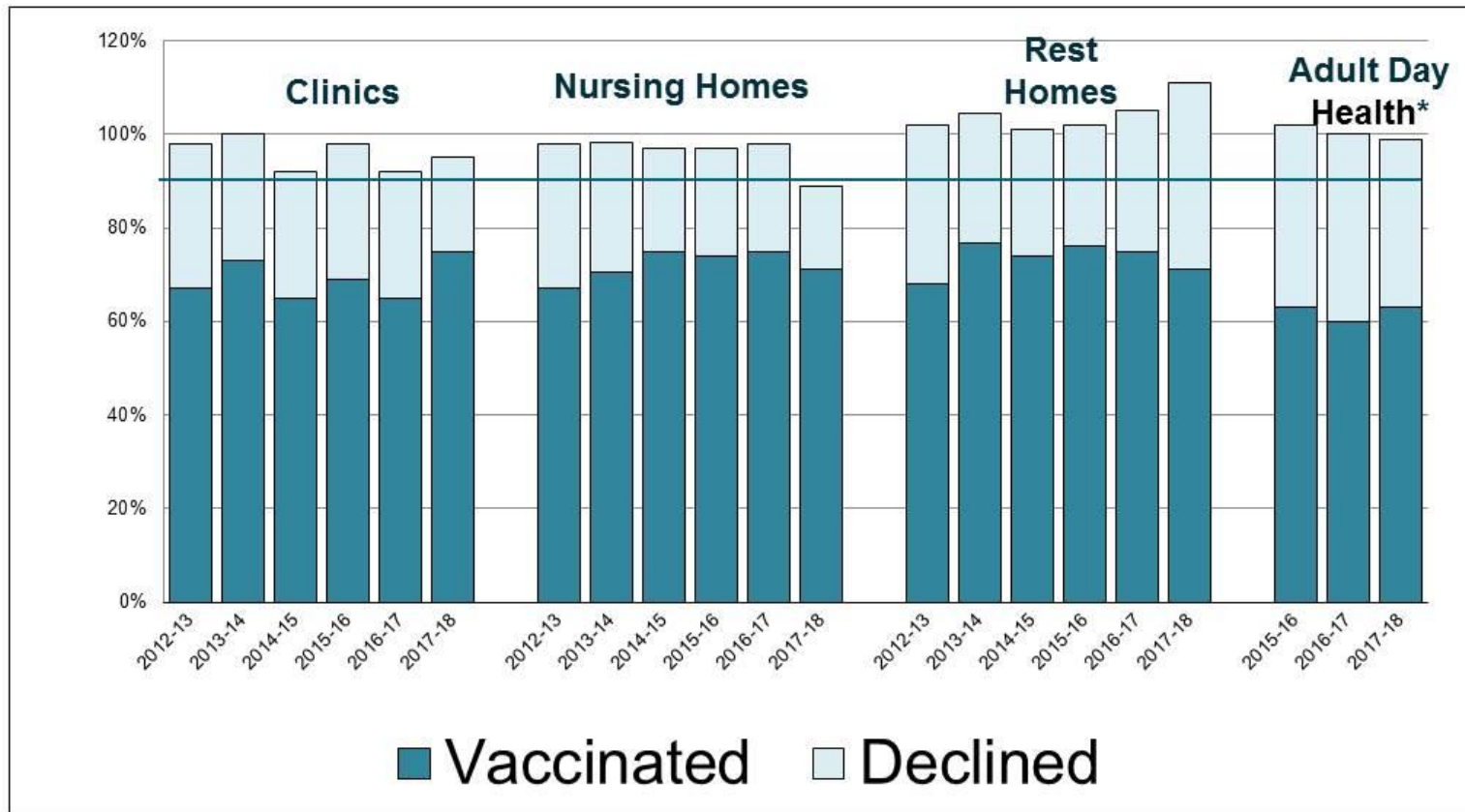
Source: MA Pregnancy Risk Assessment Monitoring System (PRAMS)

Trends Over Time Acute Care Hospitals



Median HCP vaccine coverage remained constant in 2017-18 and met the Healthy People 2020 benchmark of 90%. The median declination rate remained 4% in 2017-18.

Mean Percent of HCP Influenza Vaccinations and Declinations as Reported by Massachusetts Clinics, Nursing Homes, Rest Homes and Adult Day Health Programs: 2012-2018 Seasons

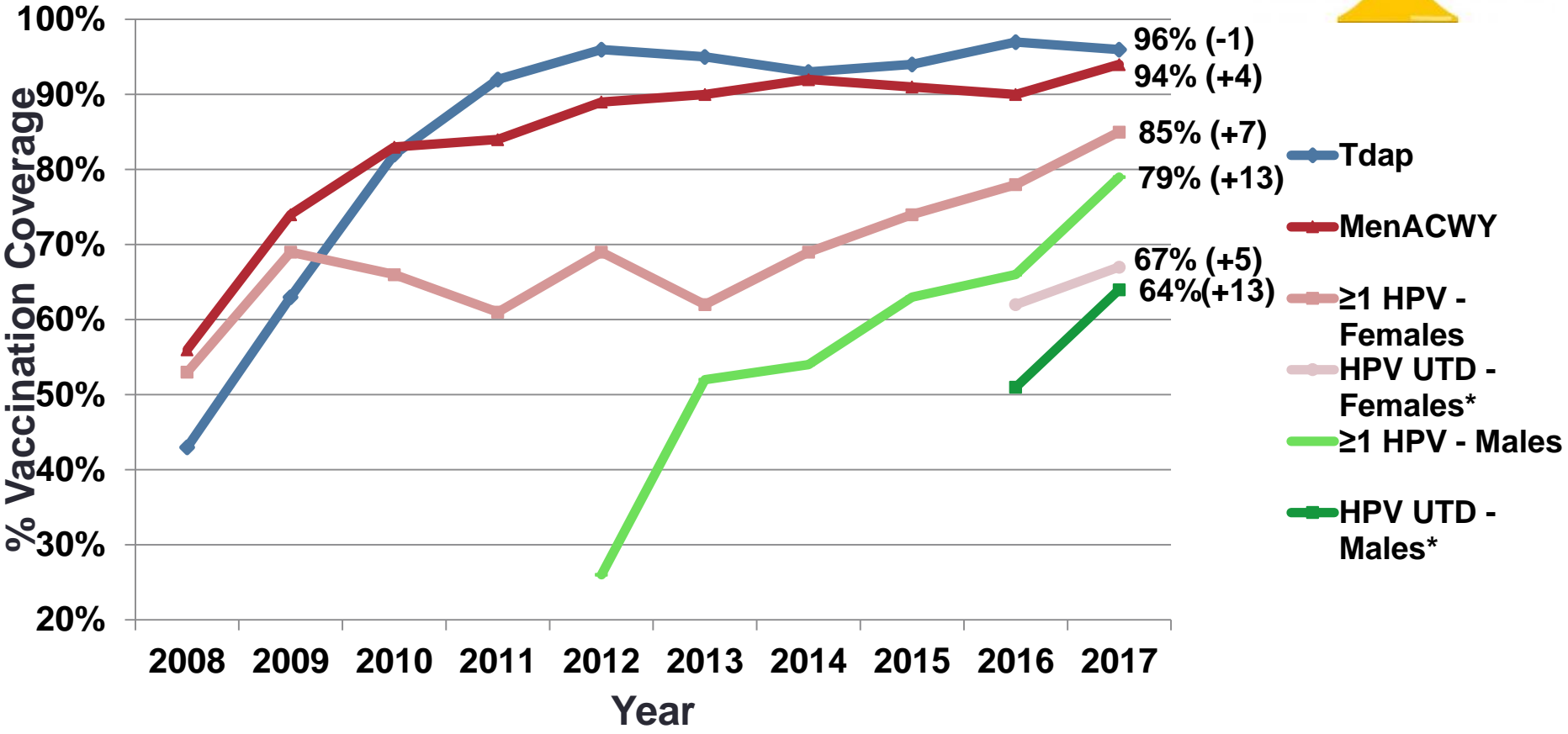


* 2015-2016 Season was the first year Adult Day Health Programs were required to report.



Ahead of Schedule
Healthy People 2020
Goal

Adolescent Vaccination Coverage with Tdap, MenACWY, and HPV, Massachusetts, NIS, 13-17 years, 2008 – 2017



Numbers in parentheses indicate a change from the previous year

*HPV Up to date (UTD): 2 doses if the first dose given before the 15th birthday and doses were separated by at least 5 months, otherwise, 3 doses

NIS Data, CDC



Estimated Vaccination Coverage with HPV Among Adolescents 13-17 Years of Age, MA vs US, NIS 2016 vs 2017

	MA				US			
	Females		Males		Females		Males	
	2016	2017	2016	2017	2016	2017	2016	2017
≥1 HPV	78%	85%	66%	79% [◇]	65%	69% [◇]	56%	63% [◇]
HPV UTD*	62%	67%	51%	64% [◇]	50%	53% [◇]	38%	44% [◇]

HPV-UTD – 2 doses if the first dose was given before the 15th birthday and doses were separated by five months, otherwise, 3 doses

◇ Statistically significant improvement from the previous year



Massachusetts Immunization Information System





MIIS Data Over Time...

2011

Total Sites: 9
Total Patients: 3,902
Total Shots: 69,505

2013

Total Sites: 341
Total Patients: 1,539,629
Total Shots: 7,303,293

2015

Total Sites: 1,121
Total Patients: 4,427,623
Total Shots: 33,334,571

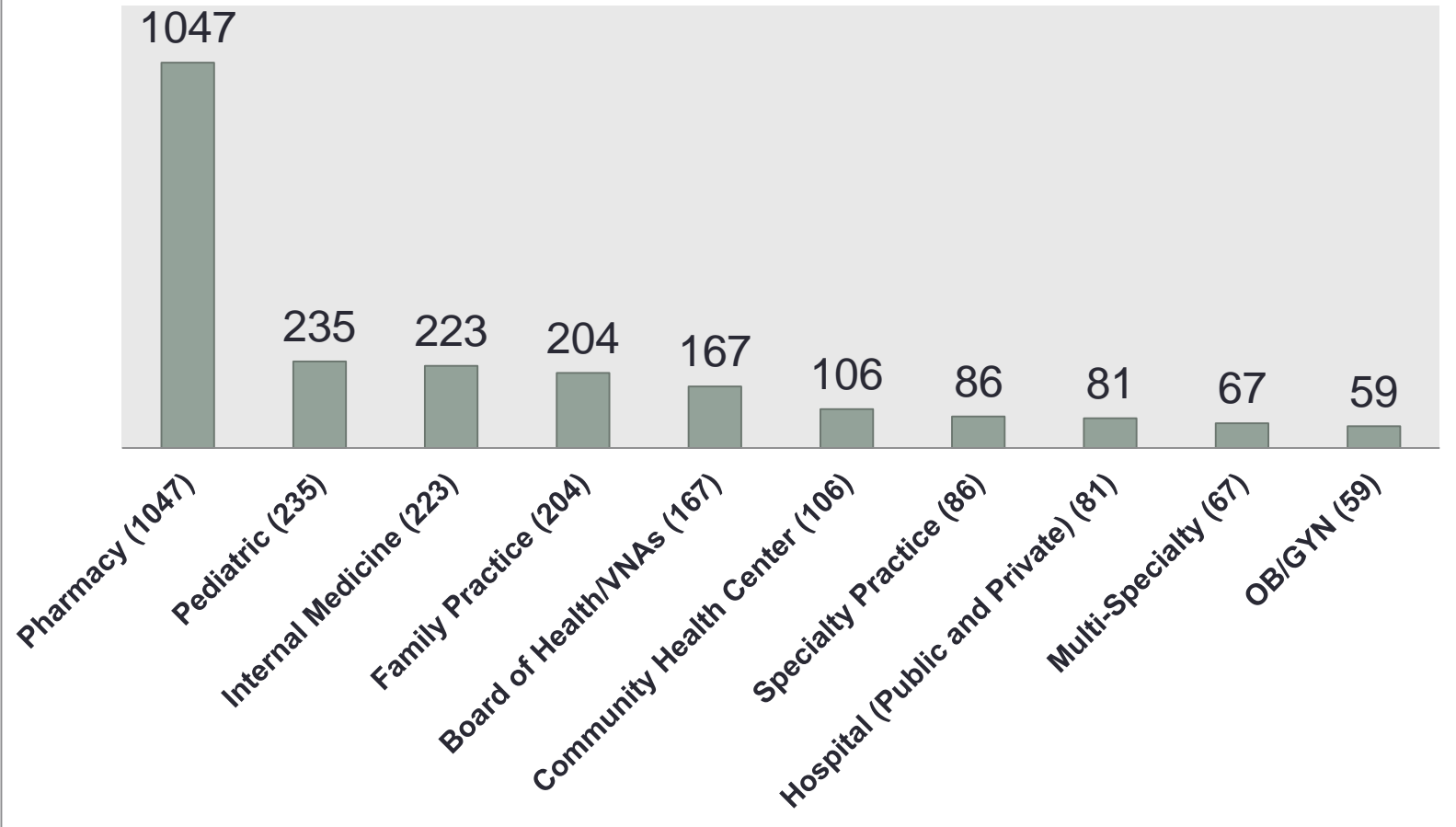
March 2019

Total Sites **2,471***
Total Patients **7,144,693***
Total Shots **56,389,594***



Number of Sites by Practice Type

Reporting to the MIIS





New & Upcoming to the MIIS...

- All New Appearance!
- Streamlined
- Increased Usability
- Improved Vaccine Order Process
- Improved Storage & Handling Process
- Redesigned Patient Immunization History
- Enhanced Practice Population Report



- Roster Entry Redesign
- Improved Deduplication Process
- Stopped HL7 Message Alerts





Vaccine Confidence and Effective Communication Strategies





[Home](#) / [Emergencies](#) / Ten threats to global health in 2019

- Air pollution and climate change
- Noncommunicable diseases
- Global influenza pandemic
- Fragile and vulnerable settings
- Antimicrobial resistance
- Ebola and other high-threat pathogens
- Weak primary health care
- **Vaccine Hesitancy**
- Dengue
- HIV

A photograph of a young child in a refugee camp. The child is wearing a pink headscarf and a purple sweater, looking directly at the camera with a serious expression. In the background, other people and makeshift structures are visible, suggesting a crowded and possibly unsafe environment.

Ten threats to global health in 2019



Create Culture of Immunization in Your Practice

It Takes a Team

- Patient's **confidence** is increased when they receive the same information from different people
- Inconsistent message from staff may confuse parents and create mistrust
- A culture of immunization starts at the front desk and extends into the waiting room, exam room and finally to the check-out desk
- Everyone plays a part:
 - Receptionists & other support staff
 - Nurses and nurse practitioners
 - Physicians and physician assistants
 - Office manager
 - Vaccine coordinator





Provider Recommendation is Key

Providers who consistently recommend vaccines have higher patient immunization uptake:

- Make provider assessment and vaccination recommendation routine
- Provider recommendations can help reduce racial and ethnic disparities in immunization coverage
- Give a **strong** routine recommendation
 - Use the “presumptive” or “announcement” style

[The Guide to Community Preventive Services](#)

National Vaccine Advisory Committee: standards for adult immunization practice. Public Health Reports 2014

Williams, MMWR 2017

[CDC Vaccination Coverage Among Adults in the U.S., National Health Interview Survey](#)

[CDC Standards for Adult Immunization Practice](#)





How You Make a Recommendation is Important

The way that we communicate with our patients matters...

- **Participatory:**
 - *Would you like an influenza vaccine today?* [implied following phrase 'or not?']
 - This passive recommendation is more likely to leave the impression of uncertainty of the value of [or commitment to] intervention suggested.
- **Presumptive:**
 - ***I strongly recommend*** we give you the influenza vaccination today to prevent the flu. Do you have any questions about that?
 - Recommending an immunization is equivalent to prescribing a diuretic for heart failure or an antibiotic for pneumonia...



CDC's SHARE Structured Communication Message

For some patients, a recommendation might not be enough. **SHARE** important information to help patients make informed decisions:

- **SHARE** tailored reasons why this vaccination is right for this patient.
- **Highlight** positive experiences with vaccination.
- **Address** patient questions and concerns.
- **Remind** patients that vaccines protect them and their loved ones against a number of common and serious diseases.
- **Explain** the potential costs of getting sick.

S
H
A
R
E

<h3>Hepatitis A Vaccine</h3> <p>Addressing Common Questions about Hepatitis A Vaccine</p> <p>What disease does this vaccine protect against? Hepatitis A vaccine protects against a serious liver disease caused by the hepatitis A virus.</p> <p>How common is this disease? In 2013 there were an estimated 3,473 new hepatitis A infections in the US.</p> <p>How is this disease spread? Hepatitis A is spread person-to-person through ingestion of something that has been contaminated with the feces of an infected person. This disease is usually spread by close personal contact with an infected person or by eating food or drinking water containing the hepatitis A virus. A person who has hepatitis A can easily pass the disease to others within the same household.</p> <p>Who is at risk for this disease? Although anyone can get hepatitis A, some people are at greater risk, such as those who:</p>	<h3>Hepatitis B Vaccine</h3> <p>Addressing Common Questions about Hepatitis B Vaccine</p> <p>What disease does this vaccine protect against? Hepatitis B vaccine can protect against hepatitis B virus, and the serious consequences of hepatitis B infections, including liver cancer, liver damage, and liver failure.</p> <p>How common is this disease? Hepatitis B is an estimated 700,000 to 1.4 million persons have chronic (long-term) hepatitis B virus infection. In 2013, there were an estimated 19,364 new hepatitis B virus infections in the United States. Many people don't know they are infected or may not have symptoms and therefore never seek medical treatment.</p> <p>How is this disease spread? Hepatitis B virus is easily spread through contact with the blood of another body fluid of an infected person. People can also be infected from contact with an object contaminated with hepatitis B virus. The virus can live for at least 7 days outside of the body. People who are chronically infected can spread hepatitis B virus to others.</p> <p>Who is at risk for this disease?</p>	<h3>Influenza (Flu) Vaccines</h3> <p>Addressing Common Questions about Influenza Vaccines</p> <p>What disease does flu vaccine protect against? Seasonal influenza (flu) vaccines protect against seasonal influenza viruses that circulate among people annually. The flu is a contagious respiratory disease that spreads around the United States every fall and winter, usually beginning in October and lasting as late as May. Flu vaccines are made to protect against the three or four different flu viruses that research indicates will be most common during the upcoming season.</p> <p>How common is this disease? Flu is very common in the United States in the fall and winter. Millions of people get sick, hundreds of thousands are hospitalized, and tens of thousands of people die from flu every year.</p> <p>How is this disease spread? Flu is spread mainly by droplets made in the air when people with flu cough, sneeze, or talk. A person might also get flu by touching an object that has flu virus on it and then touching their own mouth or nose.</p> <p>Who is at risk for this disease?</p>	<h3>Tdap/Td Vaccines</h3> <p>Addressing Common Questions about Tdap/Td Vaccination</p> <p>What diseases do these vaccines protect against? Tdap vaccine helps protect adults from these diseases: <ul style="list-style-type: none"> Tetanus (lockjaw) a serious bacterial disease that causes painful tightening of muscles that can stop muscles from working properly, including the muscles that control breathing. Diphtheria a very contagious bacterial disease that affects the heart and respiratory system, including the lungs. Pertussis (whooping cough) another very contagious bacterial disease that can cause severe cough and breathing problems. </p> <p>Who is at risk for these diseases? All adults who are not up to date with their tetanus and diphtheria risk for whooping cough vaccinated as children 6 years of over time.</p> <p>What could happen if you don't get these vaccines? TETANUS (lockjaw) can tighten and stiffen the body. It can lead to tight the head and neck to your mouth, swollen, or sore.</p> <p>DIPHTHERIA can cause fever, and swollen glands lead to breathing problems before, even leading to death.</p> <p>Pertussis can cause death.</p>	<h3>Protect your patients with the new shingles vaccine</h3> <p>CDC recommends new shingles vaccine (Shingrix) for adults 50 and older.</p> <p>patients: 50+ years old</p> <p>doses: 2-6 months apart</p> <p>administer: intramuscular in the deltoid</p> <p>store: 36°F refrigerated</p> <p>Who should get Shingrix? Give Shingrix (Recombinant Zoster Vaccine) to immunocompetent adults 50 years and older, including those who: <ul style="list-style-type: none"> had shingles in the past received Zostavax® (Zoster Vaccine Live) at least 6 weeks prior have health conditions, such as chronic renal failure, diabetes mellitus, rheumatoid arthritis, or </p>	<h3>Pneumococcal Vaccines (PCV13 and PPSV23)</h3> <p>Addressing Common Questions about Pneumococcal Vaccination for Adults</p> <p>What diseases do these vaccines protect against? There are two vaccines that protect against pneumococcal disease, which is caused by infection with a common bacterium called <i>Streptococcus pneumoniae</i>.</p> <ul style="list-style-type: none"> PCV13 (pneumococcal conjugate vaccine) protects against 13 of the approximately 90 types of pneumococcal bacteria that can cause the most serious types of pneumococcal disease, including pneumonia, meningitis, and bacteremia. PPSV23 (pneumococcal polysaccharide vaccine) protects against 23 types of pneumococcal bacteria. This vaccine helps prevent invasive infections like meningitis and bacteremia. <p>What could happen if I get this disease? Pneumococcal disease ranges from mild to very dangerous. Pneumococcal disease can spread from the nose and throat to ear or sinuses, causing generally mild infections, or spread to other parts of the body, leading to severe health problems such as lung infections (pneumonia), blood infections (bacteremia), and infection of the covering of the brain and spinal cord (meningitis).</p> <p>How common is pneumococcal disease? Each year in the United States, pneumococcal disease kills thousands of adults, including 18,000 adults 65 years or older. Thousands more end up in the hospital because of pneumococcal disease.</p> <p>How does pneumococcal disease spread? Pneumococcal bacteria can spread from person to person by direct contact with respiratory secretions, like saliva or mucus. People can carry the bacteria in their nose and throat, and can spread the bacteria to others.</p> <p>These serious diseases can lead to disabilities like deafness, brain damage, or loss of arms or legs. These diseases can also be life threatening.</p> <ul style="list-style-type: none"> Pneumococcal pneumonia kills about 1 out of 20 people who get it. Pneumococcal bacteremia kills about 1 out of 4 people who get it. Pneumococcal meningitis kills about 1 out of 6 people who get it.
<ul style="list-style-type: none"> • Vaccine specific fact sheets for Providers addressing common concerns about immunization for adults <ul style="list-style-type: none"> • Hep A, HepB, Pnuemo, Flu, Zoster, Td/Tdap • <i>How to Give a Strong Recommendation</i> videos • Resources for patients 					



How to Handle Resistance

- Engage the patient respectfully and fully in the discussion - **ASK PERMISSION TO GIVE INFORMATION.**
- Use empathy, collaboration, evocation and support for autonomy.
- Use open-ended questions and reflections.
- Use of behavior change principles like emphasizing social norms, pivoting from debunking myths and focusing on the disease that is prevented rather than negatives (like side effects).
- Make a clear, strong, & personalized recommendation
 - Use the presumptive or announcement approach.



If At First You Don't Succeed... Don't Give Up!

- Declination is not final.
The conversation can be revisited.
Declining = Delaying
- May agree to vaccination later
- ➔ • End the conversation with **at least 1 action** you both agree on.
- *Many patients who decline at first will vaccinate later*



The Vaccine Confidence Project

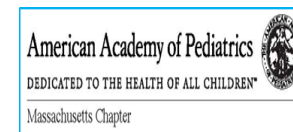
The Vaccine Confidence Project is a statewide initiative formed in 2018 by the Immunization Initiative of the Massachusetts Chapter, American Academy of Pediatrics (MCAAP) and the Immunization Division of the Massachusetts Department of Public Health (MDPH). Vaccine Confidence is the trust in the:

- Recommended vaccines;
- Providers who administer them; and
- Process that leads to vaccine licensure and recommendations.

The goal of the Vaccine Confidence Project is to increase vaccine confidence throughout Massachusetts to ensure that all residents are fully protected against serious, vaccine-preventable disease.

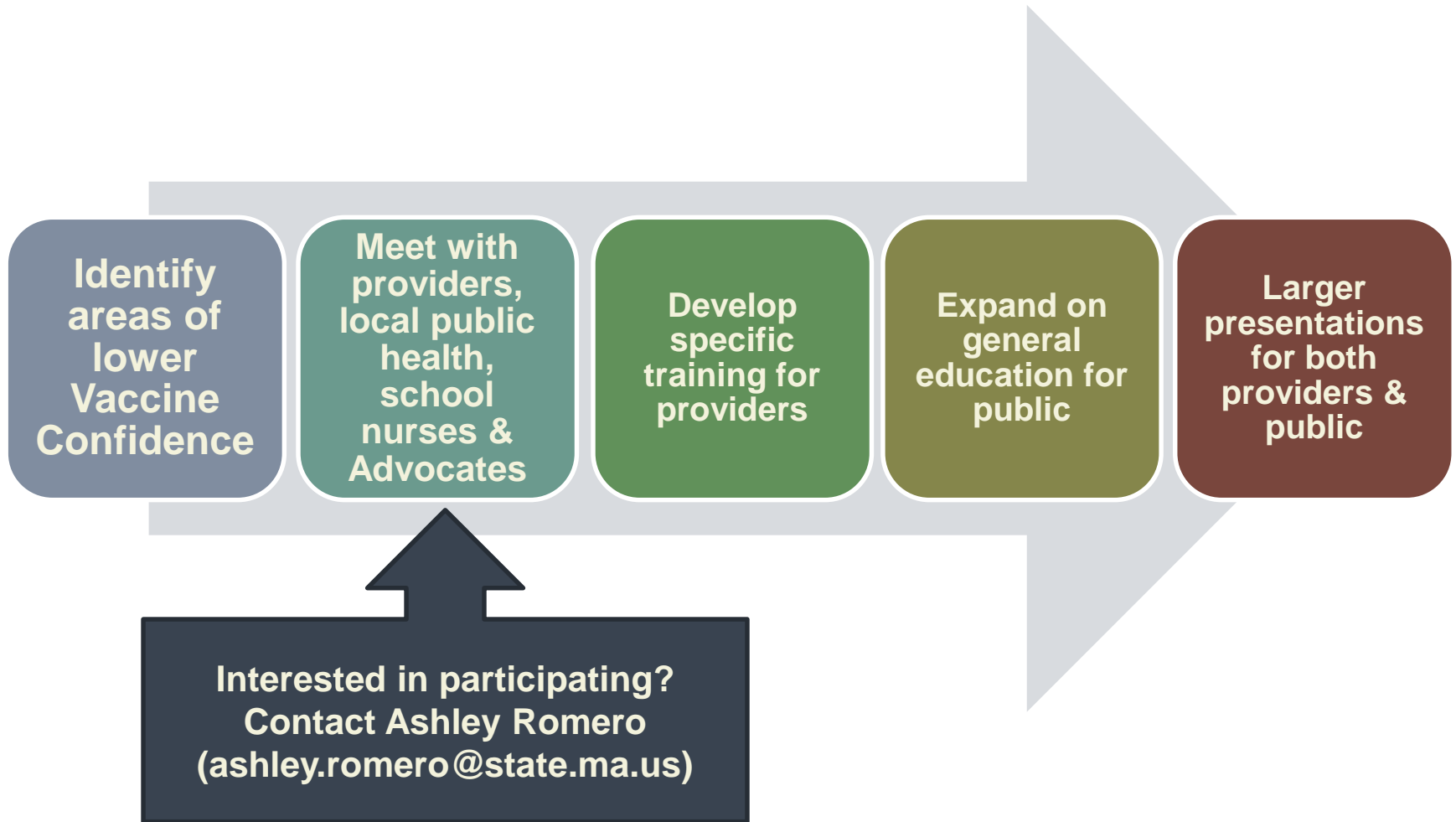
Visit the MCAAP Vaccine Confidence Project website:
<https://mcaap.org/immunization-initiative/vaccine-confidence-project/>

Download the Vaccine Confidence Project flyer:
<https://mcaap.org/2018/wp-content/uploads/11.8.18-Vaccine-Confidence-Project-Flyer.pdf>





Vaccine Confidence Project





Upcoming Vaccine Confidence Project Meetings

Email ashley.romero@state.ma.us to RSVP

Wednesday, May 8, 1:00—2:00 pm

Holyoke Community College

Kittredge Center, PeoplesBank Conference Room

303 Homestead Ave, Holyoke, MA

Friday, May 17, 1:00—2:00 pm

Berkshire Medical Center, Hillcrest Campus

165 Tor Court, Pittsfield, MA

Join us for updates on
Vaccine Confidence in
Massachusetts, and
hear from other
providers and
advocates.

All are welcome!

Questions:

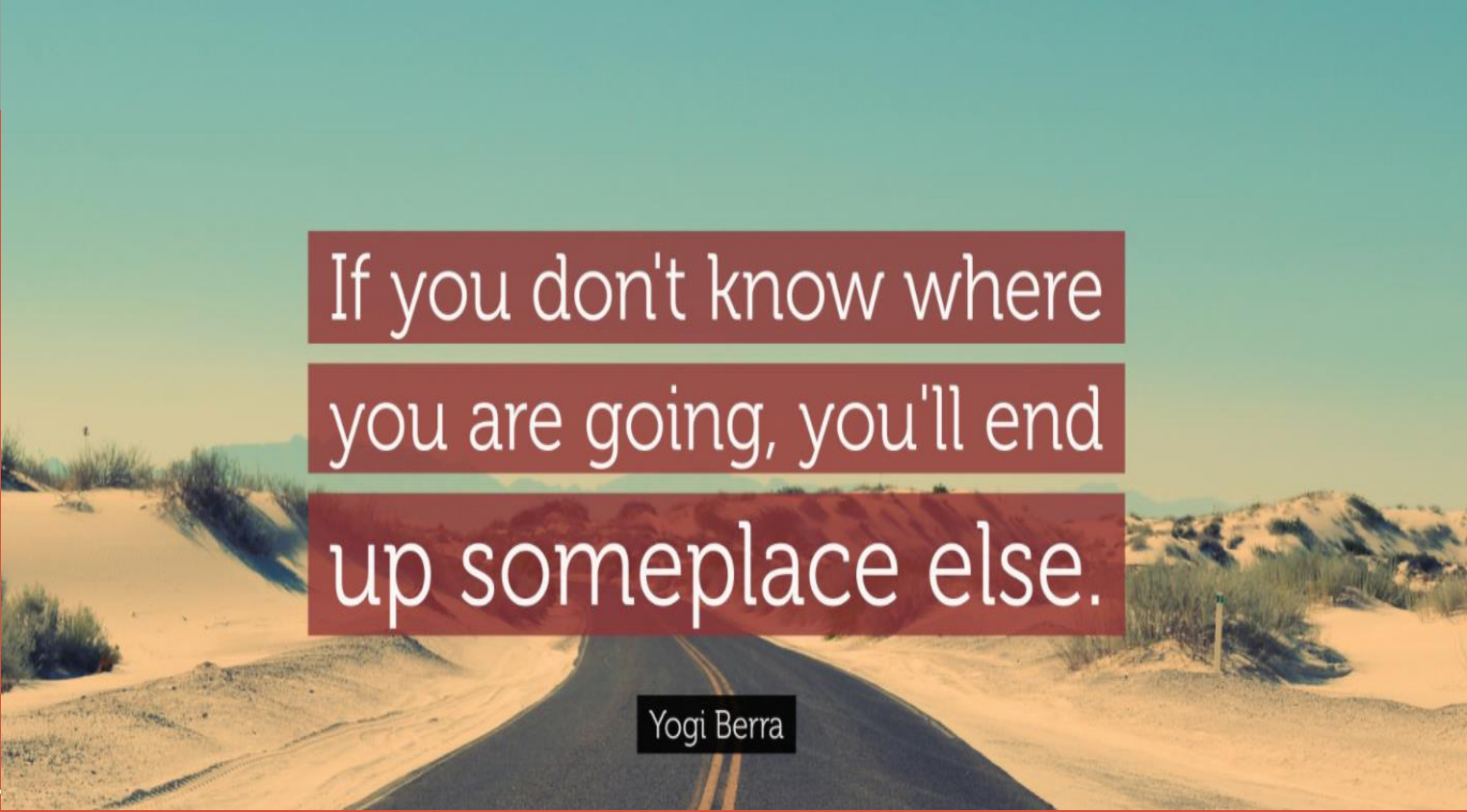
Call Ashley Romero (MDPH) 617-983-6826

or

Cynthia McReynolds (MCAAP): 781-895-9850

cmcreynolds@mms.org





If you don't know where
you are going, you'll end
up someplace else.

Yogi Berra

How Are We Going to Get There? Partnerships and Projects



MA Adult Immunization Coalition (MAIC)



- MAIC is a collaborative partnership dedicated to increasing adult immunization through education, networking, and sharing innovative and best practices.
- There are currently over 200 members representing:
 - Local and state public health organizations
 - Community health centers
 - Health insurance plans
 - Pharmacies
 - Physicians
 - Vaccine manufacturers
 - Long-term-care and senior service organizations
 - Consumer advocacy groups
 - Hospitals
 - Home health
 - College health services

Next Meeting!

Monday, June 18th
1:30 pm at
Massachusetts
Medical Society

Sign up at the MDPH
table today or learn
more at
<http://maic.jsi.com/>

Adult Standards

Call to action for healthcare professionals for **evidence-based activities**

- **Assess** immunization status of all patients in every clinical encounter.
- Strongly **recommend** vaccines that patients need.
- **Administer** needed vaccines or **refer** to a vaccinating provider and confirm receipt
- **Document** vaccines received by patients, including entering immunizations into immunization registries.

<https://www.cdc.gov/vaccines/hcp/adults/for-practice/standards/index.html>

Immunizing Adult Patients: New Standards for Practice

Your patients trust you to give them the best advice on how to protect their health. Vaccine-preventable diseases can result in serious illness, hospitalization, and even death.

Make adult

Your patients received all recommended vaccines. Even though the recommended rates are extremely low.

1 Vaccine Needs Assessment

A Series on Standards for Adult Immunization Practice



2 Vaccine Recommendation

A Series on Standards for Adult Immunization Practice



3 Vaccine Administration

A Series on Standards for Adult Immunization Practice



U.S. vaccination

4 Vaccine Referral

A Series on Standards for Adult Immunization Practice



5 Vaccine Documentation

A Series on Standards for Adult Immunization Practice



Since patients can get their vaccines from many different healthcare professionals, assessing current vaccination status for patients can be challenging but it is very important.

Keep an up-to-date record of the vaccines your patients have received to make sure they have the best protection against vaccine-preventable diseases.

To ensure patients get the vaccines they need and to prevent unnecessary vaccinations, you should:

- Record vaccination in patients' medical records.
 - Provide documentation of vaccines received to patients for their personal records.
 - Document vaccinations in immunization information systems (IIS).
- IIS are confidential, community-wide, computerized databases that record vaccines administered by participating healthcare professionals. Documenting vaccines into IIS can benefit your practice by:
- Consolidating vaccination records for your patients
 - Helping you assess your patients' immunization status
 - Making sure your patients have completed necessary vaccine series (for example, all three doses of hepatitis B vaccine)
 - Reducing chances for unnecessary doses of vaccine or missed opportunities to provide vaccines
 - Facilitating use of reminder and recall notifications to send to patients
 - Making calculation of your office's immunization coverage rates easier
- For more information on how to access IIS, contact your state coordinator. (See back for details.)

Even if you do not administer vaccines in your office, follow up with your patients to ensure they received the recommended vaccines from another immunization provider.

U.S. vaccination rates for adults are extremely low.

For example:

- Only 14% of adults 18 years or older have received Tdap vaccination.
- Only 20% of adults 65 years or older have received zoster (shingles) vaccination.
- Only 20% of adults 19 to 64 years old at high risk have received pneumococcal vaccination.
- Only 41% of adults 18 years or older had received flu vaccination during the 2012-2013 flu season.

Sources: MMWR 2012 (60)(RR-10) (www.cdc.gov/mmwr); CDC 2013 (www.cdc.gov/flu/fluseason)

For resources and tips on vaccine assessment, recommendation, administration, and referral, visit www.cdc.gov/vaccines/adultstandards

**DON'T WAIT.
VACCINATE!**




Information Series for Healthcare Professionals
www.cdc.gov/vaccines/adultstandards



MDPH Adult Immunization Recommendations

- **At every encounter, assess for all vaccines indicated.**
- **Given current VPD epidemiology at the international, national and local levels, remember:**

- 
- **Hepatitis A Vaccine**
 - **Hepatitis B Vaccine**
 - **MenACWY**
 - **MMR Vaccine**
 - **Don't forget flu**



Commonwealth Medicine Billing

- For 10% administrative fee, CHCF at Commonwealth Medicine electronically bills the participating plans and distributes payments to public providers
 - 10 private health plans and MassHealth participate
- Cities and towns can bill contracted plans for the:
 - Administration of all state-supplied vaccine to individuals ages 6 months and older
 - Cost of purchasing and administering all recommended vaccines to adults for private health plans
 - Cost of purchasing and administering influenza and pneumococcal vaccines to Medicare Part B
 - 153 public sector providers across the state participate, representing 207 out of 351 towns in MA
- **> \$2.5 million reimbursed to communities last flu season**



Center for Health Care Financing

a Commonwealth Medicine center of distinction



HPV Initiative





Increase HPV vaccination rates



Decrease HPV- related cancer

A group of diverse school children of various ethnicities and ages, smiling and wearing backpacks, representing the target population for HPV vaccination.

**HPV vaccine
is
cancer prevention.**

www.mass.gov/dph/HPVvax

The logo of the Massachusetts Department of Public Health, featuring a shield with a figure and a star, surrounded by the text "Massachusetts Department of Public Health".



Partners Working Together to Prevent HPV Cancers



The Massachusetts Chapter



Massachusetts Department of Public Health



Meeting today!

After the conference in Concord Room. All are welcome!



American College of Physicians (ACP)

- MDPH collaboration with the MA Chapter the ACP:
 - Communication
 - Education
 - Coalition Participation



ACP's *Adult Immunization* Website:

<https://www.acponline.org/clinical-information/clinical-resources-products/adult-immunization>



MA Chapter of ACP Website:

<https://www.acponline.org/about-acp/chapters-regions/united-states/massachusetts-chapter/about-the-massachusetts-chapter>



American College of Obstetricians & Gynecologists (ACOG)

- MDPH collaboration with national ACOG and MA Chapter:
 - Communication
 - Education
 - Special Projects



ImmunizationforWomen.org website



IMMUNIZATION *for* **WOMEN**
Immunization Information for Ob-Gyns and Their Patients



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS





MDPH Website

Immunization Program

We are committed to promoting the health of Massachusetts' citizens by reducing the burden of vaccine preventable diseases.

Vaccine information for adults

The need for vaccinations does not end in childhood. Vaccines are an important step in protecting adults against several serious and sometimes deadly diseases.

You may not realize that you need vaccines throughout your life. Adults need to keep their vaccinations up to date because immunity from childhood vaccines can wear off over time. You are also at risk for different diseases as an adult. Vaccination is one of the most convenient and safest preventive care measures available.

All adults need:

- [Influenza \(flu\)](#) vaccine every year
- [Td](#) or [Tdap](#) vaccine

Vaccines are one of the clean water. Among of million illnesses, 21 million lifetimes. We all need

century, second only to an estimated 322 course of their serious diseases.



CDC Adult Immunization Website

Vaccine Information for Adults

Adult Vaccination Home

[CDC](#)

<https://www.cdc.gov/vaccines/adults/index.html>

Reasons to Vaccinate

There Are Vaccines You Need as an Adult



Find Out What Vaccines You Need



Take this [short quiz](#) to find out which vaccines you need and create a customized printout to take with you to your next medical appointment.

Keep Track of Your Vaccinations



Record [vaccines you receive](#) to make sure you have the best possible protection against vaccine-preventable diseases.

Vaccine Finder by vaccines.gov

Adults need protection against vaccine-preventable diseases.

Enter ZIP Code **GO**

powered by HealthMap

[SHARE THIS WIDGET](#)

Learn More about Adult Vaccines



[Resources](#) to help you better understand vaccines recommended for adults and why they are an important part of staying healthy.

Traveling Internationally?



Use [CDC Travelers' Health website](#) to find out if your destination recommends or requires certain vaccines before you travel.

Reasons to Vaccinate



Where to Find Vaccines



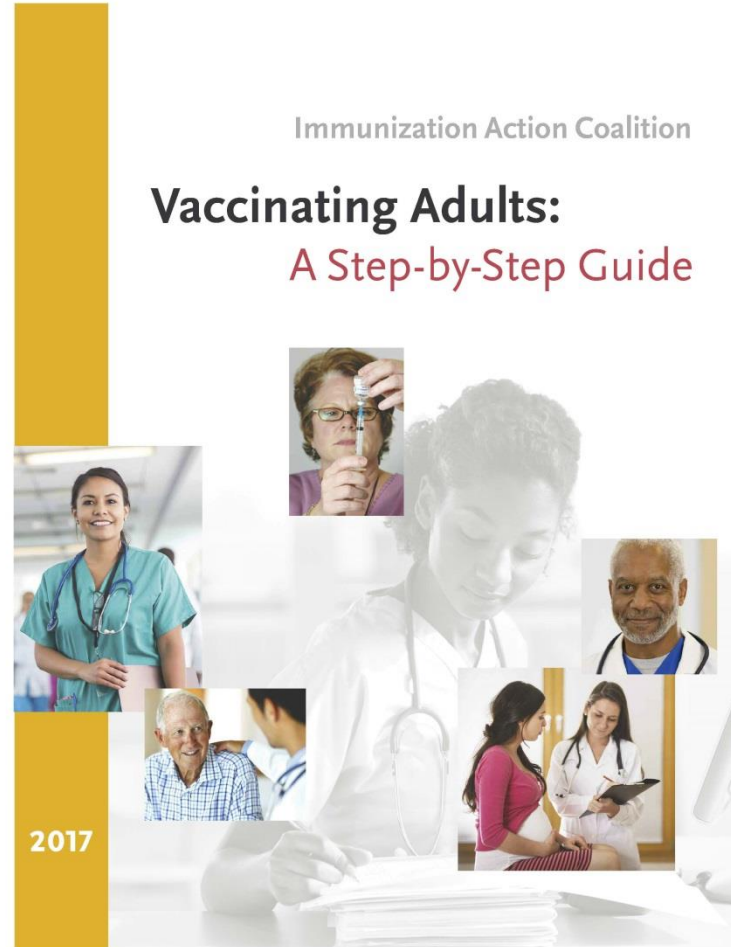
How to Pay for Vaccines





Immunization Action Coalition's

Comprehensive
"How-To" guide with
current information
and resources



<http://www.immunize.org/guide/>

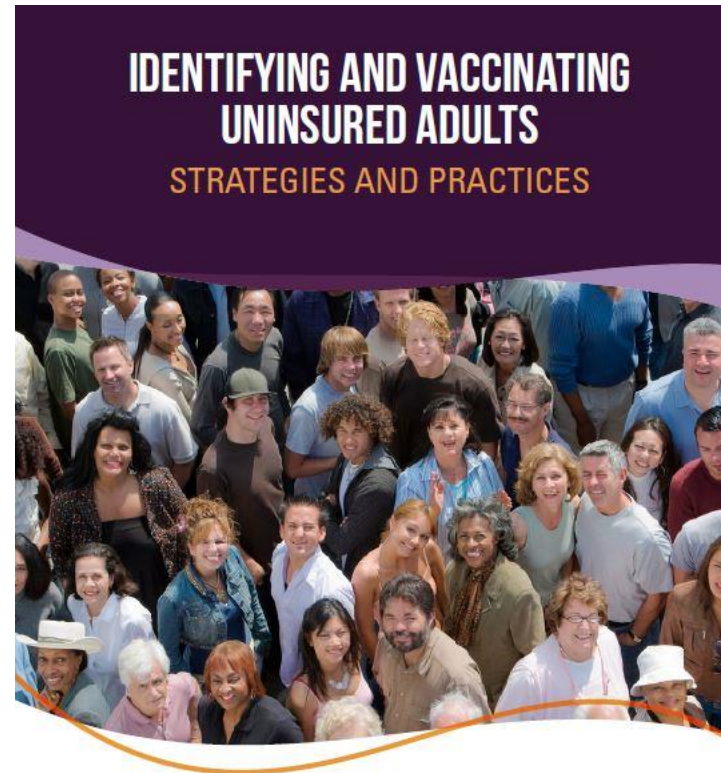


ASTHO Guide for Vaccinating Uninsured Adults

Guide to assist state and local immunization programs and their partners in identifying and vaccinating uninsured and underinsured adults.

Massachusetts was featured in the guide

- MAIC Members
- Commonwealth Medicine Billing Program
- Kitty Mahoney of Framingham



astho™

[http://www.astho.org/Programs/Immunization/Documents/ASTHO-Identifying-and-Vaccinating-Uninsured-Adults-\(FINAL-5_19_17\)/](http://www.astho.org/Programs/Immunization/Documents/ASTHO-Identifying-and-Vaccinating-Uninsured-Adults-(FINAL-5_19_17)/)



Contact Information MDPH Immunization Division

Immunization Program Main Number

For questions about immunization recommendations, disease reporting, etc.

- **Phone:** 617-983-6800
- **Fax:** 617-983-6840
- **Website:** www.mass.gov/dph/imm

MIIS Help Desk

- **Phone:** 617-983-4335
- **Fax:** 617-983-4301
- **Email:** miishelpdesk@state.ma.us
- **Websites:** www.contactmiis.info | www.mass.gov/dph/miis

MDPH Vaccine Unit

- **Phone:** 617-983-6828
- **Fax:** 617-983-6924
- **Email:** dph-vaccine-management@state.ma.us
- **Website:** www.mass.gov/dph/imm (click on Vaccine Management)

