2011-2012 Flu Season Frequently Asked Questions as of NOVEMBER 1, 2011

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General Flu Questions

What are the symptoms of the flu?

People who have the flu often feel some or all of these symptoms:

- fever* or feeling feverish/chills
- cough
- sore throat
- · runny or stuffy nose
- · muscle or body aches
- headaches
- fatigue (very tired)
- Some people may have vomiting and diarrhea, though this is more common in children than adults.

*It's important to note that not everyone with flu will have a fever.

Most people recover within a week.

How long is someone contagious?

You may be able to pass on the flu to someone else before you know you are sick, as well as while you are sick. Most healthy adults may be able to infect others beginning 1 day **before** symptoms develop and up to 5-7 days **after** becoming sick. Some people, especially children and people with weakened immune systems, might be able to infect others for an even longer time.

What is 2009 H1N1 (swine flu)? What is the current situation in Maine?

- The World Health Organization (WHO) has declared the 2009 H1N1 pandemic over, but we expect the virus to continue to circulate as a seasonal virus for years to come.
- During the 2011-2012 flu season, US CDC expects the 2009 H1N1 virus to cause illness again along with other flu viruses. The seasonal flu vaccine will protect against 2009 H1N1 and two other flu viruses.

What are the Emergency Warning Signs in Adults?

- Hard time breathing or short of breath.
- Pain or pressure in the chest or stomach.
- Feeling dizzy all of a sudden.
- · Being confused.
- Not being able to stop throwing-up.
- Flu-like symptoms that were getting better but then came back with a fever and worse cough.

What are the Emergency Warning Signs in Children?

- Fast breathing or trouble breathing
- Bluish or gray skin color
- Not drinking enough fluids
- Severe or persistent vomiting
- Not urinating or no tears when crying
- Not waking up or not interacting
- Being so irritable that the child does not want to be held
- Fever with a rash
- Flu-like symptoms improve but then return with fever and worse cough

What should I do if I get sick?

- People with the flu may be able to infect others <u>from 1 day before getting sick</u> to <u>5–7 days</u> <u>after</u>. This can be longer in some people.
- If you get sick, you should:
 - Keep away from others as much as possible to keep from making them sick.
 - Stay home for at least 24 hours after your fever is gone without fever-reducing medicine (longer is you work in health care).
 - If you have severe illness or you are at high risk for flu complications, contact your health care provider or seek medical care.

Prevention and Protection

What can I do to prevent serious illness?

- · Get vaccinated against the flu.
- Consult your health care provider about getting a pneumococcal vaccine for anyone who is younger than 5, between ages 5 and 64 with high risk conditions, or age 65 and older.
- Stay home if you are sick, until you are fever-free for a full 24 hours without taking feverreducing medicine.
- Cough and sneeze into your elbow, or into a tissue. Throw this tissue away.
- Wash your hands frequently with soap and water, but especially after coughing and sneezing.
 Alcohol-based hand gels can also be used.
- Avoid touching your nose, mouth, and eyes. Germs can spread this way.
- Avoid contact with sick people. If you are at very high risk for complications, you may want to avoid large crowds.
- Although most people can stay home to recover without seeing a health care provider, it is
 possible for healthy people to develop severe illness from the flu. Anyone with the flu
 should seek medical attention for:
 - o **Dehydration**
 - o Trouble breathing
 - Getting better, then suddenly getting a lot worse
 - Any major change in condition

What is the best technique for washing hands to avoid getting the flu?

You can either wash your hands with soap and water or with alcohol-based hand cleaner. CDC recommends that when you wash your hands with soap and warm water that you wash for 20 seconds. When soap and water are not available, alcohol-based disposable hand wipes or gel sanitizers may be used.

How long can influenza virus live on objects (such as books and doorknobs)?

Influenza virus can survive on environmental surfaces and can infect a person for <u>2 to 8 hours</u> after being deposited on the surface.

The EPA has a list of EPA-registered products effective against flu: http://www.epa.gov/oppad001/influenza-disinfectants.html

Treatment

What are antivirals?

Antiviral drugs are prescription medicines (pills, liquid or an inhaled powder) that fight against the flu by keeping flu viruses from reproducing in your body.

If you get sick, antiviral drugs can make your illness milder and make you feel better faster. They may also prevent serious flu complications. You should consult with your medical provider regarding use of antivirals to treat or prevent flu.

Who needs antivirals?

- Those at highest risk for complications from the flu include:
 - o Children younger than 2 years-old
 - Pregnant women
 - o Adults age 65 and older
 - People with underlying medical conditions (such as asthma, heart failure, chronic lung disease, diabetes, HIV)
- If you fall into one or more of these groups and you have signs of the flu, contact your health care provider as soon as possible to get a prescription for antiviral medications (such as Tamiflu®).
- If you fall into one of more of these groups, you have not been vaccinated against the flu yet, and you live with someone who has the flu, contact your health care provider. In some cases, your doctor may want to prescribe antiviral medications before you show symptoms.

Vaccine

When should I get vaccinated?

Yearly flu vaccination should begin as soon as vaccine is available, and continue throughout the flu season which can last as late as May.

Where is vaccine available?

You can search by zip code at www.flu.gov, www.211maine.org, or check with your local health care provider.

Who should get vaccinated?

On February 24, 2010 vaccine experts voted that everyone 6 months and older should get a flu vaccine each year starting with the 2010-2011 influenza season. CDC's Advisory Committee on Immunization Practices (ACIP) voted for "universal" flu vaccination in the U.S. to expand protection against the flu to more people. While everyone should get a flu vaccine each flu season, it's especially important that certain people get vaccinated either because they are at high risk of having serious flu-related complications or because they live with or care for people at high risk for developing flu-related complications:

- Pregnant women
- Children younger than 5, but especially children younger than 2 years old
- People 50 years of age and older
- People of any age with certain chronic medical conditions
- People who live in nursing homes and other long-term care facilities
- People who live with or care for those at high risk for complications from flu, including:
 - Health care workers
 - Household contacts of persons at high risk for complications from the flu
 - Household contacts and out of home caregivers of children less than 6 months of age (these children are too young to be vaccinated)

Why should I get vaccinated?

Vaccination is the most effective way to prevent the flu and its complications.

Can you get the flu from the vaccine?

No. The virus in your flu shot will be inactivated (killed), so it cannot cause the disease. If you get the vaccine in nasal spray form (like "FluMist"), the virus will be alive but weakened, so it can't grow in the lungs and cause illness. Some people get a mild fever for a short time immediately after getting a flu shot. None of this means you have gotten the flu from the vaccine.

Does getting vaccinated early in the flu season mean you could get sick later on?

Seasonal flu vaccination provides protection against the influenza strains contained in the vaccine through one influenza season. Vaccination can begin as soon as vaccine is available. Studies have not demonstrated a benefit of receiving more than one dose during an influenza season, even among elderly persons with weakened immune systems.

Who should not get the flu vaccine?

Some people should not be vaccinated without first consulting a physician. They include:

- People who have a severe allergy to chicken eggs.
- People who have had a severe reaction to an influenza vaccination in the past.
- People who developed <u>Guillian-Barré syndrome (GBS)</u> within 6 weeks of getting an influenza vaccine previously.
- Children younger than 6 months of age (influenza vaccine is not approved for use in this age group).
- People who have a moderate or severe illness with a fever should wait to get vaccinated until their symptoms lessen.

If you have questions about whether you should get a flu vaccine, consult your health care provider.

What are the formulations of vaccine?

- There are two types of vaccine:
 - The "flu shot" an inactivated vaccine (containing killed virus) that is given with a needle, usually in the arm. The flu shot is approved for use in people older than 6 months, including healthy people and people with chronic medical conditions.
 - The intranasal-spray flu vaccine a vaccine made with live, weakened flu viruses that do not cause the flu (sometimes called LAIV for "live attenuated influenza vaccine" or FluMist®). LAIV (FluMist®) is approved for use in healthy people 2-49 years of age who are not pregnant.
- Between these types, there are many formulations of the vaccine, and each is licensed for specific age ranges and other parameters.

How long does the vaccine take to become effective?

It takes about two weeks for full immunity.

What are side effects to the vaccine?

- For the injected vaccine, the most common side effect is soreness at the injection site.
 Other side effects may include mild fever, body aches, and fatigue for a few days after the inoculation.
- For the nasal spray vaccine, the most common side effects include runny nose or nasal congestion for all ages, sore throats in adults, and -- in children 2 to 6 years old -- fever.
- Severe reactions usually begin within a few minutes to a few hours after the shot (seek medical attention right away):
 - o Life-threatening allergic reactions:
 - Difficulty breathing
 - Hoarseness or wheezing
 - Swelling around the eyes or lips
 - Hives
 - Paleness
 - Weakness
 - Fast heart beat
 - Dizziness
 - o Behavior changes
 - High fever

How and why are the CDC and FDA monitoring the vaccines for safety?

The CDC and FDA closely monitor the safety of seasonal influenza and other vaccines licensed for use in the United States in cooperation with state and local health departments, healthcare providers, and other partners.

The purpose of vaccine safety monitoring is <u>timely identification of clinically significant adverse events</u> following immunization that may be of public health concern.

What are preservatives and why are they used in vaccines?

In vaccines, preservatives are used to prevent the growth of bacteria and fungi in the event that they get into the vaccine. This may occur when a syringe needle enters a vial as a vaccine is being prepared for administration. Contamination by germs in a vaccine could cause serious illness or death. In some vaccines, preservatives are added during the manufacturing process to prevent microbial growth.

What is thimerosal?

Thimerosal is an important preservative that protects vaccines against potential microbial contamination that could cause serious illness or death. Some of the vaccine is produced in multidose vials, and contains thimerosal to safeguard against possible contamination of the vial once it is opened. Thimerosal is a mercury-based preservative that has been used for decades in the United States in multi-dose vials (vials containing more than one dose) of some vaccines and are a safe product to use in vaccines.

Does this year's flu vaccine contain thimerosal?

The 2011-2012 seasonal flu vaccines are being produced in formulations that contain thimerosal, a mercury-containing preservative, and in formulations that do not contain thimerosal.

For more information about thimerosal:

 Fact Sheet: http://www.maine.gov/dhhs/boh/Thimerosal%20Fact%20Sheet%20Final%20Version10%2005
 http://www.maine.gov/dhhs/boh/Thimerosal%20Fact%20Sheet%20Final%20Version10%2005
 http://www.maine.gov/dhhs/boh/Thimerosal%20Fact%20Sheet%20Final%20Version10%2005
 http://www.maine.gov/dhhs/boh/Thimerosal%20Fact%20Sheet%20Final%20Version10%2005
 http://www.maine.gov/dhhs/boh/Thimerosal%20Fact%20Sheet%20Final%20Version10%2005
 <a href="http://www.maine.gov/dhhs/boh/Thimerosal%20Fact%20Sheet%20Final%20Version10%20Versi

What is Guillian-Barre Syndrome (GBS)?

Guillain-Barré syndrome (GBS) is a rare disorder in which a person's own immune system damages the nerves, causing muscle weakness and sometimes paralysis. GBS can cause symptoms that last for as little as a few weeks, or go on for several months. Most people recover fully from GBS, but some people have nerve damage that does not go away. In rare cases, people have died of GBS, usually from not being able to breathe due to weakness of their breathing muscles.

What causes GBS?

While it is not fully known what causes GBS, it is known that about two-thirds of people who get GBS do so several days or weeks after they have been sick with diarrhea or a lung or sinus illness. An infection with the bacteria <u>Campylobacter jejuni</u>, which can cause diarrhea, is one of the most common illnesses linked to GBS. Although rare, people can also get GBS after having the flu or other infections such as Epstein Barr virus. Except for the swine flu vaccine used in 1976, no other flu vaccines have been clearly linked to GBS.

How common is GBS?

Anyone can get GBS, but it is far more common in adults than children. Adults over 50 years of age are 2-3 times more likely to get GBS than younger people. Each year, between 6,000 and 9,100 people in the United States get GBS. This means that about 140 people get GBS every week.

How often do people get GBS from a vaccine?

In very rare cases, someone may develop GBS in the days or weeks after getting a vaccination. In 1976, there was a small increased chance of GBS after getting a flu (swine flu) vaccination. This means about 1 more case per 100,000 people who got the swine flu vaccine. Since 1976, many studies have been done to see if other flu vaccines may cause GBS. In most studies no link was found between the flu vaccine and GBS. However, two studies did suggest that about 1 more person out of 1 million people vaccinated with seasonal flu vaccine may develop GBS. This continues to be studied. For the most part, the chance of getting very ill from flu is far higher than the chance of getting GBS after getting the flu vaccine.

How will public health authorities investigate cases of GBS?

Since GBS is a serious disorder that people get every year, CDC has developed several GBS tracking systems to better see whether some GBS cases are linked to flu vaccinations.

Will there be a possibility of GBS cases from the flu vaccine?

Scientists do not fully understand what causes GBS, but it is believed that stimulation of the body's immune system may play a role in its development. On very rare occasions, people may develop GBS in the days or weeks following receiving a vaccination.

Information for Health Care Providers

Who can get state-supplied seasonal flu vaccine?

Influenza vaccine is recommended for all people for the 2011-2012 season. Maine CDC does not and never has provided the majority of seasonal flu vaccine in Maine. However, the following groups are eligible for state-supplied vaccine:

- All Maine children ages 6 months to 18 years-old
- Employees of schools that provide onsite vaccine clinics on school days
- Pregnant women and their partners (through health care providers who routinely care for pregnant women)
- Nursing home employees and residents
- Any underinsured or uninsured adult in any setting (for patients who do not have insurance or whose insurance does not cover vaccines)
- All individuals served by Tribal health centers and Municipal Health Departments

Please note that, as in years past, the only state-supplied vaccine available for health care workers is for those who work in nursing homes. However, we strongly encourage all health care personnel, including EMS, to be vaccinated.

Is the VIS available?

US CDC has issued the <u>Vaccine Information Statements (VIS)</u> for the 2011-2012 seasonal flu vaccine. Audio recordings and translated documents for both the nasal spray and injectable forms of the vaccine should be linked here soon.

Can I bill insurance for vaccine I receive from the state?

You may not bill insurance for the vaccine, but you may bill insurance for an administration fee.

Can I charge an out-of-pocket fee for vaccine I receive from the state?

Because the vaccine is supplied for free by the state, you may not charge for the vaccine. It is allowable to bill a reasonable administration fee provided that no patient is denied state-supplied vaccine for inability to pay administration fee. If the patient is MaineCare-eligible, you may not bill for more than \$14.37 for the administration fee.

What do I have to do to get vaccine?

You must ensure that you have completed your 2011 Provider Agreement, that you have submitted at least two weeks of temperature logs in ImmPact2, and have placed your vaccine order in ImmPact2.

School-based Clinics

Are all Maine schools required to offer seasonal flu vaccine this year?

No. Participation in school-based vaccine clinics is voluntary.

What must a school do in order to offer vaccine to students and staff this year?

All school-located vaccine clinics (SLVC) must be registered in order to receive state-supplied vaccine and the credit for supplies through McKesson.

The SLVC registration form is available in the SLVC toolkit at www.maineflu.gov

Registration materials may be submitted by school personnel or personnel from a cooperating medical provider (if one is used). However, some cooperative planning may need to take place between school personnel and the medical provider in order to complete all parts of the registration.

The registration form is designed for one School Administrative Unit (SAU) and one medical provider. If an SAU is working with multiple medical providers, one enrollment packet is needed for each medical provider relationship.

The registration form must be completed in its entirety. The Memorandum of Agreement (Section 4) may be skipped if the SAU is not utilizing an outside medical provider to administer vaccine.

Participating schools may need to complete a Maine Immunization Program provider agreement in order to be eligible to order vaccine, if one has not already been completed for the 2011-12 season. Participating schools may also need to complete ImmPact2 user agreements for any new users or provide a list of authorized users for the school site. Upon receipt of your SLVC registration, a representative of the Maine Immunization Program will contact the individuals listed in Section 1 to complete these steps, if needed.

I am a health care provider working with schools. What must I do?

All school-located vaccine clinics (SLVC) must be registered in order to receive state-supplied vaccine.

The registration form is available in the SLVC toolkit at www.maineflu.gov

Registration materials may be submitted by school personnel or personnel from a cooperating medical provider (if one is used). However, some cooperative planning may need to take place between school personnel and the medical provider in order to complete all parts of the registration.

The registration form is designed for one School Administrative Unit (SAU) and one medical provider. If a medical provider is working across multiple SAUs, one enrollment packet is needed for each SAU.

Participating medical providers may need to complete a Maine Immunization Program provider agreement in order to be eligible to order vaccine, if one has not already been completed for the 2011-12 season. Participating medical providers may also need to complete ImmPact2 user agreements for any new users or provide a list of authorized users for the school site. Upon receipt of your SLVC registration, a representative of the Maine Immunization Program will contact the individuals listed in Section 1 to complete these steps, if needed.

When will vaccine be shipped for SLVC?

Vaccine will be shipped only after Maine Immunization Program verifies that the following are complete:

- 2011 Vaccine Provider Agreement
- SLVC Registration form
- At least two weeks of temperature logs

Is ImmPact2 required?

Yes. You must use ImmPact2 for your temperature logs and to submit your vaccine order. All SLVC doses administered must be entered in ImmPact2 using the Mass Immunization module (not Manage Client). The ImmPact2 contact listed in Section 1 of the SLVC registration form will be contacted by Maine Immunization Program about users.

What is an NPI? Why do I need one?

The National Provider Identifier (NPI) is a unique 10-digit identification number for all health care providers who bill MaineCare which determines where payment for administration fees will be sent. For more information: http://www.cms.gov/NationalProvIdentStand/

How do I sign up as a MaineCare provider?

To enroll as a MaineCare Provider and authenticate your NPI, please visit https://mainecare.maine.gov/ProviderHomePage.aspx or contact the MIHMS Provider Enrollment staff between 7 a.m. and 6 p.m. Monday-Friday at 1-866-690-5585 - Option 2

Where can I get information on roster billing through ImmPact2?

A fact sheet on the Mass Immunization billing features is available in the SLVC Toolkit at www.maineflu.gov (in the section labeled "Billing")

Where can I get information on roster billing for staff at SLVC?

A letter from MEA Benefits Trust and Anthem Blue Cross and Blue Shield is posted in the SLVC Toolkit at www.maineflu.gov (in the section labeled "Billing") along with the appropriate roster billing form. Providers must put the member information on the roster and then submit a bill on the provider's letterhead, indicating the school department, the number of shots and the cost per shot, and the total charge to be reimbursed to Anthem at the address on the bottom of the roster within 60 days of the clinic.

Can dependents of school staff receive state-supplied vaccine at SLVC?

Schools offering vaccine to students may also provide state-supplied flu vaccine to staff and their dependents. These schools need to be registered through our SLVC process and report vaccine usage through ImmPact2. The <u>letter regarding roster billing for staff vaccinations at school clinics</u> and the <u>roster form</u> are both available in the SLVC toolkit at <u>www.maineflu.gov</u>

Will you be supplying needle tips?

Maine CDC is not directly supplying needle tips. However, all schools that are registered to conduct SLVC are eligible to order up to \$500 in supplies – including needle tips - from McKesson.

Who can order free supplies from McKesson?

Only schools participating in registered SLVC may order supplies from McKesson Medical-Surgical through Maine CDC's pre-selected catalog. All districts participating in SLVC -- whether they are ordering their own vaccine or working with a medical provider -- are eligible to order supplies through McKesson. Medical providers partnering with schools are not eligible to order from McKesson.

How do I order supplies from McKesson?

All districts with registered SLVC will be contacted directly by McKesson with a user account and password. This information will be sent to the SAU contact identified on the SLVC registration form.

If a participating school has not received the account information, they should:

- i. Check to make sure the SLVC was registered
- ii. Check with the SAU contact listed on the SLVC registration form to make sure that person has not received the account information from McKesson

If the SLVC has been registered and the SAU contact has not received the account information from McKesson, please send an email to flu.questions@maine.gov for assistance.

If the SLVC has not been registered, the registration form needs to be completed and submitted before the supply account with McKesson can be created. The SLVC Registration Form is available in the SLVC Toolkit at www.maineflu.gov

What if I have leftover vaccine?

- 2. Make sure all second doses have been administered to children under 9, as appropriate.
- 3. Make sure that all staff and adults associated with the school (coaches, volunteers, etc) have been vaccinated.
- 4. Notify Maine Immunization Program of leftover doses by calling 1-800-867-4775
- 5. Contact any other MIP providers in the local area to see if they need vaccine

Other Clinics

I'd like to offer flu vaccine. How do I do that?

If you are health care provider, you need to become a vaccine provider through the Maine Immunization Program by completing the Provider Agreement at http://www.maine.gov/dhhs/boh/ddc/immunization/providers/forms-updates.shtml

Organizations should contact local health care providers to see if they'd be willing to partner with the organization to administer vaccine.