

IMMUNEWS

A newsletter from the Maine Immunization Program



Maine Center for Disease
Control and Prevention

An Office of the
Department of Health and Human Services

John E. Baldacci, Governor

Brenda M. Harvey, Commissioner

Important VFC Program Changes for 2009

- **Starting January 1, 2009, all childhood vaccines supplied by the Maine Immunization Program must be administered to VFC qualified children only. This includes any state supplied vaccine you currently have in stock on that date.**
- **MIP will provide Pentacel for VFC qualified children after January 1, 2009.**
- **All state supplied vaccines can be used for underinsured children in all facilities.**
- **Underinsured children will no longer need to be referred to FQHCs/ RHCs for VFC vaccines.**
- **Children that have health insurance should be immunized with private inventory.**

VFC Qualified children include:

1. Children, up through age 18, that are enrolled in MaineCare/Medicaid.
2. Children, up through age 18, that are American Indian/Alaskan Native.
3. Children, up through 18, that are uninsured.
4. Children, up through age 18, that are underinsured. Underinsured is defined as having health insurance that does not cover vaccines.

It is important to note:

- Children whose health insurance covers the cost of vaccinations are **NOT** eligible for VFC vaccines.
- Children who have MaineCare/Medicaid as secondary coverage, **DO** qualify for VFC vaccine. Impact2 providers should list the child's VFC eligibility as "Medicaid"
- All providers will need to continue to screen every child for VFC qualification and documentation of the child's VFC status must be kept on file.
- MIP has 2 methods available for VFC screening:

1: Paper: This form is in duplicate so a copy can be kept on file and a copy in a central file for easy access to VFC numbers.

2: Impact2 automatically indicates Medicaid eligibility and allows for capture of other VFC categories.

Use of Impact2 can be a substitution for the use of the paper based accountability.

Providers will need to demonstrate their VFC screening documentation during VFC site visits.

Following our joint mission of ensuring Maine children are fully protected from vaccine-preventable disease, it was very difficult to make these drastic changes. We hope that eventually we can return to universal coverage for Maine children.

Vaccine Management

The Maine Immunization program (MIP) is asking for your cooperation in reducing vaccine wastage. Adhering to the timelines of submitting your data will help us reach this goal.

Non-Impact2 Providers:

Please follow these tips when completing and submitting your Optical Character Reader (OCR) forms.

(1) Temperature Log

- Always write your PIN number on each form.
- Black in the circle to record the temperature indicated from your thermometer.
- Record your temperatures twice a day.
- Check mark inside the boxes for any dates your office is closed.
- If your temperature is out of range please note that on the temperature logs and document what steps your office took to correct the issue.

(2) Doses Administered Form

- Always write your PIN number on each form.
- Use Whole numbers.
- Do not use tick marks. (the OCR software cannot read these and it will delay your vaccine order)
- Carry your math throughout the form.
- Total Doses administered columns.
- Add doses accumulated.
- Minus doses wasted or transferred.
- Subtract doses administered from previous inventory and enter new total in the inventory on hand block.

(3) Order Form

- Vaccine is only available for VFC and Underinsured eligible children.
- Your order form is pre-populated to the recommended amount of vaccine that you will need for the next 6 weeks.
- Left justify all vaccine dose amount that your are requesting.
- Order in increments of 10 doses.
- If OCR forms are not properly completed forms may be returned and be requested to resubmit. This will delay your vaccine order.

Do not photocopy these forms. Photocopied forms cannot be read by our computer system and will delay your vaccine order. If you need more forms, please log on to: <http://maine.gov/dhhs/boh/mip/materials.html> to print fresh and clean forms, or contact the program and we will mail some out to you.

The following two **fax numbers** are **for scannable forms only: 207-287-3347 or 1-800-569-0659.**

Vaccine Management

ImmPact2 Providers

(1) Manage Cold Chain

- Temperature logs are located under the cold chain link.
- All logs must be completed and submitted for all units listed for your site prior to your reconciliation.

(2) Manage Inventory

- Prior to reconciling, any client that has been seen in your office since your last reconciliation date and has received State supplied vaccines must have their client record properly updated. If the client shot records are not up to date this could cause inventory discrepancies.
- Receive any outstanding orders that have been shipped under “Manage Orders”.
- Receive any incoming transfer transactions under “Manage Orders”.
- Send out transfers for vaccine that have been given to other offices under “Manage Transfers”.
- Count the inventory you have in your refrigerator and validate that it matches the inventory the system is showing as your “inventory on hand”
- If your inventory is off, run a transaction report for all shots “given” from the last reconciliation date until the current date to ensure that all shot records have been entered.
- You can cross reference this report with a billing reports from your office or a schedule of patients that may have been seen during that time period.
- Submit your reconciliation.

(3) Manage Order

- After successfully submitting your cold chain reports and reconciling, you are now able to order vaccine.
- Under the link “Manage Order” you will see a button labeled “Create new order”, click this link and you will see that the vaccine allocation has been pre-populated for the recommended amount of vaccine you will need to carry you through the next 6 weeks.
- Enter in the amount of vaccine you are requesting and submit.

Order, Approval and Delivery to ImmPact2 and Paper-based Providers:

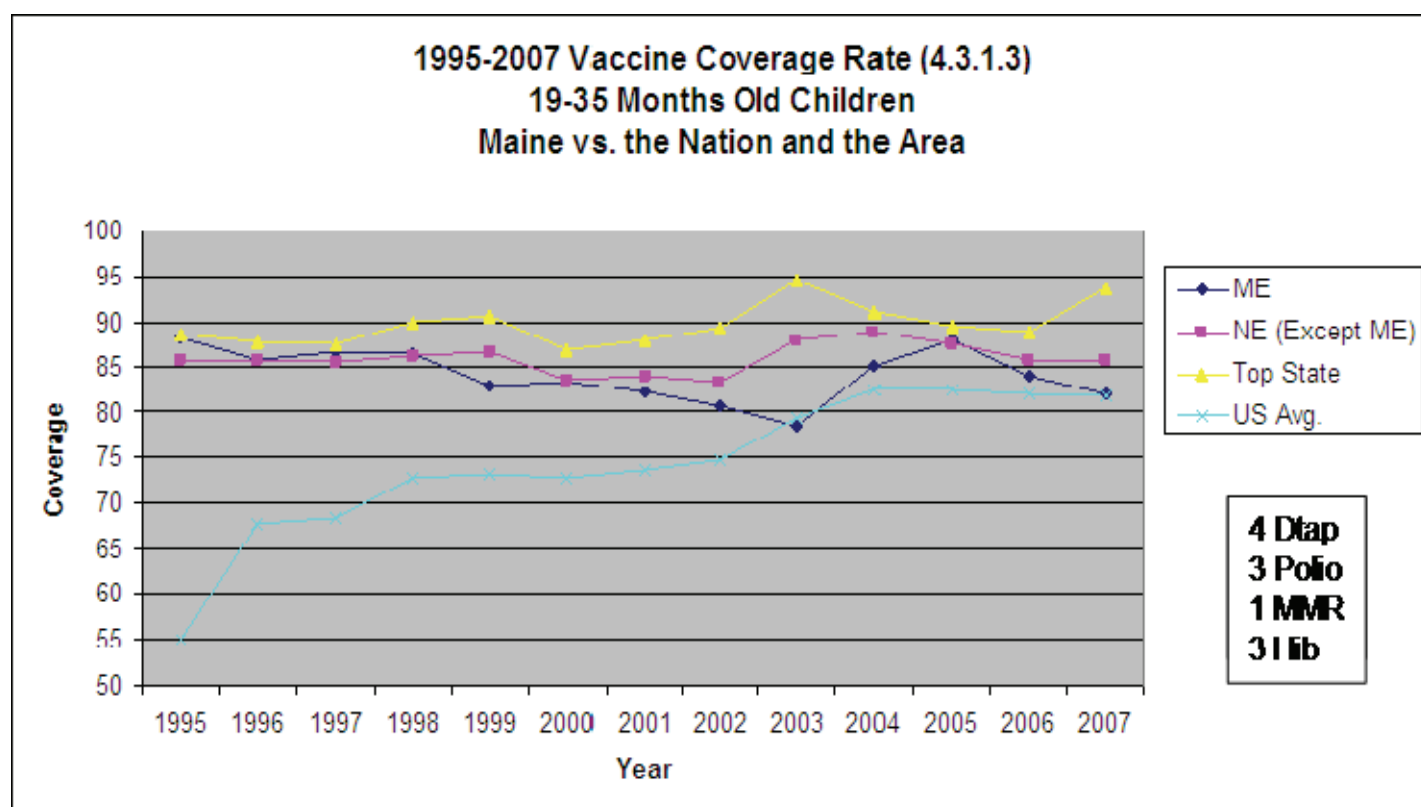
- Once MIP has approved you vaccine order it is sent to the Federal Centers for Disease Control and Prevention (CDC) for further processing. CDC then approves the order and sends it to a centralized distributor, McKesson Specialty located in Memphis, Tennessee.
- McKesson ships vaccine on Monday, Tuesdays and Wednesdays.
80% of orders will be shipped within three shipping days. 100% of orders in five shipping days.
- McKesson uses packaging that has been tested form shipments to remain stable for “72 hours”.
- If you have a “signature release on file” with UPS or FedEx your vaccine shipments will be drop shipped and not require a signature.
- We recommend that you cancel this “signature release on file”
- We can not guarantee replacement and viability of vaccine that is not signed for and properly stored.

Education and Training News

Vaccination Rates in Maine

Every year the federal Centers for Disease Control and Prevention (CDC) conducts the National Immunization Survey (NIS) and publishes those results in the Morbidity and Mortality Weekly Report and on the CDC web site.

Data on vaccination coverage is used to measure how well the nation and states are vaccinating young children against vaccine preventable disease.



The NIS uses random-digit-dialing to find households with children aged 19 to 35 months.

They ask parents or guardians for the vaccines-with dates-that appear on the child's "shot card" kept in the home, and they also collect demographic and socioeconomic information.

At the end of the interview, they ask for permission to contact the child's vaccination providers. Providers are then contacted by mail to verify each child's vaccinations.

Epidemiology and Surveillance News

Varicella (Chickenpox)

Background:

Chickenpox is a highly contagious viral disease of which humans are the only source of infection. Person-to-person transmission occurs primarily through direct contact with respiratory tract secretions of infected individuals and is transmitted occasionally via airborne route. The incubation period of varicella is 14-16 days with a range from 10 to 21 days. Chickenpox is infectious 1-2 days before to 4-5 days after the onset of the rash or until all the lesions have crusted over. Mandatory vaccination for varicella started in Maine as of 2003 and is now a requirement for school admission.

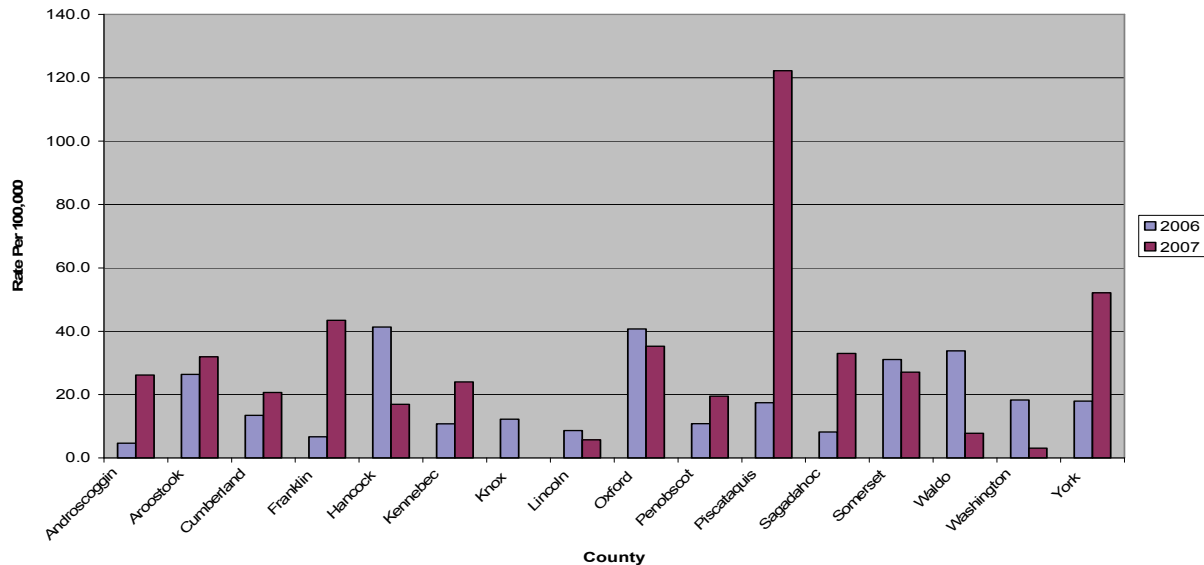
In 2006 ACIP recommended that a second dose of varicella vaccine be administered to all children with the first dose administered at 12-15 months and a second dose administered at 4-6 years. A two-dose series was also recommended for those not previously vaccinated.

Varicella vaccine is a live attenuated viral vaccine. Studies place the effectiveness of one dose of the varicella vaccine above 70%. A two-dose series is estimated to be more than 90% effective in preventing infection. Breakthrough infection has been reported in 10% of vaccinated individuals. Breakthrough chicken pox is more mild than in those children who are unvaccinated.

There were 366 cases of reported chickenpox in 2007 compared with 222 in 2006.

The following graph depicts frequency distribution of Chickenpox in the counties of Maine in 2006 and 2007.

Chickenpox Incidence in Maine by County, 2006-2007



ImmPact2 News

Hello Everyone,

This year has been an exciting and complicated year for ImmPact2 (IIS/Registry) development.

Changes:

We continue to strive and to improve your user experience in the most important aspects of the system; your contracts and site profiles, client management, and vaccine management. Many of the providers using ImmPact2 have been impressed with the speed of the new system and how well we are integrating the CDC requirements for Cold Chain and Vaccine accountability into the system.

We appreciate your efforts and patience each time we implement a new component (like cold chain). While we have a great deal of experience and try to anticipate every aspect, and often bring in provider staff to consult with off and on, nothing tests the system like a few hundred people all being on it all at the same time. We hope that you feel we are addressing the contract, client, and vaccine management items quickly and efficiently.

Coverage Reports:

We are pleased to also announce that the Client Coverage Reports are working well. Providers using these reports (Up-To-Date Status and Immunization Coverage Report) are seeing their recorded clients rates go up dramatically. In some cases, there were missed vaccines that needed to be recorded out of charts. In many other cases, providers are finding clients who slipped through the system and needed to be called back in. The quick coverage reports show those children and allow for fast call backs. Paired with a full monthly reminder/recall effort, some providers have moved from below 60% to over 85% in just a couple months.

Challenges:

The Vaccine Schedule continues to be one of our greatest challenges. Vaccine schedules are so complicated that bringing them into the system almost requires an advanced degree in vaccine voodoo. It reminds us of the complexity that you have to deal with in your offices on a daily basis and in the small amount of time each visit you have to make vaccine recommendations. All states are having the same struggles with updating the schedule as Maine is having. Shawn Box, our Asst. Dir., was in Atlanta in mid-Sept. and spoke with the CDC about improving how they communicate schedule additions and changes to Registries like ImmPact2.

Data Exchange is another big effort that seems like it may never get completed. Trust us, it will. It is the personal mission of Shawn Box and our lead technical resource, John Pease, to facilitate data exchange for our providers. We are happy to inform you that our first OUTGOING message, meaning the providers puts data into ImmPact2 and the data goes down to the provider EMR, went LIVE in the first week of December. Additionally, the Maine Immunization Program will publish by the end of December a Providers Guide for Registry-Centric (data from ImmPact2 to EMR) data exchange.

By the first quarter of 2009 ImmPact2 will be able to receive data from EMRs. We will be piloting that effort in November and December with either Indian Health Services or another external data source. At the end of first quarter 2009, the Maine Immunization Program will be publishing a portfolio for data exchange. In it will be a self assessment tool for your EMR, a data field definitions list, and instructions on how to sign up and get into the process. We will continue working with the twenty or so programs that have already expressed interest and they are at the front of the line pending the results of their own self assessment in 2009.

Provider Quality Assurance News

Pentacel, MIP's Newest Addition for Combination Vaccines

Pentacel is now available through the Maine Immunization program (MIP).

Pentacel is a combination vaccine that contains DTaP, IPV and Hib vaccine. Pentacel is supplied as single-dose vials, 5 doses to a package. A single-dose vial of liquid DTaP-IPV vaccine is used to reconstitute a single-dose vial of ActHIB vaccine.

The vaccine must be kept at refrigerator temperature (35–46 F) at all times.

IMPORTANT NOTE:

The availability of Pentacel will improve the Hib vaccine supply situation. However, the availability of Pentacel is not sufficient to reinstate the last (booster) dose of the Hib vaccine series (i.e. the dose administered after the first birthday).

Although Pentacel is licensed by FDA for the fourth dose in the DTaP, IPV and Hib series, providers should **NOT** use it for the fourth dose until there is further improvement in the Hib vaccine supply. Further information on any updates with Hib will be provided.

The Maine Immunization Program will continue to supply single dose antigens; IPV, Hib and DTaP

Packaging and Mixing of Pentacel:

There will be 5 single dose vials of DTaP/IPV liquid diluents and 5 vials of HIB powder. Withdraw the DTaP/IPV liquid and inject it into the powder to create Pentacel.

Recording of Lot Numbers:

Pentacel has two lot numbers. You will need to record the Hib component lot number.

For ImmPact2 Providers:

Impact will have the option to order Pentacel and report usage into the Registry.

For non-Immimpact users:

There is a new revised order form to fax into the Maine Immunization Program to order Pentacel.

Thank you and if you have any further questions, please contact our Program at:

1-800-867-4775



<http://immunizeme.org/>

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