

**Texas Immunization Stakeholder Working Group Meeting  
Legislative Conference Center  
Austin Texas  
August 19, 2010**

**Participants:**

Austin Travis County Health and Human Services, **Coleen Christian, Rita Ortega\***; Brownwood-Brown County Health Department Immunization Coalition, **Jodie Hohertz\***; Children's Association of Texas **Kathy Eckstein**; City of Cleburne Fire Department, **Clint Ishmael, Julie Roberts**; Dan Walters and Associates **Dan Walters, Jim Bates**; GlaxoSmithKline Vaccines **Rick Coco, Angela Craig, Becky Jacks, Brian Buckles, Scott Piper**; Hill Co. Partners, **Amber Pearce, Tanya Vazquez, Haley Cornyn**; Houston Department Health and Human Services **Jeanel Montez, Decrecia Robinson**; Immunize El Paso, **Daniel Acosta, Edna Diaz\***; Medimunne Vaccines, **Lori Bush, Rita Veaz**; **Hastings\*, Lori Koehler, Thomas Colbert**; Merck Vaccines, **Mike Rush\*, Andrea Stricklin**; Milam County Health Department, **Diane Flow**; Novartis Vaccines, **Ed Kothera, Dave Barker, Stephanie Campbell**; Pfizer Pharmaceuticals, **Keith Cunniff, Bianca Parr**; Office Eliminating Health Disparities, Texas Health and Human Services Commission, **Melonee Carter**, Sanofi Pasteur Vaccines, **Laura Cordell\*, Brad Bracken**; State Rep. Donna Howard, **Scheleen Walker**; Tarrant Count Public Health Department, **Fran Kirkley**; Texas Academy of Family Physicians, **Kate McCann**; Texas Association Community Health Centers, **Peggy Gibbons**; Texas Association of Health Plans, **Barry Lachman MD**; Texas Association Local Health Organizations, **Kathy Moore**; Texas Education Agency, **Glendelia Zavala\***; Texas Medical Association, **Emily Babcock**; Texas Medical Foundation, **Christine Pencak**; Texas Nurses Association, **Laura Lerma**; Texas Osteopathic Medical Association, **Neil Levy DO**; Texas Pharmacy Association, **Ashley Blount Intern\***; Texas Pediatric Society, **Carrie, Kroll, Jason Terk MD**; Texas Vaccine Institute, **Pablo De Angulo MD\*, Edna Restrepo\***; The Immunization Partnership, **Maureen Moore, Nidhi Nakra**; University of North Texas/Senior Volunteer Childhood Immunizations, **Kathy Dreyer, Elsie Wiley**; Waco- McLennan County Public Health Department, **Jacqueline Walker**; Walgreen Pharmacies, Alta Vista, **Karen Reagan**; Wesley Nurse Association, Methodist Health Care Ministries, **Sharon Skaggs**; Wharton County Junior College, **Bruce Kieler\***; DSHS Immunization Branch: **Ana Thomas\*, Denise Walker-Gonzales, Estella Garcia, Jack Sims, Janna Zumbrun, Karen Hess, Kathryn Johnson, Kurt Wolf\*, Lupe M Garcia, Melissa Samples Ruiz, Monica Games, Sara Kirk\*, Thomas Colvin, Tony Aragon, Tristan DelCanto, Vivian Harris**. Health Service Region 6/5 South, **Angel Angco, Melinda Denson\*, Paul Grunewald\***; Health Service Region 7, **Diane Romnes**; Texas CDC Federal Advisors, **Mark Ritter**; DSHS Programs: Center for Program Coordination, **Alison Little\***, **Ardas Khalsa**; Hepatitis B Program, **Ruthie Benson**; Children with Special Health Care Needs, **Lillian Goeders**; Infectious Disease Control Unit, **Rachel Wiseman, Carol Davis\***; HIV/STD Comprehensive Services Branch, **Tammy Foskey, Mary McIntosh\***

\* Represents New Attendee

<b>Topic</b>	<b>Speaker</b>	<b>Comments</b>
Orientation	Vivian Harris Program Specialist	Mrs. Vivian Harris welcomed all first time attendees to TISWG. A short presentation on the history and accomplishments of TISWG since inception was provided.
Welcome	Jack Sims Immunization Branch Manager	Mr. Jack Sims welcomed everyone and introduced Ms. Janna Zumbrun as the new Infectious Disease and Intervention Section Chief. She was mentored by and replaces Mr. Casey Blass, who has retired. Following a few remarks from Ms. Zumbrun, Mr. Sims also introduced Mr. Dan Walters as the meeting facilitator.

Meeting Overview	Dan Walters Facilitator	Mr. Walters welcomed the TISWG participants. He emphasized that the continuity that has kept us focused continues to center on what improvements we can achieve successfully together as the Texas Immunization System that we cannot achieve alone. Participants were asked to examine the continuity of improving the status of Texas Immunizations through this forum. Participants then introduced themselves, identified what city they were from and what organization they were representing. The diversity and demographics were well represented.
Introduction to Health Care Reform	Ardas Kalsa Program Specialist Medicaid Coordinator	Ms. Ardas Khalsa was introduced as the first speaker and facilitated a presentation entitled "Health Care Reform the Road Ahead." As a resource she serves as the communication liaison for DSHS and HHSC tracking the various rules and anticipated entitlements for the Health Care Reform. The Patient Protection and Affordable Health Care Act were enacted on March 23 <sup>rd</sup> 2010. The Health Care and Education Reconciliation Act was enacted on March 30, 2010. Together these two pieces of legislation created the Affordable Care Act. This act will determine aspects of the Health Care Reform in Texas for the next three years. Her presentation covered several highlights of health care reform that will impact Texas. Ms Khalsa briefly addressed these aspects of the reforms. Medicaid Reform, Medicaid Eligibility, Benchmark Benefits Plan, Essential Benefits, Health Insurance Exchange, Expansion Benefits, Demonstration Grants, Health Work Force, and the Impact to Texas Health Care Delivery Systems. More specific details may be found in the attached power point presentation entitled "Health Care Reform-The Road Ahead". There were several questions addressed in the brief question and answer session. Please also see a supplemental handout with these responses along with a listing of the Texas Initiatives and other resources currently available for review.
ImmTrac Electronic Medical Records, EMR Interoperability Project	Thomas Colvin ImmTrac Group Manager	Mr. Thomas Colvin presented updated information of the Electronic Medical/Health Records (EMR) Interoperability Project for ImmTrac. The purpose of the project is to measure outcomes and increase interface with electronic health records for children 6 years old and younger. Thus far the process is working well and the selection of available resources is promising. Please see document in more detail via a power point presentation entitled. "EMR/IIS Interoperability Project". Mr. Colvin briefed in detail aspects of the Federal Grant, required activities for the use of EMRs, stakeholder input, the measurable outcomes, and the funding criteria for projected partners. Mr. Colvin stated he was please with the options available to the department thus far. Mr. Colvin announced he will be participating in the upcoming Immunization Summit. He invited Ms. Maureen Moore to extend an invitation and

		<p>provide additional information regarding the Summit. Participants were encouraged to register early. The summit will be held in Fort Worth Texas September 30-October 1, 2010. See attached flyer for more information.</p>
<p>Immunization Branch Update</p>	<p>Jack Sims Immunization Branch Manager</p>	<p>Mr. Jack Sims began the Branch Updates discussing the proposed budget outlook. He continued with the progressive use of the American Recovery and Reinvestment Act of 2009, (ARRA) funding for immunizations. Topics highlighted included the following:</p> <p>Adult Vaccination Safety Net</p> <ul style="list-style-type: none"> <li>• ARRA Funding is being used to expand the safety net for the Adult Vaccine Program. As a result, more adults have been vaccinated. Measuring the number of adults vaccinated leads to more vaccination facilities reducing the potential lack of access to care.</li> <li>• Expansion in Federally Qualified Health Centers, (FQHC) has made a difference in the vaccinations reported to CDC. The increase funding will be available through 2011. See handout attached.</li> </ul> <p>Special Projects</p> <ul style="list-style-type: none"> <li>• The First Responder Project continues in development. The clarification on who is a first responder has been expanded.</li> <li>• The University of North Texas will conduct a survey to expand the First Responder Project.</li> <li>• Cocooning and School based studies will also continue. Currently working with others to make it standard operating practices for TDaP vaccine to be given to new mothers.</li> </ul> <p>Upcoming Flu Season and availability of vaccines.</p> <ul style="list-style-type: none"> <li>• So far 23-26 million plus the federal grant of 350 million doses of vaccine will be available for Texas.</li> <li>• Funding designations for vaccine orders are established. Presumably 6.4 million doses are available for private physicians to order.</li> <li>• Mr. Sims acknowledged West Texas University and Dallas County for assisting during the H1N1 efforts.</li> <li>• Funding for vaccines will be restored for certain programs.</li> <li>• Mr. Sims asked participants if reductions in Flu vaccine hindered any school clinics last flu season. He announced 300 million doses of Flu vaccine will be available for</li> </ul>

		<p>Back to School clinics. Last year we received numerous requests for vaccines due to the shortages and H1N1 concentration response. This season, we do not anticipate that problem. Schools should have access to an ample supply.</p> <p>Exemptions</p> <ul style="list-style-type: none"> <li>• Vaccination Exemptions are increasing. There still seems to be a rush or a last minute parental decision not to vaccinate. One reported reason was the H1N1 vaccine information posed concerns for parents.</li> </ul> <p>National Immunization Survey (NIS)</p> <ul style="list-style-type: none"> <li>• Results from 2009 NIS measurement will be announced in September. This year the NIS measurement will be 4:3:1:3:3:1:4<sup>1</sup> which will also include pneumococcal conjugate vaccine. The data collected will help focus efforts on education and outreach. There still seems to be gaps in honing in on the collected data.</li> </ul> <p>H1N1 Updates</p> <ul style="list-style-type: none"> <li>• Discussed H1N1 vaccines, manufacturers are discussing bar coding in the future for accountability.</li> <li>• Next season's flu vaccine will carry a strain of the H1N1 antigen.</li> <li>• Sanofi has released new information for those providers with multi-dose vials remaining; the antigens on hand can be used through September 15<sup>th</sup>.</li> <li>• There is some discussion nationally regarding disposal of excess vaccine whether to destroy and or return to the manufacturer. No decision has been finalized at this time. H1N1 antigen will be included in the 2010-2011 seasonal flu doses.</li> </ul> <p>Other topics</p> <ul style="list-style-type: none"> <li>• A small funding source from the Heirloom Birth Certificates is funding another special initiative.</li> <li>• Attendees are reminded of the upcoming Immunization Summit in Ft Worth. 86 registrations via email have been completed as of August 18<sup>th</sup>.</li> </ul>
Adult Immunization Plan	Tristan DelCanto Program Specialist	Mr. Tristan DelCanto discussed from last meeting' participants remarks pertaining to the Adult Immunization Program. A general discussion of the Adult Immunization Program with

<sup>1</sup> 4:3:1:3:3:1:4 series NIS measurement consists referred to as routine, includes ≥4 doses of DTP/DT/DTaP, ≥3 doses of poliovirus vaccine, and ≥1 doses of measles-containing vaccine, ≥3 doses of Hib vaccine, ≥3 doses of hepatitis B vaccine, ≥1 doses of Varicella vaccine, and ≥4 doses of PCV. MMWR Sept 17, 2010,

	Adolescent and Adult Immunization Coordinator	<p>its strengths and barriers was reviewed at the last meeting. Today's meeting is to focus and discuss the draft of the Adult Vaccination Plan along with some main messages that are to be included in such a plan. A short presentation of the history, and progress was presented. Participants were asked to focus now and provide the recommendations for the Adult Program. Discussion topics were to include clarification of the strengths and barriers of an effective adult immunization program in Texas. Also to discuss the proposed path, goals and objectives, different strategies, adult vaccines and prioritize the age groups to encompass the Adult Immunization System. Highlights of the presentation can be found on the attached PowerPoint Presentation entitled "Adult and Adolescent Immunization Program", which includes the following topics of discussion:</p> <ul style="list-style-type: none"> <li>• National rankings for adult immunizations</li> <li>• Strengths of an adult safety net and insurance coverage for vaccines.</li> <li>• Strengths Medicare coverage, vaccine availability,</li> <li>• Barriers <ul style="list-style-type: none"> <li>○ Education-physicians also need education about adult vaccine schedules and coverage.</li> <li>○ Incomplete access to knowledge regarding the adult vaccination schedule.</li> </ul> </li> </ul> <p>Participants were asked given the information received at the last meeting and today, feedback is requested on how to increase adult vaccination in Texas.</p>
Vaccine Choice Update	Karen Hess Vaccine Services Group Manager	<p>Ms. Karen Hess provided an update on the Provider Choice Initiative for vaccine purchasing, providing data and the implementation process. HB448 requires providers' vaccine choice in both the Texas Vaccines for Children and Adult Safety Net programs by September 1, 2010. A survey on the vaccine choice supply selections for on-line ordering and via paper source was conducted in May 2010. Highlights of the outcomes of the survey and the strategic building and launching of the Provider Choice Vaccine Ordering System were reviewed in detail. Please see the accompanying PowerPoint Presentation entitled "I'm invincible! TISWG Update on Vaccine Choice". Ms Hess thanked the entire staff for their excellent collaboration in getting this project launched in a very short period of time.</p>

<p>Pertussis and Mumps</p>	<p>Rachel Wiseman Program Specialist Lupe M. Garcia Public Information Education and Training Group Manager</p>	<p>Ms Rachel Wiseman provided a presentation on the Mumps Outbreak 2010. As of July 16<sup>th</sup> 21 cases of mumps have been identified in local county jails. She described in detail the public health response which has been ongoing to include, the surveillance, testing and investigation. She commended the staff on their ongoing efforts to thoroughly investigate this event. The initial surveillance began with interviews, lab confirmation, identifying who has been exposed, and to continue to look for other cases of mumps in correctional facilities. Parties involved in this surveillance has included, staff at central office (Austin) Immunization Branch, laboratory services, Infectious Disease Control Unit, five regional Health Service Regions, two local Health Departments, the Texas Department of Criminal Justice, and two county jails. Over 1600 doses of MMR vaccine was administered. Again, collaboration was key among the staff of both internal and external partners.</p> <p><b>Pertussis Cases in Texas</b> There were a total of 1519 pertussis cases reported to the CDC as of August 7, 2010. The Public Health response was regionally focused and doses were delivered. There were no deaths reported. Blast Fax for initial communications was sent as notification to local physicians and emergency room services. Local media, CDC, and laboratory services were also heavily involved. Ms Wiseman stated the surveillance and the distribution of pertussis data in Texas was primarily found in central Texas in 2009 and 2010. Multiple outbreaks were identified in 2009 primarily in two central Texas counties. Surveillance and laboratory practices specific to central Texas led to over identification of potential cases. Please see attached PowerPoint Presentation.</p> <p><b>Pertussis in Texas Media Campaign and Highlights.</b> Mrs. Lupe Garcia presented the Immunization Branch' media campaigns pertaining to controlling pertussis in Texas dating from 2002-to the present. 2002 -The Immunization Branch held a symposium for physicians which was well attended. 2003 - An Education Campaign focusing on parents and the general audience awareness on the importance of vaccines. 2006 - DSHS launched a statewide Pertussis Public Awareness Campaign. During this period, 9 deaths related to pertussis were reported in Texas. 2007- Continued campaign for Pertussis to raise public awareness. 2008 - 4<sup>th</sup> DTaP Vaccine and Health Care Provider Campaign focused to further the importance of reducing missed opportunities at health visits and encouraged providers to</p>
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		<p>give the 4<sup>th</sup> dose of the DTaP series.</p> <p>2008 - Pertussis Study: A survey of children in ImmTrac who did not have the fourth DTaP to identify barriers to on-time DTaP vaccination.</p> <p>2010 - Cocooning Initiative: a collaboration to promote the cocooning strategy in all health care settings. See PowerPoint Presentation entitled "Outbreak Response" for more details. Mrs. Garcia briefly discussed the campaign evaluations and effectiveness of these efforts.</p>
<p>Centers for Disease Control and Prevention (CDC) Update Vaccine Supply, ACIP Meeting</p>	<p>Mark Ritter CDC Program Advisor</p>	<p>Mr. Mark Ritter attended the recent Advisory Committee on Immunization Practices (ACIP) meeting and provided updates on the seasonal flu and other vaccine supply status. Mr Ritter stated vaccine manufacturers of Hepatitis A vaccine are reporting this vaccine is now in good supply. Pediatric doses of Hepatitis B are also in good supply. Combination vaccines of MMR/V plus DTaP/IPV<sup>2</sup> are in limited supply and are expected to be out the remainder of the year according to manufacturers. Zostavax® is not available. KinRix ® is only available in vials at this time. CDC anticipates restocking in October.</p> <p>The 2010-11 Flu Vaccine trivalent and vaccine will be available and contain the H1N1 antigen. The ACIP recommends for the 2010 flu season that all persons should receive the vaccine beginning with children at ages 6 months. Children ages 6 months-8 years that receive at least one dose of H1N1 in 2009 should receive 2 doses of a 2010-11 seasonal flu regardless of previous vaccination history.</p> <p>Vaccine administration for certain vaccines were very specific this flu season.</p>

<sup>2</sup> Combination vaccines which consists of Measles, Mumps, Rubella with Varicella (MMR/V)  
Diphtheria, Tetanus Acellular Pertussis with Inactivated Polio Vaccine (DTaP/IPV)

		<ul style="list-style-type: none"> <li>• Newly approved High Dose vaccines were also approved for persons 65 years of age to receive.</li> <li>• ACIP Influenza Update as of August 5, 2010. The 2010-11 Afluria vaccine should not be administered to children aged 6 months through 8 years of age. Other age appropriate licensed seasonal influenza vaccine should be used for the prevention of influenza for these children.</li> </ul> <p>More detail information can be found on the PowerPoint Presentation attached entitled "CDC Vaccine Supply, Seasonal Flu and ACIP Meeting Update."</p> <p>The presentation also included Seasonal Flu doses projected per manufacturer. There was a noted increase in doses ordered from 2006-2010. ACIP meeting notes also included discussion of the HPV vaccine for women and the permissive recommendations for males. Pertussis vaccine statements now have four ACIP recommendations. The working group is working towards consolidation. Rotavirus findings were reviewed and the ACIP reaffirmed its recommendation for continued use. Please see accompany handout for more detailed information.</p>
Announcements	All	2010 Immunization Summit September 30-October 1 <sup>st</sup> See Flyer
Next Meeting	Location TBD	November 4 <sup>th</sup> 2010