

Texas Department of State Health Services

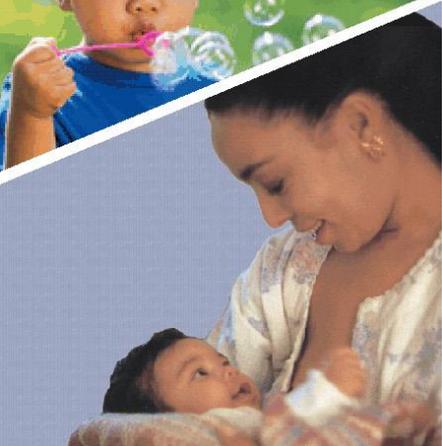
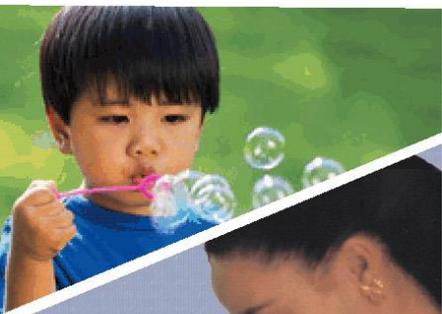
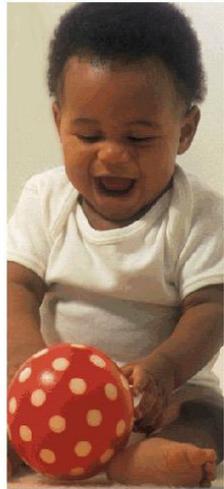
Immunization Update

Mark Ritter, MHA
CDC Senior Public Health Advisor



www.ImmunizeTexas.com





Agenda

- Texas Population Estimates
- Texas VFC Program Review
- Influenza Program Update
- Adolescent Initiatives
- Adult Initiatives (ASN Program)

Goals of TX DSHS Immunization Unit

- Raise and sustain vaccine coverage levels for infants and children.
- Expand statewide immunization services and resources.
- Improve adolescent immunization levels.
- Improve adult immunization levels.
- Reduce indigenous cases of vaccine preventable diseases.

Texas Population Estimates



Texas PES- 2017 (Children 0-18 years)

TEXAS 2017 POPULATION ESTIMATES	TOTALS	%
	Total Grantee Population	7,992,836
Underinsured and VFC Eligible		
1. The number of children enrolled in the Medicaid	3,215,345	40.23%
2. The number of American Indians/Alaska Natives.	145,669	1.82%
3. The number of children without health insurance.	865,798	10.83%
Underinsured and VFC Eligible		
4. Federally Qualified Health Centers.	133,463	1.67%
5. Delegated Authority	4,721	0.06%
Sub-total VFC Eligible	4,364,996	54.61%
6. The number of children underinsured in private sector	97,350	1.22%
7. The number of children with CHIP	344,906	4.32%
8. Privately Insured	3,185,584	39.86%
Sub-total NON-VFC Eligible	3,627,840	45.39%

Additional 442,256 (5%) Non-VFC Eligible Children (CHIP and Underinsured) are Texas VFC Eligible

Texas PES- 2017 (Children 0-18 years)

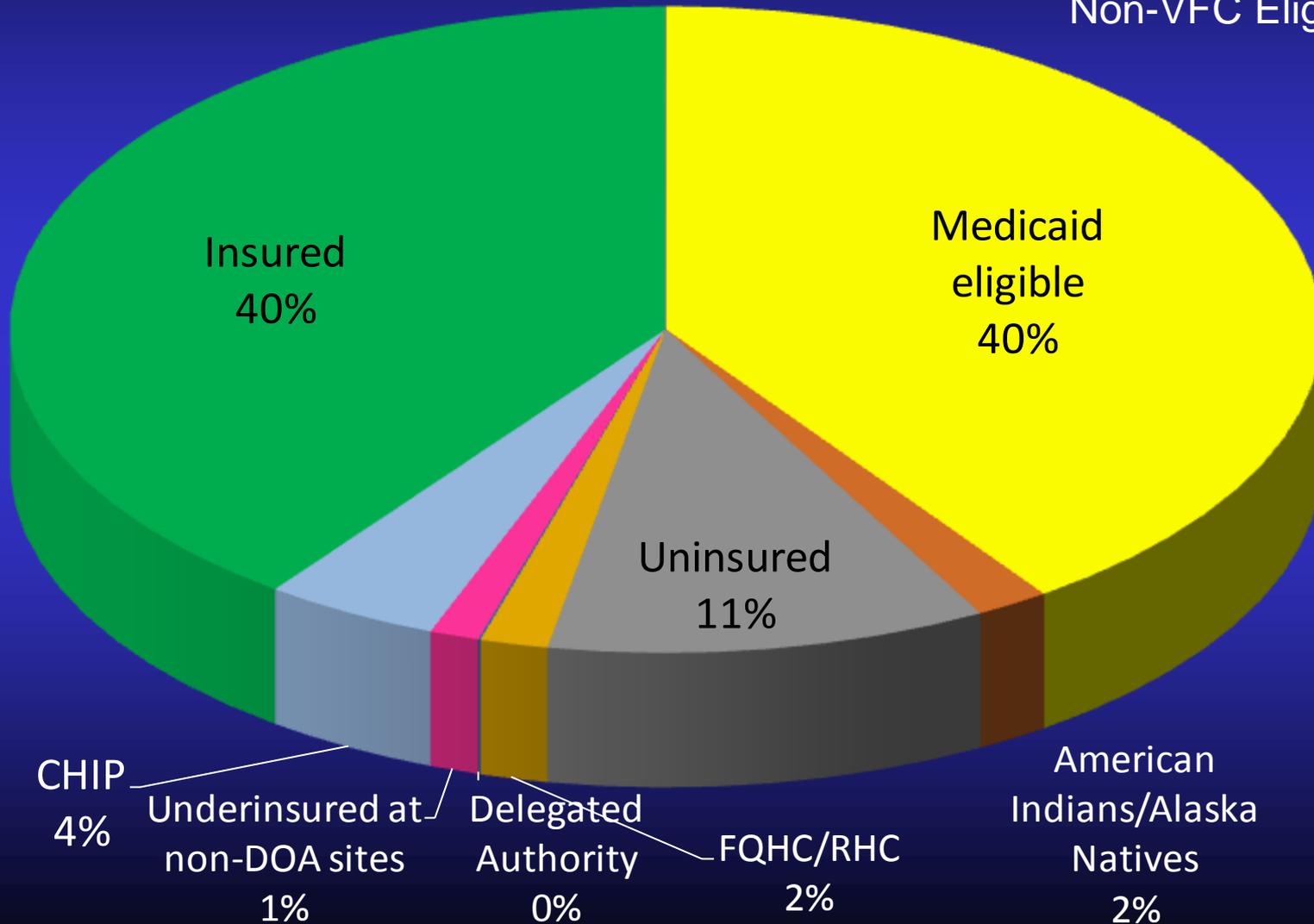
	Years of Age				
	0-1	1-2	3-6	7-18	Totals
Total Childhood Population (0-18)	448,285	893,538	1,771,529	4,879,484	7,992,836
% Total Population	5.6%	11.2%	22.2%	61.0%	100%
TOTAL VFC Eligibles	316,941	509,977	997,992	2,540,086	4,364,996
<i>% VFC eligible</i>	<i>71%</i>	<i>57%</i>	<i>56%</i>	<i>52%</i>	<i>55%</i>
TOTAL Non-VFC Eligible	131,344	383,561	773,537	2,339,398	3,627,840
<i>% Non-VFC eligible</i>	<i>29%</i>	<i>43%</i>	<i>44%</i>	<i>48%</i>	<i>45%</i>

Additional 442,256 (5%) Non-VFC Eligible Children (CHIP and Underinsured) are Texas VFC Eligible

Texas 2017 Total Population (0-18) By Eligibility

Total Population (0-18): 7,992,836

VFC Eligible: 55%
Non-VFC Eligible: 45%



Texas Vaccines For Children (TVFC) Program





VFC BELONGS TO THE CHILDREN

Texas Vaccines
for Children 

Overview of Federal VFC Program

- CDC VFC Program
 - 82 million VFC doses administered to 40 million children at a cost of \$3.6 billion dollars (Texas has 4.3 million VFC eligible children and .4 million CHIP children participating in TVFC)
 - Over 44,000 enrolled providers (Texas has 3,600 sites)
 - States must ensure the integrity of the VFC Program
 - Entitlement to the child; must ensure the child is program's priority
 - Ensure the vaccines offer maximum protection against VPD
 - Ensure VFC Providers do not commit
 - Fraud
 - Waste
 - Abuse
-  **Accountability!**

Goals of Federal VFC Program

- Ordering vaccines in the appropriate quantities (per provider profiles)
- Storing and handling vaccines appropriately (minimizing transfers and borrowing)
- Screening clients for VFC Program eligibility (documentation critical)
- Recruit/enroll new provider's and sites
- Continue to strive to increase children and adolescent immunization rates (using AFIX)

TVFC Providers in Texas

Region	VFC Providers
San Antonio	177
1	163
2	104
3	656
4	166
5	115
6	400
7	351
8	174
9	107
10	128
11	471
25	330
TOTAL	3,342

ASN Sites*	516
School Based	115
Pharmacies	19

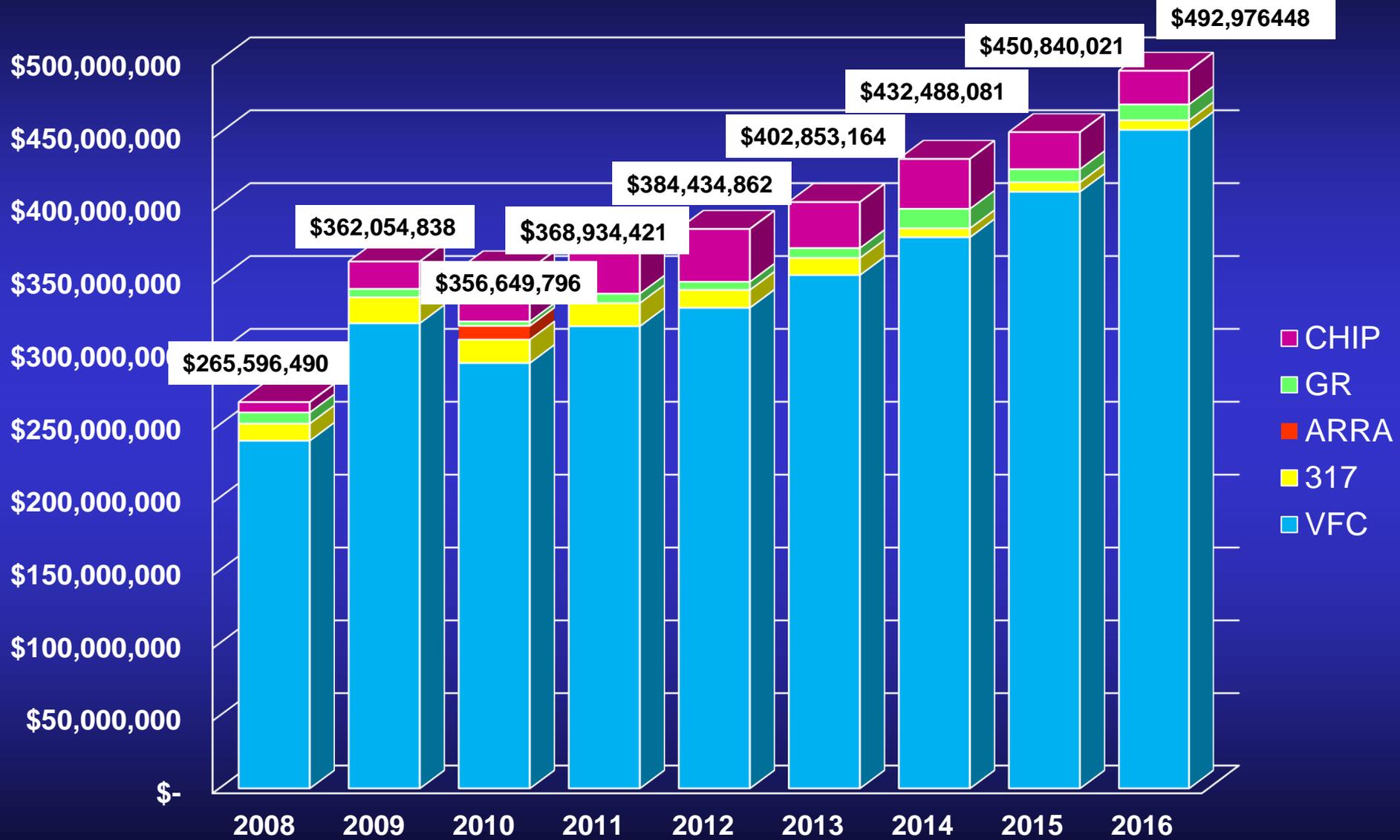
*49 ASN Only Sites

Vaccine Financing

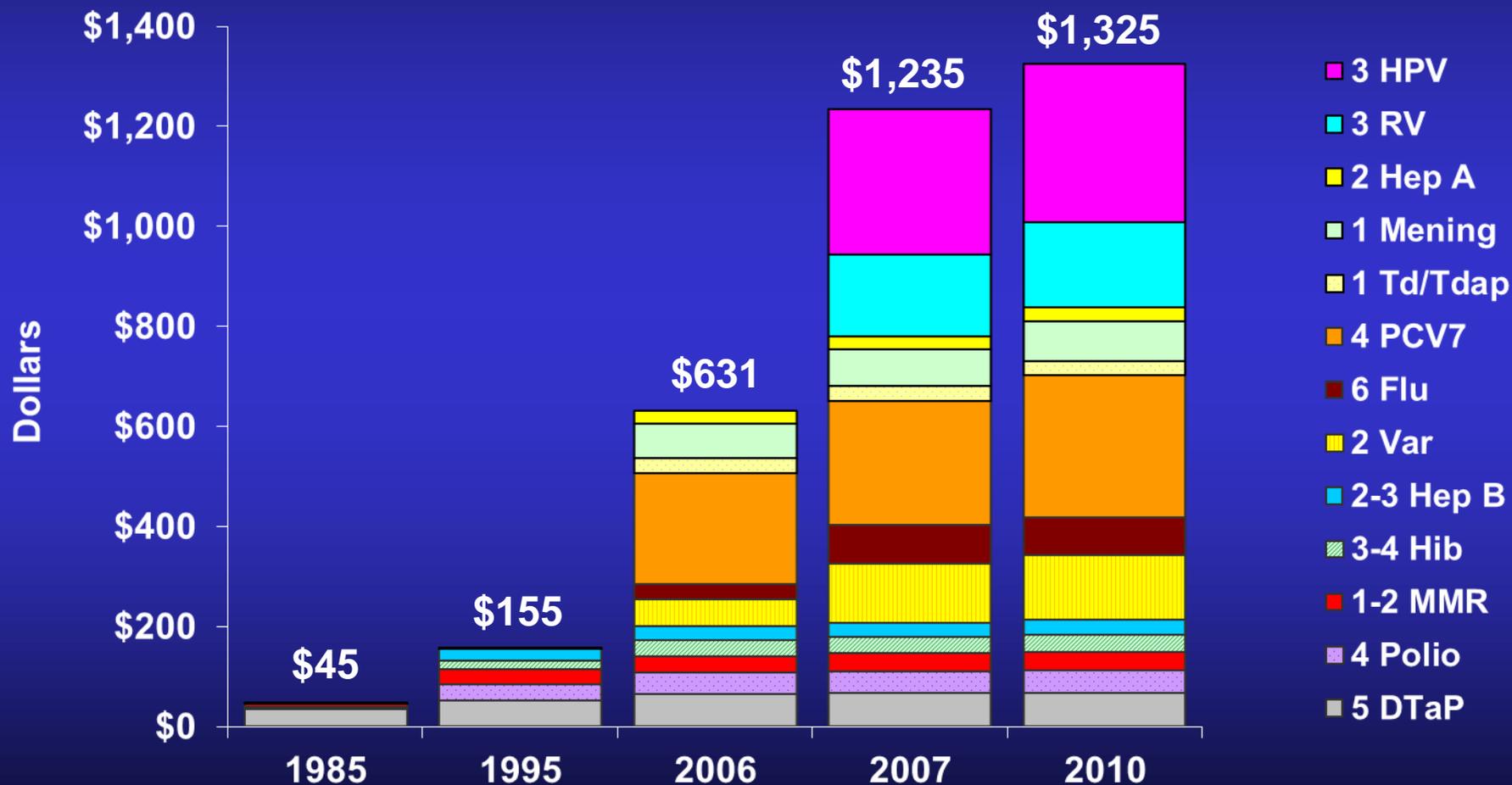


Total Vaccine Purchases in Texas 2008-2016

Vaccine Purchases based on Federal Fiscal Year



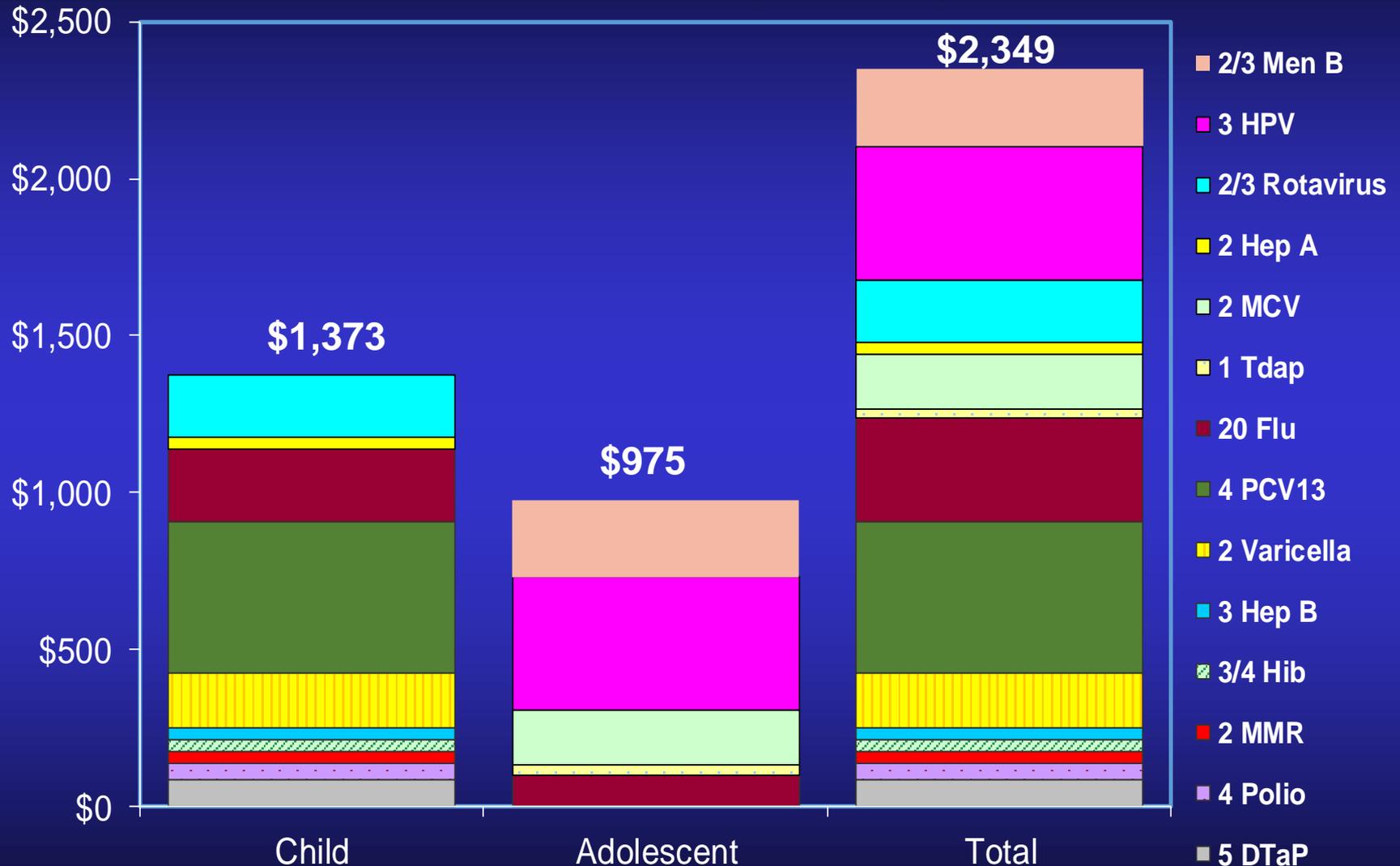
Federal Contract Prices for Vaccines Recommended Universally for Children & Adolescents 1985, 1995, 2006-2007 & 2010



Based on federal contract prices. Private insurance cost would be between 20-55% greater per vaccine

Federal contract price shown for 1985 and 1995 are averages that account for price changes within that year.

Cost To Vaccinate a Child (0-10) and Adolescent (11-18)- 2016



2016 represents minimum cost to vaccinate a child (birth through 18); exceptions are 1) no preservative quadrivalent pediatric influenza vaccine, and 2) HPV for males and females.

Federal contract prices as of June, 2016

4.28% increase in cost from 2015

VFC Guidance



TVFC Program Responsibilities

- Adherence to TVFC Program Policies and Procedures
- Adequate TVFC Provider Oversight
 - Vaccine Ordering Patterns
 - Doses Ordered vs. Doses Administered
 - Eligibility Screening Documentation
 - Use of vaccine on ineligible populations
 - Provider trainings and updates
 - Vaccine transfers and borrowing

TVFC Provider Profile

- VFC Provider Agreement
 - Required to be updated annually as part of provider re-certification (Jan-March)
 - Requires each provider to have 2 vaccine coordinators (primary contacts for TVFC)
 - Requires provider to agree to terms of VFC
 - Requires facility information to be included and updated whenever there is a change
 - Requires provider to identify patient population to be served (both public and private) by age group

TVFC Provider Profile

- Providers must do a better job of identifying VFC eligible clients served using benchmarking, EHRs, EMR, doses ordered/administered and encounter forms
- Doses ordered, administered and Population Estimates should 'be close' to ensure providers have sufficient vaccines for population served = recommended dose order
- This and the assurance that providers submit Monthly Biological Reports (C-33) and Temperature Recording Form (EC-105) are a major focus for TVFC Program

TVFC Provider Profile

- VFC Provider Agreement (cont.)
 - Maximum Stock Levels (MSLs) based on provider profiles and can be/should be updated as necessary
 - CDC recommends that providers place orders when they have a four-week supply of vaccine available, to ensure there is enough vaccine in stock to allow for any potential delays.
 - CDC recommends smaller, more frequent orders rather than large orders to minimize the amount of vaccine loss if an incident occurs during shipment or in the vaccine storage unit.

TVFC Program Responsibilities

- Provider Recertification Process
- VFC and ASN Provider Recruitment
- Ensuring consistency on-
 - How providers receive information and education on program policies and procedures- standardization
 - Materials and resources
 - Onboarding new providers and follow-up education
- Identification of VFC Priorities

TVFC Program Responsibilities

- Provider Site Visits
 - Texas visits almost 90% of all TVFC on an annual basis (CDC requires 50%)
 - 100% of public sites have a visit annually
 - Identifying and correction Vaccine Storage/Handling issues
 - Identifying and correcting provider screening/eligibility of clients
 - Unannounced Site Visits
 - Adult only site visits

TVFC Program Upcoming Events

- Vaccine Choice Opens- Mid November
- Move all providers to a doses administered projection to set MSL
 - Focus on 30 day re-order point for all providers
- VFC and ASN Provider Re-enrollment (re-certification)- Early January
- Immunization Unit Annual Training (required for all DSHS Regional and LHD VFC Staff)- Mid January

Vaccines For Children Vaccine Updates



TVFC Program Updates

- 2016-2017 VFC Provider Flu Survey Completed (15% of TVFC Providers did not order flu vaccines)- 2nd Round survey was submitted 9/30/2016
 - Providers pre-booked 1.68 million doses
 - Additional 130,000 in second round
- Pentacel® (Dtap/IPV/Hib) allocations for all states continue through Fall, 2016
- Hiberix® (GSK Hib Vaccine) is licensed for all 4 dose (FDA) and available for TVFC

TVFC Program Updates

- Men B (target population 16-18) added to VFC Program (1/2016)
 - Bexsero® (GSK); 2 dose series at 0 and 1 month
 - Trumenba® (Pfizer)
 - FDA licensed Trumenba for a 2 or 3 dose series
 - VFC approved for 2 dose series at 0 and 6-12 months (recent ACIP meeting)
 - Vaccines NOT interchangeable

TVFC Program Updates

- HPV 9 vaccine choice added to ASN Program; now only HPV product available for both VFC and ASN
 - 2 dose regiment (age 9-14 approved; pending TVFC release)
- Twinrix® (GSK Hep A/B) no longer available

Texas Influenza Program



2016-2017 Flu Ordering Process

- TVFC Providers Pre-book flu vaccines through survey in early 2016
- DSHS Immunization Unit over-orders certain formulations of flu vaccine to account for flu vaccine needs of new providers who join after the flu-pre book is completed or providers who expand their practices and need additional doses to cover their populations.
- Last two years, these doses were used in lieu of a 2nd Round Flu order to the CDC

Influenza Doses Pre-Booked By DSHS For 2016-2017: Round 1

Manufacturer	2016-2017	2015-2016	2014-2015
Sanofi	1,529,710	1,035,950	1,054,180
GSK	461,750	420,560	362,730
MedImmune	NA*	567,800	500,630
CSL (Tri-valent)	9,330	12,070	7,420
Novartis (Trivalent)	7,440	15,520	13,960
Total	2,008,230	2,051,900*	1,938,920

*Sanofi received 510,130 and GSK received 41,140 of FluMist Doses for 2016

**2,136,450 Total Doses Ordered By Texas for 2014-2015 (2nd Round)

2016-2017 Summary

- 99% of all TVFC Providers have received at least some of their order
 - DSHS has received 73% of its total doses
 - All flu products have been allocated to TVFC Providers
 - Those providers who are in Suspended Status are not eligible to receive flu vaccines until issues are resolved
- 939 providers (35%) have completely received 100% of their pre-booked doses
- Doses will continue to be allocated every Monday until all pre-books are filled
- 2nd round survey returned 9/30/16

Adolescent Immunizations



Talk to your child's doctor or nurse about the vaccines recommended for their age.

	Flu <i>Influenza</i>	Tdap Tetanus, diphtheria, pertussis	HPV Human papillomavirus	Meningococcal		Pneumococcal	Hepatitis B	Hepatitis A	Inactivated Polio	MMR Measles, mumps, rubella	Chickenpox <i>Varicella</i>
				MenACWY	MenB						
7-8 Years	Green	Orange		Purple		Purple	Orange	Purple	Orange	Orange	Orange
9-10 Years	Green	Orange	Purple	Purple		Purple	Orange	Purple	Orange	Orange	Orange
11-12 Years	Green	Green	Green	Green		Purple	Orange	Purple	Orange	Orange	Orange
13-15 Years	Green	Orange	Orange	Orange		Purple	Orange	Purple	Orange	Orange	Orange
16-18 Years	Green	Orange	Orange	Green Orange	Purple Blue	Purple	Orange	Purple	Orange	Orange	Orange

More Information:

Proteins and teens should get a flu vaccine every year.

Proteins and teens should get one shot of Tdap at age 11 or 12 years.

Both girls and boys should receive 3 doses of HPV vaccine to protect against HPV-related disease. HPV vaccination can start as early as age 9 years.

All 11-12 year olds should be vaccinated with a single dose of a quadrivalent meningococcal conjugate vaccine (MenACWY). A booster shot is recommended at age 16.

Teens, 16-18 years old, may be vaccinated with a MenB vaccine.



These shaded boxes indicate when the vaccine is recommended for all children unless your doctor tells you that your child cannot safely receive the vaccine.



These shaded boxes indicate the vaccine is recommended for children with certain health or lifestyle conditions that put them at an increased risk for serious diseases. See vaccine-specific recommendations at www.cdc.gov/vaccines/hcp/acip-recs/index.html



These shaded boxes indicate the vaccine should be given if a child is catching-up on missed vaccines.



This shaded box indicates the vaccine is recommended for children not at increased risk but who wish to get the vaccine after speaking to a provider.



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN™



AMERICAN ACADEMY OF FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

Adolescent Immunizations

- CDC Priority (especially on HPV vaccination)
- 5 vaccines ACIP recommended (11-18)
 - Tdap (added in 2006; TX 1 dose required)
 - Meningococcal
 - MCV4 (added to VFC in 2006; TX 1 dose required)
 - Men B (added to VFC 2016)
 - HPV (added to VFC in 2006)
 - Influenza
- Efforts to increase non-required school immunizations
 - State Efforts
 - Regional/local Efforts

Texas CDC 2016 Evaluation Project- Increasing HPV Rates



HPV Vaccine Availability

- Texas Vaccines for Children Program
 - Medicaid
 - Uninsured or underinsured children
 - CHIP
 - Native American or Native Alaskan heritage
- Adult Safety Net
 - Providers include FQHC's, RHC's, FPC's, Community Health Centers, and STD/HIV clinics
 - HPV vaccine available for uninsured adults

Customized VFC Provider HPV Ordering Mailout

- Special project targeting TVFC Adolescent Providers
- Vaccine ordering data from iTEAMS assessed for all adolescent vaccines (HPV, Tdap, MCV4)
- Created customized profiles with HPV:Tdap ratio and overall ordering data
- Sent customized email reports to providers

HPV Vaccine Uptake in Texas

- Vaccine ordering data for Jan-June of 2016 analyzed to compare Tdap and HPV vaccine among TVFC providers
- 1.63 (up from 1.54) doses of HPV vaccine ordered for every dose of Tdap
- Ideal ratio 3.0 (meaning for every 1 Tdap, 3 HPV are administered)
- Customized ordering profiles sent to providers in September

Region	Tdap:HPV Ratio Jan-Jun 2016
1	1.41
2/3	1.54
4/5N	1.61
6/5S	1.58
7	1.95
8	1.56
9/10	1.61
11	1.78
Statewide	1.63

TVFC Provider Report on [REDACTED] Adolescent Vaccine Ordering [REDACTED]

Tdap to HPV Vaccine Ordering Ratio Report*

Ideal Tdap:HPV Ratio	Time Frame Comparison		2016 Current Ratio Rating
	Jan - Jun 2015	Jan - Jun 2016	
1 Tdap : 3.00 HPV	1 Tdap: 4.67 HPV	1 Tdap: 3.67 HPV	Excellent

Over the past 6 months (Jan-Jun 2016), for every 1 dose of pediatric Tdap ordered, your clinic has ordered 3.67 doses of pediatric HPV vaccine. Ratios of 3 or more indicate excellent utilization of HPV vaccine.

Jan-Jun 2016 Current Ratio Rating Scale

Tdap:HPV Ordering Ratio	HPV Vaccine Ordering Adherence Rating
≥ 1Tdap: 3.00HPV	Excellent
≥ 1Tdap: 2.50HPV – 1Tdap: 2.99HPV	Good
≥ 1Tdap: 2.00HPV – 1Tdap: 2.49HPV	Fair
< 1Tdap: 2.00HPV	Needs Improvement

* TVFC vaccine ordering data for pediatric doses of Tdap and pediatric doses of HPV were assessed to calculate ratio data. Ratios of 1 Tdap: 0.00 HPV indicate HPV vaccine was not ordered for PIN in respective time frame.

Adolescent Vaccine Ordering History, Jan-Jun 2015 vs Jan-Jun 2016

Pediatric Vaccine	Total Doses Ordered		Percent Doses Ordered Changed
	Jan - Jun 2015	Jan - Jun 2016	
HPV	70	110	57.14%
Tdap	15	30	100.00%
MCV4	40	40	0.00%

The CDC recommends routinely assessing your clinic's immunization rates and examining vaccine ordering data trends. Reviewing vaccine ordering data at the clinic level can help to identify missed opportunities for HPV vaccination when compared to other adolescent vaccines.

Comparing Jan-June 2015 to Jan-June 2016

Region	Tdap:HPV Ratio Jan-Jun 2015	Tdap:HPV Ratio Jan-Jun 2016	Change
1	1.47	1.41	-0.07
2/3	1.41	1.54	+0.13
4/5N	1.39	1.61	+0.22
6/5S	1.49	1.58	+0.09
7	1.89	1.95	+0.06
8	1.59	1.56	-0.03
9/10	1.75	1.61	-0.14
11	1.67	1.78	+0.11
Statewide	1.55	1.63	+0.08

1.4 ratio for 2014

HPV-Tdap Vaccine Ordering Ratios

Overall State- Jan-Jun 2016 Rating Breakdown	
Excellent (≥ 3.0)	15.78%
Good ($\geq 2.5-2.99$)	5.75%
Fair ($\geq 2.0-2.49$)	11.74%
Needs Improvement (< 2.0)	66.74%

Texas HPV Strategies

1. Increase community demand for HPV vaccine
 - Adolescent media campaign
 - Increase HPV awareness through clinic based education
2. Provider and System Interventions
 - Increase knowledge and strengthen health care provider recommendation of HPV vaccine.
 - HPV Vaccine Ordering Profiles for TVFC Providers
 - Support the use of the Texas Immunization Registry (ImmTrac) and reminder recall systems.
3. Establish and strengthen partnerships with State and local organizations
 - Strengthen outreach to providers through professional organizations and local coalitions.

Adult Safety Net Program



Adult Safety Net (ASN) Overview

- The Adult Safety Net (ASN) Program supplies publicly-purchased vaccine at no cost to enrolled providers.
- The aim is to increase access to vaccination services in Texas for uninsured adults.
- Funding for 2014 -2017 is from State Exceptional Item and Federal 317 funds
- Currently available in DSHS Regional Clinics, Local Health Departments, FQCH/RHCs, STD/HIV Clinics, Public Family Planning Clinics, Substance Abuse Centers, and hospitals

Adult Safety Net (ASN) Overview

- Continue to serve only uninsured adults, 19 years of age and older
- Vaccines currently available include Hepatitis A, Hepatitis B, Combination Hepatitis A/B, MMR, HPV (2 and 4), Pneumococcal 13 and 23, Tetanus, Diphtheria, and Pertussis (Td and Tdap), Meningococcal Conjugate (MCV4), and Zoster
- Other vaccines may be added if contract exist and funding is available

Adult Safety Net (ASN) Overview

Doses Ordered FFY 2016 (Oct 2015- Sept 2016)

Hepatitis A	9,680
Hepatitis A/B	12,740
Hepatitis B	22,290
HPV	18,110
MCV4	16,895
MMR	21,820
PCV 13	11,610
PPV 23	11,972
TD	7,417
TDAP	54,785
Varicella	13,610
Zostervax	8,250
Total	209,179

Total Funds Expended: \$10,335,482

Adult Safety Net (ASN) Overview

Doses Administered (Jan-August, 2016)

VACCINE	DOSES
HEPA	6,197
HEPAB	7,973
HEPB	15,982
HPV	10,200
MCV4	12,789
MMR	15,123
PCV13	6,134
PPSV23	6,271
TD	4,342
TDAP	35,281
VARICELLA	9,120
ZOSTER	5,199
Total	134,620

Adult Safety Net (ASN) Overview

January – August, 2016

- 511 Sites in Texas enrolled in ASN
 - 247 of these sites have administered less than 50 doses in the past 8 months
 - Tdap, MCV4, Hep B, and MMR most popular

CDC Funded PPHF Adult Project Goals

1. Improve and expand healthcare providers' knowledge and utilization of the Standards for Adult Immunization Practice
2. Increase the number of healthcare providers offering and administering ACIP-recommended adult immunizations
3. Increase the utilization of ImmTrac, the Texas Immunization Registry, to record immunizations for consented adults
4. Increase the awareness and importance of adult immunizations among the general public and healthcare providers

PPHF Adult Project Goals

Collaborate with 3 settings to implement Standards for Adult Immunization Practice

- Community Health Centers
- Large Provider Groups or Health Systems
- Pharmacies

Partnerships and Collaborations

- Texas Immunization Stakeholder Working Group (TISWG)
- Texas Medical Association
- Texas Pediatric Society
- Other State Agencies – HHSC, DADS, DFPS, DSHS Programs
- Texas Immunization Coalitions
- Vaccine Manufacturers

Thank You!

Mark Ritter, MHA
CDC Senior Public Health Advisor
Mark.ritter@dshs.texas.gov