Lunch and Learn – 12/14/2011
Change to State-Supplied Vaccine Policy

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Public Vaccine Funding Options

- Vaccines For Children (VFC): federal entitlement program.
  - Age 0-18 and one of the following:
    - Medicaid eligible
    - Uninsured
    - American Indian/Alaska Native
    - Underinsured
- Section 317
  - All ages, state discretion
    - Not intended for VFC-eligible
- State

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North Dakota History

- Prior to 2004, North Dakota was a *Universal* state.
  - The NDDoH supplied all ACIP recommended vaccines to all enrolled providers (public and private) for all children (VFC and Insured).
  - The NDDoH funded this using VFC and Section 317.

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North Dakota History

- Starting in 2004 when Tdap and MCV4 became available, North Dakota became *Universal Select*.
  - The NDDoH supplied all ACIP recommended vaccines to all children (VFC and Insured), except Tdap and MCV4, which were only available to VFC.
  - Section 317 funding remained level, but the number of vaccines recommended increased.

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North Dakota History

- Starting in 2006, North Dakota went back to being a *Universal* state when BCBSND offered to provide funding for vaccines for their children to the NDDoH.
- Also in 2006, Section 317 funding started decreasing and more vaccines were recommended by ACIP – rotavirus, MMRV, HPV.

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FIGURE 1. Recommended childhood vaccination schedule* — United States, January–June 1996

Vaccine	Age										
	Birth	1 Mo.	2 Mos.	4 Mos.	6 Mos.	12 Mos.	15 Mos.	18 Mos.	4-6 Yrs.	11-12 Yrs.	14-16 Yrs.
Hepatitis B†	Hep B-1										
		Hep B-2			Hep B-3					Hep B§	
Diphtheria and tetanus toxoids and pertussis vaccine¶			DTP	DTP	DTP	DTP (DTaP at ≥15 mo.)			DTP or DTaP	Td	
Haemophilus influenzae type b**			Hib	Hib	Hib		Hib				
Poliovirus††			OPV	OPV	OPV				OPV		
Measles-mumps-rubella§§						MMR			MMR or	MMR	
Varicella zoster virus¶¶							Var			Var***	

Range of Acceptable Ages for Vaccination

"Catch-Up" Vaccination § ***

10 diseases

*Vaccines are listed under the routinely recommended ages.

† **Infants born to hepatitis B surface antigen (HBsAg)-negative mothers** should receive 2.5 µg of Recombivax HB® (Merck & Co.) or 10 µg of Engerix-B® (SmithKline Beecham). The second dose should be administered ≥1 month after the first dose. **Infants born to HBsAg-positive mothers** should receive 0.5 mL hepatitis B immune globulin (HBIG) within 12 hours of birth, and either 5 µg of Recombivax HB® or 10 µg of Engerix-B® at a separate site. The second dose is recommended at age 1–2 months and the third dose at age 6 months. **Infants born to mothers whose HBsAg status is unknown** should receive either 5 µg of Recombivax HB® or 10 µg of Engerix-B® within 12 hours of birth. The second dose of vaccine is recommended at age 1 month and the third dose at age 6 months.

Recommended Immunization Schedule for Persons Aged 0 Through 6 Years—United States • 2011

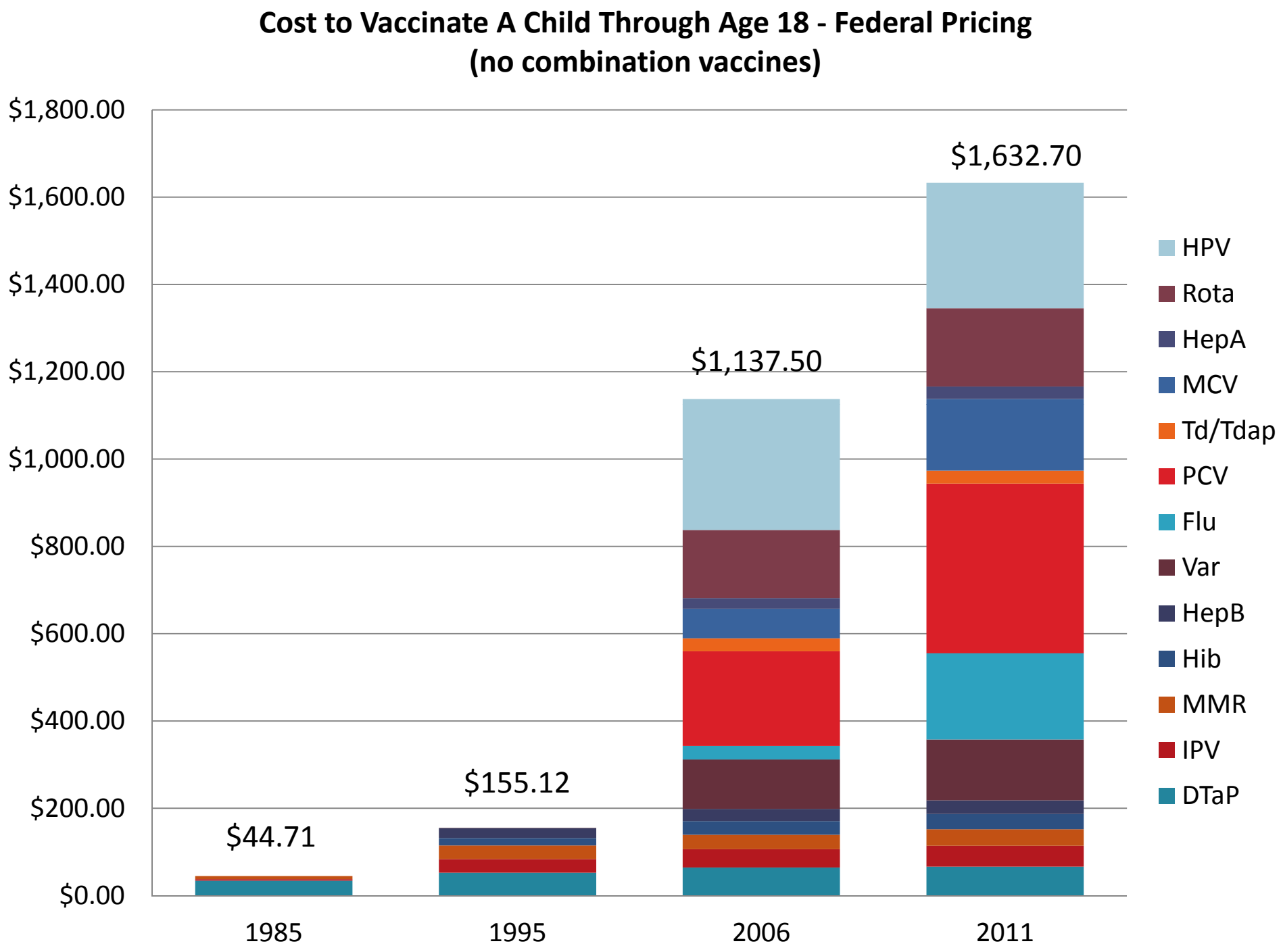
For those who fall behind or start late, see the catch-up schedule

Vaccine ▼ Age ▶	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	19–23 months	2–3 years	4–6 years
Hepatitis B[1]	HepB	HepB			HepB						
Rotavirus[2]			RV	RV	RV[2]						
Diphtheria, Tetanus, Pertussis[3]			DTaP	DTaP	DTaP	*see footnote*[3]	DTaP				DTaP
Haemophilus influenzae type b[4]			Hib	Hib	Hib[4]	Hib					
Pneumococcal[5]			PCV	PCV	PCV	PCV				PPSV	
Inactivated Poliovirus[6]			IPV	IPV	IPV						IPV
Influenza[7]					Influenza (Yearly)						
Measles, Mumps, Rubella[8]						MMR		*see footnote*[8]			MMR
Varicella[9]						Varicella		*see footnote*[9]			Varicella
Hepatitis A[10]						HepA (2 doses)				HepA Series	
Meningococcal[11]										MCV4	

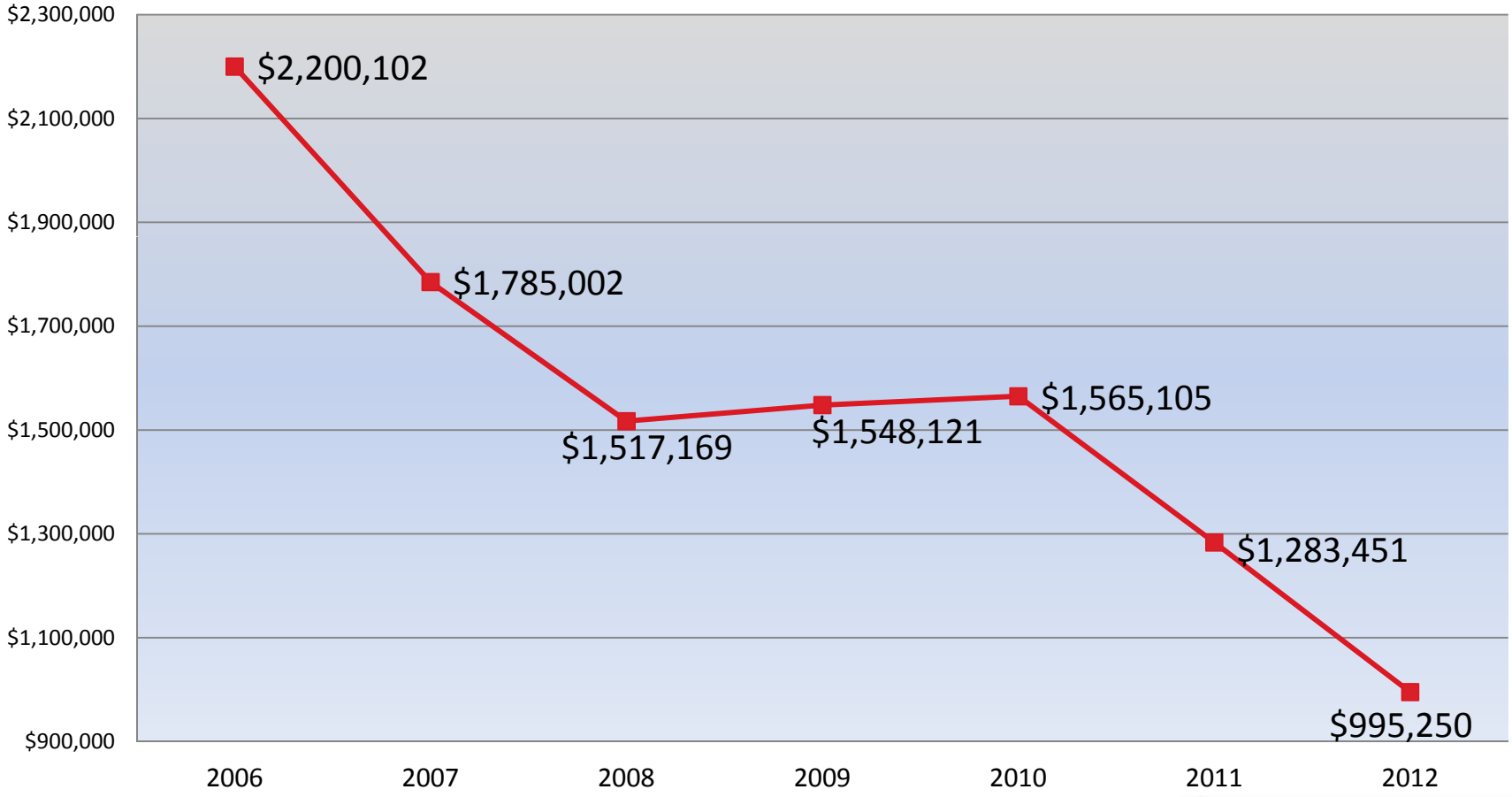
Range of recommended ages for all children

Range of recommended ages for certain high-risk groups

15 diseases plus HPV: separate childhood and adolescent schedule.


Cost to Vaccinate A Child Through Age 18 - Federal Pricing
(no combination vaccines)
$1,800.00
$1,600.00
$1,400.00
$1,200.00
$1,000.00
$800.00
$600.00
$400.00
$200.00
$0.00
$44.71
$155.12
$1,137.50
$1,632.70
1985
1995
2006
2011
HPV
Rota
HepA
MCV
Td/Tdap
PCV
Flu
Var
HepB
Hib
MMR
IPV
DTaP

Section 317 Funding by Year - ND



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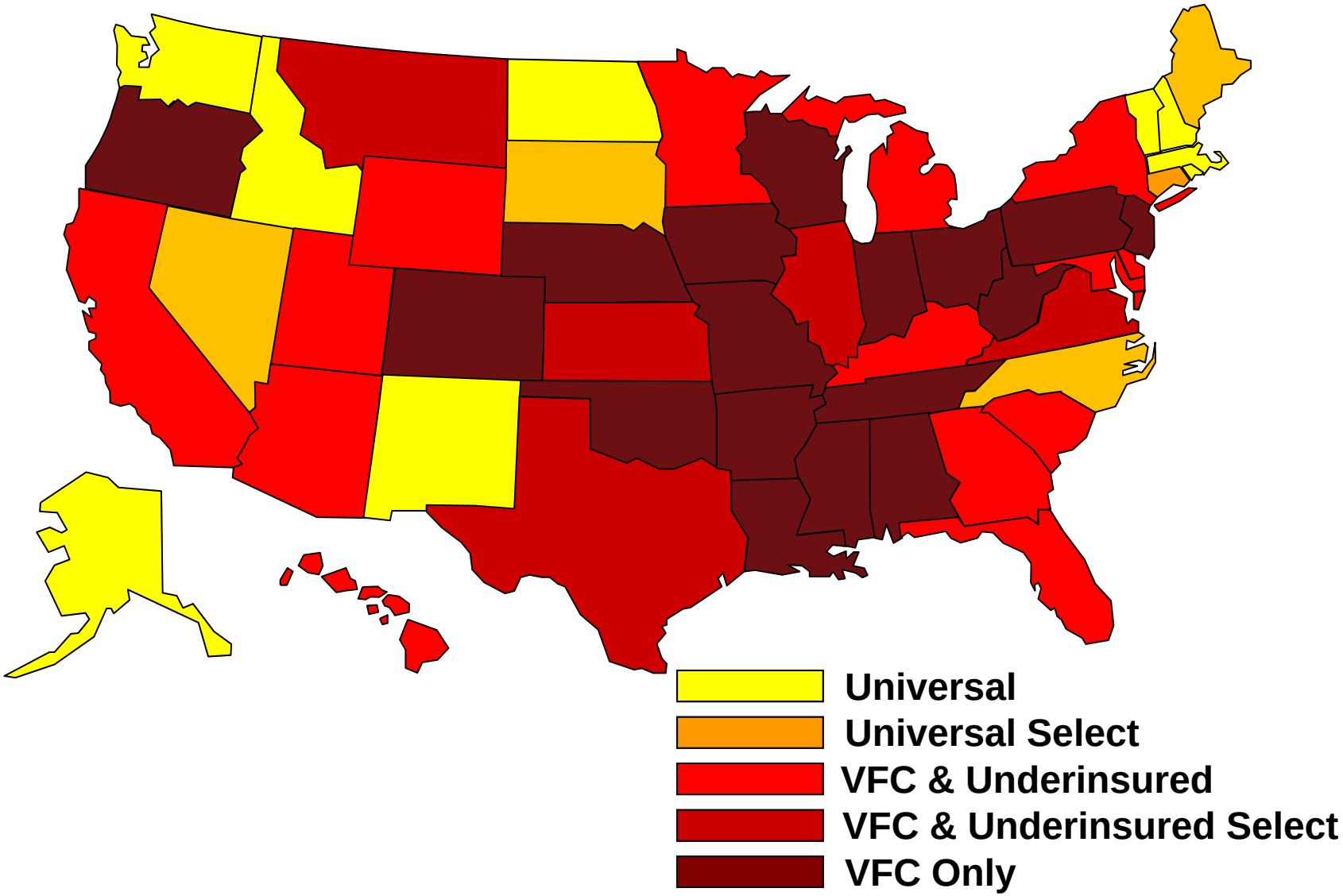
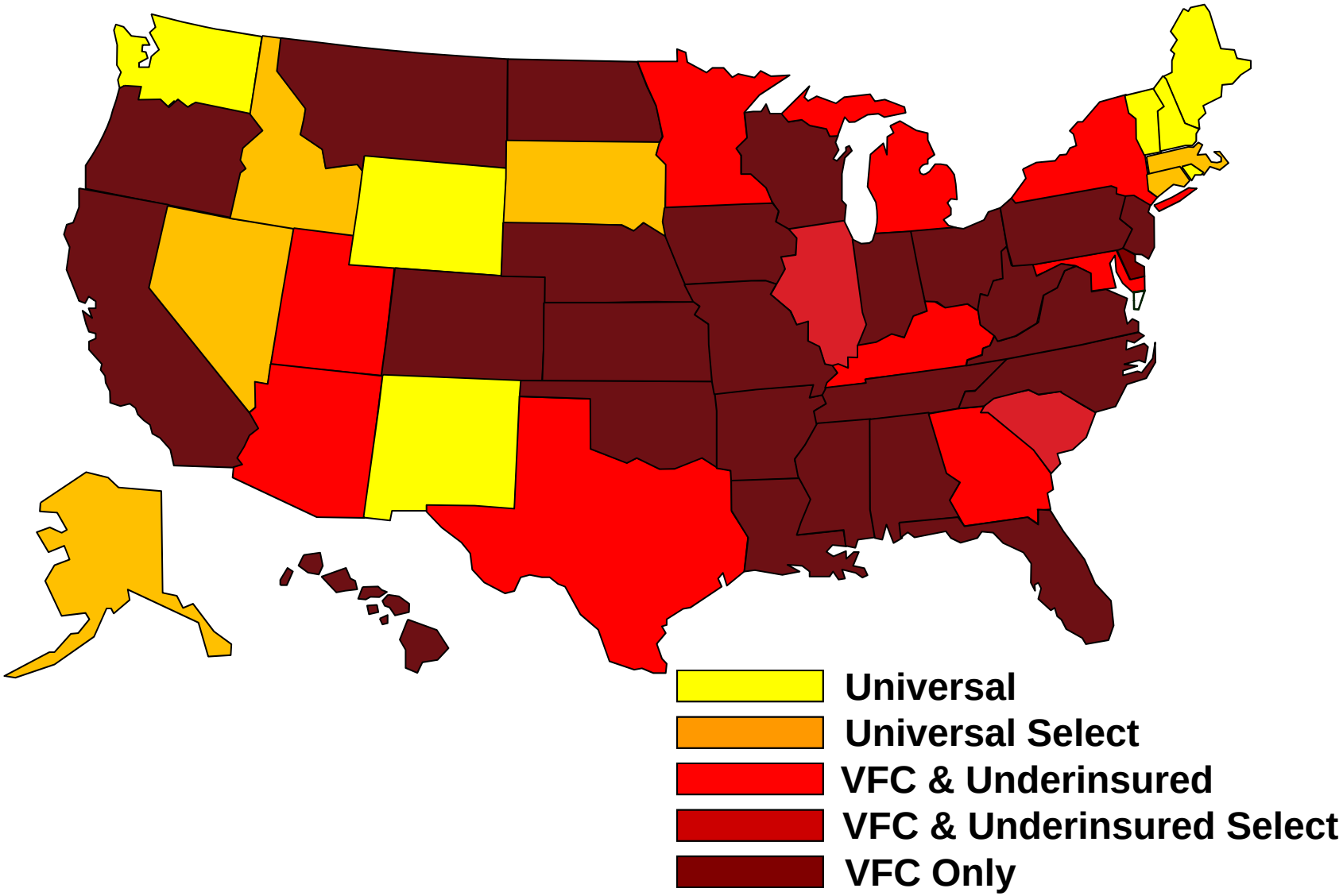
VACCINE SUPPLY POLICY 2003

Source: VFC Management Survey 03/2004



VACCINE SUPPLY POLICY 2011

Source: University of Michigan



North Dakota History

- Due to continued decreases in Section 317 funding and increases in vaccine prices and the number of vaccines recommended, North Dakota could no longer keep its *Universal* status.
- 2007 Legislature appropriated state funding for vaccine purchase to remain *Universal* while transitioning to *VFC Only*.

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North Dakota History

- Starting January 1, 2008, North Dakota became a VFC Only State.
  - NDDoH supplied ACIP recommended vaccines to only VFC-eligible children.
  - All providers, including public health, purchased private vaccine for insured children.
  - Section 317 was used for "special projects."
    - HPV for uninsured/underinsured adults.
    - Tdap for new parents.

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2011 Legislative Session

- Senate Bill 2276 originally attempted to assess all insurance companies for the cost of vaccines for their children and use that funding to provide vaccines for all children from the NDDoH.
  - North Dakota would again be a *Universal* state.
  - All vaccines for children would be purchased off of federal contract.

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2011 Legislative Session

- Final version of SB2276:
  - North Dakota Local Public Health Units would be *Universal* using Section 317 and state funding.
  - Private providers would remain *VFC-Only*.
  - Bill also required brand choice for all state-supplied vaccines.
  - Bill also mandated data entry into NDIIS within 4 weeks of administration for childhood vaccines.

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What does this change mean to private providers?

- Private providers may still order and administer VFC vaccines.
  - Children ages 0 – 18 who are either Medicaid-eligible, uninsured, underinsured, or American Indian.
  - Providers must continue to purchase private vaccine to administer to insured children.
  - Same as before!

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What does this change mean to private providers?

- Since Section 317 is being used to fund local public health unit vaccines, *most* "special projects" no longer exist.
  - Exceptions!
    - Hepatitis B birth dose for birthing hospitals – state supplied vaccine may be used for any North Dakota newborn, insured and VFC.
    - HPV vaccine for uninsured/underinsured North Dakota adults – state supplied vaccine may be used.
      - ND Medicaid covers 19 – 21 – use private.

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What does this change mean to private providers?

- Since VFC is a federal entitlement program, VFC vaccine may be administered to eligible children, regardless of residency.
- Section 317 is state-specific, so hepatitis B birth dose for insured children and HPV vaccine for uninsured/underinsured adults may only be administered to ND residents.
- **See ND Vaccine Coverage Table!**

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What does this change mean to local public health units?

- As of October 1, 2011, local public health units may order vaccines from the NDDoH for insured children, in addition to VFC children.
  - VFC – may administer regardless of residency.
  - Insured – only for ND residents.
- Also may order HPV vaccine for uninsured/underinsured North Dakota adults.

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What does this change mean to local public health units?

- For the 2011 – 2012 influenza season, local public health units are not *Universal* for influenza vaccine.
  - Must use private vaccine for insured children.
- For the 2012 – 2013 influenza season, local public health units can be *Universal* for influenza vaccine.
- Health units must still purchase private supplies of vaccine for adults.

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What does this change mean to local public health units?

- 6 health units not participating (are *VFC Only*):
  - Grand Forks
  - Fargo/Cass
  - Dickey
  - Cavalier
  - Nelson/Griggs
  - Upper Missouri District Health Unit (Williams, Divide, McKenzie, Mountrail)

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Vaccine Administration Fee

- VFC-eligible: $13.90 maximum.
  - $0 for the cost of the vaccine.
  - Cannot refuse to vaccinate based on inability to pay.
  - <u>What is your billing department doing?</u>
- LPHUs may charge > $13.90 for non-VFC, state-supplied vaccines.
  - $0 for the cost of the vaccine.
  - Cannot refuse to vaccinate based on inability to pay administration fee.

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Vaccine Administration Fee

- **After the 2012 Prevention Partnership Enrollment is signed**, private providers may also begin to bill more than $13.90 for the non-VFC, state supplied vaccine administration fee.
  - $0 for the cost of the vaccine.
  - Cannot refuse to vaccinate based on inability to pay.

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Brand Choice

- The NDDoH now offers brand choice for all vaccines.
- Providers must commit to a brand for six months.
- The NDDoH will notify providers via email when they can change brands (June and December).
- Email msander@nd.gov by December 15.

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Future NDIIS Changes

- Adding an "other state-eligible" category to VFC-eligibility in NDIIS.
  - Use for non-VFC, state-supplied vaccine.
    - Hepatitis B birth dose for insured children.
    - HPV vaccine for uninsured/underinsured adults.
    - Vaccines for insured children at local public health units.
- Until "other state-eligible" available, use "not eligible" for non-VFC, state-supplied vaccines.

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Immunization Program Update

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Vaccine Information Statements

- As of January 1, 2012, the NDDoH will no longer be supplying copies of Vaccine Information Statements (VIS) to Prevention Partnership Providers.
- The National Childhood Vaccine Injury Compensation Act of 1986 requires that immunization providers provide a copy of the applicable VIS for each vaccine administered at every visit.

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Vaccine Information Statements

- give the appropriate VIS to the recipient or to the recipient's parent or legal representative with each dose of vaccine,
- give it prior to administration of the vaccine,
- give it each time the vaccine is given (not just with the first dose), and
- record certain information in the patient's permanent medical record.

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State-Supplied Thermometers

- As of January 1, 2012, NDDoH will no longer be supplying certified and calibrated minimum/maximum thermometers to Prevention Partnership providers for vaccine storage.
- Providers enrolled in the VFC Program are required to have certified and calibrated thermometers in all refrigerator and freezer compartments used for VFC and other publicly-funded vaccine storage in order to monitor temperatures.

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State-Supplied Thermometers

- Providers must begin purchasing certified and calibrated thermometers for vaccine storage units.
- These thermometers must be in place as of January 1, 2012, or when NDDoH-supplied thermometers' calibration and certification expires.

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State-Supplied Thermometers

- Instead of purchasing new thermometers, providers may choose to recalibrate previously supplied NDDoH thermometers as needed.
  - The blue sticker on the back of NDDoH-supplied thermometers lists the calibration expiration date and the contact information for the company.
  - Cost to recalibrate is $17.50 and an additional $16.00 in shipping and handling.

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State-Supplied Thermometers

- Providers will be asked to produce certificates of calibration for each thermometer at the time of a VFC compliance site visit (annually or biennially).
- Remember – NO DORM FRIDGES for state-supplied vaccines!

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Borrowing and Returning

- Borrowing VFC or other publicly funded vaccine to administer to a not-eligible child or adult should only occur in rare unplanned situations, such as outbreaks.
- The provider's state vaccine supply must be adequate to meet the needs of the provider's VFC-eligible and other state-eligible patients.

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Borrowing and Returning

- Every time a dose of publicly-funded vaccine is borrowed, the provider must complete the NDDoH Borrowing/Return Report.
  - Once the borrowed state-supplied vaccine is replaced with private stock vaccine, that date should be entered on the form and the completed form saved for at least three years.
  - Providers must return borrowed state-supplied doses within <u>four weeks.</u>

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Borrowing and Returning

- Before entering the borrowed dose that was administered into the NDIIS, providers must use the NDIIS Borrow/Return functionality.
  - The same should be done when returning vaccine.
- Please ensure that NDIIS data entry staff is entering doses appropriately, especially the VFC-eligibility for each dose.

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Borrowing and Returning

- **VFC influenza vaccine must never be borrowed for not-eligible children or adults.**
- If the NDDoH does not see compliance with the borrow/return policy, the NDDoH may have to institute stricter policies such as requiring written NDDoH authorization prior to borrowing and returning or no longer allowing borrow/return at all.

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State Immunization Conference

- June 12 and 13 in Bismarck, ND at the Radisson.
- Keynote Speaker – Andrew Kroger, MD, MPH - CDC

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Next Lunch and Learn

- Wednesday, January 11, 2012 at noon.
  - Topic: To Be Determined.
- Send suggested topics to the immunization program!
- If good turnout, the immunization program will explore obtaining continuing educational credits.

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Website

- www.ndhealth.gov/immunize

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