

The presentation will begin shortly. There will be no audio until then.





An Update on VFC-Related Topics

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Overview

- Overview of recent ACIP recommendations (June 24-25, 2015)
- Changes to vaccine return procedure
- Insurance coverage review
- Data logger update
- Upcoming educational opportunities





-  Meningococcal B (Men B) vaccine
-  HPV9
-  Seasonal influenza

RECENT ACIP RECOMMENDATIONS



Men B Permissive Vaccine Recommendations

- ACIP voted to recommend that a MenB vaccine series may be administered to persons 16 through 23 years of age.
 - Preferred age of vaccination is 16 through 18 years.
 - This Category B (permissive) recommendation allows for individual clinical decision-making, and will enable coverage of MenB vaccines by the Vaccines For Children (VFC) Program and most insurance plans.



Current Men B Vaccines

- Two vaccines available:
 - Trumenba® (Pfizer) - 3 dose series
 - Doses at 0, 2, and 6 months
 - Bexsero® (Novartis) - 2 dose series
 - Doses at 0 and 1 month
- Meningococcal B vaccine is available to order from the NDDoH.
- Currently vaccine can only be ordered for high risk individuals 10-18 years of age. In the near future Men B vaccine will be available to order for vaccination of healthy VFC-eligible patients and state-eligible patients at universal LPHUs.
 - The immunization program will send out an email when it is available for widespread ordering.



Men B Vaccines

- No preference was stated for the use of either of the two currently licensed MenB vaccines, Bexsero® (Novartis) or Trumenba® (Pfizer). However, because the vaccines are antigenically different, the same product should be used to complete the series for each of the vaccines.



HPV9 Booster Discussion

- ACIP did not take a vote either to recommend or to not recommend routine revaccination of persons who have previously received a full series of either the 2- or 4-valent HPV vaccine.
- A study has shown no serious safety concerns among females revaccinated with HPV9 after a series of HPV4.



HPV9, cont.

- The benefit of protection against the 5 additional types included in 9vHPV is primarily for females for protection against cervical cancers and precancers.
- Only a small percentage (about 4%) of HPV-associated cancers in males are caused by the 5 additional types included in the 9-valent vaccine.



HPV9, cont.

- No ACIP recommendation means that the Vaccines For Children program and insurance plans probably won't cover revaccination.
 - If parents or patients request additional doses they should be informed they will most likely have to pay out of pocket.
 - If insurance denies coverage because the patient is getting additional doses, this DOES NOT make them eligible for VFC or state doses.



HPV9, cont.

- At the conclusion of the discussion, ACIP requested that the HPV Work Group reconsider a permissive recommendation (Category B-similar to the recommendation made for MenB vaccine for healthy adolescents) for revaccination.
- This would enable coverage by the VFC program and some insurance plans for clinicians or patients who wish to be revaccinated.
- This issue will likely be discussed again at the October 2015 meeting.



Seasonal Influenza

- ACIP approved another revision of the algorithm for determining the number of influenza doses needed for children 6 months through 8 years of age.
- The revised algorithm is simpler because consideration of doses of the 2009 monovalent H1N1 influenza vaccine has been removed.



Seasonal Influenza, cont.

- If a child eight years or younger has ever received at least two doses of seasonal influenza they only need one dose this year.
 - This is regardless of whether the child received the two doses in the same influenza season or regardless of whether the doses contained H1N1 vaccine.



Case Study

Sheldon is a six year old patient who is in the clinic today to receive influenza vaccine. When reviewing his influenza vaccine history you find he got one flu vaccine in 2010 and one in 2014. How many doses does he need this year?



Six year old who received flu vaccine in 2010 and 2014

- A) He would need two doses as none of his previous doses were given in the same influenza season.
- B) He would only need one dose as the updated recommendation looks at doses ever given in a previous season.
- C) He would not be recommended to receive influenza vaccine.



Case Study Correct Answer

- A) He would need two doses as none of his previous doses were given in the same influenza season.
- **B) He would only need one dose as the updated recommendation looks at doses ever given in a previous season.**
- C) He would not be recommended to receive influenza vaccine.





Shipping label to be emailed

CHANGES TO VACCINE RETURNS

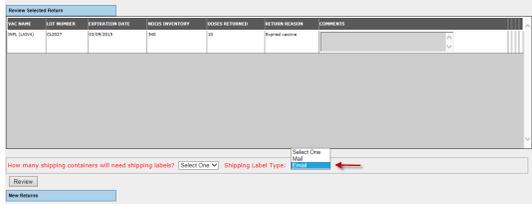


Email Shipping Label

- NDIIS now has the capability for providers to have their McKesson return shipping label emailed instead of mailed to their facility.
- Providers may have noticed this option in the return module already.
 - Have not sent out via email as we were waiting for CDC clarification on the email message that providers will receive.
- Will send out formal email instructions in the next week or so.



Email Capability



Email Capability, Cont.

- The label will be emailed to the primary contact listed on the provider demographics page of the Vaccine Ordering, Returns and Wastages Module.
- It is imperative that the email address is correct and contains no typos.
- The email address listed as the primary contact should receive the shipping label via email within 1-2 business days.



NDHS NDIIS Vtrcks Ordering System

Help

Provider Information | Provider Order | Provider Return | Provider Wastage

Provider

Provider: 1 - N D. DEPT OF HEALTH

Provider ID: 1

Facility Name: N D. DEPT OF HEALTH

Address Information

*Address: 1200 INDUSTRIAL DRIVE Address 2:

*City: BISMARCK *State: NORTH DAKOTA *Zip: 58503

Primary Contact Information

*First Name: ABBI *Last Name: BERG

*Phone: 701-328-2378 Ext:

*Fax: 701-328-2499 *Email: ALBERG@ND.GOV



UPS Return Label Delivery
 This notice tells you that a UPS shipper has sent you an electronic label.
 You can print and use this label to include in your cardboard shipment, or send it to the consignee. The label will be available for 30 days.
 Note: When retrieving your label below, we will provide you with both a UPS Return Label and Commercial Invoice if the invoice was prepared by the original shipper.

[View UPS Return Documentation Instructions](#)
[Retrieve Your Shipment Label](#) ←
[Schedule a Pickup](#)
[Get the Receipt](#)
[Find the Client Service Location](#)
[Find Out More About Retrieving Your Shipment](#)

- This is what the content of the email will look like.
- Providers should only click on the “Retrieve Your Shipping Label” hyperlink.
- If providers use the “Schedule a Pickup” hyperlink providers may accrue a charge for this service.
 - As always contact the Immunization Program if your facility needs to schedule a pickup.



Multiple Boxes to Return

- One unique return label will be included per email.
- Labels cannot be photocopied or reprinted for multiple uses.
- So if three boxes are indicated in the return, the contact will receive three emails, each containing a single return mailing label.
 - It does not matter which label is put on each of the three boxes for that specific return, because when the boxes are received, McKesson will be looking at the boxes altogether.





Healthy steps



Caring program



Medicaid expansion



More than one eligibility



INSURANCE COVERAGE REVIEW



Healthy Steps

- An insurance policy that covers State Children's Health Insurance Program (sCHIP) patients who are not eligible for Medicaid.
- Children who have insurance coverage through the Healthy Steps program are considered insured.
 - Non-universal local public health units (LPHUs) and private providers: give private vaccine and bill Healthy Steps for the price of the vaccine and administration fee.
 - Universal LPHUs: give state-supplied vaccine and bill Healthy Steps for the cost of the administration fee only.



Caring Program

- The Caring for Children Program no longer provides health or dental benefits to patients.
- These patients should have another form of insurance or they would be considered uninsured and therefore VFC-eligible.



Medicaid Expansion

- Medicaid Expansion is an insurance policy that covers adults who are not eligible for standard Medicaid.
- Medicaid Expansion does not cover children. Children who have parents on Medicaid Expansion will have separate standard Medicaid cards.
- Medicaid Expansion policy holders will have a Sanford Health insurance card.
 - Medicaid Expansion will be noted on the front of the card.



Medicaid Expansion

- Medicaid Expansion is required by the Affordable Care Act (ACA) to cover adult vaccinations at first dollar.
- Individuals who have the Sanford Medicaid Expansion health plan should receive private vaccine and the provider should bill Sanford Health for the cost of the vaccine and the administration fee.



More Than One Eligibility

- American Indian children with private insurance
- Patients with Medicaid and private insurance



American Indian Children with Private Insurance

- American Indian/Alaskan Native children are always VFC-eligible.
- VFC is an entitlement program and participation is not mandatory for an eligible child.
- For AI/AN children that have full immunization benefits through a primary private insurance, the decision to participate in the VFC program should be made based on what is financially most cost advantageous to the child and family.



American Indian Children with Private Insurance, Cont.

- Universal LPHUs: Administer VFC vaccine and bill insurance for the administration fee only. VFC eligibility in NDIIS should be "American Indian".
 - If insurance denies payment the client should be billed no more than \$20.99 per dose.



American Indian Children with Private Insurance, Cont.

- Non-universal LPHUs and private providers:
 - 1) Use private vaccine and bill insurance for the cost of vaccine and the administration fee.
 - NDIIS eligibility should be "Not Eligible".
 - If insurance denies payment the child is now eligible for VFC vaccine. NDIIS eligibility should be changed to "American Indian" and a dose of private vaccine has now been borrowed.
 - 2) Use VFC vaccine and bill insurance for the administration fee only.
 - NDIIS eligibility should be "American Indian".



American Indian Children with Private Insurance, Cont.

- If using VFC vaccine for an American Indian child who has insurance, the provider may bill insurance \$0 for the cost of vaccine and the private rate for the vaccine administration fee.
- However, if insurance does not fully cover the private vaccine administration fee, the provider cannot charge the patient or their parent more than the VFC vaccine administration fee cap.



Medicaid and Private Insurance

- **Option #1** – Universal LPHUs must use
- Providers can administer VFC vaccine and bill insurance only for the administration fee.
 - Providers must not bill insurance for the cost of vaccine.
 - Providers may choose to bill insurance at the private rate for the vaccine administration fee.
 - If the insurance company refuses payment, Medicaid can then be charged for the administration fee. As a precaution, Medicaid may not be billed more than the VFC vaccine administration fee cap.
 - NDIIS eligibility should be "Medicaid".
- The parent or child should never be charged more than the VFC vaccine administration fee cap.



Medicaid and Private Insurance,

Cont.

- **Option #2**
- A provider can administer private stock vaccine and bill the primary insurance carrier for both the cost of the vaccine and the administration fee.
 - NDIIS Eligibility should be listed as "Not Eligible".
- If the primary insurance pays less than the Medicaid amount for the vaccine administration fee, the provider can bill Medicaid for the balance of the vaccine administration fee up to the amount Medicaid pays for the administration fee.



Medicaid and Private Insurance,

Cont.

- **Option #2, cont.**
- If the primary insurance denies payment of vaccine and the administration fee, the provider may replace the privately purchased vaccine with VFC vaccine and bill Medicaid for the administration fee.
 - Eligibility in NDIIS should be changed to "Medicaid" and a dose of private vaccine has been borrowed.



Medicaid and Private Insurance, Cont.

- The parent/guardian of a child with Medicaid as secondary insurance must never be billed for a vaccine or an administration fee.
- Providers may be reimbursed a higher amount if privately purchased vaccine is administered and both the vaccine and administration fee are billed to the primary insurance.
- The deciding factor on which vaccine inventory to use should be based on what will be most cost effective for the family



Expiration dates



DATA LOGGER UPDATE



Data Logger Expiration Dates

- Depending on when the data logger was received from NDDoH the expiration date may differ.
- Expiration dates on FridgeTag™ or FreezerTag™ are either:
 - April 8, 2016
 - August 8, 2016
 - October 14, 2016
- Providers are responsible for replacing data loggers once they are expired.



Data Logger Expiration, cont.

- As of January 1, 2015 all storage units that contain VFC or state-supplied vaccine must have a data logger with a current certificate of calibration monitoring temperatures.
- When NDDoH-supplied data loggers expire providers must purchase data loggers to replace them.
- Providers received data loggers the first time as part of a one-time grant. They will not be provided by NDDoH again.



Other Data Loggers

- Back-up data loggers may have the same expiration as primary data loggers.
- Transport data loggers most likely expired in early June 2015.
 - If you have transport data loggers from NDDoH (VFC 5000™) please check their expiration and do not use until they have been recalibrated or replaced.





- Upcoming Lunch and Learn presenters
- CDC's pink book series
- 2016 North Dakota state immunization conference

UPCOMING EDUCATIONAL OPPORTUNITIES



Upcoming Lunch and Learns

- August – Child care and School Immunization Requirement Update
– Amy Schwartz
- September – NDIIS Update
– Mary Woinarowicz
- October – Adolescent Immunization Update
– CDC Subject Matter Expert



Upcoming Lunch and Learn, Cont.

- November – Frequently Asked Questions
– Miranda Baumgartner
- December – Addressing Vaccine Concerns
– Dr. Paul Carson, Sanford Health, NDSU
- January – Adult Vaccine Update
– Dr. L.J. Tan – Immunization Action Coalition



Pink Book Series

- Live webinar put on by CDC subject matter experts every Wednesday from 11-12 AM CST from July 8th – October 14th.
- Each week covers a different chapter of the pink book.
- All sessions will be archived for viewing at a later date.



Scheduled Webinars

Schedule
(all events begin at noon eastern)

Date	Content
July 8	Principles of Vaccination
July 15	General Recommendations — Part 1
July 22	General Recommendations — Part 2, and Vaccine Safety
July 29	Vaccine Storage & Handling and Administration
Aug 5	Immunization Strategies
Aug 12	Rotavirus and Hep A
Aug 19	DTaP /Tdap
Aug 26	Pneumococcal
Sept 2	Polio and Hib
Sept 9	Meningococcal
Sept 16	Measles, Mumps, Rubella
Sept 23	Influenza
Sept 30	HPV
Oct 7	Hepatitis B
Oct 14	Varicella and Zoster

<http://www.cdc.gov/vaccines/ed/webinar-epv/index.html>



Upcoming North Dakota State Immunization Conference

Save the Date

- The 2016 North Dakota State Immunization Conference will be held ~~August 4-5, 2016~~ at the Ramkota Hotel in Bismarck, ND.
- State immunization conferences are only held every other year so there will not be a state immunization conference in 2015.
- The immunization program welcomes ideas for topics or speakers.
 - Contact any member of the immunization program to give suggestions.



Type your question in the chat window to the right

After the presentation, questions may be sent to:

Molly Howell	mahowell@nd.gov
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Amy Schwartz	amschwartz@nd.gov
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Mary Woinarowicz	marywoinarowicz@nd.gov
Dominick Fitzsimmons	dfitzsimmons@nd.gov

Immunization Program :
701.328.3386 or toll-free 800.472.2180



Post-test

- Post-test
 - Nurses interested in continuing education credit, visit: <http://www.ndhealth.gov/disease/post/default.aspx?PostID=87>
 - Successfully complete the five-question post-test to receive your certificate.
 - Credit for this session is available until Tuesday, August 11, 2015.
 - This presentation will be posted to our website: www.ndhealth.gov/immunize.



Questions?