

MEETING TITLE: **Vaccine Advisory Committee (VAC) Quarterly Meeting**

DATE: **July 15, 2010**

LOCATION: **iLinc Session**

Attendees:

Janna Bardi
Lin Watson
Jan Hicks-Thomson
Jeff Wise
Vikki Davis
Dr. John Dunn
Christina Dettra
Margaret Wilson
Dr. Jenny Arnold
Betsy Hubbard
Lynette Wachholz
Chas DeBolt
Dr. Nancy Fisher
Dr. Kyle Yasuda
Diane Rousseau
Dr. Jeff Duchin
Dr. Ed Marcuse
Dr. Neil Kaneshiro

Representing:

Manager, Immunization Program CHILD Profile, DOH
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Washington State Association of Local Public Health Officers
Group Health Cooperative
Clallam County Health and Human Services
Health and Recovery Services Administration
Washington State Pharmacy Association
PHSKC
NAPNAP
Vaccine Preventable Diseases Epidemiologist, DOH
WA State Health Care Authority
American Academy of Pediatrics, WA Chapter
Community Health Leadership Forum
PHSKC
Consultant
American Academy of Pediatrics, WA Chapter

Guest:

Fred Potter
Katelin Nickel
Sherry Riddick

Executive Director, Washington Vaccine Association
CDC/CSTE Epidemiology Fellow, WA St. Department of Health
Manager, CHILD Profile Immunization Registry

Facilitator/Chair:

Maxine Hayes
Washington State Health Officer

Recorder:

Nicole Avelar
Immunization Program CHILD Profile, DOH

Discussion and Recommendations	Conversation, Decisions and Follow-Up
<p><u>Introductions, Welcome, and Changes to Agenda</u> <i>Maxine Hayes</i></p> <p>Introductions and Welcome:</p> <ul style="list-style-type: none"> ➤ DOH is still figuring out if the VAC will continue to meet remotely or get an exception from Office of Financial Management to meet in person. As soon as we know, you'll know. <p><u>Welcome Guest</u></p> <ul style="list-style-type: none"> ➤ Fred Potter Executive Director, Washington Vaccine Association <ul style="list-style-type: none"> • Fred Potter is an attorney from New Hampshire, where he was paramount in establishing a vaccine purchasing system with health insurers. He's now helping our state to do the same as the temporary executive director of the WVA. ➤ Katelin Nickel CDC/CSTE Epidemiology Fellow, WA St. Department of Health <ul style="list-style-type: none"> • Katelin Nickel has been doing her Epi fellowship here in WA since August of 2008 under the guidance of Chas DeBolt. Today she'll be reporting her project findings on CHILD Profile data and immunization rates. ➤ Sherry Riddick Manager, CHILD Profile Immunization Registry <ul style="list-style-type: none"> • Sherry Riddick manages the CHILD Profile registry –join us for Katelin's presentation to help answer any technical questions about the registry data. <p>Handouts: None</p> <p>Changes to the agenda: Move the influenza up in the agenda.</p> <p>Additional handouts:</p>	<p>All welcomed</p>

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<p><u>Conflict of Interest Declaration</u> <i>Janna Bardi</i></p> <p><i>Handouts: Vaccine Advisory Committee Conflict of Interest Policy 2008 (White)</i></p>	<p>Janna Bardi reviewed <i>Conflict of Interest Declaration</i></p> <p>None Declared</p>
<p><u>Updates</u> <i>Maxine Hayes/Jeff Duchin</i></p> <ul style="list-style-type: none"> ➤ Department of Health Administration <ul style="list-style-type: none"> ● On July 1, Allene Mares replaced Mary Wendt as the department's new Assistant Secretary of the Community and Family Health division. Allene has been with DOH since October 2008 as director of our Office of Public Health Systems Development. Allene has had a long distinguished career in local public health in Montana, Ohio, California, and Washington. As part of this work she has also established and managed community health centers. Allene is a nurse and has her Master's in Public Health. She has been active in state and national public health associations. On July 1st, Allene changed the reporting structure within CFH to have Janna Bardi and the Immunization Program CHILD Profile directly report to her. This is a change and will be good for addressing future immunization and vaccine. ➤ June 23-24 ACIP Meeting (Influenza Vaccine federal Health Care Reform). <ul style="list-style-type: none"> ● Much has been happening at the federal level. The ACIP was scheduled to vote on recommendations regarding flu vaccine – and discussed what national health care reform implies for immunization policy. Jeff Duchin will fill us in. <p><i>Handouts:</i></p>	<p>Christina Dettra: What is the information of the availability of H1N1 with our preservatives?</p> <p>Jan H-T: There will not be a separate H1N1 vaccine for the 2010 – 2011 season. An H1N1 antigen is included in the regular seasonal influenza vaccine for the coming season. DOH will be providing a variety of age appropriate preservative free seasonal influenza vaccines for kids less than 3 years of age and pregnant adolescents. 2009 H1N1 vaccine is no longer</p>

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	<p>available in a preservative free formulation and will be completely discontinued for ordering on July 30, 2010.</p> <p>Jenny Arnold: Will you be changing the doses for the elderly?</p> <p>Update: Fluzone High dose: No preferential recommendation from ACIP on Fluzone High Dose for persons 65 and older – from 8/6/2010 MMWR: A newly approved inactivated trivalent vaccine containing 60 mcg of hemagglutinin antigen per influenza vaccine virus strain (Fluzone High-Dose [sanofi pasteur]) <u>is an alternative</u> inactivated vaccine for persons aged ≥65 years. Persons aged ≥65 years can be administered any of the standard-dose TIV preparations or Fluzone High-Dose. Persons aged <65 years who receive inactivated influenza vaccine should be administered a standard-dose TIV preparation.</p> <p>Jeff Duchin: The ACIP discussed the final recommendations for the 2010-2011 flu vaccination season and those recommendations will be published soon. The recommendation for those 6 months – 9 years will include specifics on 1 or 2 doses needed related to the child’s history of seasonal flu vaccination and H1N1 vaccination.</p>

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<p><u>Washington Vaccine Association</u> <i>Fred Potter</i></p> <ul style="list-style-type: none"> ➤ WVA's executive director gave us a "101" course on this new association. In past meetings we've been discussing the WVA and what affect it may have on our VAC. Fred is here to bring us up to speed and, more importantly, VAC members have the chance to ask questions. ➤ Roles and Responsibilities ➤ Vaccine Selection Committee 	<p>There was also a presentation on health reform and discussion of the first dollar coverage requirement for private insurance and ACIP recommended vaccinations that is effective on September 23, 2010.</p> <p>Lin Watson: We received the website from the Wa commissioner and Jeff Wise will send that out to the VAC members on the ListServe.</p> <p>Jeff Duchin: How are the final decision made on the Vaccine Selection Committee?</p> <p>Ed Marcuse: By law, the Vaccine Selection Committee has 5 voting members which include a physician, three health plans and the Secretary of Health or designee. We are aiming for cross-representation between the VAC and the WVA Vaccine Selection Committee. The committee also includes a non-voting representative of the vaccine manufacturers. The committee makes</p>

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<p>➤ Other Major Issues</p> <p>Handouts:</p>	<p>recommendations to the WVA Board and the Board works with the department on the specific vaccines to be purchased.</p> <p>Jeff Duchin: Did you have any thoughts of involving the Immunization Action Coalition?</p> <p>Ed Marcuse: No. The coalition includes many pharmaceutical representatives and they have a Non-Voting member that represents them.</p>
<p><u>Purpose and Membership of VAC</u></p> <p><i>Maxine Hayes</i></p> <ul style="list-style-type: none"> ➤ Based on the discussion we just had about the roles and responsibilities of the WVA, Maxine wanted to revisit our ongoing topic about future roles of our VAC. Kyle Yasuda is in the process of convening a small workgroup (with Larry Jecha, Ed Marcuse, John Dunn, Nancy Fisher and Chas DeBolt) to examine roles further. In the meantime, Maxine wanted to collect anyone's thoughts now with this fresh in our minds. ➤ ISSUE: Although we don't have all the details, we know that national health care reform will require first dollar coverage of all ACIP recommend vaccine (effective six months after signing of the law, which is September of 2010). This is on top of the existing federal requirement that all VFC providers must follow ACIP guidelines. How might this affect the work of the VAC? <p>Handouts:</p>	<p>Ed Marcuse: I think what is so important is that the VAC is wide range of representation and serves as a forum for discussion amongst providers and stakeholders to immunizations. That rich discussion around vaccines and vaccine preventable diseases is important.</p> <p>Maxine Hayes: The VAC is concerned with implementation. Buying the vaccine is just one component of the problem. There are many other aspects that we need to work on together. We need these discussions and the work of the VAC to build the capacity to address challenges at all levels. The VAC will need to discuss how to implement health reform changes.</p>

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<p><u>Influenza Vaccine Ordering and Distribution</u> <i>Jan Hicks-Thomson</i></p> <ul style="list-style-type: none"> ➤ Jan HT presented an update about the seasonal childhood influenza vaccine supply and distribution, an overview of provider communications and information about seasonal childhood influenza vaccine in the first year of transition of financing of non-federal vaccines through the Washington Vaccine Association. <p>Handouts:</p>	<p>Jan Hicks Thomson gave presentation. See PowerPoint.</p> <p>Jeff Duchin: What's the estimated gap in the state purchasing of vaccine vs expected use?</p> <p>Jan Hicks-Thomson: The gap is estimated between 40,000 and 120,000 doses. It is extremely difficult to pin-point the exact amount of a gap between supply available through the state childhood vaccine program and the demand. The 2009 season was a banner year for influenza vaccination, and the state has secured an additional 60,000 more doses than last year for the upcoming season. Because we do not know the exact amount of vaccine privately purchased for children less than 19 years of age, it is difficult to know what the gap will be.</p> <p>Ed: What are we expecting for product availability and does local health have the information to share with providers?</p> <p>Jan Hicks-Thomson: We have not heard any concerns about production at this point in time. Overall, the state will be providing</p>

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	<p>490,000 doses of vaccine for kids less than 19 years of age. We will start the ordering process as soon as there is vaccine available at our distributor in an amount that can be allocated across the state equitably. We have shared information about Washington's pre-booked amount with LHJs and given them data to show influenza vaccine ordering by presentation and amount for 2009 by each provider in their jurisdiction and we have calculated an estimate of what will be available based on this years pre-book so that LHJs can help providers understand better whether or not to make or adjust a private purchase.</p> <p>Neil Kanashiro: regarding Pre-Booking – providers were told to cancel private purchase pre-books and now they are being told to adjust private purchase or make private purchases.</p> <p>Jan Hicks-Thomson: We realize this is going to be a challenging year for influenza because of the timing associated with influenza pre-booking, the transition to our new purchasing system, and a lack of private purchase data for projections. In light of those uncertainties, we've worked really hard to put together strategies to support influenza vaccination for Washington children. We are bringing as much influenza</p>

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	<p>vaccine into the state as possible and will work hard during the season to manage vaccine allocations among LHJs so vaccine in jurisdictions that do not need their full allocation can be made available to jurisdictions that need it. We will work with our national partners to do the same if we can. We've worked really hard with the WVA and the health plans to try to put a structure in place that "does no harm," to the provider or their patients. Given the number of manufacturers in the market it seems likely that influenza vaccine will be available for providers to purchase if they need it. These strategies are intended to make the best of the situation this year, and our plan is to have the influenza vaccine purchasing figured out for our new system before the pre-booking starts for 2011 – 2012.</p>
<p><u>Epi Analysis of CHLD Profile Immunization Registry Data</u> <i>Katelin Nickel</i></p> <ul style="list-style-type: none"> ➤ Katelin presented (via ppt) immunization coverage data that she calculated using CHLD Profile Immunization Registry, and she used the National Immunization Study immunization coverage estimates as a comparison. This analysis represents a first step towards taking advantage of the wealth of information housed in the immunization registry for public health analysis and assessment purposes. <p><i>Handouts:</i></p>	<p>Katelin Nickel gave presentation. See PowerPoint.</p>
<p>THE NEXT VAC MEETING DATE: TO BE ANNOUNCED LOCATION TO BE ANNOUNCED</p>	
<p><u>Agenda Suggestions for Upcoming Meetings</u></p>	

