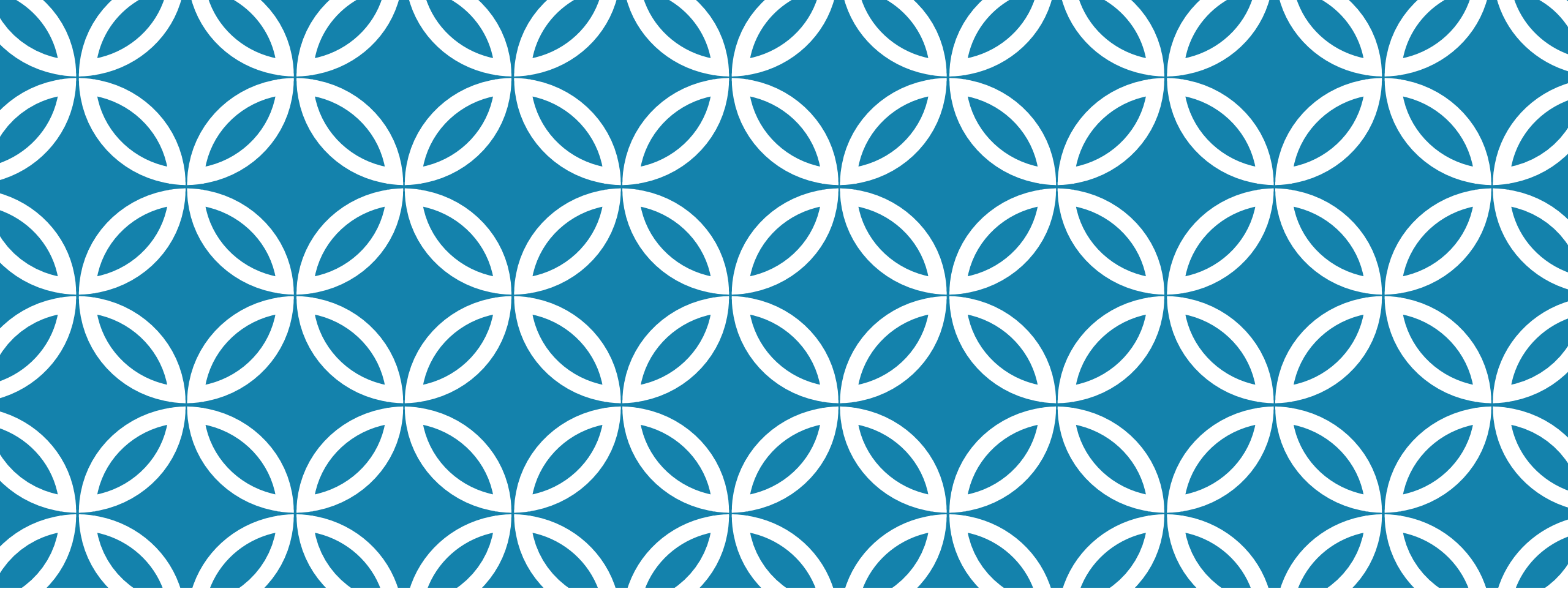




TURNING KNOWLEDGE INTO ACTION: WHERE ARE WE GOING? HOW DO WE GET THERE?

Rebecca Vanucci
Immunization Outreach Coordinator
Adult Immunization Conference
April 10, 2018

VANUCCI DISCLOSURE

I, Rebecca Vanucci, have been asked to disclose any significant relationships with commercial entities that are either providing financial support for this program or whose products or services are mentioned during my presentations.

- *I have no relationships to disclose.*

I may/will discuss the use of vaccines in a manner not approved by the U.S. Food and Drug Administration.

- *But in accordance with ACIP recommendations.*

ROADMAP





WHERE ARE WE? IMMUNIZATION RATES

Know where you are before you
plan what to do next

MA ADULT VACCINATION RATES

Vaccine/Group	2014	2015	2016	US 2016
Tdap ≥ 18 yrs	41%	35%	39%	27% [†]
Zoster ≥ 60 yrs	39%	44%	44%	33%
HPV females 18-26 yrs (1+ doses)	64%	71%	60%	49% [§]
HPV females 18-26 yrs (3+ doses)	79%*	78%*	84%*	N/A
HPV males 18-26 yrs (1+ doses)	38%	38%	27%	14% [§]
HPV males 18-26 yrs (3+ doses)	N/A	47%*	N/A	N/A
Influenza vaccine ≥ 65 yrs	58%	61%	57%	70%
Pneumococcal vaccine ≥ 65 yrs	72%	73%	76%	67%

*Percent of those who received at least 1 dose.

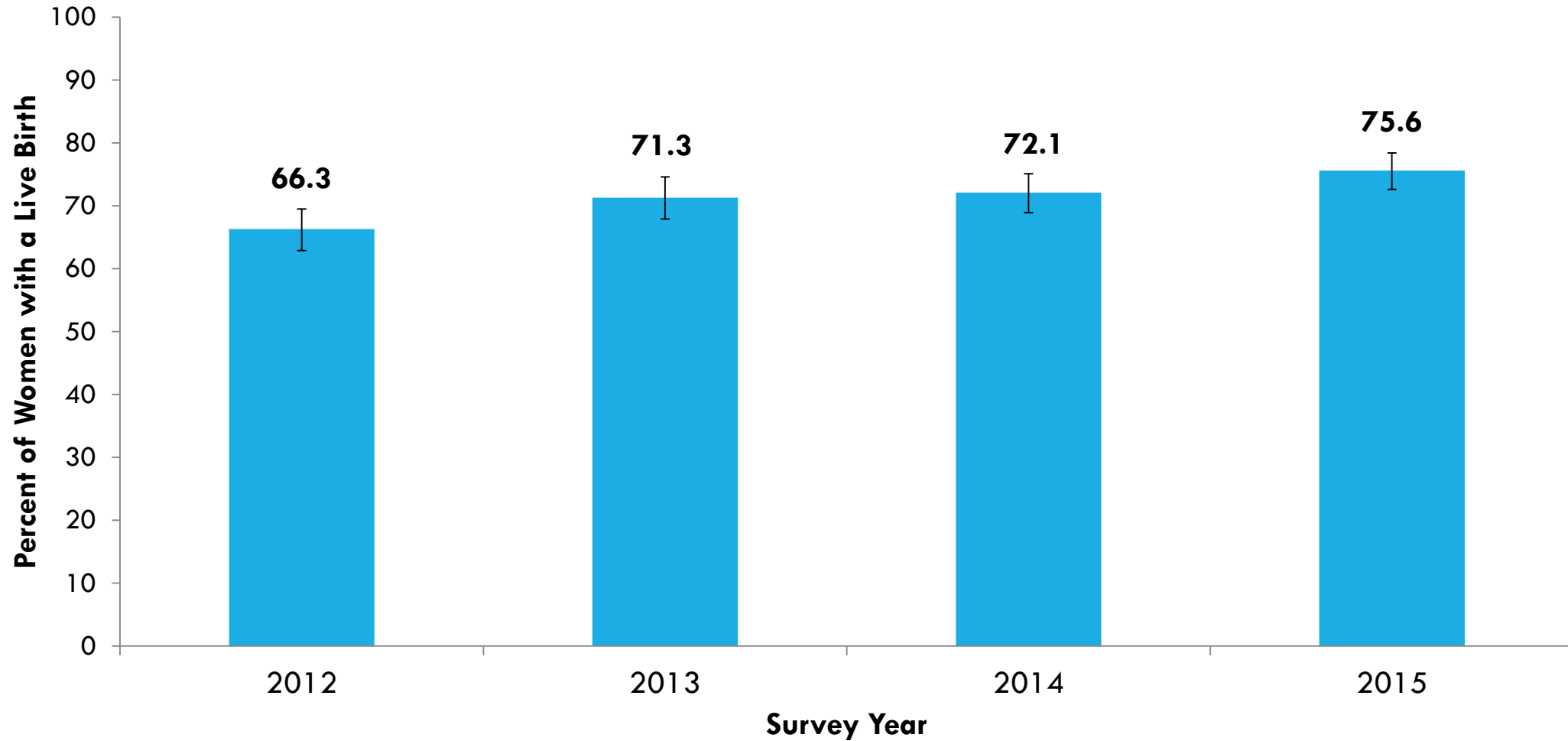
[†]US NHIS data for Tdap is for adults ≥ 19 years old.

[§]US NHIS data for HPV (at least 1 dose) is for adults 19-26 years old.

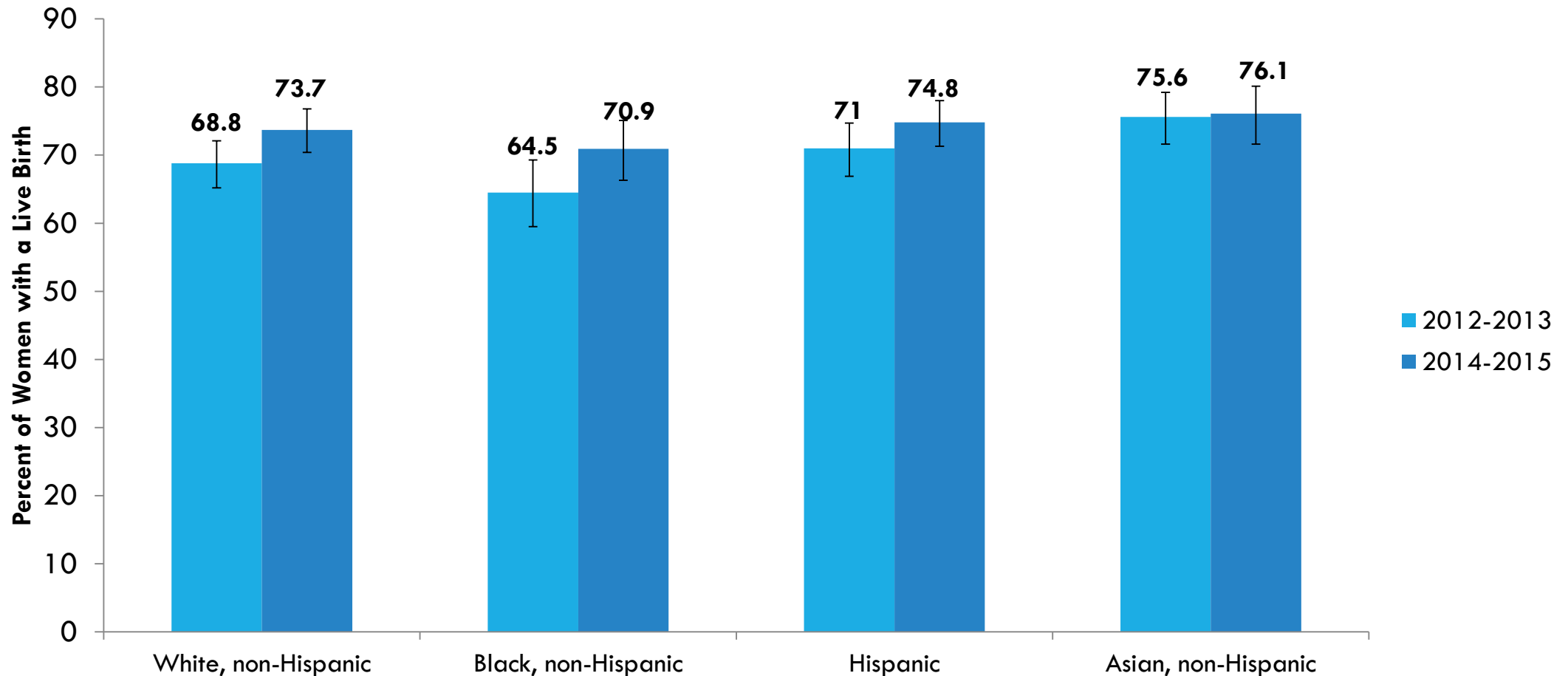
MA FLU VACCINATION RATES

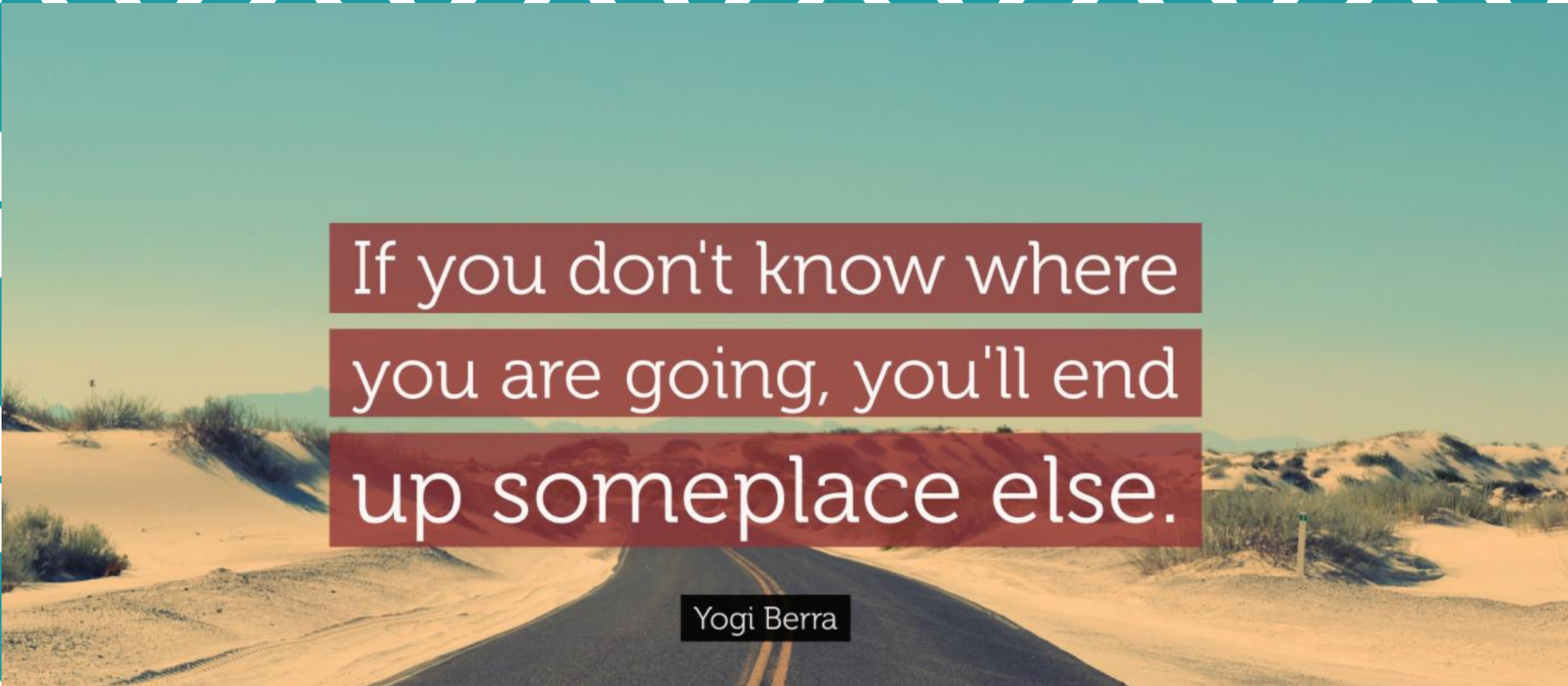
	MA 2015-16	MA 2016-17	US 2016-17
Everyone 6 mos+	50%	50%	47%
Children 6 mos – 17 yrs	75%	72%	59%
○ Children 6 mos – 4 yrs	85%	82%	70%
○ Children 5 – 12 yrs	79%	71%*	60%
○ Adolescents 13 – 17 yrs	63%	65%	49%
Adults 18 +	44%	45%	43%
○ Adults 18 – 64 yrs	40%	41%	38%
○ Adults HR 18 – 64 yrs	48%	49%	46%
○ Adults 50 – 64 yrs	46%	47%	45%
○ Adults 65+	60%	59%	65%

INFLUENZA VACCINATION, PRAMS, 2012-2015



INFLUENZA VACCINATION BY RACE/ HISPANIC ETHNICITY, PRAMS, 2012-2015



A photograph of a desert landscape with sand dunes and a road. Overlaid on the image are three red rectangular boxes containing a quote in white text. The quote is: "If you don't know where you are going, you'll end up someplace else." Below the quote, in a small black box, is the name "Yogi Berra".

If you don't know where
you are going, you'll end
up someplace else.

Yogi Berra

HOW ARE WE GOING TO GET THERE? PROJECTS AND PARTNERS

Turning Knowledge into Action



Immunization Program Goal



HEALTHY COMMUNITIES FULLY VACCINATED TO REDUCE VPD MORBIDITY AND MORTALITY

It Takes a Village to
Vaccinate!

HOW ARE WE DOING THIS?



MA ADULT IMMUNIZATION COALITION (MAIC)



MAIC is a collaborative partnership dedicated to increasing adult immunization through education, networking, and sharing innovative and best practices.

There are currently over 200 members representing:

- Local and state public health organizations
- Community health centers
- Health insurance plans
- Pharmacies
- Physicians
- Vaccine manufacturers
- Long-term-care and senior service organizations
- Consumer advocacy groups
- Hospitals
- Home health
- College health services

Next meeting!

Monday, June 4th 1:30pm at
Massachusetts Medical Society

Sign up at the MMS table today or
learn more at <http://maic.jsi.com/>

MIIS

2011

Total Sites: 9
Total Patients: 3,902
Total Shots: 69,505

2013

Total Sites: 341
Total Patients: 1,539,629
Total Shots: 7,303,293

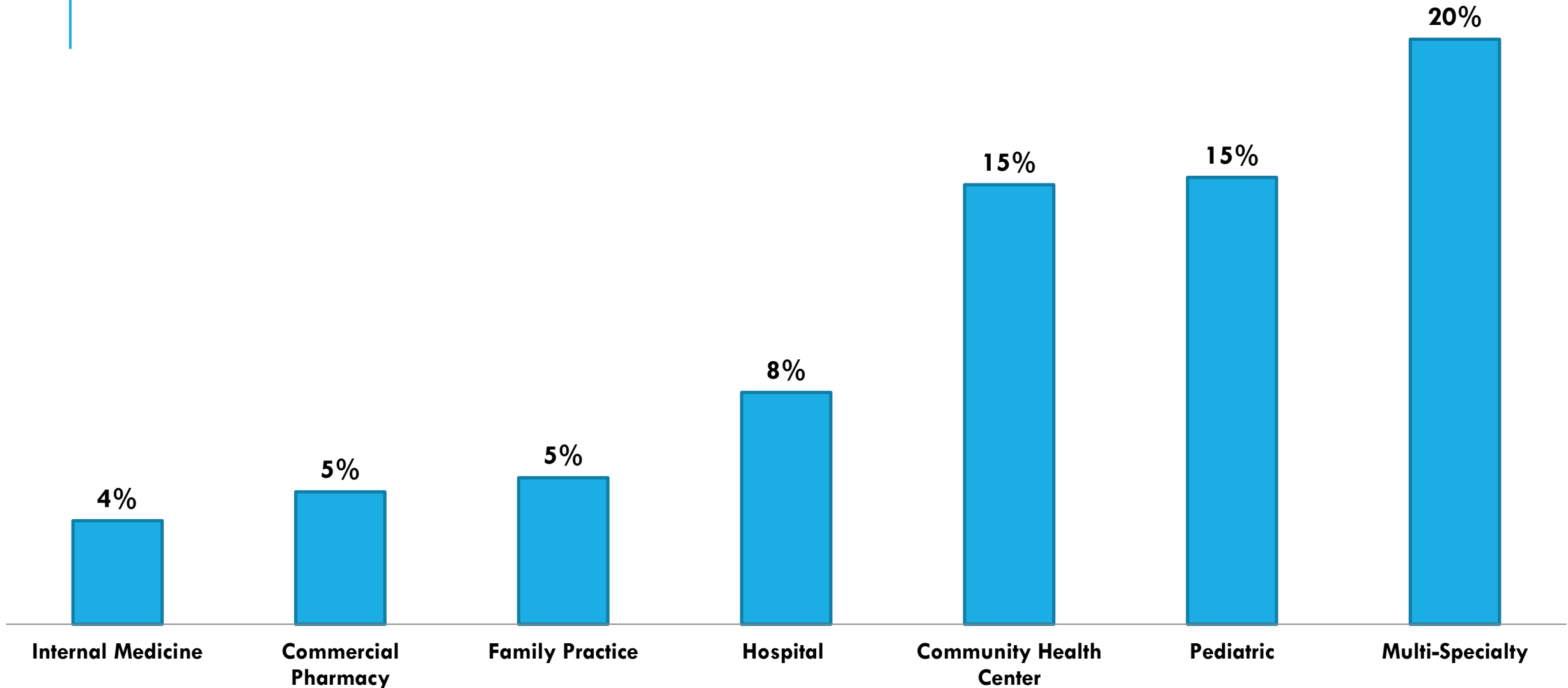
2015

Total Sites: 1,121
Total Patients: 4,427,623
Total Shots: 33,334,571

March 2018

Total Sites **2,280**
Total Patients **6,413,949**
Total Shots **48,668,309**

MIIS IMMUNIZATION DATA BY PROVIDER TYPE



ADULT STANDARDS

Call to action for healthcare professionals for **evidence-based** activities

- **Assess** immunization status of all patients in every clinical encounter.
- Strongly **recommend** vaccines that patients need.
- **Administer** needed vaccines or **refer** to a vaccinating provider and confirm receipt
- **Document** vaccines received by patients, including entering immunizations into immunization registries.

Immunizing Adult Patients: New Standards for Practice

Your patients trust you to give them the best advice on how to protect their health. Vaccine-preventable diseases can result in serious illness, hospitalization, and even death. Make adult immunization a priority.

1 Vaccine Needs Assessment
A Series on Standards for Adult Immunization Practice

2 Vaccine Recommendation
A Series on Standards for Adult Immunization Practice

3 Vaccine Administration
A Series on Standards for Adult Immunization Practice

4 Vaccine Referral
A Series on Standards for Adult Immunization Practice

5 Vaccine Documentation
A Series on Standards for Adult Immunization Practice

NEW Standards for healthcare professionals not... are published by the Centers for national medical

Since patients can get their vaccines from many different healthcare professionals, assessing current vaccination status for patients can be challenging but it is very important.

Keep an up-to-date record of the vaccines your patients have received to make sure they have the best protection against vaccine-preventable diseases.

To ensure patients get the vaccines they need and to prevent unnecessary vaccination, you should:

- Record vaccination in patients' medical records
- Provide documentation of vaccines received to patients for their personal records
- Document vaccinations in immunization information systems (IIS)

IIS are confidential, community-wide, computerized databases that record vaccines administered by participating healthcare professionals. Documenting vaccines into IIS can benefit your practice by:

- Consolidating vaccination records for your patients
- Helping you assess your patients' immunization status
- Making sure your patients have completed necessary vaccine series (for example, all three doses of hepatitis B vaccine)
- Reducing chances for unnecessary doses of vaccine or missed opportunities to provide vaccines
- Facilitating use of reminder and recall notifications to send to patients
- Making calculation of your office's immunization coverage rates easier

For more information on how to access IIS, contact your state coordinator. (See back for details.)

Even if you do not administer vaccines in your office, follow up with your patients to ensure they received the recommended vaccines from another immunization provider.

Information Series for Healthcare Professionals
www.cdc.gov/vaccines/adultstandards

U.S. vaccination rates for adults are extremely low.

For example:

- Only 14% of adults 19 years or older have received Tdap vaccination.
- Only 20% of adults 60 years or older have received zoster (shingles) vaccination.
- Only 20% of adults 19 to 64 years old, at high risk, have received pneumococcal vaccination.
- Only 41% of adults 18 years or older had received flu vaccination during the 2012-2013 flu season.

Sources: NHIS, 2012 (AHRQ 2014); CDC NHIS, 2012-2013 (www.cdc.gov/flu/season/); Behavioral

For resources and tips on vaccine assessment, recommendation, administration, and referral, visit: www.cdc.gov/vaccines/adultstandards

DON'T WAIT. VACCINATE!

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

COMMONWEALTH MEDICINE BILLING

For 10% fee, CHCF at Commonwealth Medicine electronically bills the participating plans and distributes payments to public providers

- 10 private health plans and MassHealth participate

Cities and towns can bill contracted plans for the:

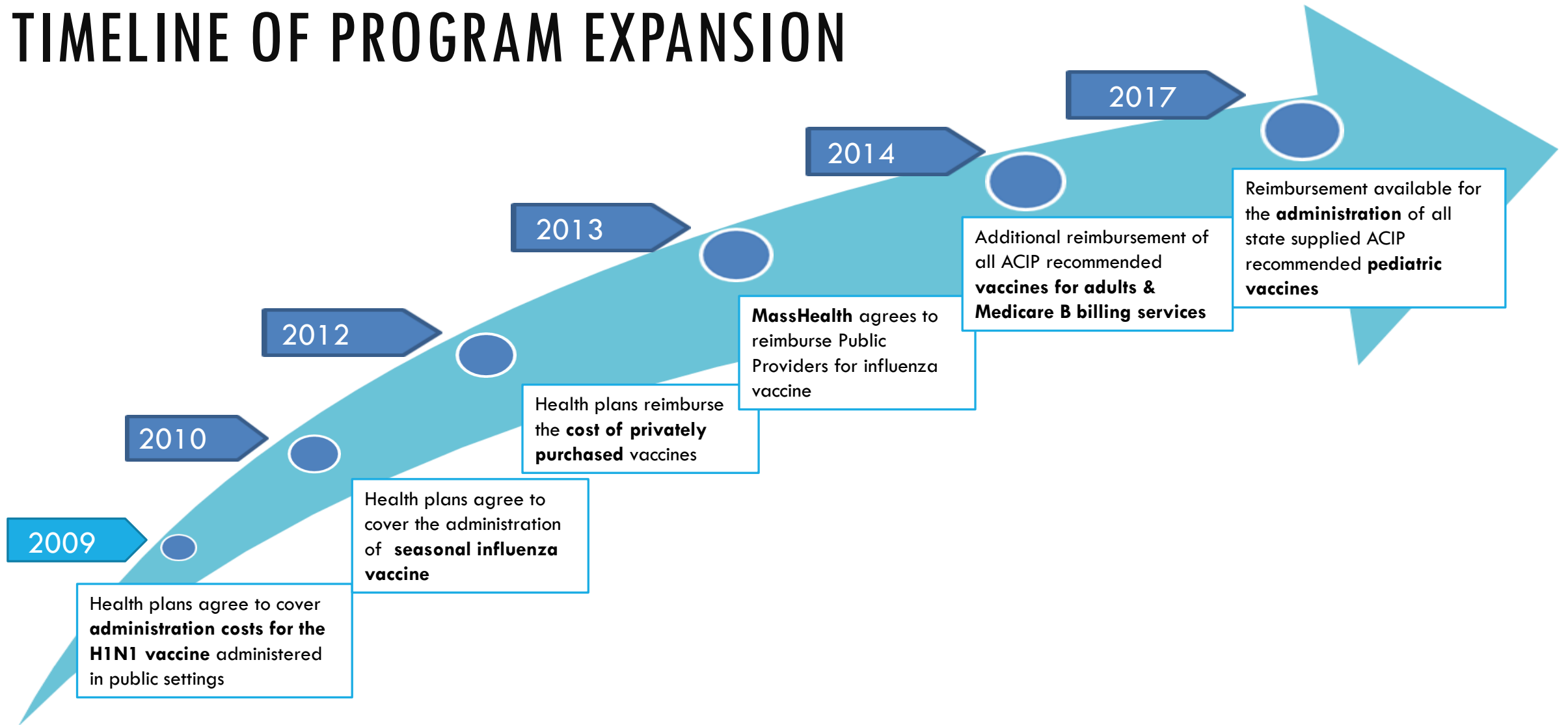
- Administration of all state-supplied vaccine to individuals ages 6 months and older
- Cost of purchasing and administering all recommended vaccines to adults for private health plans
- Cost of purchasing and administering influenza and pneumococcal vaccines to Medicare Part B
- 175 public sector providers across the state participate, representing 214 out of 351 towns in MA

> **\$2.5 million reimbursed to communities last flu season**



Center for Health Care Financing
a Commonwealth Medicine center of distinction

COMMONWEALTH MEDICINE: TIMELINE OF PROGRAM EXPANSION

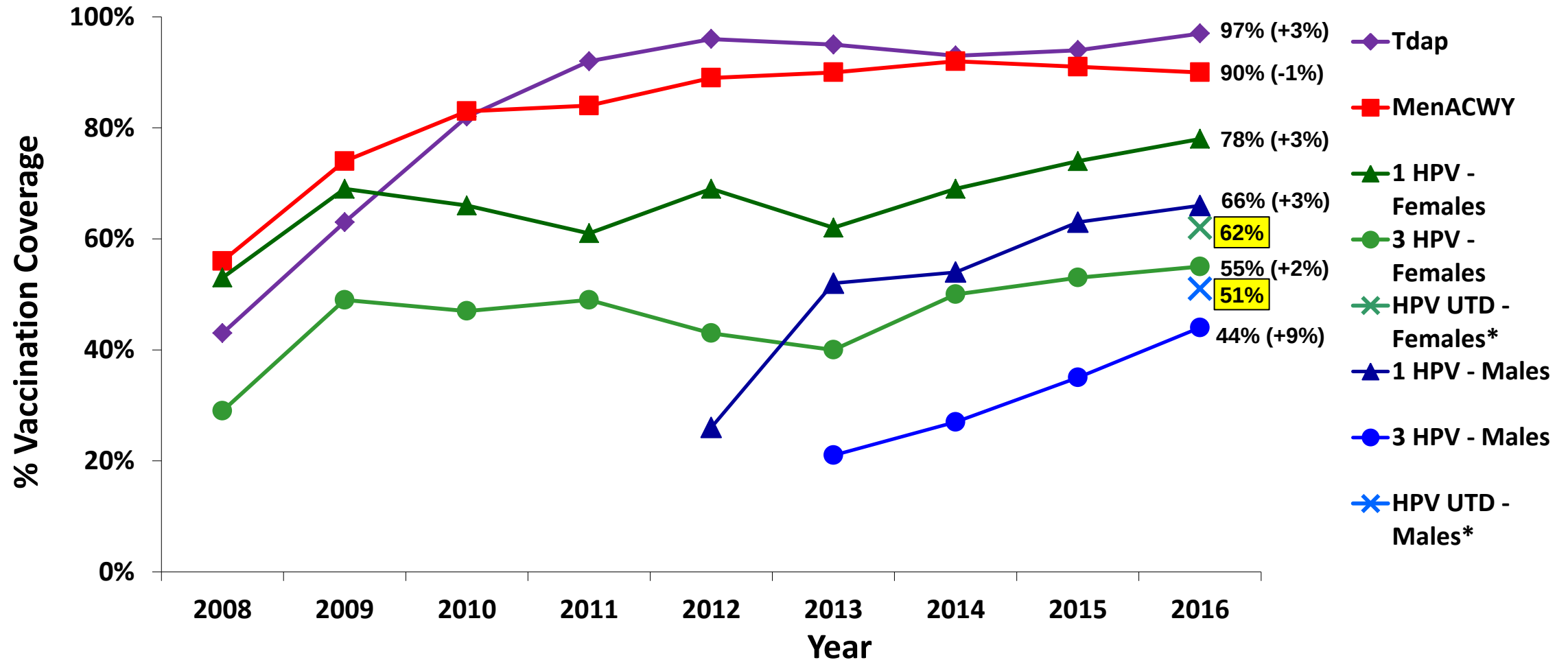




HPV INITIATIVE

A Case Study of Using Data to Inform Projects

ESTIMATED VACCINATION COVERAGE WITH TDAP, MCV4, AND HPV AMONG ADOLESCENTS 13-17 YEARS, MA 2008 – 2016



ESTIMATED VACCINATION COVERAGE WITH HPV AMONG ADOLESCENTS 13-17 YEARS OF AGE, MASSACHUSETTS, NIS 2015 VS 2016

	Females		Males	
	2015	2016	2015	2016
1+ HPV	74%	78% (+4%)	63%	66% (+3%)
2+ HPV	63%	68% (+5%)	51%	59% (+8%)
3+ HPV	53%	55% (+2%)	35%	44% (+9%)
HPV UTD*	N/A	62%	N/A	51%

*2 doses if the first dose given before the 15th birthday and doses were separated by five months, otherwise, 3 doses

CANCERS ATTRIBUTABLE HPV PER YEAR, U.S., 2010–2014

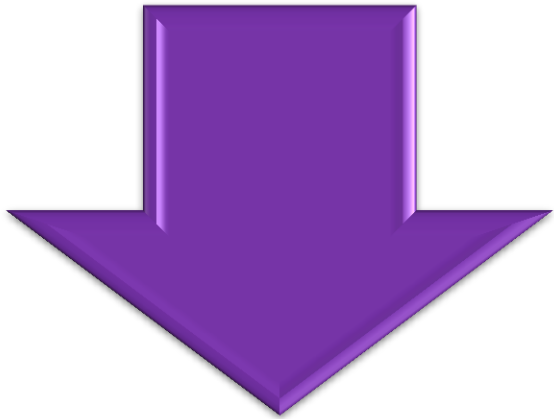
Cancer site	Percentage of HPV cancers attributable to HPV	Number of HPV cancers attributable to HPV		
		Female	Male	Both Sexes
Cervix	91%	10,600	0	10,600
Vagina	75%	600	0	600
Vulva	69%	2,600	0	2,600
Penis	63%	0	800	800
Anus*	91%	3,800	1,900	5,700
Oropharynx	70%	2,100	10,100	12,200
TOTAL		19,700	12,800	32,500

*Includes anal and rectal squamous cell carcinomas

CDC, National Program of Cancer Registries and the NCI Surveillance, Epidemiology and End Results Program, <https://www.cdc.gov/cancer/hpv/statistics> and Saraiya M et al. J Natl Cancer Inst. 2015;107:djv086



Increase HPV
vaccination rates



Decrease HPV-
related cancer



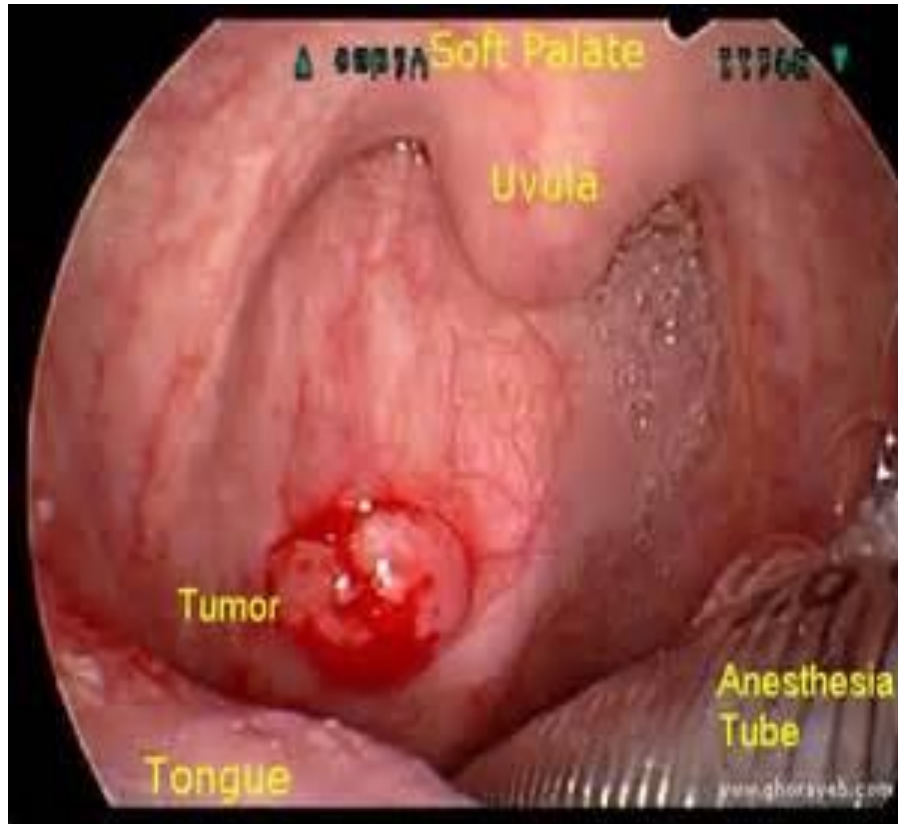
**HPV vaccine
is
cancer prevention.**



Massachusetts Department
of Public Health

www.mass.gov/dph/HPVvax

HPV-RELATED OROPHARYNGEAL CANCER



<http://www.ghorayeb.com/OropharyngealCarcinoma.html>

12,200 cases annually, 10,100 in men

Has surpassed cervical cancer as the **most common HPV related cancer**

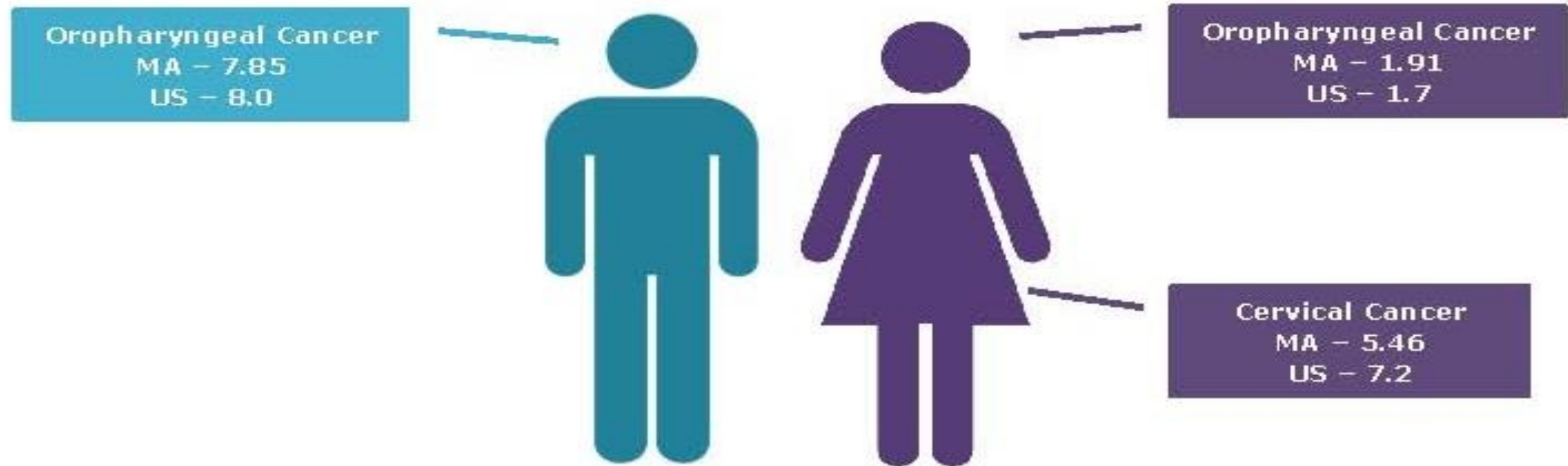
HPV-related cancers increased by **225%** in the past 20 years

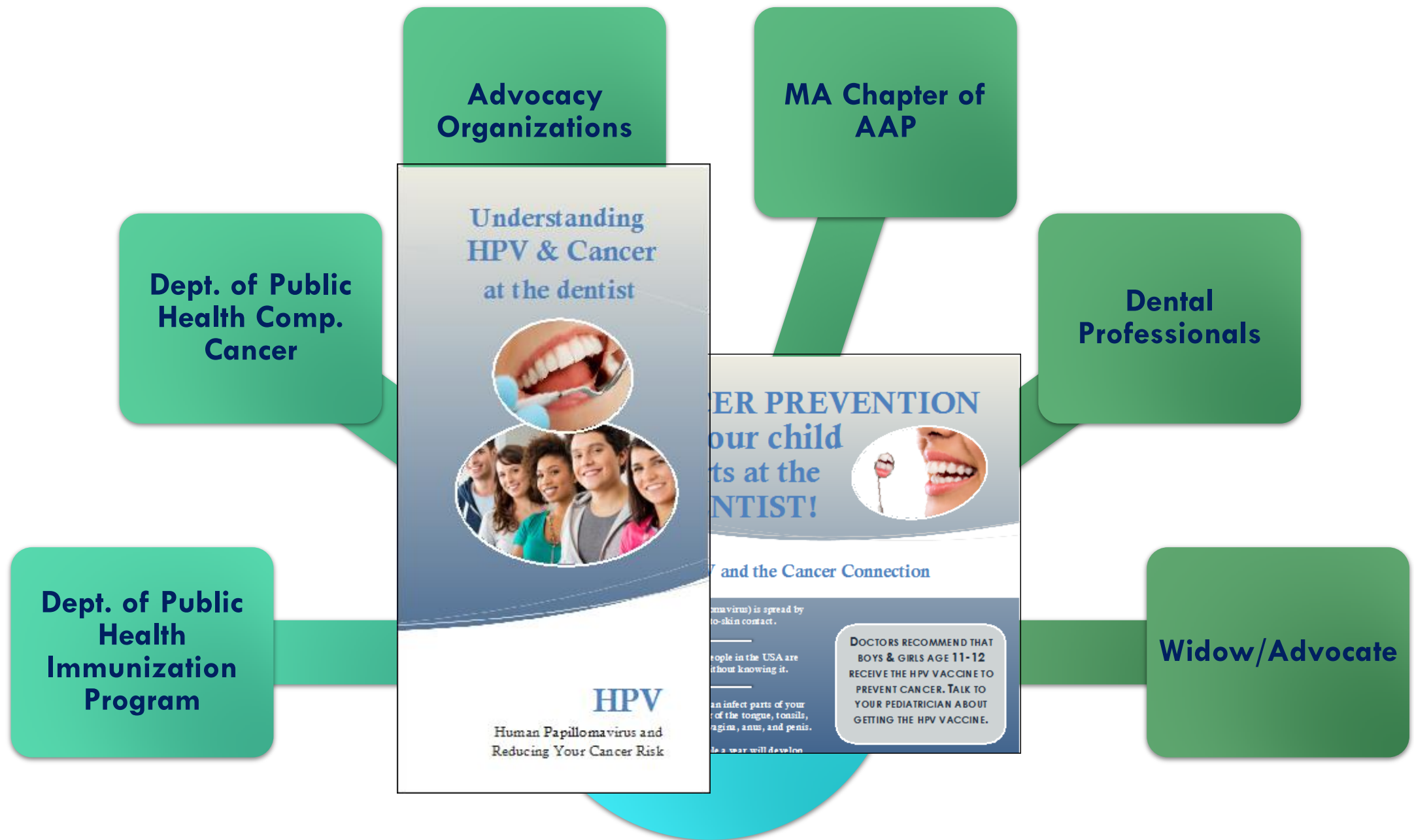
Rise in incidence and changing patient demographics due to HPV

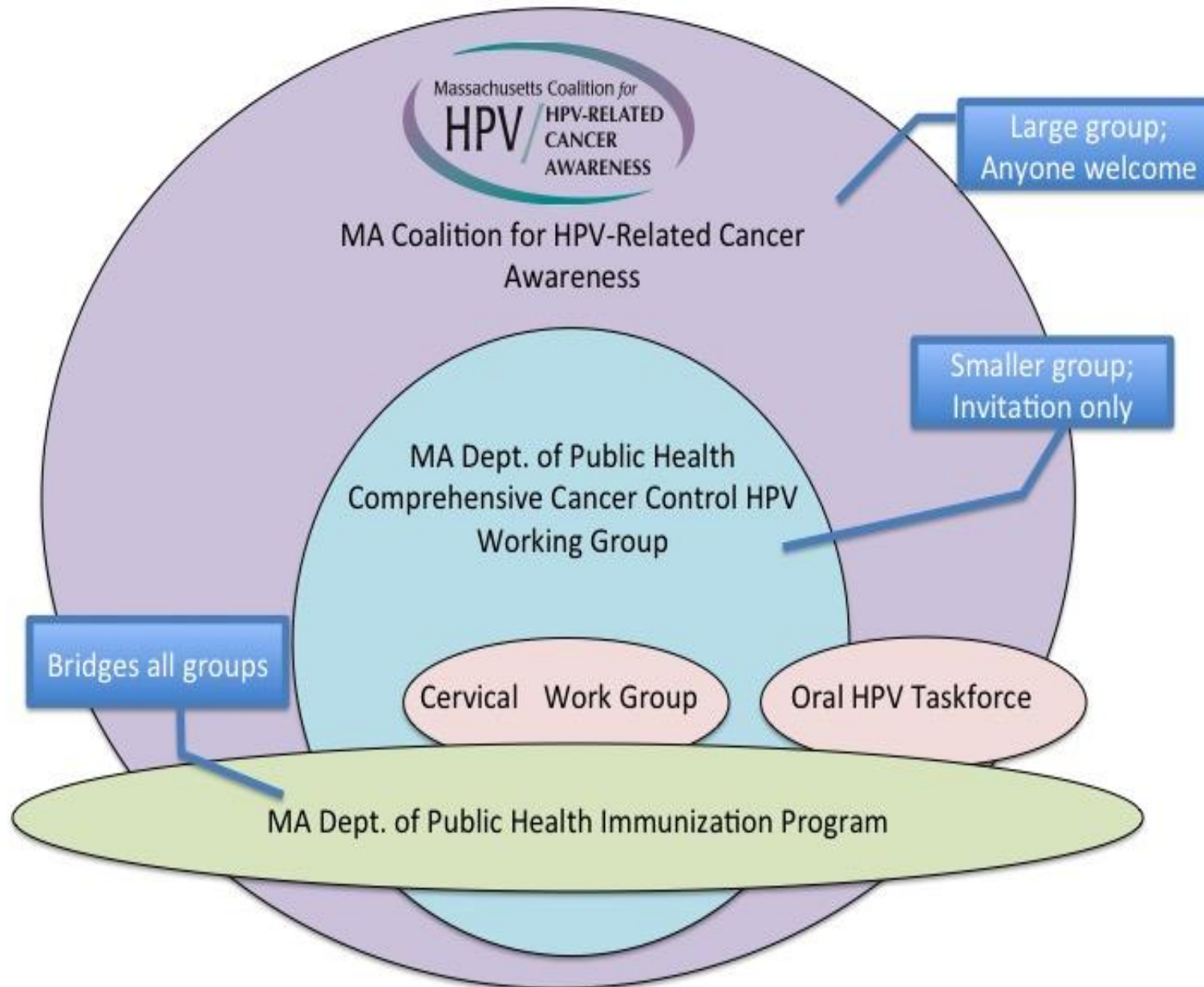
No screening test

- No endpoint in clinical trial
- Late stage diagnosis

MASSACHUSETTS HPV CANCER INCIDENCE COMPARED TO US HPV CANCER INCIDENCE







Meeting today!

After the conference in Westborough Room.
All are welcome!



RESOURCES

NEW IMMUNIZATION PROGRAM WEBSITE

Imm

We are com
citizens by

Vaccine information for adults

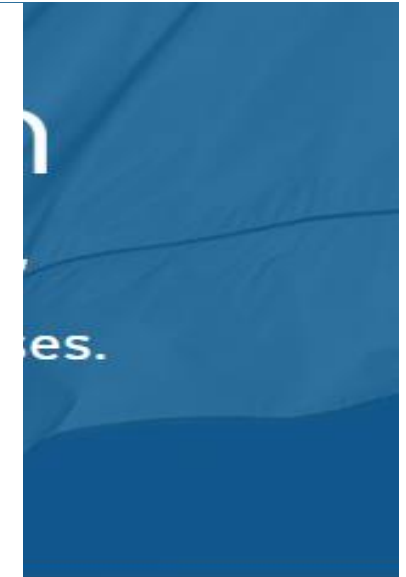
The need for vaccinations does not end in childhood. Vaccines are an important step in protecting adults against several serious and sometimes deadly diseases.

You may not realize that you need vaccines throughout your life. Adults need to keep their vaccinations up to date because immunity from childhood vaccines can wear off over time. You are also at risk for different diseases as an adult. Vaccination is one of the most convenient and safest preventive care measures available.

All adults need:

- [Influenza \(flu\)](#) vaccine every year
- [Td](#) or [Tdap](#) vaccine

<https://www.mass.gov/immunization-program>

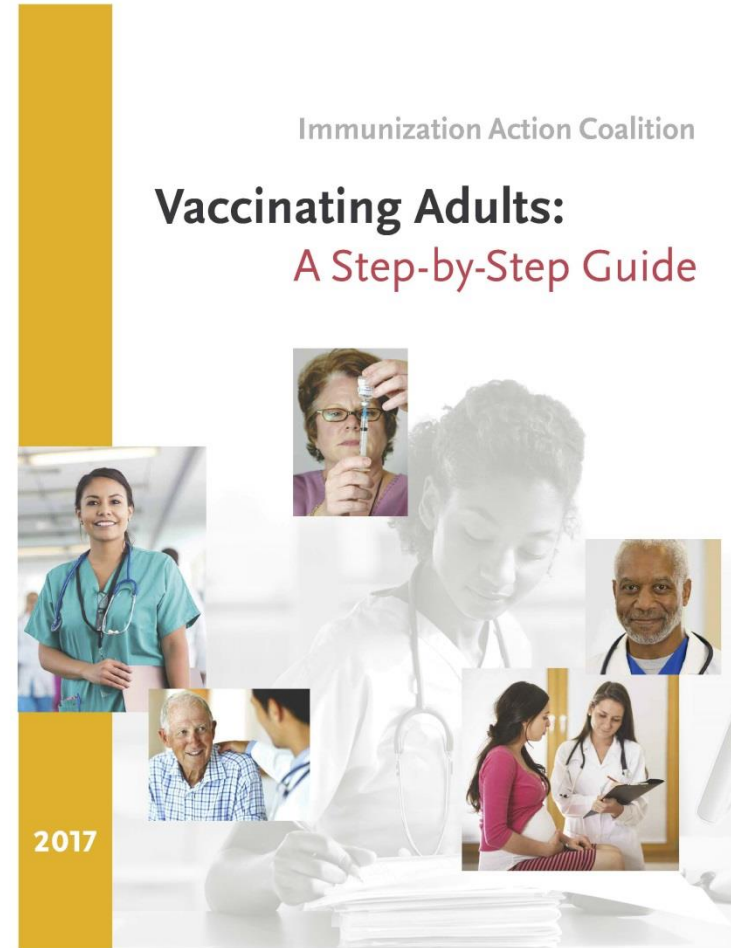


nd only to
ated 322
eir
eases.

IMMUNIZATION ACTION COALITION'S NEW GUIDE

Comprehensive
“How-To” guide with
current information
and resources

<http://www.immunize.org/guide/>

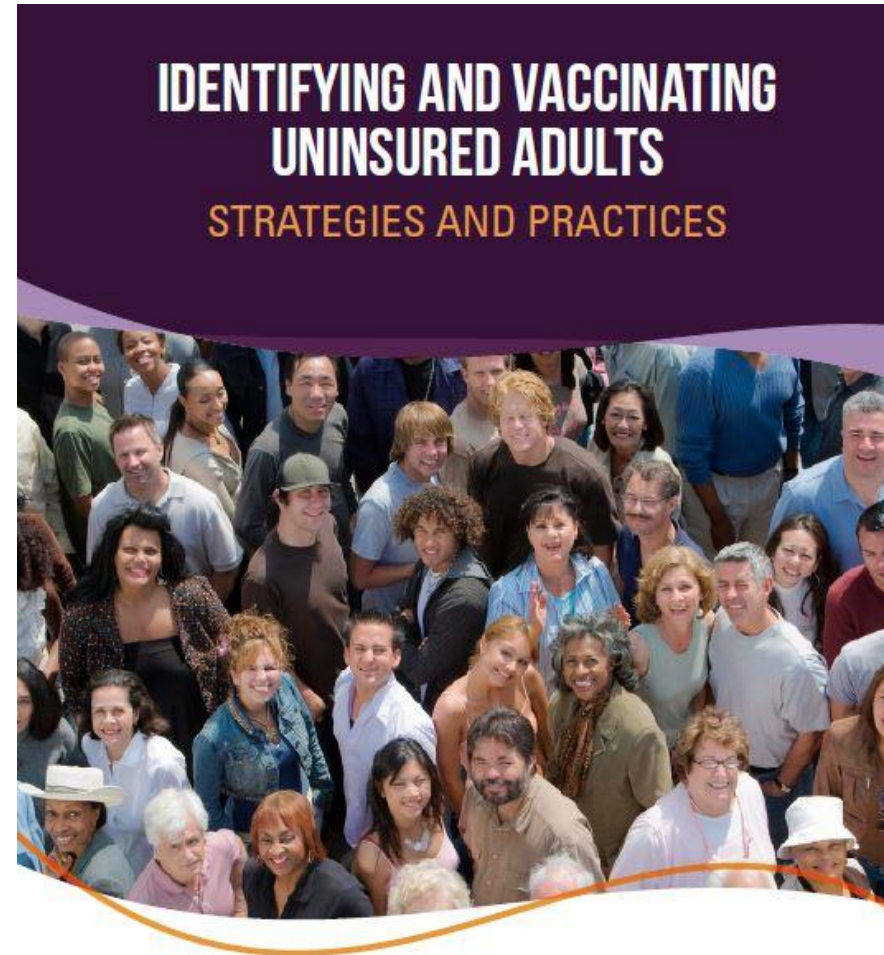


ASTHO GUIDE FOR VACCINATING UNINSURED ADULTS

Guide to assist state and local immunization programs and their partners in identifying and vaccinating uninsured and underinsured adults.

Massachusetts was featured in the guide

- Immunization Program
- Kitty Mahoney of Framingham



CDC PRENATAL TOOLKIT AND ACOG PARTNERSHIP

CDC created an online toolkit (<https://www.cdc.gov/vaccines/pregnancy/hcp-toolkit/index.html>) to help prenatal care providers increase the rates of maternal immunization.

1. Why Maternal Vaccines are Important
2. Implementation Resources
3. Maternal Vaccination Information

MDPH continues to collaborate with ACOG on their 3 year grant to increase immunization rates for pregnant and non-pregnant women in CA and MA.

1. Utilization of MIIIS
2. Connection to Adult Vaccination Resources
3. Newsletters and Trainings

NEW HPV MATERIALS FROM NATIONAL HPV ROUNDTABLE

[HTTP://HPVROUNDTABLE.ORG/ACTION-GUIDES/](http://HPVROUNDTABLE.ORG/ACTION-GUIDES/)



**Cancer Prevention
HPV Vaccination
Practice:**
Physicians
and Nurses



**Cancer Prevention
HPV Vaccination
Practice:**
Nurses and



**Cancer Prevention
Through HPV
Vaccination:**
An Action Guide for
Health Care Providers



**Cancer Prevention
Vaccination
Practice:**
An Action Guide for
Administrative Staff



**Cancer Prevention
Through HPV
Vaccination:**
An Action Guide for
Health Care Providers



**Cancer Prevention
Through HPV Vaccination:**
An Action Guide for Small
Private Practices





QUESTIONS?

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Immunization Outreach
Coordinator

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617-983-6534

