

Immunization Program Teleconference Minutes

Date: July 18, 2012

Present-Lisa Wordeman, Robert Grenwelge, Jude Serrano, John Anderson, Karoleigh Cassel, LaChel May, and Kathy Strang

Facilitator – Lisa Wordeman, Immunization Program Manager

Minutes submitted by Karoleigh Cassel, Immunization Program Administrative Specialist

Immunization Program Updates-Lisa

- The Immunization Program has applied for a federal grant to help implement vaccine billing, particularly in public health nursing offices but may be expanded into private sector as well. The Immunization Program will find out within the next few months whether or not the grant has been awarded.
- As Lisa has transitioned into her new role as Immunization Program Manager, her position as Vaccine program Specialist was left vacant. The Immunization Program is happy to announce that Jude Serrano has started as the new Vaccine Program Specialist. She has hit the ground running and picked up the processes very quickly. If providers have any vaccine program questions, they can contact her at jude.serrano1@wyo.gov or 307-777-2413.
- The Immunization Program thanks providers for their patience in the transition to VTrckS. We have successfully transitioned to the new system and have seen minimal problems.

Clinical Updates-Lisa (on behalf of Diana Martin and Val Koch, who are out of the office)-

ACIP Meeting Notes from June 20-21, 2012:

- Pneumococcal Vaccines - There has been a decline in cases of pneumonia since the introduction of PCV13
- PPSV23 in Immunocompromised Persons – A second dose of PPSV23 is recommended 5 years after the first dose for individuals 19-64 years of age.
- PCV13 use in Immunocompromised Adults – Benefits outweigh the risks. Data supports a dose of PCV13 then a dose of PPSV23 at least 8 weeks later. In adults who have already received a dose of the PPSV23, a dose of PCV13 should be administered 1 year later. A more complex schedule may be recommended.

- Flu Vaccines – H3N2 was the predominant influenza strain in the 2011-2012 flu season. The 2011-2012 season was the lowest and shortest peak season on record. Vaccine strains for 2012-2013 include:
 - A/California H1N1 like
 - A/Victoria H3N2 like (NEW, replaces A/Perth)
 - B/Wisconsin (NEW, replaces B/Brisbane)
 Quadravalent LAIV will be available beginning 2012-2013 season.
- MMRV – Proquad (MMR/Varicella combination vaccine) looks to be returning in October 2012.
- HibMenCY – MenHibrix 4-dose series, given at 2, 4, 5, 6, and 12-15 months. Some children are protected after 2 doses are given.

WyIR Updates-John

- Statistics – 550,000 patients are in the registry, just over 5,310,000 vaccines have been entered into the registry, 140 providers are currently active in registry, and there are 822 active users.
- WyIR annual enrollment goes through the end of the month. 30% of providers have completed enrollment. The new WyIR enrollment process is to be completed online, signed with a digital I.D. and agreements cannot be faxed in. The reason is that anytime changes are made to the contract, it has to be routed again for signatures, which is very time-consuming. With the new electronic WyIR enrollment, the process is much quicker. The Immunization Program may also look at combining the VFC/WyVIP enrollment with the WyIR enrollment in the near future.

There were some issues with saving the agreements due to 4 digit zip code errors. John is working on updating all the instruction guides for enrollment, which, once approved, will be posted to the immunization website www.immunizewyoming.com.

Vaccine Program Updates-Lisa

- Pentacel shortage – Allocations for Pentacel have fallen 400 doses short of what the Immunization Program typically receives, due to a shortage. The Vaccine Program has had to cut some orders. At this time, the estimate for when the shortage will end is approximately January of 2013. The Vaccine Program is doing what it can to fulfill provider orders for Pentacel.
- Monthly Orders – Now that the Vaccine Program has a better understanding of the new order processes the reporting due dates have been changed. Provider temperature logs and the monthly vaccine orders should be submitted between the 1st and the 5th of the month. Temperature logs should be faxed or emailed and vaccine orders placed online through VOMS between the 1st and 5th. The turnaround times for vaccine orders has been surprisingly fast, with some providers receiving orders within 48 hours of placing

orders, which is a vast improvement over the turnaround time in the past. As a reminder, providers are asked to go into the WyIR as soon as they receive their order to receive the shipment. This will automatically populate the WyIR inventory, including lot numbers and expiration dates. Some providers may be experiencing difficulties in displaying correct inventory and doses administered information, which may indicate that some of the inventory does not have NDC numbers. If providers see issues like this, they can go in the registry under Lot Number Search/Add screen to see if the vaccines have an NDC number associated with them. Without the correct NDC number, information will not be accurate and may cause issues, which could cause an order to be denied as it appears unnecessary.

- Benchmarking – The due date for benchmarking was July 13, 2012. If providers have not sent in their benchmarking data, they are asked to please send it in this week. Vaccine orders for the month will not be placed for providers who have not submitted benchmarking data. If providers used the WyIR to track the data, the Immunization Program can pull the information for providers.

The next teleconference is September 19, 2012 at 12:15 pm.