

# IMMUNIZATION UPDATE

The Iowa Immunization Program Newsletter

Spring 2015

## News & Summaries

### National Measles Outbreak

The United States is currently experiencing a large, multi-state outbreak of measles linked to an amusement park in California. There are no confirmed measles cases in Iowa.

Measles starts with a high fever. Soon after, it causes a cough, runny nose, and red eyes, and then 3-7 days after the fever a rash of tiny, red spots breaks out. It usually starts at the head and spreads to the rest of the body. The rash can last for a week, and coughing can last for 10 days.

The best way to prevent measles is to get the measles-mumps-rubella vaccine (MMR). Two doses of MMR vaccine will provide over 99% of people long term protection against measles. The first dose of vaccine is routinely recommended between 12-15 months of age. The second dose is usually administered at school entry, between 4-6 years of age, but can be administered as soon as 28 days after the first dose. Iowa school law requires two doses of measles, rubella containing vaccine upon enrollment. Generally, persons who started elementary school in Iowa after 1991 and were up-to-date on all school entry vaccine requirements have received two doses of MMR vaccine.

### Measles Vaccine Recommendations

- The Advisory Committee on Immunization Practices (ACIP) recommends adults born in 1957 or later receive at least one documented dose of MMR vaccine or have laboratory confirmation of immunity or disease to be considered immune. A second dose of MMR vaccine is also recommended for adults in this age category traveling internationally or students in a post-secondary institution to be considered immune.
- It is assumed persons born in the U.S. prior to 1957 were likely infected with the measles virus therefore have presumptive immunity.
- All health care providers, regardless of year of birth, should have 2 documented doses of MMR vaccine, proof of immunity (positive IgG result on serology), or laboratory confirmation of disease.
- Killed measles vaccine, or vaccine of unknown type, administered between 1963 and 1967 did not provide long-lasting protection. Doses given during that time should not count as valid doses. Anyone with doses of measles vaccine documented during this timeframe should be revaccinated.
- If someone is unable to verify prior history of illness or vaccination, it would be appropriate to vaccinate the individual. Vaccination in those who have already had measles or have already received the recommended vaccination is not harmful; it only boosts immunity.

The Iowa Department of Public Health has measles information and resources available for health care providers and the general public [here](#).

# Vaccine Highlights

## Pneumonia Vaccine Covered by Medicare

On September 19, 2014, the Centers for Disease Control and Prevention (CDC) published recommendations regarding the use of pneumococcal vaccines for adults 65 years and older. These recommendations include the 13-Valent Pneumococcal Conjugate Vaccine (PCV13) and 23-Valent Pneumococcal Polysaccharide Vaccine (PPSV23). For more information on these recommendations, visit <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6337a4.htm> on the CDC website.

The Centers for Medicare and Medicaid Services (CMS) is updating the Medicare coverage requirements to align with the updated Advisory Committee on Immunization Practices (ACIP) recommendations. Effective for dates of service on or after September 19, 2014, and upon implementation of CR9051 on February 2, 2015, Medicare will cover:

- An initial pneumococcal vaccine to all Medicare beneficiaries who have never received the vaccine under Medicare Part B; and
- A different, second pneumococcal vaccine one year after the first vaccine was administered (if 11 full months have passed following the month in which the last pneumococcal vaccine was administered).

Note that Medicare Administrative Contractors (MACs) will not search for and adjust any claims for pneumococcal vaccines and their administration, with dates of service on and after September 19, 2014. However, they may adjust such claims brought to their attention.

The complete CMS Update can be found [here](#). For more information on pneumococcal vaccination, please click [here](#).

## Birth Dose Honor Roll

A fifth Iowa hospital has been included in the Immunization Action Coalition's (IAC) Hepatitis B Birth Dose Honor Roll. Congratulations to St. Anthony Regional Hospital, Carroll, who reported a birth dose coverage rate of 97% from 1/1/2012 to 12/31/2013.

Mary Greeley Medical Center, Ames, has reported a second year birth dose coverage rate of 94% from 1/1/2014 to 12/31/2014. Myrtue Medical Center, Harlan, has reported a second year birth dose coverage rate of 96% from 7/1/2013 to 6/30/2014. These are the first Iowa hospitals to be included on IAC's Hepatitis B Birth Dose Honor Roll two years in a row.

The Hepatitis B Birth Dose Honor Roll was created in July of 2013 to recognize hospitals and birth centers who achieved 90% or greater coverage rate of administering hepatitis B vaccine prior to discharge. To protect newborns from hepatitis B viral infection, birthing institutions who qualify must also implement written policies, procedures, and protocols including the following:

- A standing order to administer the hepatitis B vaccine to all infants is included as a part of routine newborn admission orders.
- All newborns routinely receive hepatitis B vaccine after birth, prior to discharge.
- Mother's HBsAg screening test result is reviewed, and original result is included in her chart as well as in infant's chart.
- If incorrect test was ordered or is missing, an HBsAg blood test is ordered ASAP for the mother.
- Infants born to HBsAg-positive mothers receive hepatitis B immune globulin (HBIG) and hepatitis B vaccine within 12 hours of birth.

- Notification to the state or county health department's perinatal hepatitis B prevention program prior to discharge for all mothers whose HBsAg test result is positive.
- Infants born to mothers whose HBsAg status is unknown receive hepatitis B vaccine within 12 hours of birth.
- Infants who weigh less than 2,000 grams who are born to mothers whose HBsAg status is unknown receive HBIG within 12 hours of birth.

More information about the Hepatitis B birth Dose Honor Roll is available at <http://www.immunize.org/honor-roll/birthdose/> or call Kelli Smith at (800)831-6293, extension 2.

## Updated Immunization Schedules

The [\*2015 Childhood Immunization Schedule\*](#) and the [\*2015 Adult Immunization Schedule\*](#) are now available. Annually, the Advisory Committee on Immunization Practices (ACIP) develops recommendations for routine use of vaccines in children, adolescents, and adults.

A summary of this year's changes can be found at [www.cdc.gov/mmwr/pdf/wk/mm6404.pdf](http://www.cdc.gov/mmwr/pdf/wk/mm6404.pdf).

## *IRIS Update*

### IRIS Webinars

Mark your calendars for upcoming IRIS Q&A webinars! The webinars will not include a formal presentation. Instead, attendees will have the opportunity to ask staff questions about all aspects of the IRIS application. Registration links can be found on the [IRIS website](#).

- Thursday, March 12<sup>th</sup> 10:00 AM – 11:00 AM
- Thursday, April 16<sup>th</sup> 2:00 PM – 3:00 PM
- Wednesday, May 20<sup>th</sup> 10:00 AM – 11:00 AM

## ***Program Highlights***

# **Save the Dates October 28-29, 2015**

## **EPIDEMIOLOGY & PREVENTION OF VACCINE-PREVENTABLE DISEASES (CDC PINK BOOK COURSE)**

**&**

## **2015 IOWA IMMUNIZATION CONFERENCE**

Veterans Memorial  
Community Choice Credit Union Convention Center  
833 5th Street, Des Moines, Iowa 50309

### **Epidemiology & Prevention of Vaccine-Preventable Diseases - October 28, 2015**

Faculty from the CDC's National Center for Immunization and Respiratory Diseases will present a live one-day comprehensive overview of the principles of vaccination, general recommendations, immunization strategies for providers, and specific information about vaccine-preventable diseases and the vaccines that prevent them. Continuing Education will be offered.

### **2015 Iowa Immunization Conference - October 29, 2015**

Hear renowned speakers share the latest information on immunizations and vaccine-preventable diseases. Take advantage of the opportunity to network with healthcare professionals involved with immunization and vaccine-preventable diseases. Continuing Education will be offered.

### **Featured Presenters**

- **Paul Offit, MD** *Children's Hospital of Philadelphia*
- **Wendy Swanson, MD** *Seattle Children's Hospital*
- **Noel Brewer, PhD** *University of North Carolina; Director of Cervical-Free Cancer North Carolina*
- **Sandra Fryhofer, MD** *Adjunct Associate Professor of Medicine at Emory University; ACIP member*
- **Karen Ernst** *Director, Voices for Vaccines*
- **William Atkinson, MD** *Immunization Action Coalition, Associate Director for Immunization Education*

### **Who Should Attend**

The Epidemiology & Prevention of Vaccine-Preventable Diseases Course and Iowa Immunization Conference are designed to be of interest to a diverse field of health care professionals, including: nurses, nurse practitioners, pharmacists, medical assistants, public health staff, physicians, physician assistants, medical and nursing students, and anyone interested in learning more about immunizations.

## VFC Highlights

### VFC Eligibility

The VFC program requires patient eligibility screening and documentation at each immunization visit. Children from birth through 18 years of age who meet at least one of the following criteria are eligible to receive VFC vaccine:

- Medicaid enrolled
- Uninsured
- American Indian or Alaskan Native
- Underinsured - eligible to receive VFC vaccine only through a Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC) or Local Public Health Agency (LPHA).

Circumstances which determine underinsured eligibility are listed below:

- Some insurance plans may cover all ACIP-recommended childhood vaccines but exclude certain combination vaccines or certain products. A child with this type of coverage would be considered insured and NOT eligible for VFC because all recommended vaccines are covered.
- Some insurance plans may cover a portion of the cost of the vaccine even though it may be only a small portion of the cost of the vaccine, so this child is considered insured for the purpose of the VFC Program and is NOT eligible for the program.
- Children enrolled in *hawk-i* are NOT eligible under the VFC Program because the *hawk-i* Program is a full coverage insurance plan. Children enrolled in *hawk-i* must be vaccinated with private vaccine.
- Some insurance plans limit the coverage to a specific number of provider visits annually. If a child's insurance will not cover the cost of vaccine after the child has exceeded the number of provider visits, the child can be considered underinsured for the purposes of the VFC Program because the insurance would not cover the vaccine.
- Children whose health insurance covers the cost of vaccinations are NOT eligible for VFC Program benefits even when a claim for the cost of the vaccine and its administration would be denied if submitted to the insurance carrier for payment because the plan's deductible (high deductible plan) had not been met.
- Adolescents through 18 years of age who do not know their insurance status and who present at family planning clinics for contraceptive services or STD treatment can be considered uninsured for the purposes of the VFC Program. A person under 19 years of age who may have insurance but because of the confidential circumstances for seeking services in a family planning clinic does not have access to insurance coverage is considered uninsured for the purposes of the VFC Program.
- If an adolescent through 18 years of age loses access to health insurance because of incarceration, the minor is considered uninsured and is VFC eligible.

If you have questions regarding VFC eligibility, please contact Tina Patterson at [Tina.Patterson@idph.iowa.gov](mailto:Tina.Patterson@idph.iowa.gov) or 1-800-831-6293, ext. 4.

## VFC Temperature Documentation Requirements

Effective January 1, 2015, all Vaccines for Children providers must include the time and initials of staff performing the twice daily temperature checks. Temperature logs must be maintained for three years. For facilities using an electronic system to monitor temperatures remotely, the electronic system must be able to flag the time and initials of the staff logging in to check temperatures twice daily. If this cannot be done, paper temperature logs should be used to document temperature checks.

## Vaccine Storage & Handling Plan

The Vaccine Storage and Handling Plan template has been updated to reflect new requirements. When conducting the annual review of your clinic's storage and handling plan, please use the new template. The new template can be found on the Iowa Immunization Program's Storage and Handling webpage at:

<http://www.idph.state.ia.us/ImmTB/Immunization.aspx?prog=Imm&pg=Handling>.

## Question Corner

### Q: How contagious is the measles?

**A:** Measles is highly infectious and is primarily transmitted from person to person via respiratory droplets. Airborne transmission via aerosolized droplets has been documented in closed areas (such as an office examination room) for up to 2 hours after a person with measles occupied the area. Following exposure, more than 90% of susceptible people develop measles. The virus can be transmitted from 4 days before the rash becomes visible to 4 days after the rash appears.

### Q: Can MMR be given on the same day as other live virus vaccines?

**A:** Yes. However, if two parenteral or intranasal live vaccines (MMR, varicella, LAIV and/or yellow fever) are not administered on the same day, they should be separated by an interval of at least 28 days.

### Q: If a health care worker develops a rash and low-grade fever after MMR vaccine, is s/he infectious?

**A:** Approximately 5 to 15% of susceptible people who receive MMR vaccine will develop a low-grade fever and/or mild rash 7 to 12 days after vaccination. However, the person is not infectious, and no special precautions (such as exclusion from work) are necessary.

### Q: When the package insert does not match CDC's recommended immunization schedule or minimum intervals, which should be followed?

**A:** The Advisory Committee on Immunization Practices (ACIP) makes recommendations for vaccine use to the CDC. When the CDC adopts those recommendations, they are published in the Morbidity and Mortality Weekly Report (MMWR). Those recommendations represent the standard of immunization practices in the United States. Occasionally, ACIP recommendations differ from those on the FDA-approved package insert. When this occurs, health care providers should follow the ACIP and CDC recommended and minimum intervals and ages.

## Resources

### Immunization Program Email Lists

The Iowa Immunization Program has several email list serves available to help health care providers receive important and timely immunization related information. Providers can send a blank email to the addresses below to receive updates directly in their inbox.

- VFC Program: [join-VFC@lists.ia.gov](mailto:join-VFC@lists.ia.gov)
- Immunization Program: [join-IMMUNIZATION@lists.ia.gov](mailto:join-IMMUNIZATION@lists.ia.gov)
- IRIS Program: [join-IRISUSERS@lists.ia.gov](mailto:join-IRISUSERS@lists.ia.gov)

### HPV Resources from the Iowa Immunization Program

The Iowa Immunization Program launched a media and radio campaign regarding HPV vaccine the week of January 26, 2015. Below are HPV vaccine resources available to health care providers. If you have questions regarding the HPV campaign, please contact Bethany Kintigh at [Bethany.Kintigh@idph.iowa.gov](mailto:Bethany.Kintigh@idph.iowa.gov) or 1-800-831-6293, ext.7.

- **HPV Poster:** This 11x17 poster features the "HPV Vaccine is the Key" campaign theme with infographics regarding HPV vaccination. The poster is recommended for health care providers and general public use. It has a space at the bottom of the poster to enter facility-specific information. The poster can be ordered [here](#).
- **HPV Brochure:** This folded 3¼ x 8½ brochure outlines HPV, HPV vaccine information and recommendations. It is recommended for health care providers and general public use. The brochure can be ordered [here](#).
- **HPV Webpage:** The Iowa Immunization Program has added a HPV web page with HPV resources for health care providers. The page can be found [here](#).
- **HPV Billboard Campaign:** The Iowa Immunization Program launched a billboard campaign throughout Iowa which will run through August 2015. The billboard design can be found [here](#) in a PDF form which may be used for posters, advertising, etc.
- **HPV Radio Campaign:** Jackie's Story features a mom who is a cancer survivor speaking on the importance of HPV vaccination for boys and girls starting at age 11. The radio ad can be found [here](#).

