

Massachusetts Adult Immunization Coalition Meeting



June 1, 2017 6:30 – 8:30 PM
Location: Massachusetts Medical Society
860 Winter Street, Waltham, MA 02451
Commonwealth Room

MAIC Meeting Notes

ATTENDEES IN PERSON - 15		
Last Name	First Name	Organization
Aceto	Rich	GSK Vaccines
Alie	Robyn	MA Medical Society
Burke	Alexandra	JSI Research and Training Institute, Inc.
DeMaria	Al	MDPH
Elliot	Debora	Sanofi Pasteur
Fisher	Lloyd	MAIC Champion Award 2017
Lett	Susan	MDPH
McKenzie	Mary	ANA Massachusetts
Melin	Judith	American College of Physicians
Sokola	Jessica	Sanofi Pasteur
Temple	Tim	Pfizer
James	Thushara	Healthcentric Advisors
Vanucci	Rebecca	MDPH
Whittaker	Kathy	Winchester Board of Health
Zacharia	An	FHC at Webster Square Office
WEBINAR: 17		
Choi	Elisa	MA Chapter of the ACP
Deleo	Susan	Walgreens
DiMaio	Leanne	Tufts Health Plan
Dutra	Donald	Defense Health Agency
Frazier	Diane	Pfizer
Goldstein	Michael	Merck
Hampton	Donna	UMASS Dartmouth
Harrell	Josh	Merck
Keough	Kathy	Atrius
Lamm	Everett	Berkshires
Laurence	Valerie	St. Mary's Healthcare
McVey	Caleb	VA of Boston
Moran	Patricia	Marlborough BOH
Sandalis	Mariela Irene	Latino Health Immunization Program
Sorentino	Kerry	Chelmsford Board of Health
McReynolds	Cynthia	MCAAP
Vescera	Debra	Harrington Memorial Hospital

Adult vaccination rates in MA, Tdap effectiveness in pregnancy, Meningococcal B vaccine update – Dr. Susan Lett, MDPH

- Maternal Tdap vaccine protect infants during first year of life, and doesn't interfere with infant DTaP
- MenB – FHbp vaccine (Trumemba) recommendations
- New checklist of best practices for offsite clinics. Reminder about the CDC One and Only campaign basic standard practices (one needle, one syringe)
- MA is above US rates for vaccines, but we still have a lot of work to do in adult vaccinations

Regulatory Updates – Robyn Alie

- A circular letter went out advising that certified medical assistants can vaccinate. We are waiting for more clarification on this letter.
- Pharmacists will start being able to vaccinate children ages 9+ in the future in MA (other states already do this). This will definitely improve adolescent vaccine rates, as a supplement to their medical home. This is coming from the Board of Registration of Pharmacists.
- Remember it takes a village to vaccinate. In MA, after pharmacists were able to vaccinate, some adult immunization rates went up – as many don't have primary care providers and got their vaccinations at the pharmacy instead.
- The majority of pharmacies are contributing to the MIIS. The problem still remains that not all adult providers are enrolled in the MIIS, and won't receive this information.

Practice based systems to improve vaccination rates – Dr. Lloyd Fisher

- Clinical decision support (CDS) – Complex immunization schedules, changes and medical conditions all factor into the decision making process. Rules are predictable and algorithms are built in to predict proper vaccine schedule for patient
- This helps with Retrospective (missing) vaccine, health maintenance alerts (what is due at time of appointment), real time alerts (in-line) on the screen to advise what is due and order sets (tells what to do next)
- Standing Orders: reduces the administration burden for the provider, empowers non-provider members of the team to address preventative care, increases likelihood patient will receive needed vaccines at every contact with the healthcare system
- At Reliant – Health maintenance alert = order

Coding and Billing for Adult Immunizations Summit Resource – Rebecca Vanucci, MDPH

- Summit Resource: <https://www.izsummitpartners.org/naiis-workgroups/access-provider-workgroup/coding-and-billing/>
- By the National Adult and Influenza Immunization Summit, new coding and billing website

Adult Immunization Conference debrief – Rebecca Vanucci, MDPH and Robyn Alie, MMS

- 348 Attendees, range of backgrounds: 2% Physicians, 4% Pharmacists, 62% Registered Nurse, 8% Nurse Practitioner, 14% Licensed Practical Nurse
- Specialties range: 24% Public Health, 29% Family Practice, 9% College Health, 9% Internal Medicine
- Overall very positive response to conference and keynote speakers
- Positive knowledge gain shown for all three conference objectives

Immunization Reports from the Field, flu updates & manufacturer updates – MAIC members

- Question on if Flumist (nasal) will be available later this year? Not likely.
- Starting in November 2016, Flulaval is now allowed down to 6 months of age at the 0.5mL dose.

Coalition Goals

- Clinician education initiative – what vaccines can be given together, how to quell concern if patient doesn't feel well after appointment, and doesn't want to have future vaccines
- Strong public perception in adult community that immunization time is only during flu season – need to address the fact that immunizations can be given at any time
- For adult patients – when patients come back for chronic disease management, we should also include preventative care and regular vaccine schedules
- Idea to campaign around diabetes and include vaccination
- Vaccine confidence – providing education to help make recommendations stick about vaccines, concrete talking points
- Suggestion to have a website with CEU short courses for Adult Immunization or Risk Management or other options for modules
- Suggested activities for projects to increase adult immunization