NCSL COVID-19 WEBINAR SERIES

COVID-19: Maintaining Child Vaccination Rates During a Pandemic

JUNE 22, 2020
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COVID-19 WEB PAGE

Information on state policies and responses related to continuity of government, education, fiscal, elections, criminal justice and more.

Go to ncsl.org
National Overview
Dr. Melinda Wharton, MD, MPH
Director, Immunization Services Division, National Center for Immunizations and Respiratory Disease, CDC

State Perspective
Claire Hannan
Executive Director, Association of Immunization Managers

State Legislative Update
Erik Skinner
Policy Associate, National Conference of State Legislatures
Maintaining and Strengthening Childhood Vaccination During the COVID-19 Pandemic

Melinda Wharton, MD, MPH
Director, Immunization Services Division

National Conference of State Legislatures
June 22, 2020
Substantial disruptions to outpatient medical care during COVID-19 pandemic

As number of COVID-19 cases increased and stay-at-home orders implemented, nearly 70% reduction in outpatient visits before starting to rebound

March 13: U.S. national emergency declared

Pediatrics among the hardest-hit specialties

62% reduction in pediatric outpatient visits by April 5th

Ateev, M. et al., To the Point (blog), Commonwealth Fund, updated May 19, 2020.
Increases in outpatient visits across all pediatric age groups in May compared to April

- Pediatric outpatient healthcare utilization improved in May, but remains well below baseline

- By May 10, pediatric outpatient visits:
  - Highest in children <2 years
  - Lowest in 3-5 year olds

COVID-19 pandemic and disruptions to routine childhood vaccination

Weekly decreases in Vaccines for Children program provider orders for pediatric vaccines – United States, January 6-May 4, 2020

All non-influenza vaccines

Source: CDC

Notable Dates:
1 1/20/2020: First US case reported (Washington state)
2 3/13/2020: US national emergency declared
COVID-19 pandemic and disruptions to routine childhood vaccination
Weekly decreases in Vaccines for Children program provider orders for pediatric vaccines – United States, January 6-May 4, 2020

Measles-containing vaccine

Notable Dates:
1 1/20/2020: First US case reported (Washington state)
2 3/13/2020: US national emergency declared

Source: CDC
Primary care practices under stress
Economic struggles, reduced staffing, and low patient volume may all affect preventive care services

Small medical practices struggle to survive amid coronavirus pandemic

Among a survey of primary care providers in early May
- 77% report severe or close to severe stress
- 70% report a >50% decrease in patient volume
- 40% had laid off staff
- 40% reporting absences due to illnesses/self-quarantine

*Primary care collaborative survey, May 1-4, 2020 (n=773)*

https://www.pcpcc.org/2020/05/06/primary-care-covid-19-week-8-survey
CDC activities with immunization programs and partners to support routine childhood vaccination

- **Monitor** vaccination service delivery to inform targeted interventions

- **Support**
  - Providers through the development of guidance and support materials
  - Catch-up vaccination through reminder/recall systems
  - Access to vaccines by identifying gaps in VFC provider network and increasing funding for VFC vaccine purchase and operations
  - Identification of policy interventions to support healthcare providers

- **Communicate**
  - Importance of vaccination to parents, providers, and partners
  - Information on VFC program to families

- **Plan** back-to-school vaccination activities during the summer and influenza vaccination in the fall
Supporting healthcare providers to deliver childhood vaccines

- Ensure providers are aware of available financial support through the Provider Relief Fund and how to apply for funding
  - As of June 9, now available to Medicaid and CHIP providers

- Promote catch-up vaccination through dissemination of information on best practices for reminder/recall, including refocusing of immunization program quality improvement activities

- Disseminate guidance on the safe delivery of vaccines during the COVID-19 pandemic

Provider relief fund portal: https://cares.linkhealth.com/#/
IQIP: https://www.cdc.gov/vaccines/programs/iqip/at-a-glance.html
CDC Interim Guidance for Immunization Services During COVID-19 Pandemic

- Vaccination is an essential medical service for all children and adolescents, ideally in the medical home.

- Administer all due or overdue vaccines according to routine immunization schedule during the same visit.

- Implement strategies to catch patients up on vaccines:
  - Start with newborns, infants and children up to age 24 months, young children, and extending through adolescence.

- Includes guidance for the safe delivery of vaccines (e.g., use of personal protective equipment, physical distancing).

https://www.cdc.gov/vaccines/pandemic-guidance/index.html
Communicating the importance of well-child and vaccination visits

- Encourage parents to return for well-child visits

- Use reminder/recall systems to help children get up to date as quickly as possible

- Discuss the safety protocols put in place to ensure patients can be safely vaccinated

https://www.cdc.gov/vaccines/programs/vfc/index.html
Prior to the pandemic, ~50% of U.S. children eligible to receive free vaccines through VFC
– More may be eligible now due to recent loss insurance or increased economic hardship

Parents of recently-eligible children may not be aware of VFC

Partners and providers can help improve vaccine access by increasing awareness and enrollment in VFC program

https://www.cdc.gov/vaccines/programs/vfc/index.html
Resources for communicating with parents about routine vaccination during the COVID-19 pandemic

CDC resources for parents and immunization partners

AAP’s #CallYourPediatrician campaign

Signs of recovery in routine childhood vaccination

Weekly decreases in Vaccines for Children program provider orders for pediatric vaccines – United States, January 6-June 8, 2020

Source: CDC
School vaccination requirements provide a critical checkpoint for children’s vaccination status

- Many children need to receive vaccines during the summer to stay up-to-date and comply with school vaccination requirements
- Important that back-to-school vaccine clinics take place this summer, to provide children an opportunity for vaccination
- If circumstances do not allow all children to receive needed vaccines, jurisdictions should consider extending provisional enrollment or grace periods to give children time to come into compliance without being penalized or resorting to an exemption
Summary of 2019-2020 influenza season

- Influenza activity this season was characterized by two consecutive waves of activity, the first driven mostly by influenza B/Victoria viruses and the second driven by influenza A (H1N1).
- Pediatric deaths reported to CDC for the 2019-2020 season: 185*
- The preliminary 2019-2020 burden estimates are:
  - 39,000,000-56,000,000 influenza illnesses
  - 18,000,000-26,000,000 influenza medical visits
  - 410,000-740,000 influenza hospitalizations
  - 24,000-62,000 influenza deaths

*As of June 13, 2020
https://www.cdc.gov/flu/about/burden/preliminary-in-season-estimates.htm
Increasing seasonal influenza vaccine coverage to decrease healthcare utilization, 2020-2021

- We expect SARS-CoV-2 to continue to circulate in the fall
- Increasing influenza vaccine coverage will decrease stress on the healthcare system
  - Decrease doctor visits and hospitalizations
  - Decrease individuals needing diagnostic testing
- Focus on adults at higher risk from COVID-19
  - Staff and residents of long-term care facilities
  - Adults with underlying illnesses and African-Americans
  - Adults who are part of critical infrastructure
Influenza vaccination planning for 2020-2021 season

- Maximize available vaccine supply
  - Expect >180M doses for U.S. market

- Operational considerations
  - Outreach to those at higher risk
  - Planning for potential need for social distancing
  - Extending influenza vaccination season (September through December or later)

- Enhancing communication
  - Align with COVID-19 messaging
  - Messaging for African-American and Hispanic communities
Conclusions

- Substantial disruptions to routine childhood vaccination services have occurred during the COVID-19 pandemic, though signs of recovery are now being seen.
- Catch up for childhood vaccination needs to be undertaken now so clinical capacity can be directed to back-to-school and influenza vaccination in the summer and fall.
- Immunization programs, partners, and providers can help get childhood vaccination back on track by supporting catch-up vaccination efforts and communicating with parents about safe vaccination during the pandemic.
Thank you

For more information, contact CDC
1-800-CDC-INFO (232-4636)

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

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Maintaining Child Vaccination Rates During a Pandemic

National Conference of State Legislatures
June 22, 2020

Claire Hannan, Executive Director
Association of Immunization Managers (AIM)

www.immunizationmanagers.org
About AIM

• AIM is a nonprofit, professional membership association that was formed in 1999 to provide a peer forum for immunization program managers

• AIM members are the immunization program managers in the 50 federally-funded states, 8 territories/federated states, 6 large cities
Who are immunization program managers?

- State health department employees
- Receive federal funding from the Centers for Disease Control and Prevention
- Conduct activities and develop policies and regulations to improve immunization coverage rates and prevent disease
- Administer the Vaccines for Children program, a federal entitlement program providing vaccines for eligible children
Immunization Program Challenges

- **Vaccine Hesitancy**: 37 view vaccine hesitancy as a burden on IP
- **Outbreaks**: 37 used 317 funds to manage outbreaks
- **Hiring Delays**: 31 had hiring delays
- **IIS**: 18 are currently or plan to replace/upgrade aging technology

*Source: 2019 AIM Annual Survey, administered 10/2019-2/2020. 53 (83%) of IPs responded*
Top 3 Immunization Program Priorities in 2020

1. Meet IIS functional standards
2. Identify and Address Low Vaccination Coverage Rates for Children
3. Respond to/prepare for outbreaks

Note: This survey was administered prior to the COVID-19 pandemic, October 2019 – February 2020.

Source: 2019 AIM Annual Survey, administered 10/2019-2/2020. 53 (83%) of IPs responded
Immunization Program Activities and COVID-19

- Assist with COVID-19 (contact tracing, testing, communication)
- Maintain routine immunization
- Prepare for flu season
- Prepare for COVID-19 vaccine campaign
Immunization Program Activities
Supporting Routine Vaccination

Monitor
Support
Communicate
Plan
Immunization Program Activities
Supporting Routine Vaccination

Monitor
North Dakota Total Doses Ordered from the VFC Program

17% decrease in vaccine ordering
Iowa Doses Administered by Age 24 Months

Figure 1. Total Immunizations Administered by age 24 months, Childhood Platform, Iowa, 2018-2020

Data Notes: Data from Iowa Immunization Registry Information System (IRIS) as of 6/1/2020. Reported by Iowa Immunization Program, 6/1/2020.
Maryland Doses Administered by Age

Comparison of doses administered by age, April 2019 vs April 2020, Maryland

Source: Maryland ImmuNet (data as of 4/29/2020)
Oregon Provider Survey

Oregon VFC Survey - COVID-19 Changes to Your Practice

The Oregon Immunization Program would like to gather information from you about how COVID-19 response has impacted your clinic and its services. Please fill out this survey below. It should take no longer than 5-10 minutes. This survey is for informational uses only. Your responses will be confidential and information you share will not impact your participation in the VFC program. We appreciate you taking the time to fill out this survey.

1. Name *

2. Clinic Name *

3. Clinic’s VFC PIN *

4. Your job title at your clinic

5. Is this a primary care site?
   - Yes
   - No

6. What is your patient population (choose only one)?
   - We see patients of all ages, or
   - We see only children, or
   - We see only adults

7. Have you modified your clinic’s operations to adapt to the coronavirus pandemic? By “operations” we mean hours of operation, patient encounters, etc.

8. If yes, how has your clinic adapted?

9. Please provide any additional comments or suggestions for improvement.
Immunization Program Activities
Supporting Routine Vaccination

Support
Tennessee Provider Guidance

Childhood Immunizations are Critical to Outbreak Prevention:
- Ensuring the delivery of newborn and well-child care, including childhood immunization, requires altered strategies during this pandemic
- Slowly or stopping access to immunizations increases our risk to outbreaks of vaccine-preventable diseases
- Immunizing the youngest children should remain a top priority
- The benefits of bringing well children in for immunizations should be weighed against the risk of exposing them to ill children and adults

Strategies to Consider to Ensure On-Time Immunizations:
- Limit well visits to early in the day, saving sick visits for the afternoon
- Separate patients spatially, place sick patients in different physical location from well patients
- Dedicate specific rooms and staff for sick visits and well visits
- Perform the history and anticipatory guidance portions of the visit via telehealth and bring patients to the office for shorter
Louisiana Reminder/Recall Postcard

Their music has to be up-to-date...

WHY NOT THEIR IMMUNIZATIONS?

Your teen is DUE OR PAST DUE for immunizations, according to our records.

TAKE ACTION TODAY:

1. Find out which vaccines your child needs in minutes—for free—at www.myir.net.
2. Contact your child’s health care provider to get immunized and get protected!

Wondering where to get vaccines? Use our interactive map at www.ldh.la.gov/vaccines.
Idaho Reminder/Recall Postcard

NOW IS THE TIME TO GIVE A BOOST TO THE HEALTH OF YOUR FAMILY AND COMMUNITY!

DID YOU KNOW?
On-time vaccination throughout childhood is essential because it helps provide immunity to vaccine preventable diseases. Vaccination not only protects your children, it also protects others you care about, including family members, friends, and grandparents. We all have a public health commitment to our communities to protect each other and each other’s children by vaccinating our own family members.

Records in Idaho’s Immunization Reminder Information System (IRIS) indicate that one or more of your children may be due for one or more of their childhood vaccines.

Idaho children, 0 through 18 years of age, may receive free* vaccine from an enrolled Vaccines for Children (VFC) provider. Additional assistance, such as sliding fee scales, may also be offered for adult immunizations. Contact your healthcare provider to learn whether they are a VFC provider or have financial assistance programs available.

*There may be a cost to administer the vaccine.

CONTACT YOUR HEALTHCARE PROVIDER TO SCHEDULE AN APPOINTMENT TODAY
Immunization Program Activities Supporting Routine Vaccination

Communicate
Washington State Social Media Campaign

**Stay Safe, Stay Healthy, Stay Vaccinated!**

[www.immunitycommunitywa.org](http://www.immunitycommunitywa.org)

**Stay Safe, Stay Healthy, Stay Vaccinated!**

[www.immunitycommunitywa.org](http://www.immunitycommunitywa.org)
WELL CHILD CARE IS IMPORTANT, EVEN DURING A PANDEMIC.

Wash your hands often and contact us to discuss regular well child visit options.

Stay on Track with Vaccinations!

Washing your hands and social distancing help prevent COVID-19 just like routine immunizations help prevent many other dangerous illnesses.

Contact us to learn about available vaccination options.
Immunization Program Activities
Supporting Routine Vaccination

Plan
Flu Season Will Be Critical

• Getting flu vaccine more important than ever

• Flu season in midst of COVID-19 could severely stress healthcare system

• Flu vaccine can save lives and help our economy
Preparing for Flu Season

• Conducting school located and mass vaccination clinics
• Purchasing additional flu vaccine
• Targeting healthcare workers, staff in long term care facilities, adults at higher risk
• Working with federally qualified health centers (FQHCs), community health centers (CHCs)
• Partnering with pharmacies, doctors, insurers, hospitals...
• More effort and involvement by public health than ever before!
<table>
<thead>
<tr>
<th>Activity</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication/outreach campaign (targeting providers)</td>
<td>36</td>
</tr>
<tr>
<td>Working with partners (AAP, coalitions)</td>
<td>33</td>
</tr>
<tr>
<td>Provider survey (tracking of practice capacity)</td>
<td>28</td>
</tr>
<tr>
<td>Communication/outreach campaign (targeting parents/consumers)</td>
<td>28</td>
</tr>
<tr>
<td>Enhanced vaccination at community health centers, rural health clinics, FQHCs</td>
<td>17</td>
</tr>
<tr>
<td>Enhanced vaccination at local/regional health departments</td>
<td>14</td>
</tr>
<tr>
<td>Centralized Reminder/Recall</td>
<td>13</td>
</tr>
<tr>
<td>Direct Service Vaccination Clinics/Mobile Vans</td>
<td>7</td>
</tr>
<tr>
<td>Strike Teams (traveling vaccinators)</td>
<td>6</td>
</tr>
<tr>
<td>Discussion w/ health systems and/or state Medicaid for increase in vaccine admin. fee or other provider incentives</td>
<td>5</td>
</tr>
<tr>
<td>Change in law/policy to allow additional vaccinators (such as pharmacies)</td>
<td>3</td>
</tr>
<tr>
<td>Delay or other revision to school/daycare requirements</td>
<td>2</td>
</tr>
</tbody>
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Source: AIM online survey administered to immunization program managers the week of June 15, 2020
Key Points

• Immunization programs are working to increase routine vaccination and “catch up” kids who have fallen behind

• School requirements, reminder/recall, communication campaigns are playing a key role

• Immunization Information Systems (IIS) and partnerships with providers, coalitions, healthcare systems, and other communities are critical
Options for legislators....

- Support and encourage vaccination
- Use credible resources
- Remember that vaccination is the norm
- Work with health agencies
- Invest in public health

#WeThePeopleVax
THANK YOU

Claire Hannan, Executive Director
Association of Immunization Managers (AIM)
channan@immunizationmanagers.org
www.immunizationmanagers.org
STATE LEGISLATIVE UPDATE:
CHILD VACCINATION, A YEAR IN REVIEW

Erik Skinner, MPH
Policy Association
Health Program, National Conference of State Legislatures
REMOVING EXEMPTIONS

- **New York Senate Bill 2994** (Enacted 6/13/19)
  Removes the religious exemption for public school immunization requirements.

- **Washington House Bill 1638** (Enacted 5/10/19)
  Removes the personal belief exemption for the measles, mumps and rubella vaccine requirement for public schools, private schools and day care centers.

- **Maine House Bill 586** (Enacted 5/24/19)
  Removes personal and religious belief exemptions for public school immunization requirements.
CHANGING THE EXEMPTION PROCESS

- **Colorado Senate Bill 163** (Passed assembly 6/13/20)

  Creates a standardized form parents must submit to obtain an exemption for school vaccination requirements.
EXEMPTIONS

Non-Medical State Exemptions
School Immunization Requirements

VACCINE ADMINISTRATION & ACCESS

- Florida House Bill 389, Amendment 632875
  - Correction: Amendment did not pass, HB 389 did.

- Hawaii Senate Bill 203 (Enacted 7/2/19)
  Clarifies pharmacists can provide immunizations and adds pharmacists to the list of providers that must submit documentation to the department of health for vaccines required for students.
VACCINE ADMINISTRATION & ACCESS, CDC ALIGNMENT

- **West Virginia Senate Bill 544** (Enacted 3/5/20)
  
  Authorizes pharmacists and pharmacy interns to administer vaccines in accordance with the CDC’s latest definitive treatment guidelines and requires that such joint rules shall permit a licensed pharmacist or pharmacy intern to administer immunizations.

- **North Carolina House Bill 388** (Enacted 6/3/19)
  
  Allows immunizing pharmacists to administer the influenza vaccine to minors 6 years of age pursuant to a written protocol to increase access to vaccines in accordance with CDC recommendations.
### ADDRESSING FEDERAL POLICY

- **Vermont House Bill 524** *(Enacted 6/17/19)*
  Clarifies that approved vaccines for children must be covered with no cost sharing, in accordance with the Affordable Care Act.

- **Wisconsin Assembly Bill 137** *(Enacted 11/19/19)*
  Provides that a pharmacist can administer a vaccine without a prescription to a person under the age of 6, as long as they meet requirements established by the Advisory Committee on Immunization Practices (ACIP).
Patient Age Limitations for Pharmacist-Administered Vaccines 2020

A COVID-19 VACCINE

- **Maryland House Bill 1663** (Enacted 3/19/20)
  Authorizes emergency powers for the Governor for the duration of the emergency declaration, includes requiring private plans and the Medicaid program to cover the cost of a future COVID-19 vaccine.

- **North Carolina Senate Bill 704** (Enacted 5/4/20)
  Allows the health director to approve a petition for a statewide standing order for pharmacists to administer a CDC-recommended COVID-19 vaccine if the legislature is not in session. Requires the State Health Director to develop a minimum standard screening questionnaire and safety procedures for written protocols for the administration of the recommended vaccination for COVID-19 by immunizing pharmacists.

- **Minnesota Senate Bill 13** (Enacted 5/27/20)
  Adds a future vaccine for COVID-19 to treatments that must be documented in a patient's medical record or reported to the patient's physician when administered by a pharmacist.
Contact Information:

Erik Skinner, MPH
Policy Associate
NCSL, Health Program
erik.skinner@ncsl.org or 303-856-1461

Resources:

NCSL Maternal and Child Health Database
NCSL Immunization Policy Issues Overview Webpage
Questions and Answers

Please type your questions into the chat box in the lower left-hand corner of your screen.
COVID-19 WEB PAGE

Go to:

www.ncsl.org or