



All-State Medicaid & CHIP Call

January 26, 2021



Agenda

COVID-19 Vaccine Safety and Tackling Beneficiary Hesitance:

- Amanda Cohn, MD, Chief Medical Officer, National Center for Immunization and Respiratory Diseases, Centers for Disease Control and Prevention (CDC); Chief Medical Officer, COVID-19 Vaccine Task Force; Executive Secretary, Advisory Committee on Immunization Practices (ACIP); CAPT, US Public Health Service

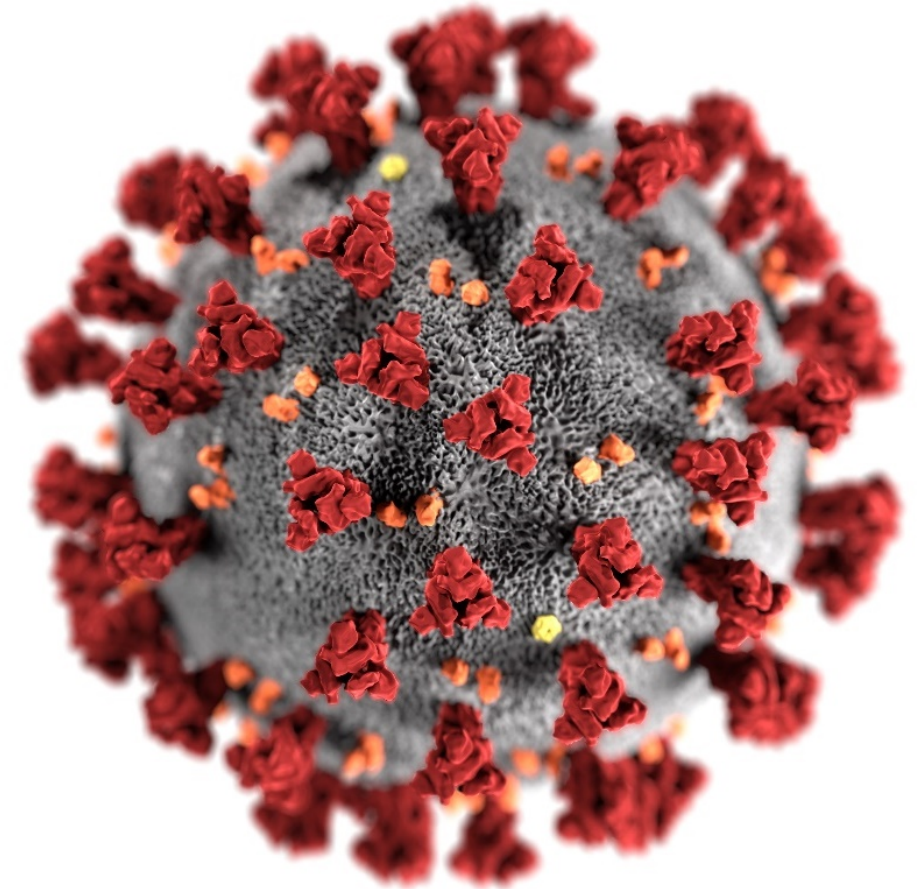
Catching Up on Missed Pediatric Immunizations:

- Melinda Wharton, MD, Director, Immunization Services Division, CDC

COVID-19 Vaccine Implementation

Dr. Amanda Cohn

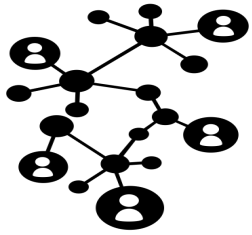
January 26, 2021



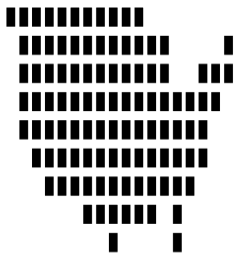
For more information: www.cdc.gov/COVID19

ACIP: COVID-19 Vaccine Guiding Principles

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Efficient Distribution. During a pandemic, efficient, expeditious and equitable distribution and administration of authorized vaccine is critical



Flexibility. Within national guidelines, state and local jurisdictions should have flexibility to administer vaccine based on local epidemiology and demand

COVID-19 Vaccine Distribution and Initiation

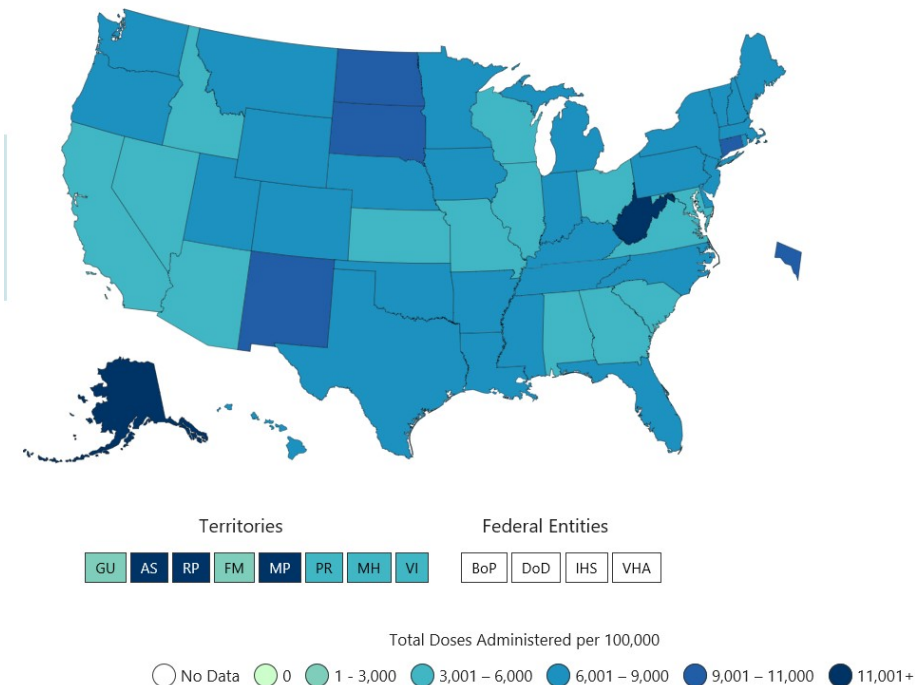
As of January 25, 2021

Overall US COVID-19 Vaccine Distribution and Administration

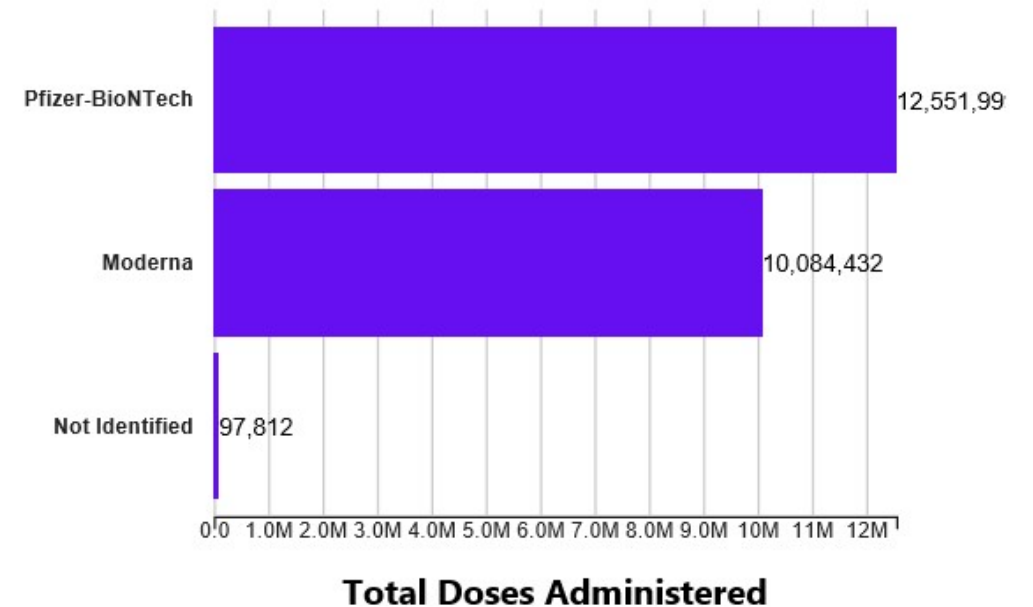


CDC | Data as of: Jan 25 2021 6:00am ET | Posted: Jan 25 2021 5:16PM ET

Total Doses Administered Reported to the CDC by State/Territory and for Selected Federal Entities per 100,000

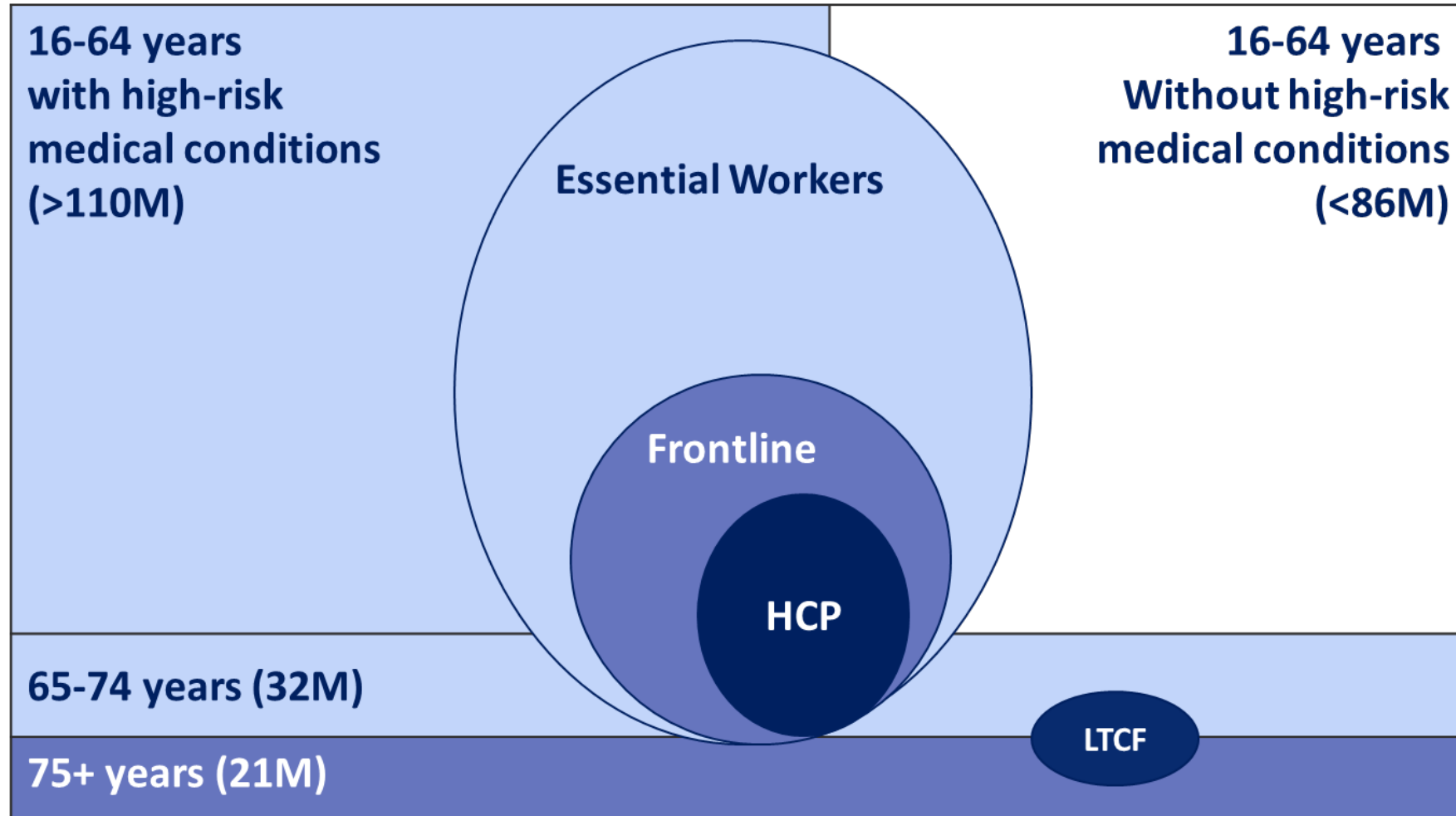


U.S. COVID-19 Vaccine Administration by Vaccine Type



Available: <https://covid.cdc.gov/covid-data-tracker>

COVID-19 vaccination phases



Phase 1a



Phase 1b



Phase 1c



Phase 2

Population Specific Recommendations - Examples

LTCF Residents	<ul style="list-style-type: none">• Include smaller facilities that may not be enrolled in CDC's Pharmacy Partnership program and consider enlisting mobile clinics to visit the facility to vaccinate residents.
Essential Workers	<ul style="list-style-type: none">• Engage occupational health clinics in these sectors, where appropriate, and consider enlisting mobile clinics for essential workers who do not have access to occupational health services
≥65 years of age	<ul style="list-style-type: none">• Include populations that may be homebound or have other access issues by engaging home health agencies and community nurses who serve these populations.
16–64 years of age with underlying medical conditions	<ul style="list-style-type: none">• Include populations that may be homebound or have other access issues by engaging home health agencies and community nurses who serve these populations, as well as specialty treatment centers (e.g., dialysis centers).

Special challenges and considerations for vaccination of older adults

- Access to information about when they are eligible for vaccination and where they can obtain vaccine
- Vaccine access for persons living in
 - Congregate settings
 - Adult family homes
 - Rural areas
- Vaccine access for persons with
 - Cognitive decline
 - Limited family or community support
 - Mobility or disability challenges
 - Limited or no transportation

The Problem: Need to Instill Vaccine Confidence

- Overall acceptability of a COVID-19 vaccine is **moderate**¹
 - Proportion intending to receive vaccine ranged across surveys: 42-86% (as of Nov-Dec 2020 polls)

Factors weighing on acceptance:



Concern about side effects



Efficacy



Risk perception



Associated costs

Tyson, A, Johnson, C, & Funk, C. (2020, September 17). *U.S. Public Now Divided Over Whether To Get COVID-19 Vaccine*. Pew Research Center. <https://www.pewresearch.org/science/2020/09/17/u-s-public-now-divided-over-whether-to-get-covid-19-vaccine/>

COVID-19 vaccine more acceptable if:



Healthcare provider said it was safe



There are no costs to the individual



It would help get back to school and work



They could get it easily

Jackson, C., & Newall, M. (2020, September 29). *Despite COVID-19 spike, few individual behaviors are changing*. Ipsos. <https://www.ipsos.com/en-us/news-polls/axios-ipsos-coronavirus-index>



Vaccinate with **Confidence**

A National Strategy to Reinforce Confidence in COVID-19 Vaccines

Reinforce Trust

Objective: Regularly share clear and accurate COVID-19 vaccine information and take visible actions to build trust in the vaccine, the vaccinator, and the system.

Empower Healthcare Providers

Objective: Promote confidence among healthcare personnel in their decision to get vaccinated and to recommend vaccination to their patients.

Engage Communities & Individuals

Objective: Engage communities in a sustainable, equitable and inclusive way—using two-way communication to listen, increase collaboration and build trust in COVID-19 vaccine.

During health crises, communication, community engagement, and cultural competency are critical



This research suggests that efforts should prioritize **tailored messaging, community engagement and support, and culturally competent interventions** to promote equitable acceptance and uptake of adult immunizations.



Tailored Messaging

Epidemics do not increase vaccine acceptance in racial or ethnic minority groups, meaning tailored communication from trusted messengers remains necessary—especially when a vaccine is new, data on safety or risks is limited, and negative informal messaging occurs (CDC, 2015).



Community Engagement

Sustained community engagement is key in identifying the education and support required to implement health efforts—especially in communities that face instability with basic needs, such as employment, food, shelter, and clean water (Hutchins, 2009).



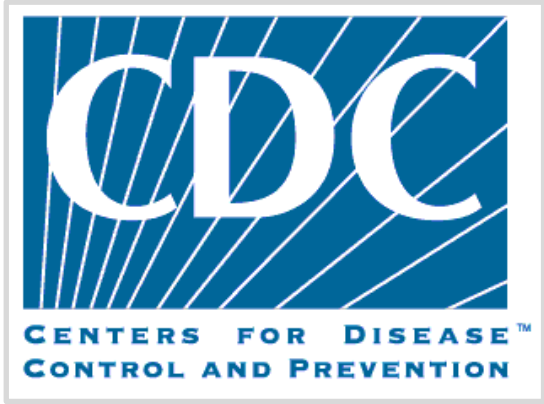
Cultural Competency

Health care staff and first responders should provide culturally competent messaging and care—and include racial and ethnic minority groups in planning—to encourage equitable engagement and outcomes in a pandemic response (Hutchins, 2009).

COVID-19 Vaccine Safety Strategy

- 1. Use established systems** to implement heightened safety monitoring for COVID-19 vaccines
- 2. Develop new platforms** and leverage other federal data sources to complement existing systems
- 3. Communicate clearly** on the vaccine safety process and systems now; provide COVID-19 vaccine safety data and monitoring results once available





1. text message check-ins from CDC (daily 1st week; weekly thru 6 weeks; then 3, 6, and 12 mo.)

vaccine recipient completes web survey



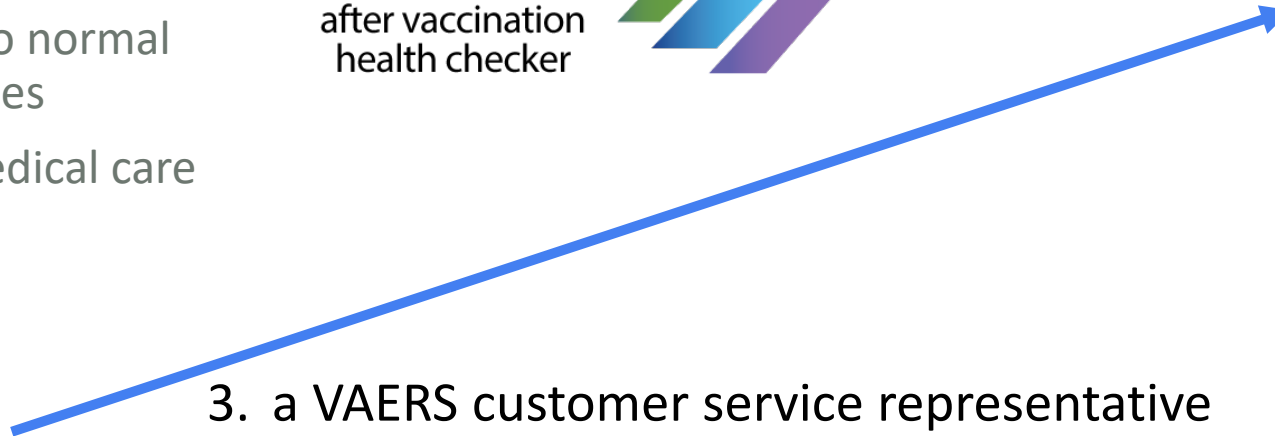
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Vaccine recipient



2. clinically important event(s) reported

- ✓ missed work
- ✓ unable to do normal daily activities
- ✓ received medical care



Call center



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3. a VAERS customer service representative conducts active telephone follow-up on a clinically important event and takes a report if appropriate



CDC Resources

Learn more with **CDC's COVID-19 vaccine tools and resources**. Find information for COVID-19 vaccination administration, storage, reporting, patient education, and more.

- COVID-19 Vaccination: <https://www.cdc.gov/vaccines/covid-19/index.html>
- For Healthcare Professionals: <https://www.cdc.gov/vaccines/covid-19/hcp/index.html>

COVID-19 Vaccine Communications Toolkits

- Medical Centers, Clinics, and Clinicians
- Long-Term Care Facilities
- Community Based Organizations
- Essential Workers

Vaccines & Immunizations

CDC > Vaccines and Immunizations Home

Vaccines and Immunizations Home

For Parents

For Adults

For Pregnant Women

For Healthcare Professionals

COVID-19 Vaccination

For Healthcare Professionals +

COVID-19 Vaccination Planning +

Vaccination Communication Toolkit

COVID-19 Vaccination Reporting Data Systems

For Immunization Managers

For Baseline

Vaccination Dis

New

COVID-19 Vaccination

Clinical Resources for Each COVID-19 Vaccine

Find information for COVID-19 vaccination administration, storage and handling, reporting, and patient education for each specific vaccine

Pfizer-BioNTech Vaccine Information



General Vaccine Administration



Storage and Handling Toolkit



ACIP Recommendations




COVID-19 Vaccine EUAs

Getting 'Back to Normal' Is Going to Take **All of Our Tools**

If we use all the tools we have, we stand the best chance of getting our families, communities, schools, and workplaces "back to normal" sooner:

- Get vaccinated.
- Wear a mask.
- Stay 6 feet from others, and avoid crowds.
- Wash hands often.

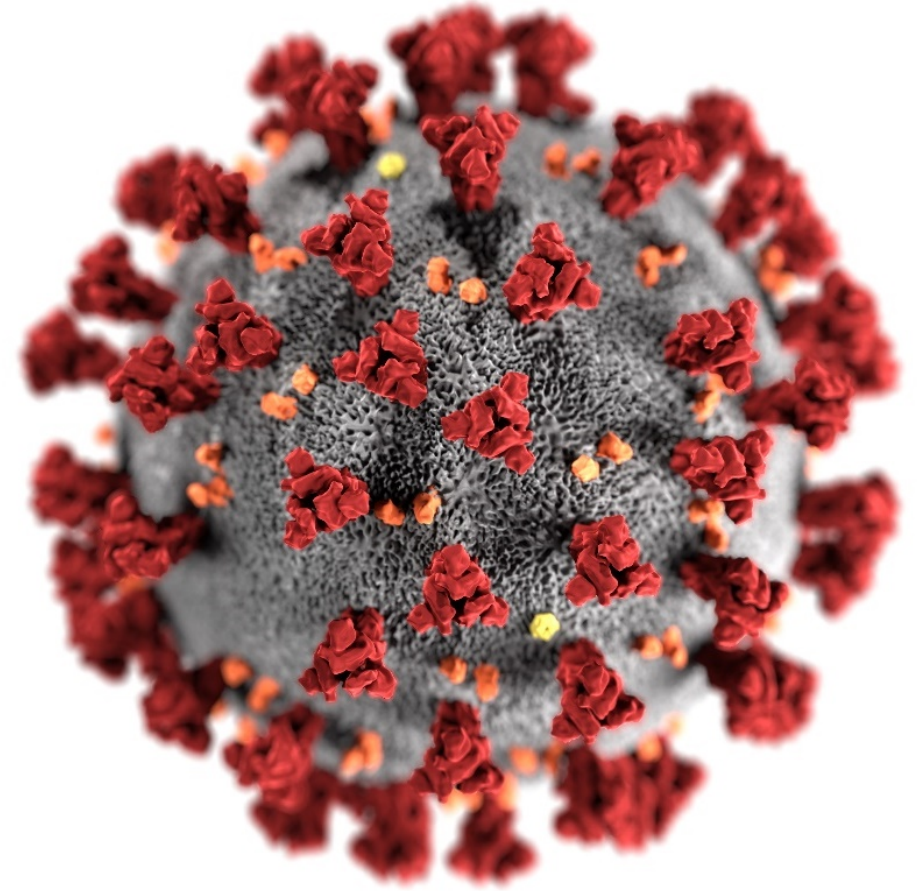
 www.cdc.gov/coronavirus/vaccines

- Training and Education
- Communicating with Recipients
- Vaccination Provider Requirements &
- mRNA COVID-19 Vaccines

I GOT MY COVID-19 VACCINE!

I GOT MY COVID-19 VACCINE!

Thank you Questions?



For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

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.



Routine Childhood Vaccination in the Time of COVID-19: An Urgent Call to Action

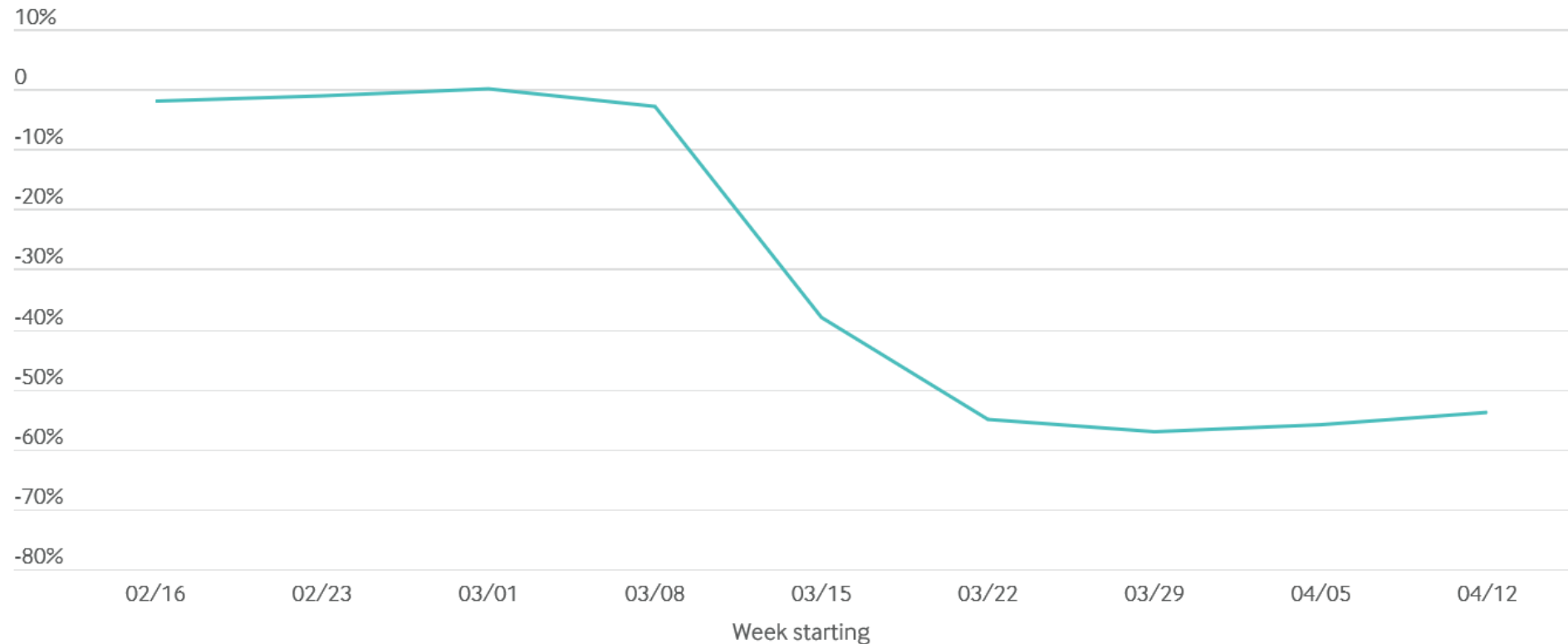
Melinda Wharton, MD, MPH

Director, Immunization Services Division

26 January 2021

The number of visits to ambulatory practices declined nearly 60 percent in mid-March and has remained low through mid-April.

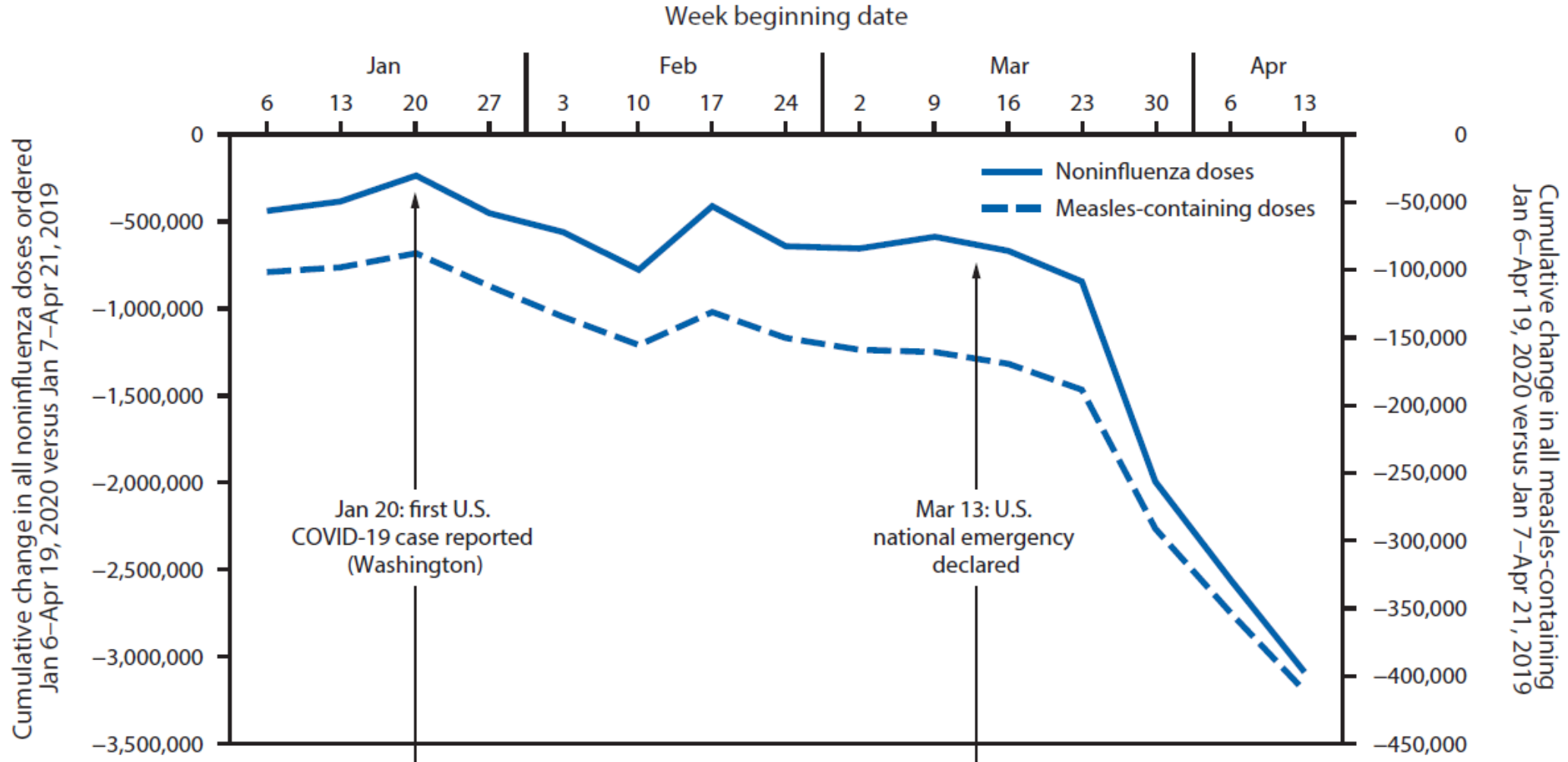
Percent change in visits from baseline



Note: Data are presented as percentage change in number of visits in a given week from the baseline week (March 1–7). Data for week of April 12 are through April 16.

Source: Ateev Mehrotra et al., "What Impact Has COVID-19 Had on Outpatient Visits?," *To the Point* (blog), Commonwealth Fund, Apr. 23, 2020. <https://doi.org/10.26099/ds9e-jm36>

Weekly changes in Vaccines for Children program provider orders for pediatric vaccines – United States, January 6-April 19, 2020

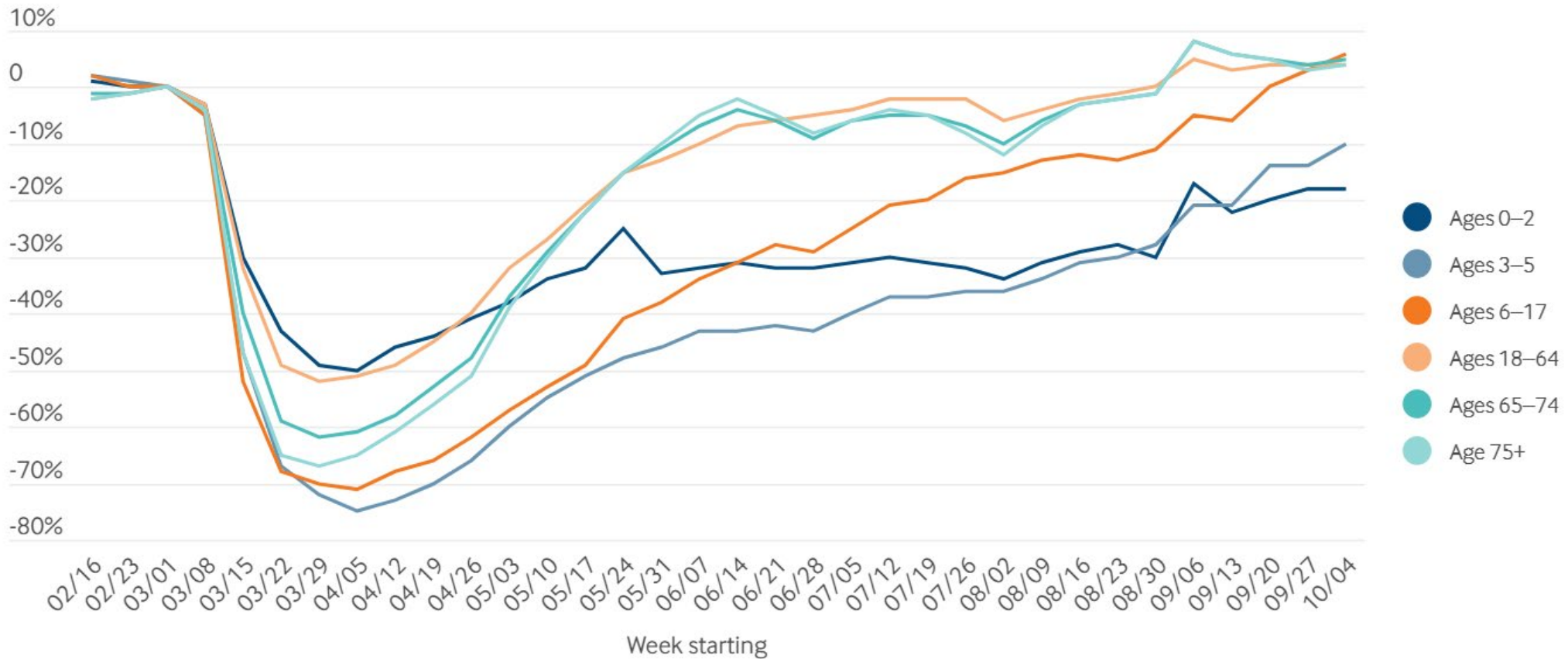


* VFC data represent the difference in cumulative doses of VFC-funded noninfluenza and measles-containing vaccines ordered by health care providers at weekly intervals between Jan 7–Apr 21, 2019, and Jan 6–Apr 19, 2020.

Santoli JM et al, MMWR (May 8, 2020)

While visits overall have returned to levels prior to the pandemic, they vary by several factors, including age group. For example, visits for younger children remain substantially below the prepandemic baseline.

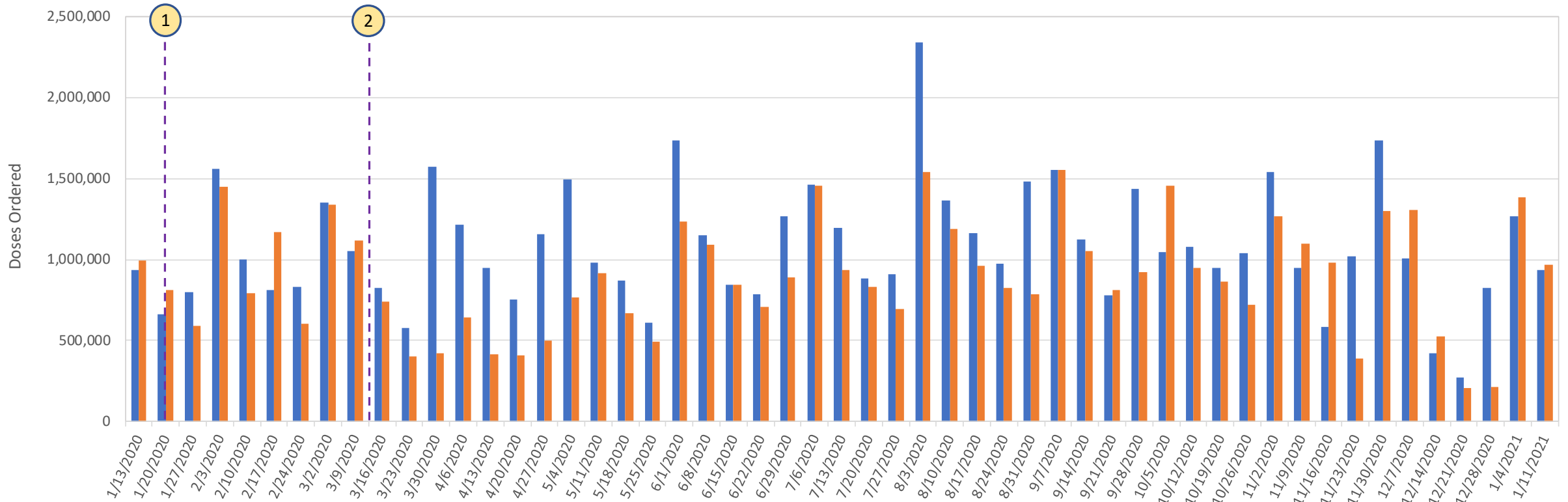
Percent change in visits from baseline, by age



Source: Ateev Mehrotra et al., *The Impact of the COVID-19 Pandemic on Outpatient Care: Visits Return to Prepandemic Levels, but Not for All Providers and Patients* (Commonwealth Fund, Oct. 2020). <https://doi.org/10.26099/41xy-9m57>

VFC provider orders have rebounded...

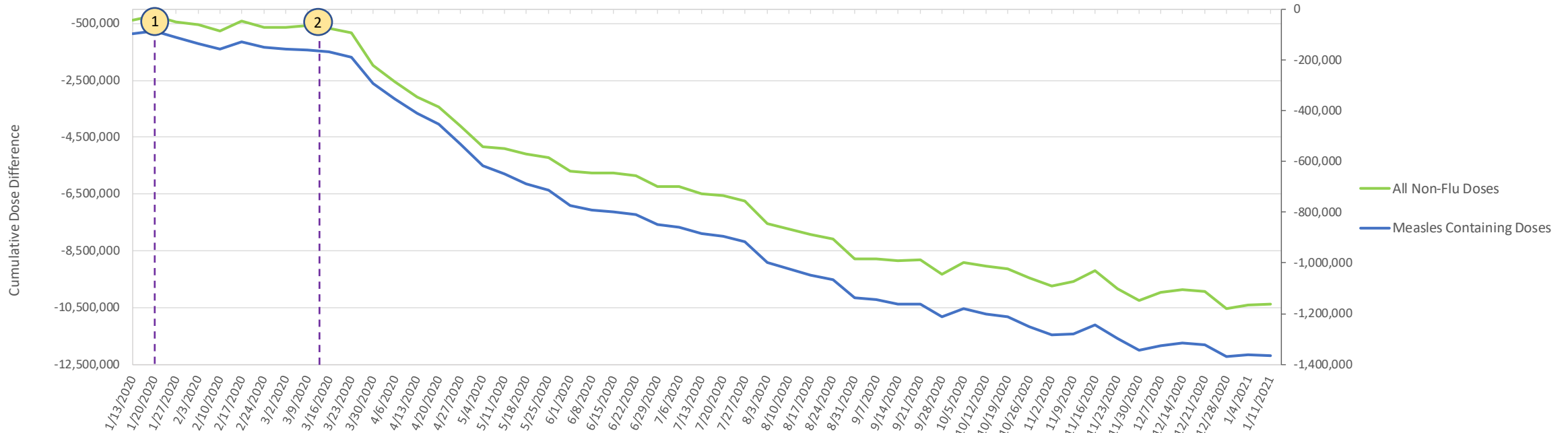
Comparison of FY19 Weekly Provider Orders to FY20 and FY21 - All Non-Flu Vaccines



Notable Dates:

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

...but there still is a substantial deficit for 2020-2021



Notable Dates:

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

As of January 17, overall VFC provider orders (other than flu) are down by **>10.3M doses** and MMR/MMRV down by **>1.3M doses**
 Other data show **a larger gap in the public sector side compared with the private sector**

Call to Action: Urgent Need for Catch Up Vaccination

The 2019 National Immunization Survey-Child showed high coverage for most pediatric vaccines by 24 months of age – *if we don't address this now, what will the 2021 survey show?*

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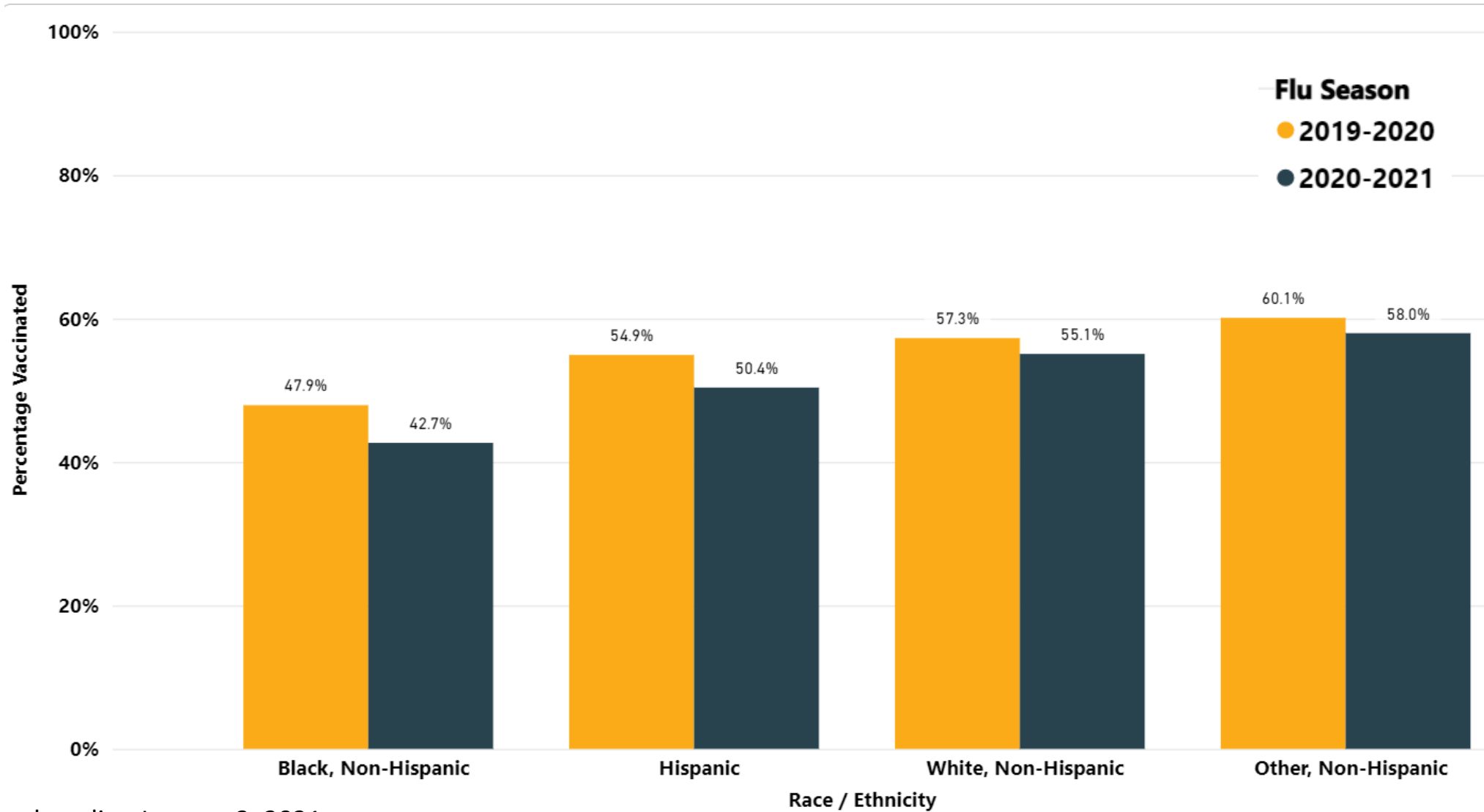
October 23, 2020

Vaccination Coverage by Age 24 Months Among Children Born in 2016 and 2017 — National Immunization Survey-Child, United States, 2017–2019

Holly A. Hill, MD, PhD¹; David Yankey, PhD¹; Laurie D. Elam-Evans, PhD¹; James A. Singleton, PhD¹;
S. Cassandra Pingali, MPH, MS¹; Tammy A. Santibanez, PhD¹

<https://www.cdc.gov/mmwr/volumes/69/wr/mm6942a1.htm>

Cumulative Influenza Vaccine Coverage by Race/Ethnicity, Children 6 Months—17 Years, United States, 2019-2020 and 2020-2021



Through week ending January 2, 2021

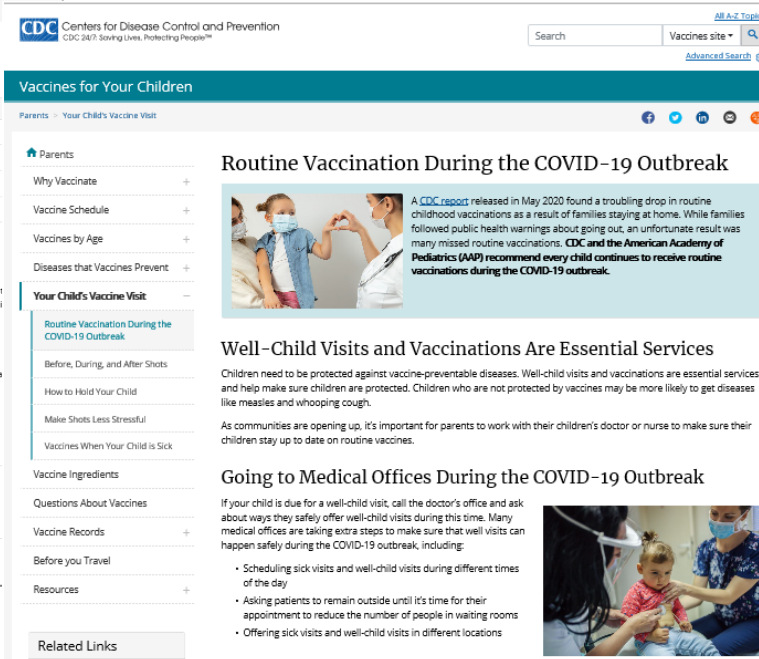
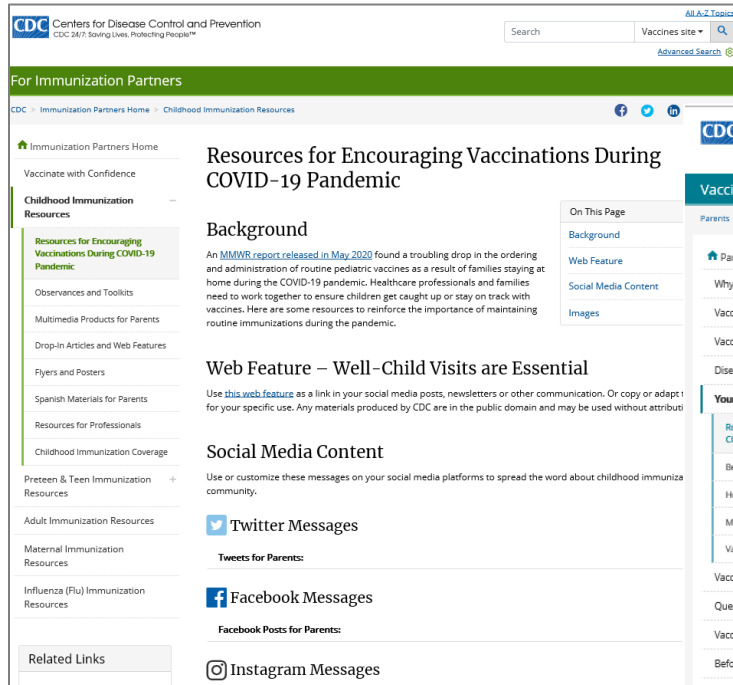
Call to Action: Urgent Need for Catch Up Vaccination (1)

- Healthcare systems and healthcare providers can:
 - Identify families whose children have missed doses and contact them to schedule appointments
 - Prompt clinicians when these children are seen to deliver vaccines that are due or overdue
 - Let families know what precautions are in place for safe delivery of in-person services
- Healthcare provider organizations can:
 - Encourage members to identify and follow up with families whose children have missed doses to get appointments scheduled

Call to Action: Urgent Need for Catch Up Vaccination (2)

- State government agencies can:
 - Send reminders to families about school immunization requirements
 - Implement follow-up for children who are not in compliance with requirements to encourage compliance
 - Use the state's immunization information system's reminder-recall capacity to notify families whose children have fallen behind on vaccines
- We all can:
 - Communicate directly to families the importance of well-child visits and getting caught up on any recommended vaccines that were missed

Resources for communicating with parents about routine vaccination during the COVID-19 pandemic



CDC resources for parents and immunization partners



AAP's #CallYourPediatrician campaign

www.cdc.gov/vaccines/routine
www.cdc.gov/vaccines/partners/childhood/stayingontrack.html
www.aap.org/en-us/about-the-aap/aap-press-room/campaigns/call-your-pediatrician

The COVID-19 Vaccine Program and the Vaccines for Children Program are Separate Programs

- Separate provider enrollment processes for the two programs
- Providers do not need to be enrolled in the Vaccines for Children program to participate in the COVID-19 vaccine program and visa versa
- Providers can vaccinate adolescents 16-18 years of age with age-authorized COVID-19 vaccines consistent with state prioritization, including VFC-eligible adolescents. VFC program enrollment is not required.
- VFC-eligible children should continue to receive routine pediatric (non-COVID-19) vaccines through the VFC program

Questions?

For more information, contact CDC
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TTY: 1-888-232-6348 www.cdc.gov

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CMS Vaccine Outreach Resources

- <https://www.insurekidsnow.gov/initiatives/vaccinations/index.html>
 - A new page on the Insure Kids Now website that highlights outreach materials available specific to pediatric immunizations.
- <https://www.medicaid.gov/resources-for-states/disaster-response-toolkit/coronavirus-disease-2019-covid-19/index.html>
 - The Medicaid vaccine toolkit highlights actions that states can take to increase education and outreach (starts on page 39) and links to COVID-19 resources (page 42).
- <https://www.cms.gov/flu> & <https://www.cms.gov/About-CMS/Agency-Information/OMH/resource-center/Immunization-Resources>
 - Flu-specific materials and resources prepared by the CMS Office of Communications and the Office of Minority Health.