

Texas Department of State Health Services



**Texas Immunization Stakeholder
Working Group (TISWG)
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Thursday, June 5, 2014

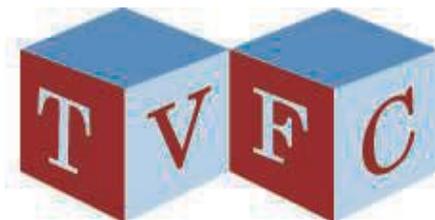


HAPPY 20TH!

VACCINES
Build your child's health



Texas Vaccines
for Children



What is VFC?

- Federally funded vaccine supply program
- National Implementation began October 1, 1994
- Distributes vaccines at no cost to private and public providers for defined populations
- Eligibility of the child is determined by the provider
- Goal: Adequately immunize 90% of two-year olds

Why Are Immunizations So Critical?

- Vaccines Protect Individuals
- Vaccines Protect Communities
- Vaccines Protect Populations



Overview

- CDC VFC Program
 - 82 million VFC doses administered to 40 million children at a cost of \$3.6 billion dollars (Texas has 4.5 million VFC eligible children and .5 million CHIP children participating in TVFC)
 - Over 44,000 enrolled providers (Texas has 3,600 sites)
- Ensure the integrity of the VFC Program
 - Entitlement to the child; must ensure the child is program's priority
 - Ensure the vaccines offer maximum protection against VPD
 - Ensure VFC Providers do not commit
 - Fraud
 - Waste
 - Abuse

Accountability!

Issues Around Vaccine Financing and Accountability

- All ACIP recommended vaccines for children continue to be covered by VFC
- Policy changes in TVFC Program are due to Office of Inspector General findings regarding VFC Program accountability and financing at the state and national level

Issues Around Vaccine Financing and Accountability

- Increase in vaccine accountability
- Increase in program accountability
- Increase in vaccine financing
- Increase in vaccine storage and handling recommendations and requirements
- Increase in number of vaccines and new recommendations
- Increase in vaccine prices

Vaccine Funding

State Vaccine Funds:

- GR: combination of funds received from Legislation, billing from Medicaid, Medicare, Rabies or other sources
- CHIP: Vaccines reimbursed from the CHIP for vaccinating eligible children

Texas VFC Program and Population Estimates



Texas PES- 2014 (Children 0-18 years)

TEXAS 2014 POPULATION ESTIMATES		
	TOTALS	%
Total Grantee Population	7,610,313	
1. The number of children enrolled in the Medicaid	2,853,828	37.50%
2. The number of American Indians/Alaska Natives.	142,974	1.88%
3. The number of children without health insurance.	1,162,674	15.28%
Underinsured and VFC Eligible		
4. Federally Qualified Health Centers.	48,785	0.64%
5. Delegated Authority	36,031	0.47%
Sub-total VFC Eligible	4,244,292	55.77%
6. The number of children underinsured in private sector	831,787	10.93%
7. The number of children with CHIP	576,052	7.57%
8. Privately Insured	1,958,182	25.73%
Sub-total NON-VFC Eligible	3,366,021	44.23%

Who Is Eligible For VFC?

- Children birth to 18 years of age who are
 - Medicaid eligible
 - Uninsured
 - American Indian/Alaska Native
 - Have health insurance, but it does not cover immunizations (underinsured). In these cases, these children must go to a Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC), or deputized Local or Regional Public Health Clinic

Texas VFC (TVFC) Program

Non-VFC Eligible Clients who receive service within the Texas VFC Program

- CHIP enrollees
- Underinsured children not seen in a FQHC, RHC, LHD, or HSR clinic
- Children who started a vaccine series while VFC eligible and are now 19...may complete the vaccine series at an ASN Provider until their 20th birthday

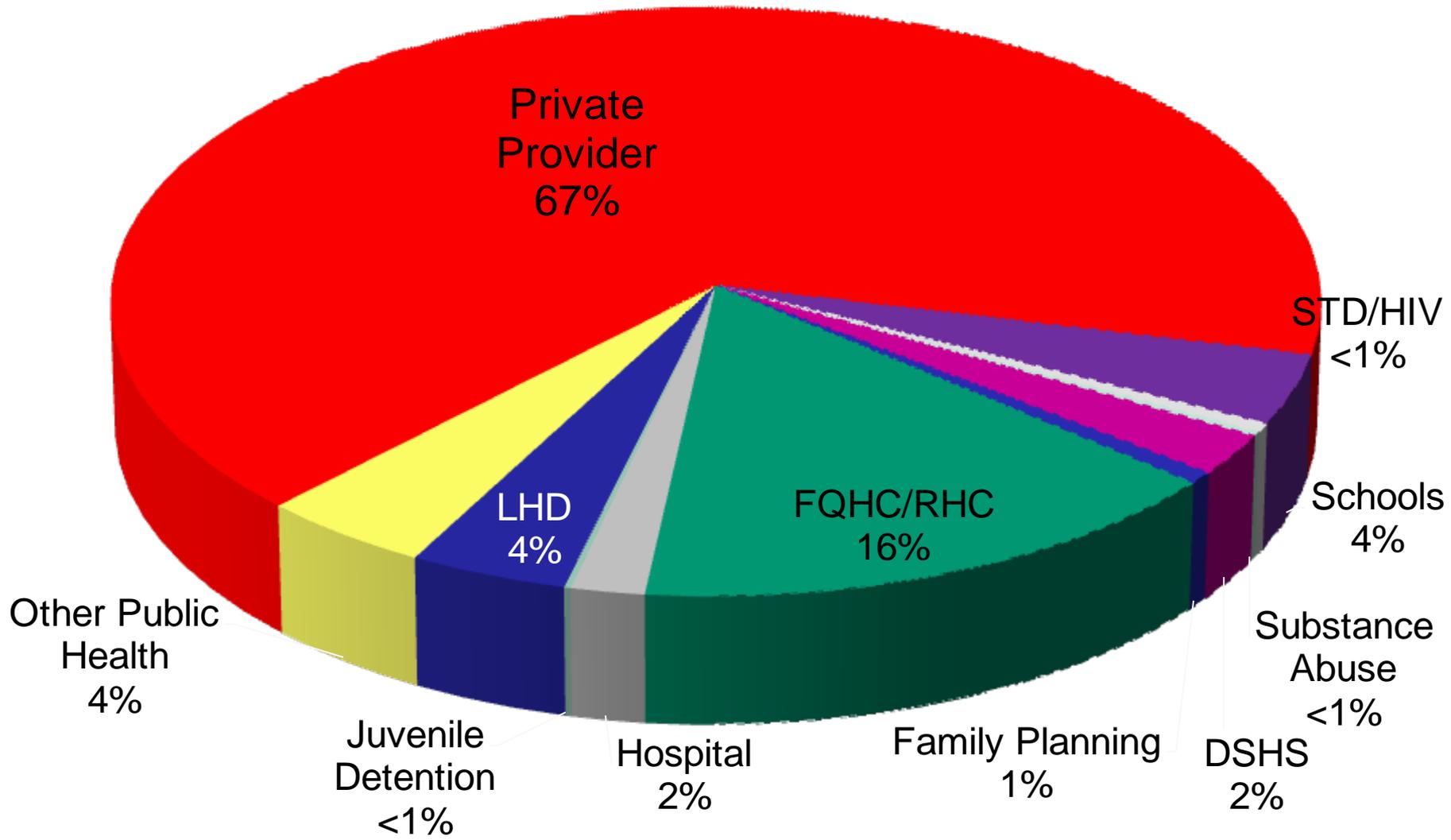
Provider Requirements

- Must serve children between 0-18 years of age or some sub-set of the age group
- Must be licensed in the state to vaccinate
- Cannot be on the current List of Excluded Individuals and Entities (LEIE)
- Must have the capacity to order, receive and properly store and handle vaccines

TVFC Providers Statewide

VFC CATEGORY	TOTAL PROVIDERS
Birth Hospital	96
DSHS	80
Family Planning	23
FQHC/RHC	547
Hospital	66
Juvenile Detention	6
LHD	142
Other Public Health	154
Private Provider	2,340
Schools	136
STD/HIV	17
Substance Abuse	8
TOTAL	3,615

TVFC Providers By Category



TVFC Provider Sites By Region

VFC CATEGORY	TOTAL PROVIDERS
San Antonio	202
HSR 1	176
HSR 2/3	835
HSR 4/5	347
HSR 6/5	220
HSR 7	375
HSR 8	194
HSR 9/10	258
HSR 11	480
City of Houston/Harris County	528
TOTAL	3,615

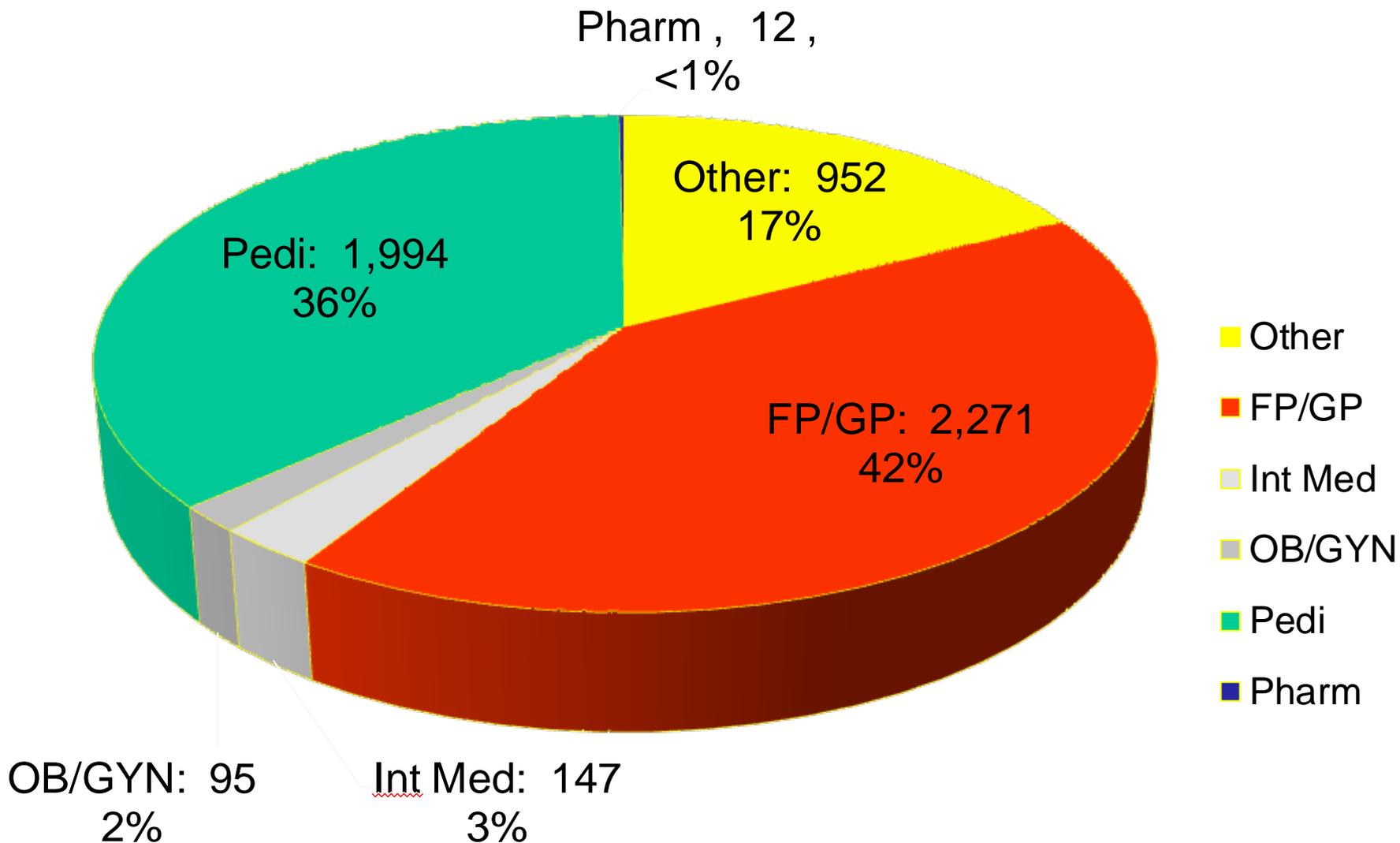
TVFC Providers By Specialty

Region	Total	Other	FP/GP	Int Med	OB/GYN	Pedi	Pharm
SAM	292	22	88	4	3	173	2
1	296	51	178	5	3	58	1
2	173	36	89	4	-	44	-
3	983	167	377	21	13	398	7
4	318	47	162	6	7	96	-
5	158	22	75	2	1	58	-
6	640	96	202	19	16	306	1
7	855	142	409	16	15	272	1
8	311	63	185	9	5	49	-
9	166	42	81	6	5	32	-
10	192	21	77	14	4	76	-
11	713	208	229	22	18	239	-
COH	371	35	119	19	5	193	-
TOTAL	5,468	952	2,271	147	95	1,994	12

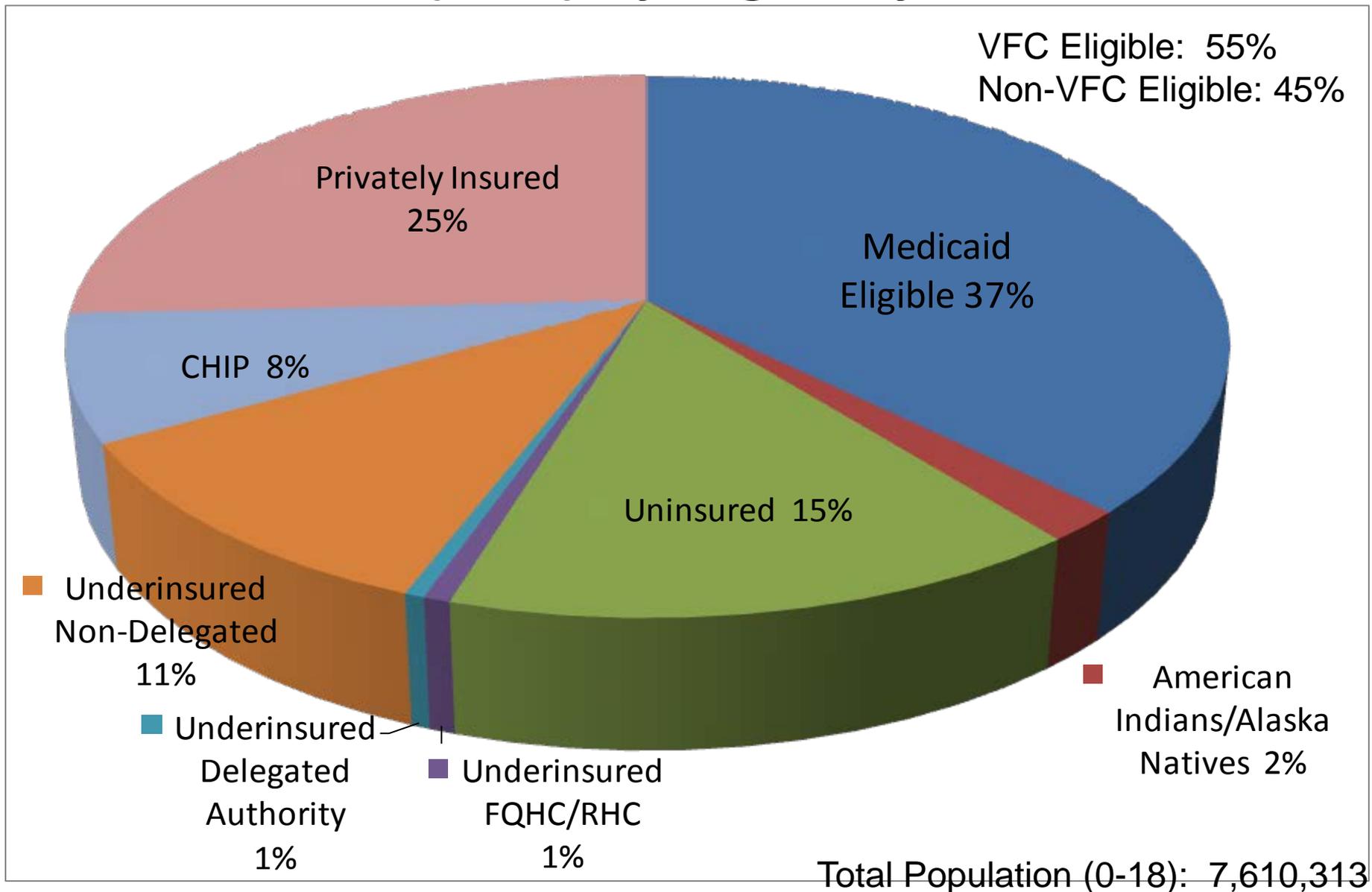
Total TVFC Provider Sites: 3,615

Other includes ISD schools, Nurse Midwives, Nurse Practitioners, and other provider types

TVFC Providers By Specialty



Texas 2014 Total Population (0-18) By Eligibility



Vaccine Policies

Additional TVFC Policies

- Blended Inventory
 - Providers may maintain blended inventory of all public purchased vaccines (VFC, CHIP, and Underinsured)
 - If the site is a Adult Safety Net (ASN) Provider, must keep VFC vaccines separated from ASN vaccines
- VFC Eligibility Screening
 - Providers must screen and document VFC eligibility at each visit
 - Maintain documentation for minimum of 5 years

Additional TVFC Policies

- Provider Training
 - Providers must complete both CDC trainings on an annual basis (vaccine storage and handling and VFC program policies)
 - Documentation must be provided as part of provider enrollment/re-enrollment
- Provider Enrollment
 - All provider enrollments were due to DSHS on 3/31/2014
 - Patient profiles must be accurate as vaccines are shipped based on provider profiles

Additional TVFC Policies

- Vaccine Transfers (new)
 - Providers should only transfer vaccines between providers under certain circumstances.
 - Approval of DSHS HSR required prior to vaccine transfer
- Vaccine Borrowing (new)
 - Should never occur - (VFC vaccine given to non-VFC eligible clients)
 - Providers should maintain adequate inventory of both public and private vaccines for eligible populations

Requirements Around Vaccine Financing and Accountability

- Clients MUST be screened for eligibility 100% of the time
- Documentation of eligibility must be maintained for all groups (VFC, CHIP, and underinsured)
- Billing of all CHIP children must be established before providing service
- Serving underinsured children must follow federal and state policies
- Referral of insured clients must continue unless clinic is set up to bill and administer from private stock

ADULT SAFETY NET PROGRAM

ASN

- The Adult Safety Net (ASN) Program supplies publicly-purchased vaccine at no cost to enrolled providers.
- Aimed at increasing access to vaccination services in Texas for uninsured adults.

ASN continued

- Since its initial inception as a limited, Hepatitis B initiative, to its current status as a program that supplies adult vaccines at no cost to a network of 466 medical providers (and counting), the ASN Program has evolved into one of the major factors in improving adult vaccination rates in Texas today.

ASN Update

- Exceptional Item granted by the legislature
- Vaccines for uninsured adults (19 and older)
- Mobile vaccination clinics
- Expanded formulary

ASN Eligible Provider

- Limited Adult Providers
 - Contracted Family Practice
 - HIV/STD
 - Substance Abuse
 - FQHC
 - RHC

ASN Providers Statewide

Provider Types	Total Providers
DSHS	82
Family Planning	32
FQHC	198
RHC	13
LHD	130
STD/HIV	15
Substance Abuse	2
TOTAL	472

ASN Providers Sites by Region

Health Service Region	TOTAL PROVIDERS
HSR 1	22
HSR 2	21
HSR 3	50
HSR 4	25
HSR 5N	11
HSR 5S	9
HSR 6	44
HSR 7	82
HSR 8	38
HSR 9	20
HSR 10	25
HSR 11	71
City of Houston (25)	31
City of San Antonio (01)	23
TOTAL	472

Current Formulary

- Hepatitis A vaccine
- Hepatitis B vaccine
- Hepatitis A and Hepatitis B combination vaccine (Twinrix[®])
- Human Papillomavirus (HPV) vaccine
- Measles/Mumps/Rubella (MMR) vaccine
- Pneumococcal Polysaccharide (PPSV23) vaccine
- Tetanus, Diphtheria, and Pertussis (Tdap) vaccine
- Tetanus and Diphtheria (Td) vaccine.

Activities to Increase Vaccination Rates



National Vaccine Advisory Committee

Incorporate immunization needs assessment
into every clinical encounter

Strongly recommend needed vaccines and
either administer vaccines or refer patients to a
provider who can immunize

National Vaccine Advisory Committee (2)

Stay up-to-date on, and educate patients
about vaccine recommendations.

Implement systems to incorporate vaccine
assessment into routine clinical care

DSHS Strategies to Increase Immunization Rates



- Promoting the Medical Home
- Systematic, methodical understanding of and development and implementation for provider, public, and parent education
- Increasing access points for TVFC and ASN eligible clients
- Promoting the Use of the Statewide Immunization Registry and Disaster Preparedness Tracking and Reporting System, ImmTrac

DSHS Strategies to Increase Immunization Rates



- Recruiting additional non-traditional immunizers
 - Pharmacies
 - Schools
 - Non-traditional providers (OBGYN, Adolescent Medicine, etc.)
- Customized approach for each Health Service Region
 - Rates assessment by vaccine antigen type
 - Demographic assessment
 - Leveraging learning from one HSR to another
- Advocating for Public/Private Partnerships, as appropriate

Conclusion

“A fully immunized society is necessary to reach optimum eradication of vaccine preventable infectious diseases.

With your help, we can reach these goals leading to a healthier Texas.”