

Texas Department of State Health Services



Immunization Branch 2014-2015 Update



www.ImmunizeTexas.com



Celebrating 20 Years of Texas Vaccines for Children



Vaccines for Children

20 years of protecting America's children

The Vaccines for Children program was established in 1994 to make vaccines available to uninsured children. VFC has helped prevent disease and save lives...big time!

CDC estimates that vaccination of children born between 1994 and 2013 will:

prevent **322 million** illnesses


more than the current population of the entire U.S.A.

help avoid **732,000** deaths


greater than the population of Boston, MA.

save nearly **\$1.4 trillion** in total societal costs
(that includes \$295 billion in direct costs)


or \$4,473 for each American



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

MMWR: Benefits from Immunization During the Vaccines for Children Program Era — United States, 1994–2013 NCIID-404 | 04.23.2014

www.cdc.gov/features/vfcprogram

Outline

- Texas Population Estimates
- Vaccine Financing
- 2014 and 2015 TVFC Program in Review



VFC BELONGS TO CHILDREN

Immunization in the United States

- Most vaccine-preventable diseases at record lows
- Achieved & sustained high childhood immunization
- Reduced disparities in childhood coverage
- Introduced multiple new vaccines
- Improved production and suppliers of influenza vaccine
- Combination of public and private insurance make vaccines accessible to virtually all children and adolescents

Texas Childhood Population Estimates

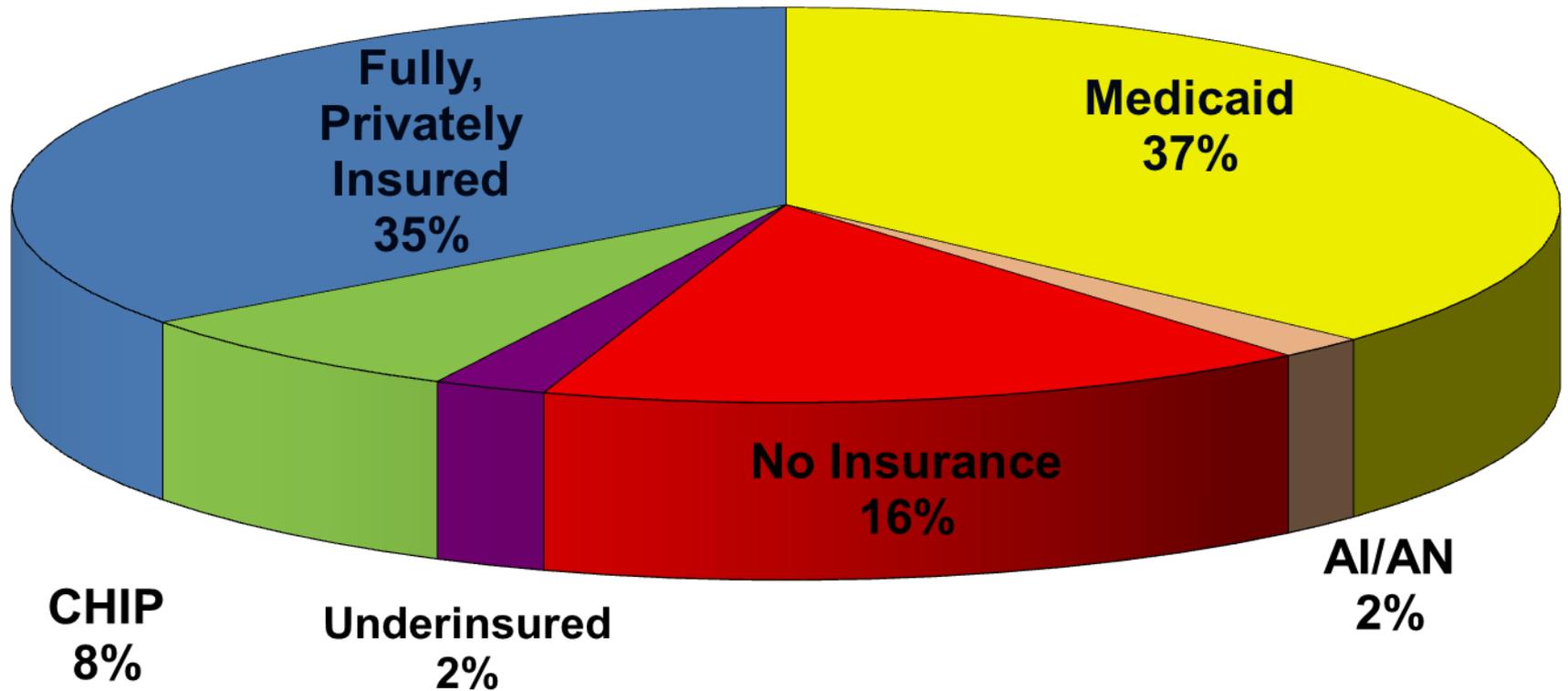
Texas PES (Children 0-18 years)

TEXAS POPULATION ESTIMATES		
	2014	2015
Total Grantee Population	7,610,313	7,721,410
1. The number of children enrolled in the Medicaid	2,853,828	2,851,373
2. The number of American Indians/Alaska Natives.	142,974	143,420
3. The number of children without health insurance.	1,162,674	1,256,462
Underinsured and VFC Eligible		
4. Federally Qualified Health Centers.	48,785	49,549
5. Delegated Authority	36,031	7,716
Sub-total VFC Eligible	4,244,292	4,308,522
6. The number of children underinsured in private sector	831,787	125,269
7. The number of children with CHIP	576,052	574,866
8. Privately Insured	1,958,182	2,712,753
Sub-total NON-VFC Eligible	3,366,021	3,412,888

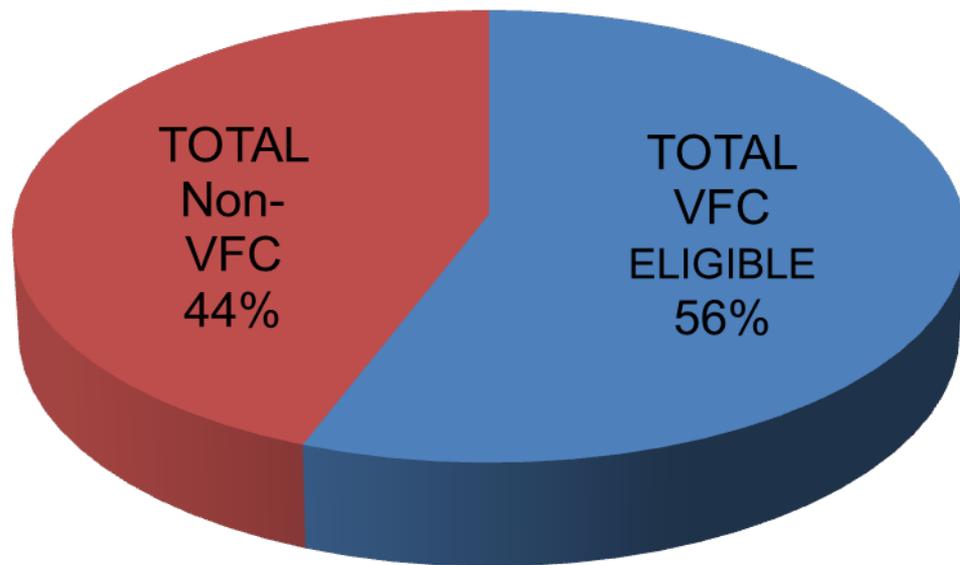
Texas PES- 2015 (Children 0-18 years)

TEXAS 2015 POPULATION ESTIMATES		
	TOTALS	%
Total Grantee Population	7,721,410	
1. The number of children enrolled in the Medicaid	2,851,373	36.93%
2. The number of American Indians/Alaska Natives	143,420	1.86%
3. The number of children without health insurance	1,256,462	16.27%
Underinsured and VFC Eligible		
4. Federally Qualified Health Centers.	49,549	0.64%
5. Delegated Authority	7,716	0.10%
Sub-total VFC Eligible	4,308,522	55.80%
6. The number of children underinsured in private sector	125,269	1.62%
7. The number of children with CHIP	574,866	7.45%
8. Privately Insured	2,712,753	35.13%
Sub-total NON-VFC Eligible	3,412,888	44.20%

Texas Population Estimates – 2015



Texas Childhood Population – 2015 (ages 0-18 years)



VFC Eligible:

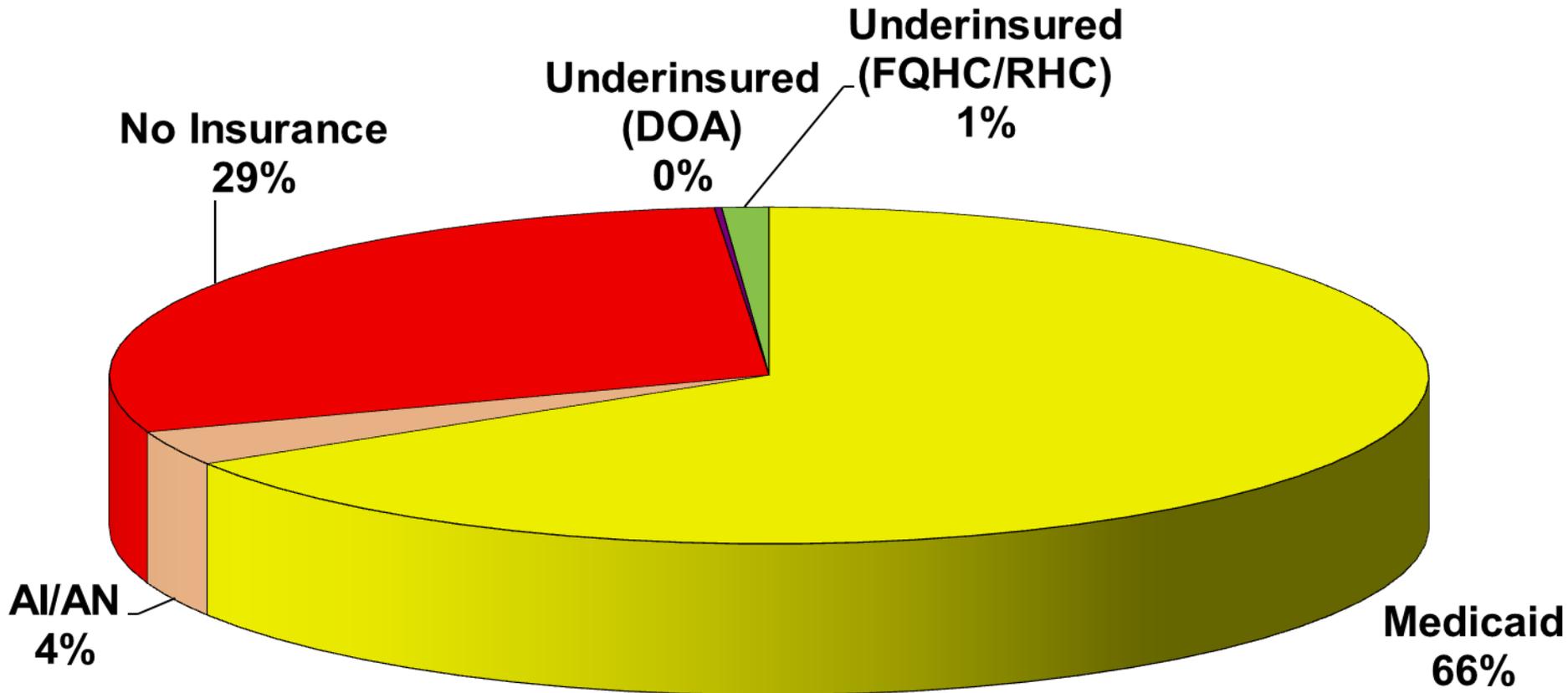
- Medicaid-eligible
- Uninsured
- American Indian/ Alaska Native
- Underinsured
 - has commercial (private) health insurance but coverage does not include vaccines; insurance covers only selected vaccines (VFC-eligible for non-covered vaccines only), or vaccine coverage is capped at a certain amount (VFC eligible after cap is reached).

Non-VFC Eligible:

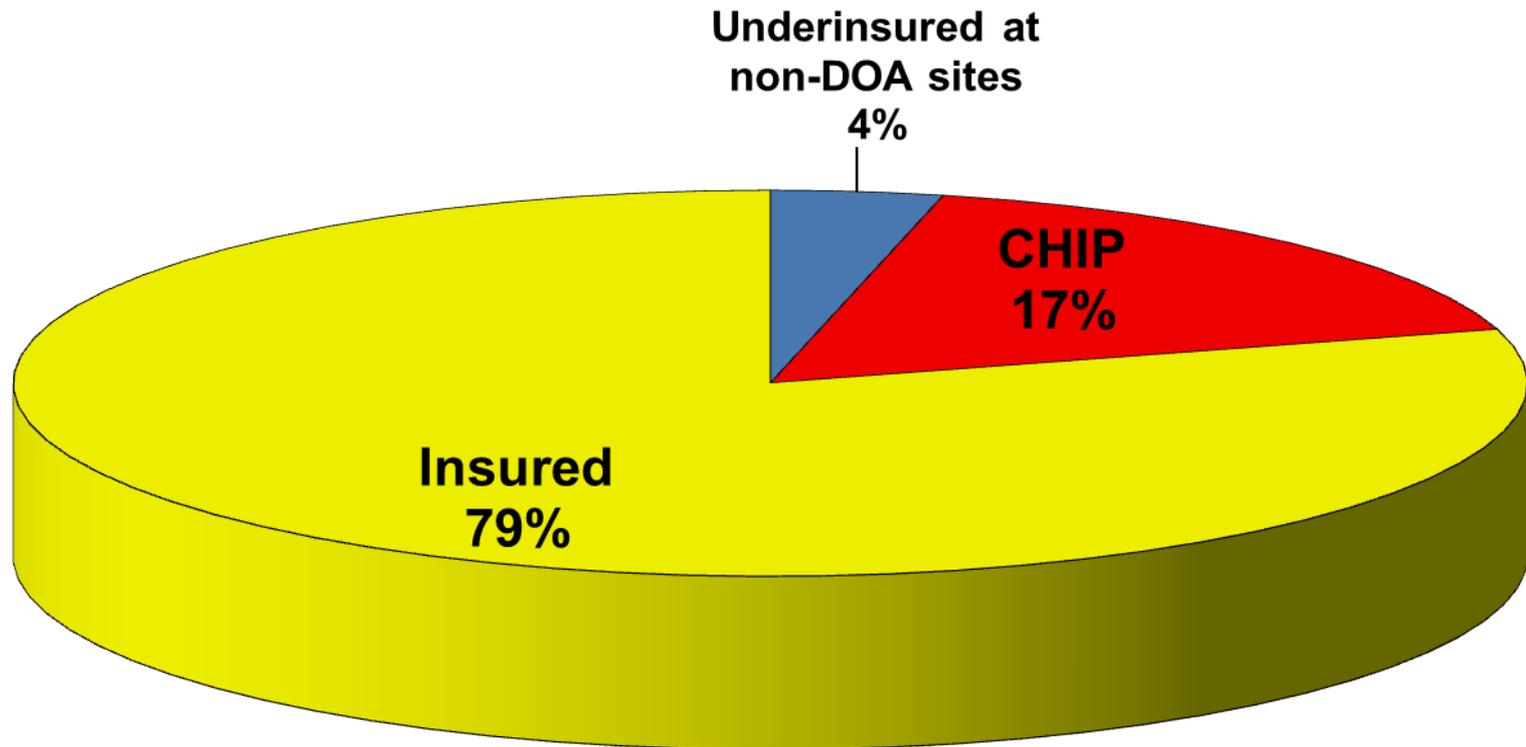
- Insured
- CHIP
- Underinsured in private sites

Total Population (0-18): 7,721,410

VFC Eligible Population – 2015 (covered by Federal VFC vaccine funds)



Non-VFC Eligible Population – 2015 (covered by Federal Section 317, State GR and CHIP vaccine funds)



TVFC Provider Sites By Region

Region	Provider Sites
HSR 1	165
HSR 2	109
HSR 3	694
HSR 4	187
HSR 5	125
HSR 6	408
HSR 7	358
HSR 8	192
HSR 9	107
HSR 10	134
HSR 11	462
COH (Region 6/5S)	345
SAMHD (Region 8)	177
TOTAL	3,463

Vaccine Financing



Federal Vaccine Funds

Federal Vaccine Funds:

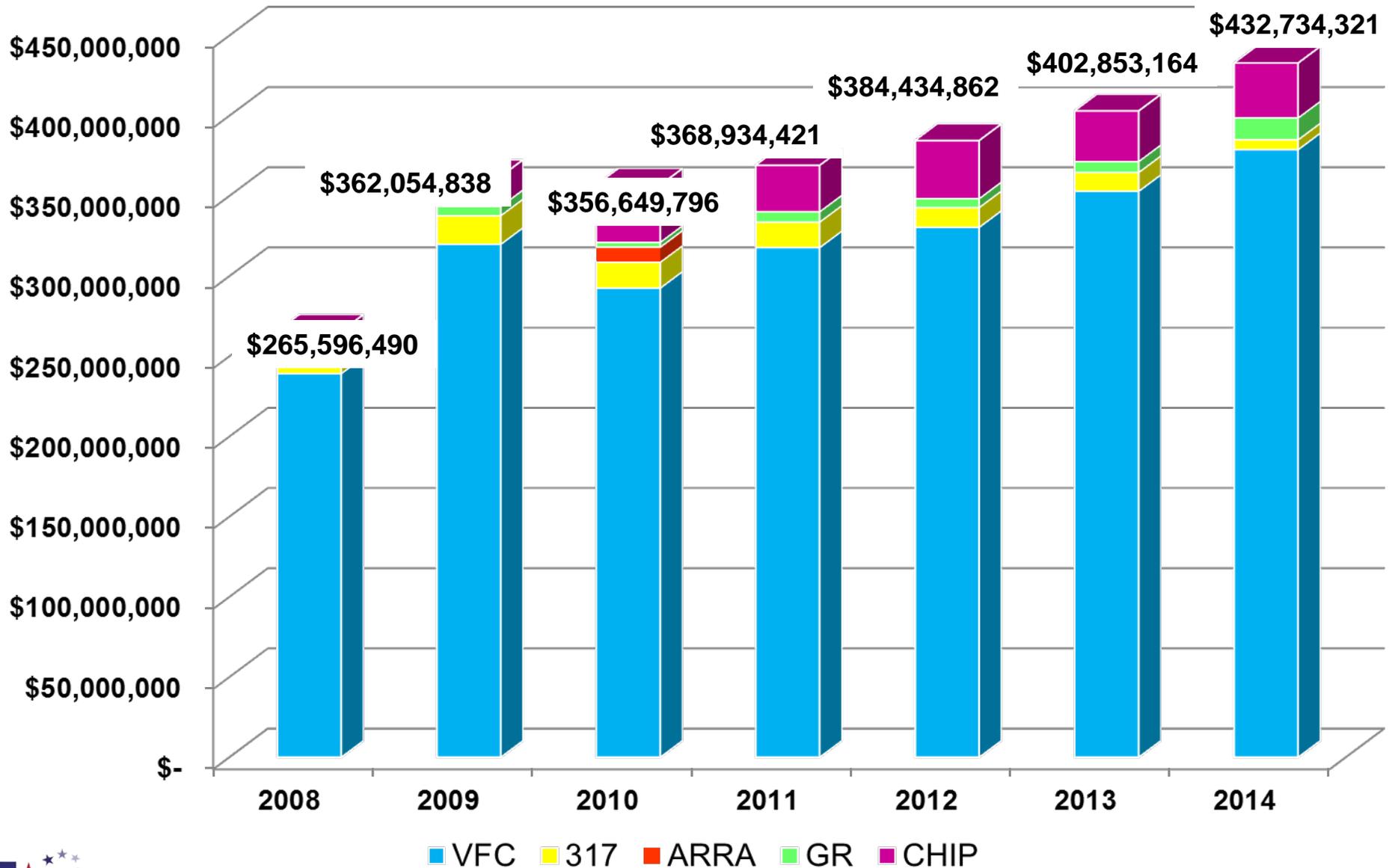
- VFC- Entitlement vaccine for eligible children (0-18)
- 317 FA- (Financial Assistance) Vaccines not available on the federal contract (Td, DT)
- 317 DA- (Direct Assistance) Vaccines to cover non-VFC eligible children and adults
 - Funds Underinsured Children in the private sector
 - Funds Adult Immunizations through ASN Program

STATE (GR) Vaccine Funds

5 Vaccine Funding Sources with General Revenue

- GR Vaccines through appropriations
- Medicare funds (from vaccine fees collected in the DSHS- 008)
- Medicaid funds (from vaccine fees collected by DSHS- 080)
- Insurance Funds (appropriated funds for purchase of specific childhood vaccines- 136)
- CHIP Vaccine Reimbursement Funds (055)

Total Vaccine Purchases in Texas 2008-2014



2015 Vaccine Budget Projections

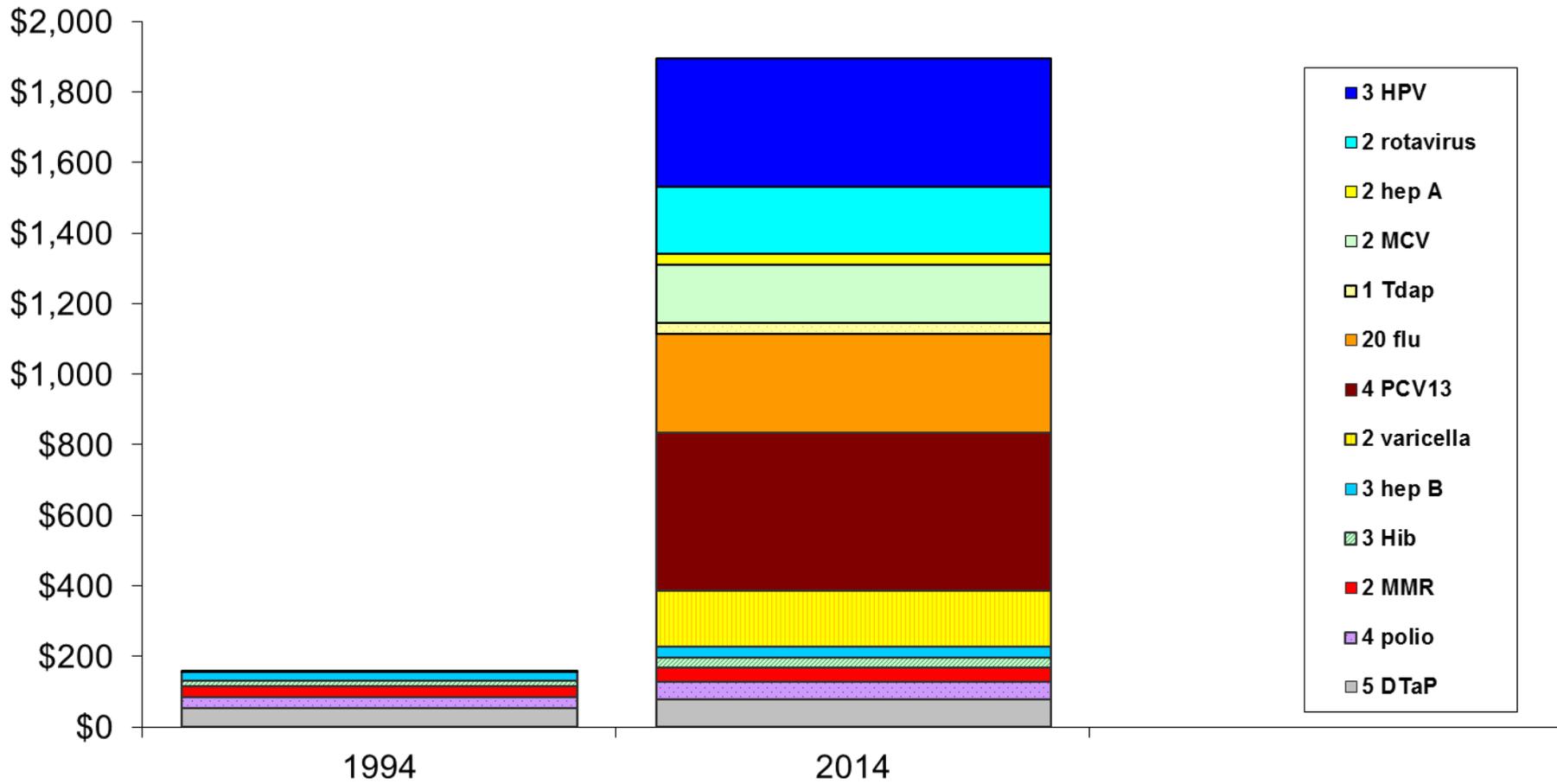
Federal Funds*

• VFC:	\$426,247,949
• <u>317:</u>	<u>\$ 6,054,898</u>
TOTAL:	\$432,302,847

State Funds:

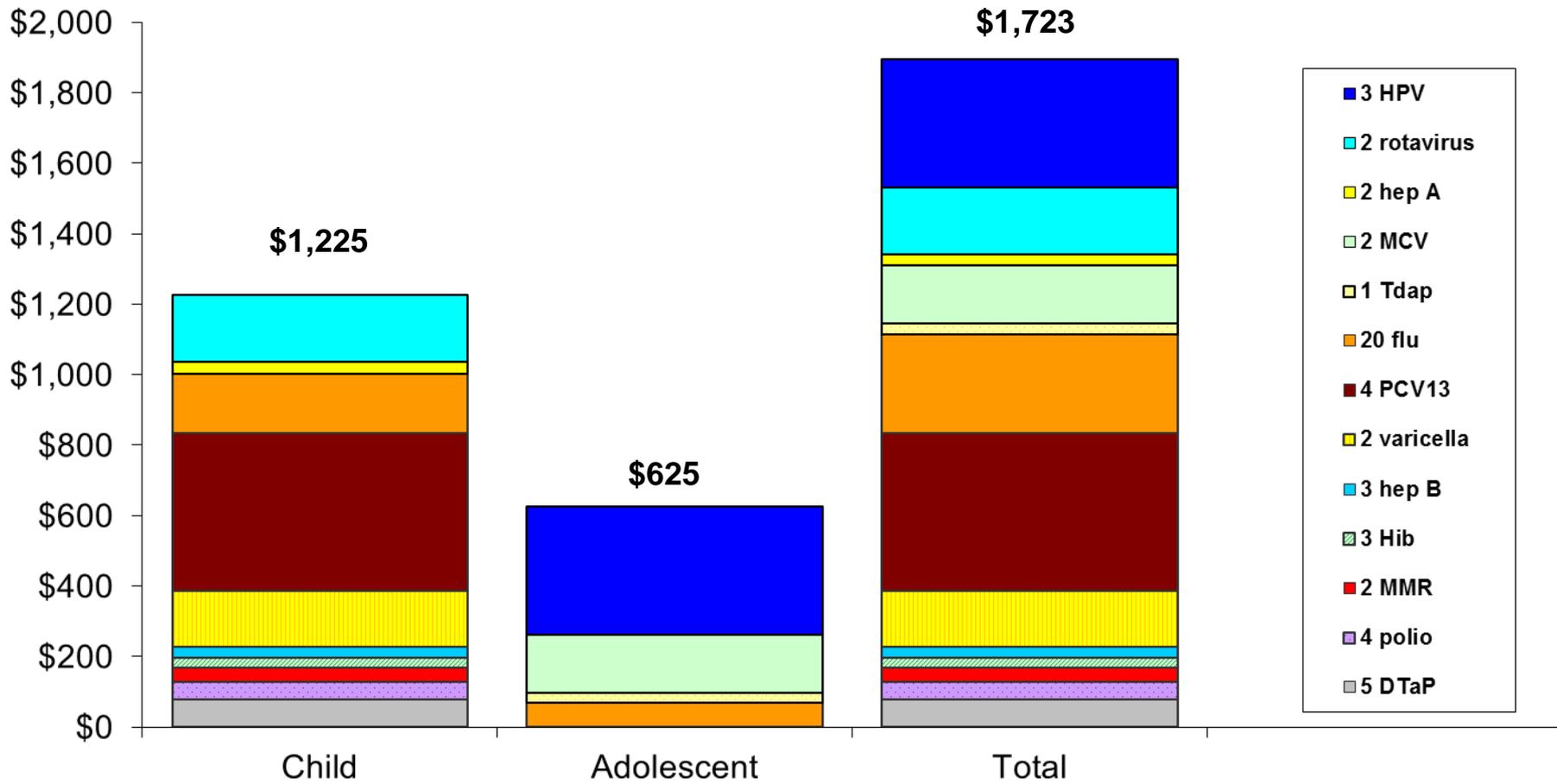
• CHIP:	\$ 23,780,690
• GR:	\$ 8,971,000
• <u>OTHER:</u>	<u>\$ 4,228,019</u>
TOTAL:	\$ 36,979,709

Increase in Pediatric and Adolescent Vaccines, Doses, and Cost of Products: 1994 to 2014



2014 represents minimum cost to vaccinate a child (birth through 18); exceptions are 1) no preservative pediatric influenza vaccine, and 2) HPV for males and females.

Cost To Vaccinate a Child (0-10) and Adolescent (11-18)- 2014



2014 represents minimum cost to vaccinate a child (birth through 18); exceptions are 1) no preservative pediatric influenza vaccine, and 2) HPV for males and females.

Federal contract prices as of February 1, 1990, September 27, 2000, and May 1, 2014.

Texas VFC Program in 2014



Texas VFC in 2014

- Expand DSHS Vaccine Services Group
 - Vaccine Operations Group (Barbara Vassell)
 - Quality Assurance (PEAR) and Site Visits
 - TVFC and ASN Provider Recruitment
 - TVFC and ASN Program Policy/Procedures
 - Adult Safety Net (ASN) Program
 - Vaccine Management Group (Kelly Patson)
 - Vaccine Call Center
 - Vaccine Ordering and doses administered
 - Vaccine Accounting/Finance
 - Annual Influenza Program
- Both Groups work with ImmTrac Replacement

Texas VFC in 2014

- Commit additional resources to vaccines storage and monitoring
 - Data loggers
- Expand Texas QA Site Visits
 - Apply ACIP recommendations to all provider immunization record assessments (CoCASA)
- Expand number of VFC unannounced site-visits
- Continue emphasis on storage and handling
- Continue emphasis on eligibility screening
- Continue requirement for VFC Providers to complete CDC required trainings

Texas VFC in 2014

- Reach out to our VFC Provider network
 - Recruit additional VFC providers (+9,000 packets going out 10/2014)
 - More customer service focused
 - Ensure providers have tools (vaccine, resources, trainings, etc.) to be successful
- Launch ‘new’ TVFC Provider (10/2014) and Operations (12/2014) manuals
- Release results of TVFC Provider Satisfaction Survey
- Adult Safety Net (ASN) Program Expansion

Texas VFC Program in 2015



Texas VFC in 2015

- Achieve 100% provider re-enrollment by 3/31/2015
- Continue requirement for VFC Providers to complete CDC required trainings
- Release guidance documents on how to train a provider to become a TVFC Provider
- Increase marketing of TVFC and ASN Program to potential individual or group providers/practices
- Continue emphasis and trainings on vaccine storage and handling
- Continue emphasis and trainings on eligibility screening

Texas VFC in 2015

- Conduct site visits on over 90% of all TVFC and ASN provider sites
- Increase the number of unannounced provider visits by more than 25% (what gets measured....)
- Launch ImmTrac2 and new vaccine ordering and reporting systems for all providers
- Increase CDC National Immunization Survey coverage levels of Texas' infants, children, and adults
- Ensure all TVFC eligible children have access to VFC vaccines at each ACIP recommended age

Texas VFC in 2015

- Continue to commit additional resources to vaccines storage and monitoring
 - Required thermometers
 - Data loggers
- Explore Additional Vaccine Choice Options
 - Consideration to lifting the ability of provider's to only add vaccines on a quarterly basis
 - In combination with launch of ImmTrac2
- Continue expansion of ASN Program
 - Consider additional site types
 - Assist with providers who wish to serve and bill privately insured adults

2014-2015 Influenza Season



DSHS Influenza Update

Presentation	Manuf.	Pre-BOOKED Round 1	Pre-BOOKED Round 2	TOTAL DOSES	Total Doses Received YTD	% Received
.25 Formulation (Quadrivalent)	Sanofi	548,400	21,000	569,400	548,400	96.31%
.5 Formulation (Tri Valent)	Sanofi, CSL, Novartis	56,040	0	56,040	56,040	100.00%
.5 Formulation (Quadrivalent)	GSK	360,030	152,400	512,430	360,360	70.32%
.5 Formulation (Quadrivalent)	Sanofi	473,820	0	473,820	473,900	100.02%
FluMist (Quadrivalent)	Medimmune	500,630	18,500	519,130	500,450	96.40%
SUB-TOTAL		1,938,920	191,900	2,130,820	1,939,150	91.00%

DSHS Influenza Update

TVFC Providers Receiving Vaccine

Total Providers Pre-Booking Flu

2,923

Total Providers Receiving Flu

2,836

% Total Providers Receiving Flu

97.02%

TVFC Providers Completing Orders

Total Providers who were allocated 100% of Pre-book

2,173

% Providers who were allocated 100% of Pre-book

74.34%

Only 2,484 provider (out of 3,206 eligible TVFC providers) pre-booked flu vaccine in 2014. An additional 439 did finally order in the second round.

DSHS Adult Safety Net (ASN) Program



Adult Safety Net (ASN) Overview

- The Adult Safety Net (ASN) Program supplies publicly-purchased vaccine at no cost to enrolled providers.
- The aim is to increase access to vaccination services in Texas for uninsured adults.
- Funding for 2014 and 2015 is from State Exceptional Item and 317 funds (including one-time end of year funding for PCV 13 in September, 2014)
 - 2015 EI funding for ASN: \$8,971,000
 - 215 Federal 317 funding for ASN: \$3,700,000

Texas ASN Providers in 2014

ASN Providers By Type (As of October 31, 2014)	
Public Health Department	219
Public Hospital	2
FQHC/RHC	224
Community Health Center	12
STD/HIV	10
Family Planning Clinic	18
Drug Replacement Facility	4
Total	489

Current ASN Formulary

- Hepatitis A
- Hepatitis B
- Hepatitis A & B combination
- Human Papillomavirus (HPV)
- Measles/Mumps/Rubella (MMR)
- Pneumococcal Vaccines (PPSV23 & newly added PCV 7 (effective 11/10/2014))
- Tetanus, Diphtheria, and Pertussis (Tdap)
- Tetanus and Diphtheria (Td)

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 of TVFC and Adult vaccinations
- Promoting the Use of the Statewide Immunization Registry and Disaster Preparedness Tracking and Reporting System, ImmTrac

DSHS Strategies to Increase Immunization Rates



- 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



VFC BELONGS TO CHILDREN