Alabama Adolescent Vaccination Task Force (AAVTF)
Alabama Department of Public Health
The RSA Tower, Suite 1586
Montgomery, AL
March 12, 2019
10:00 a.m.

Present:
Linda Champion, Alabama Chapter American Academy of Pediatrics
Leah Chapman, UAB School of Public Health
Liberty Duke, HNH Immunizations
Linda Forney, Alabama Department of Public Health, Cancer Division
Carol Garrett, Alabama Department of Public Health, Cancer Division
Cindy Lesinger, Alabama Department of Public Health, Immunization Division
Dr. Stuart Lockwood, Alabama Dental Association
Dr. Mary McIntyre, Alabama Department of Public Health, Chief Medical Officer
Drew Nelson, Alabama Medicaid
Kitty Norris, Alabama Department of Public Health, Cancer Division
Kumari Seetala, Alabama Department of Public Health, Immunization Division
Denise Strickland, Alabama Department of Public Health, Immunization Division
Dr. Burnestine Taylor, Alabama Department of Public Health, Communicable Disease
Nancy Wright, Alabama Department of Public Health, Cancer Division

Phone Attendees:
Jeff Arrington, Alabama Academy of Family Physicians
Casey Daniel, University of South Alabama
Angela Davis, American Cancer Society
Dr. Eric Forbes, UAB
Natali Fox, University of South Alabama
Justin George, Alabama Department of Public Health, Cancer Division
Clemise Hurst, Alabama Medicaid
Jennifer Jones, Franklin Primary Health Center
Lee Jones, Alabama Pharmacy Association
Mary Ann King, Laura Crandall Brown Foundation
Linda Lee, Alabama Chapter American Academy of Pediatrics
Robert Moon, Alabama Medicaid
Jessica Mosely, Franklin Primary
Kelly Newman, Alabama Medicaid
Elizabeth Smith, Mobile County Health Department
Carol Talley, Blue Cross Blue Shield of Alabama
Kimberly Williams, American Cancer Society
Dr. Jennifer Young-Pierce, Mitchell Cancer Institute
Allison __________, __________
Kathy Shuleva, Blue Cross Blue Shield of Alabama
Judy Mitchell, Franklin Primary Care Center
Tina Tarsitano, Pharmacist
Cindy Lesinger discussed recent events of ADPH, along with AAP, BCBS, ACS, dental in-house, and the Dental Association.

1. Alabama was selected as one of seven states for a community practice project on the registry. Registry issues discussed at CDC were:
   - Clarify the denominator. Currently a vaccinator is identified as anyone giving one vaccination within the past 12 months. A better definition is needed.
   - Vendor training support to the provider site with regard to the electronic health record.
   - Delay in communication for providers and vendors during ImmPRINT and on-boarding
   - Data quality issues
   - Improve marketing strategies and provider participation

2. Angela Davis reviewed a provider education summit in connection with BCBS where partners received networking opportunities.

3. Dr. Daniel provided a review of an HPV roundtable meeting which included several southeastern states (Alabama, Mississippi, Tennessee, Kentucky, Georgia, South Carolina, and [__________]). A major need in the Southeast is alternative settings for vaccinations, especially in rural areas. One suggestion is working with pharmacies. Other options to improve immunization rates could be using telehealth, establishing rural champions, offering more providers, and working with dental providers. Ms. Lesinger stated Alabama’s strength in pediatric vaccinations is a good working collaboration with Medicaid and BCBS and using ImmPRINT to determine the final matrix of percent. Also, if a patient receives vaccinations somewhere other than their primary provider, the primary provider still receives credit for the vaccinations.

4. Dr. Daniel stated Governor Ivey signed a proclamation on February 27, 2019, declaring April 29 to be Oral Cancer Awareness month in Alabama. Alabama is fifth in incidence and seventh in mortality in oropharyngeal cancer. Some oropharyngeal cancer is associated with HPV. Also, several groups are collaborating to develop social media campaigns. One is called “Watch Your Mouth.” Other campaigns include press releases, Twitter and Facebook posts, an educational release for AL.com, posters, greeting cards, and dental continuing education credit.

Workgroup leaders gave updates.

5. Dr. McIntyre gave an update on Policy and Alternative Providers. Alabama has a low vaccination rate with HPV. Plus, there are outbreaks that could have been reduced with better vaccination rates, such as the current measles outbreak in
other states and the Hepatitis A outbreak in North Alabama. Deterrents to a higher vaccination rate are lack of a medical home and children on Medicaid or VFC eligible cannot currently obtain vaccines at pharmacies. Dr. McIntyre stated Alabama Department of Public Health (ADPH) is planning to combat this by using pharmacies in a few counties (20 or less) to give immunizations to children 9 and older. Data received from the initiative will help determine two baseline measures, a medical home rate and a baseline immunization rate. The Alabama Chapter of the American Academy of Pediatrics (AAP) is working with physicians with good vaccination rates to help physicians with low vaccination rates. Dr. Harris is asking for more money from the Legislature this year to help with the cost of immunizations. A suggestion to help with HPV is to acknowledge it as a cancer prevention immunization in hopes parents will not continue to see it as a sexual vaccination.

- Ms. Lesinger expressed concern from physicians not wanting vaccinations given in schools even though most of the school systems approve of the idea. Many children in the schools do not have a medical home to receive the vaccines.

- Dr. McIntyre suggested it would be helpful to somehow come up with a list of primary physicians, by county, that would accept new patients so the list could be handed out at different places, such as pharmacies or schools, when it is determined a child does not have a medical home. It was suggested that Dr. Harris discuss the Board of Medical Examiners sending out a short survey questionnaire during their annual renewal of physicians’ licenses. The survey question would ask if they are accepting new patients and/or Medicaid patients. Denise Strickland stated the questions could be added to the VFC Provider Agreement and the Satisfaction Survey that is sent out.

- Dr. Moon stated in starting in October they are incentivizing physicians to increase immunization rates.

- Liberty Duke noted 6,000 to 9,000 children in Alabama have been identified as not being insured, but should qualify for Medicaid. Along with their immunization packet, they were given a Medicaid application.

- Ms. Lesinger discussed two map handouts showing the number of children (ages 9 – 18) per primary care provider and the number of Medicaid children (ages 9 – 18) per VFC provider. These maps show the counties that need interventions for more vaccine providers.
  - Twenty of 67 counties do not have a pediatrician.
  - The average number of children per primary care provider is 112.
  - The average number of Medicaid children per VFC provider is 167. Four counties have no VFC provider except for the county health department.
• One hurdle for the Registry bill mandate has been overcome. For providers with bi-directional systems, the physician does not have to access ImmPRINT as the ImmPRINT data automatically feeds into their system and vice versa.

• Ms. Lesinger stated she has been given permission to pursue the ACIP Rules with the State Committee of Public Health. This would require all nursery and kindergarten children to have all vaccines ACIP recommends. A discussion is needed at the next workgroup leaders meeting on how to market the changes and implementation.

• Ms. Lesinger stated everyone needs to be on a workgroup and a new leader is needed for the Parent Education workgroup. Liberty Duke volunteered for the position.

• Dr. Young-Pierce stated her workgroup discussed a list of peer to peer educators that should include high performers and are using the latest information from the CDC website, identifying regional HPV champions, and offer provider level education at each state level conference.

• Dr. Young-Pierce discussed a white paper that came out in December 2018 concerning an 80 percent decreased risk of recurrence of HPV in patients that had vaccination and treatment.

• Ms. Lesinger discussed additional issues.
  o To better educate providers on correcting errors in ImmPRINT.
  o The need for providers to do recall reminders for immunizations and well child checkups for the older children.
  o ADPH has an HPV CEU program. Ms. Lesinger will send a link out for it.
  o ADPH has started about six months’ worth of HPV digital media.

There were no organizational updates.

Angela Davis stated CDC has a new mini grant ($5,000) available to stakeholders doing a statewide event.

Ms. Lesinger stated the people that have not participated in the AAVTF meetings for the last year will be archived but will be welcomed back if they want to start participating again.

The next meeting is scheduled for June 11, 2019, at 10:00 a.m. However, some people have declared this is not a good time for them. Ms. Lesinger will send out a survey for interest for a statewide summit and changing the next meeting date. The meeting was adjourned.