Welcome to Our NCIC Quarterly Meeting

February 9, 2021





NCIC Quarterly Meeting Agenda

February 9, 2021

A Community Voice for Vaccines

Join Meeting Link: https://gskmeeting.webex.com/gskmeeting/j.php?MTID=md6c51fa496a5813ea07f2abb5e4b342c

Meeting Number: 175 825 4697

Join by Phone Only Option: +1 631 267 4890 USA/Canada toll; Enter access code: 175 825 4697

12:00 pm	Opening and NCIC Update Lindsay Capozziello, PharmD, Chair	1:15 pm	COVID-19 Vaccine Development Tim Mullenix, PharmD, Vaccines Medical Director, Pfizer		
12:05 pm	Joint COVID-19 "Node" of the Community Care of North Carolina and NC AHEC Chris Weathington, Director, Practice Support, NC AHEC	1:55 pm	Closing Lindsay Capozziello, PharmD, Chair		
12:20 pm	HPV Task Force Update Scott Coleman, Member, HPV Task Force	2:00 pm	Adjourn		
12:30 pm	Immunization Branch Update	P	Please Save the Dates for Upcoming NCIC Quarterly Meetings!		
	Scott Coleman, Communications Specialist		May 11, 2021		
			August 10, 2021		
12:40 pm	The NC Mutual CPESN Network Role in Community Immunizations and COVID-19 Activities		November 9, 2021		
	Christine Heath, PharmD, interim NC Mutual CPESN Network Facilitator	F	ind Updates on the North Carolina Immunization Coalition at https://letsimmunizenc.org		



Opening and NCIC Update

Lindsay Capozziello, PharmD, Chair



Keeping Kids Well Campaign & COVID19 Vaccine Administration Assistance Update

Chris Weathington, Director, Practice Support, NC AHEC





NC Department of Health and Human Services
Keeping Kids Well Campaign &

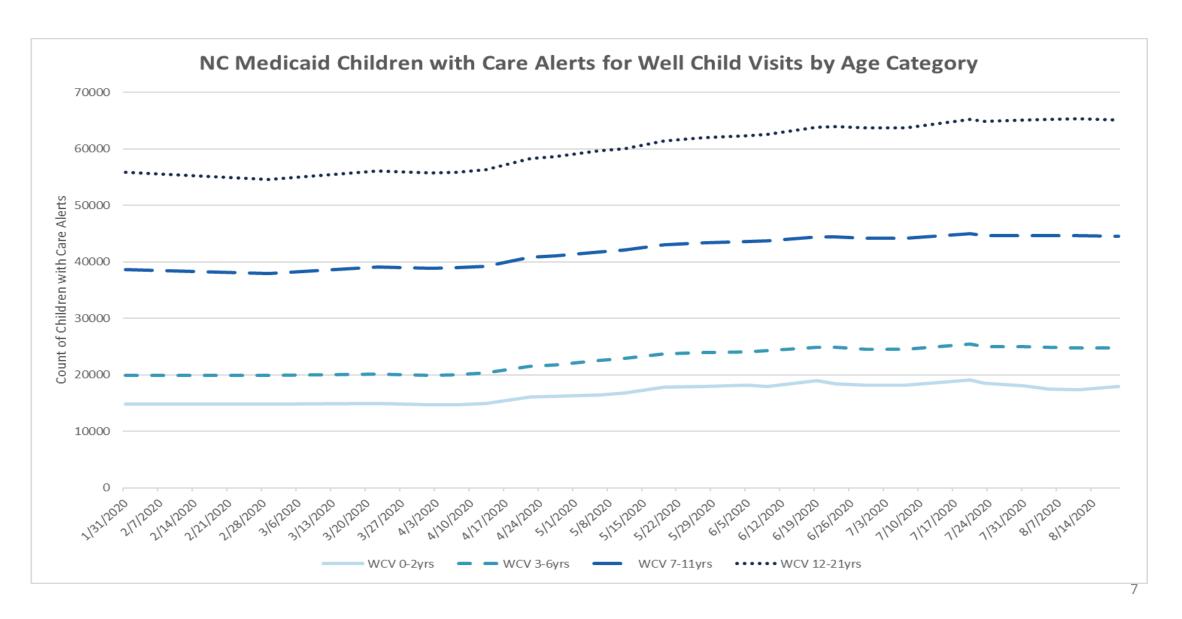
COVID19 Vaccine Administration Assistance Update

2/9/21

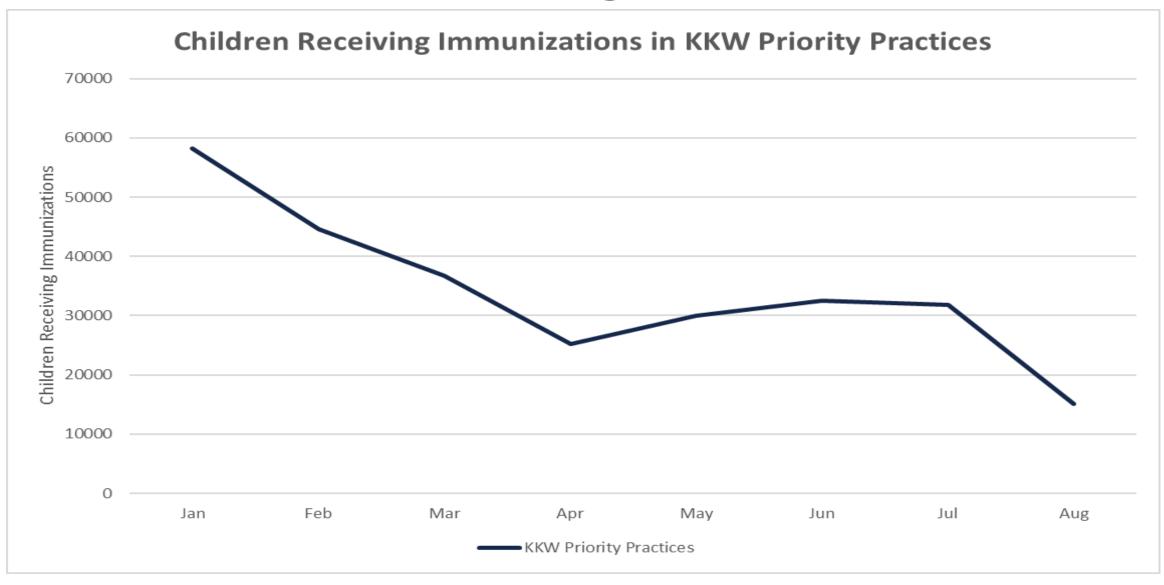
Keeping Kids Well Problem Summary

- COVID-19 has led to a measurable decrease in pediatric preventative care across all populations. Disparities in rates across populations seen historically persist, especially with Latinx and Black children.
- Under-utilization of well-child visits are missed opportunities to identify physical, developmental, and behavioral concerns – many of which can be managed or treated.
- Missed vaccinations can eventually lead to potential community outbreaks of preventable disease during a busy COVID19 and influenza season. We don't want another pandemic on top of a pandemic.
- Need for AHEC and CCNC to help practices reduce care alerts or overdue well child checks to pre-COVID19 levels via 1:1 practice support assistance, webinars, media communications, printed resources, etc.

Care Alerts for Well Child Visits



Children Receiving Immunizations



Recap of Keeping Kids Well Campaign

- Project started August 3rd and will run through first half of 2021.
- Informational webinar was given to provider community on 8/13 sharing trended claims data and an overview of the KKW campaign.
- AHEC and CCNC co-branded website went live on August 3rd sharing information, resources and tools for practices and providers.
- KKW campaign kick-off announcement was distributed to all professional DHB advisory group members and CCNC practices via email and social media.
- AHEC and CCNC publicized efforts via traditional print and internet forums.
- Practice support providing 1:1 coaching support to 160 independent and health system practice with 300 locations having more than 500 well child check are alerts.

Recap of Keeping Kids Well Campaign

- CCNC care management has been reaching out to parents and families with tailored messaging to Latinx and African-American families.
- Local Health Departments are deploying care managers
 with active outreach to children in care management who
 are missing immunizations and well visits.

Recap of Campaign Interventions

Use the EHR to generate a list of children who are behind on well childcare	
Utilize the Internet and social media to reach parents and families	
$oldsymbol{\Box}$ Utilize your staff and physical space to promote well child visits & immuniza	ations
☐ Partner with local school systems to get the message out about well childca	are and immunizations
□ Remind families across your catchment area of the importance of well child immunizations via local news outlets	Icare and
☐ Run a WCV/Immunization Promotion Month	
☐ Incorporate WCCs into acute care visits	
Develop workflow to document immunizations that were received elsewhere	ere
☐ Implement group visits for well childcare (Post-COVID-19 pandemic)	
☐ Leverage CCNC care management with prioritized groups of children	

Coaching and Practice Performance Evaluated Against 3 Process Metrics

■ **Measure 1:** Total number and percent of practices for which there is at least one contact attempt to date.

Contact attempts = 100% (Target: 100%)

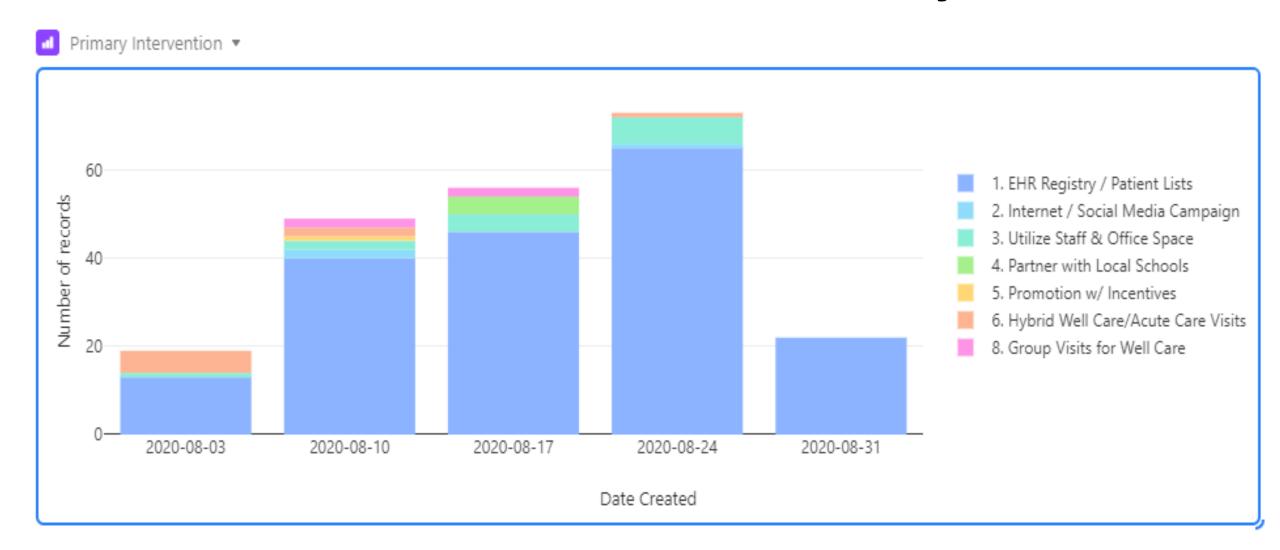
■ Measure 2: Total number and percent of practices for which there is at least one completed engagement (virtual meeting, telephone or email conversation).

Completed engagements = 87% (Target: 75%)

☐ Measure 3: Total number and percent of practices with 1 or more planned or operationalized interventions to date.

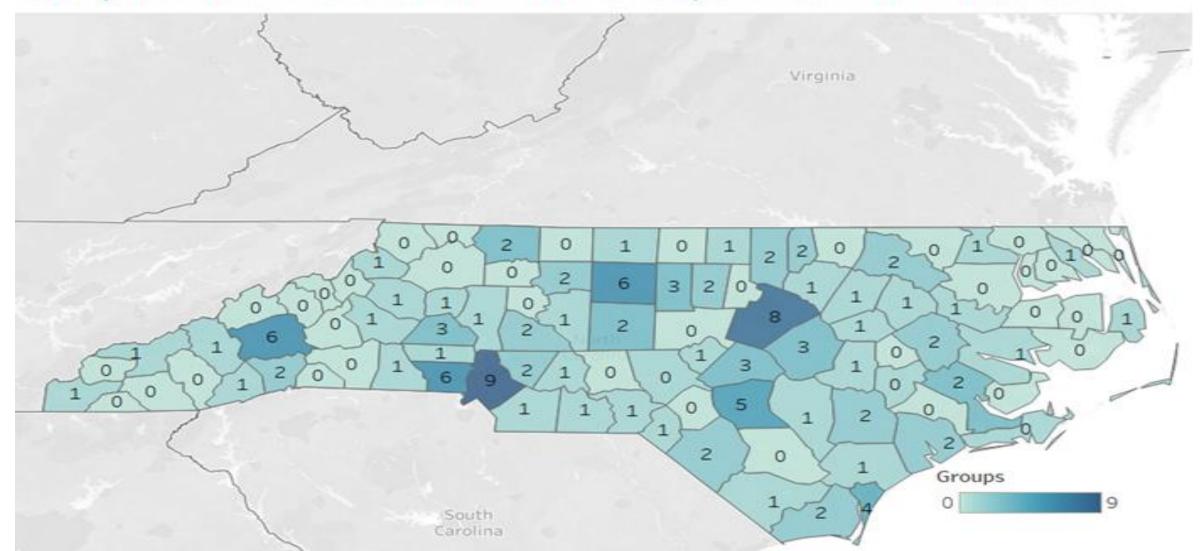
Planned or operationalized interventions = 80% (Target: 70%).

EHR Registry/Patient Lists is the Most Common Intervention Chosen By Practices



Practices with interventions is evenly distributed across the state with Mecklenburg, Wake, Buncombe, Gaston, Guilford and Cumberland Counties having 5 or more.

Completed Outreach with # of Groups with Interventions



Additional Results

- Based on Medicaid claims data (CCNC care alert reports), well child check care alerts have plateaued versus continued increase. Mixed results thus far with Latinx and Black children but there is improvement.
- AHEC, CCNC and DHB partnered with Pfizer to distribute free pediatric immunization postcards to primary care practices. Cards are available in English/Spanish and targeting both small children and adolescents. Thus far, 92 practices applied and received over 26,000 postcards.
- AHEC, CCNC and DPH partnered in December to **distribute \$175K** (**\$5K per practice**) to targeted KKW practices. Thus far, over 30 practices in 20 counties received \$175K in funding to implement targeted interventions (WCC or immunization clinics, work patient panels and contact parents for follow-up, patient education materials, etc.).

COVID-19 Vaccine Administration Assistance

- Requests for COVID19 vaccine administration should go to <u>cvms-help@dhhs.nc.gov</u>. This is for both CVMS enrollment, technical assistance with the CVMS software tool and also general COVID19 vaccine questions.
- AHEC and CCNC have partnered to also provide practice support assistance in this area. Practice support coaches are also able to assist with questions, clinical workflow guidance, and collaborate with the CVMS helpdesk to resolve issues.
- AHEC and CCNC have a co-branded website with resources at <u>Coronavirus</u> (<u>COVID-19</u>) <u>Information | Community Care of North Carolina</u> (<u>communitycarenc.org</u>).

Questions?





Immunization Branch Update & NCIC HPV Task Force Update

Scott Coleman, Communications Specialist Member, NCIC HPV Task Force





NC Department of Health and Human Services

N.C. Immunization Branch February 2021 NCIC Update

Scott Coleman Communications Manager

Get It. Got It. Good.

 North Carolina DHHS launched a new flu vaccination campaign for 2020-21 to encourage flu vaccination and educate North Carolinians about the health risks associated with flu.

 Materials are still available and, if needed, can be used by any organization to help emphasize the need for vaccination and how quick and easy the process is will soon be available at

<u>flu.ncdhhs.gov/materials</u>

 Will provide update on performance for May meeting



Get It. Got It. Good.

Target audience: All North Carolinians, with an emphasis on adults at higher risk from COVID-19, including:

- Women and mothers of young children
- Residents of long-term care facilities
- Adults with underlying illness
- African Americans and other minority populations
- Essential Workers

Get It. Got It. Good.

Deliverables for campaign include:

- 15-second and 30-second videos
- Paid social media ads used on the N.C. DHHS social channels
- Programmatic display ads
- Landing page assets available on the N.C. DHHS website: flu.ncdhhs.gov/materials
- Printed materials supporting a flu "download kit" including flyers, posters, etc.

Projects

Revised COVID Messaging

COVID-19 Information Updates

- The CVMS Healthcare Provider Experience Map is now published on the <u>main page</u> and the <u>COVID-19 training page</u> on the Immunization Branch site.
- This is a living resource that will be refreshed in-tandem with the evolving CVMS process. Additional iterations will be updated directly on the site.
- In addition to printable flyers, the experience map is currently being built out across new webpages for each step and will be available for provider access on the <u>covid19.ncdhhs.gov</u> site.
- The team is also working on migrating all existing COVID-19 content from the Immunization Branch site to ensure we don't have duplication of information in multiple places.

COVID-19 Communications Toolkit

- This is the spot for ready-made materials to help you communicate about safe and effective COVID-19 vaccines.
- Anyone who is sharing information about the COVID-19
 vaccine with their community, including health care professionals,
 team leaders, community and business leaders and non-profit
 organizations, can use and adapt the resources here to build
 confidence in the COVID-19 vaccines.
- You can help people in your community find their spot and take their shot!
- Resources are available here:

https://covid19.ncdhhs.gov/vaccines/covid-19-vaccine-communications-toolkit

Projects

Quick HPV Update

HPV Subcommittee Quick Update

Two groups for focused activities, moving forward:

- <u>Early Initiation/ On-time Completion</u> 2 doses <u>before</u> 13th birthday
 - 9-10 yrs. old early initiation of vaccination
 - 11-12 yrs. old routine on-time vaccination
- <u>Catch-up Vaccination</u> for teenage and adult opportunity 13-45 yrs.
 - 13-26 yrs. old routine catch-up vaccination
 - 27-45 yrs. old shared clinical decision-making vaccination

NC BACK TO SCHOOL Immunization Requirements

Grade Level Entry Vaccine Requirements*

Kindergarten

DTaP	5 doses
Pollo	4 doses
HID (4-YEAR-OLDS ONLY)	3-4 doses
MMR (or 2 measles, 2 mumps, 1 rubella)	2 doses
Hepatitis B	3 doses
Varicella	2 doses
Pneumococcal conjugate (4-YEAR-OLDS ONLY)	4 doses

7th Seventh Grade

DTaP	5 doses
Polio	4 doses
MMR (or 2 measles, 2 mumps, 1 rubelle)	2 doses
Hepatitis B	3 doses
Varicella	1 dose
Tdap	1 dose
Meningococcal conjugate	1 dose
Hermigococcai corquigate	1 0000

12th Twelfth Grade

Merinigoedeesi corquigate	1 0000	
DTaP	5 doses	
Polio	4 doses	
MMR (or 2 measles, 2 mumps, 1 rubella)	2 doses	
Hepatitis B	3 doses	
Varicella	1 dose	
Tdap	1 dose	
Meningococcal conjugate (IPPECTIVE 2020-21 SCHOOL YEAR)	2 doses	

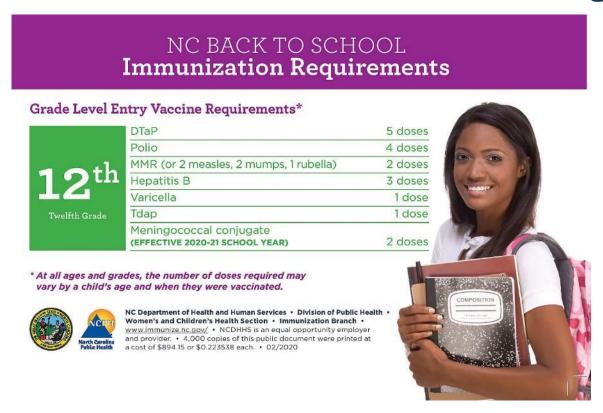
 At all ages and grades, the number of doses required may vary by a child's age and when they were vaccinated.





NC Department of Hasikh and Human Services • Obliden of Public Health • Wasse's and Children's Health Section • I remembertion Branch • <u>www.immunize.nc.gov/</u> • NCDHHS is an equal opportunity employer and provider. • C7/2019

Back-to-School Immunization Messaging



- Updated meningococcal (MCV4) booster requirement also included on new 12th grade N.C. Back to School Requirements fact sheet, as well.
- All updated grade-specific fact sheets, in English and Spanish, available at: https://www.immunize.nc.gov/family/nc immnz requirements.htm

Projects

Immunization During COVID-19 Social Media Campaign

COVID-19 Immunization Campaign

Sticking to vaccine schedules is still important, even during the COVID-19 pandemic.



Many immunizations require a series of shots, given at specific intervals, to ensure a child is fully protected.

- Series of messages focused on the importance of immunization, at all times!
- Bold, attention-grabbing colors and design to enforce the message.
- Messages have been running on multiple platforms including Facebook, Twitter and Instagram, since May.

COVID-19 Immunization Campaign



Thank you for sharing these messages with others!

>>>>>>>>> NCDHHS, DIVISION OF PUBLIC HEALTH

Questions?

Scott Coleman

Scott.Coleman@dhhs.nc.gov

919-210-6924 (mobile)



The NC|Mutual CPESN Network Role in Community Immunizations and COVID-19 Activities

Christine Heath, PharmD, NC Mutual CPESN Network Facilitator

Introducing CPESN Networks

AN Investment NOT A COST CENTER



Our Networks:

- Improve Employee Productivity
- Lower Blood Pressure
- Decrease Hospitalizations
- Lower HgA1C
- Lower Total Cost of Care



America's First Accountable Pharmacy Organization



We are:

- Clinically integrated
- Performance-based
- Willing to be held accountable



Join the Only True "Community Pharmacy" Network



CPESN USA is directed by a board of community pharmacy owners appointed by their local CPESN Network

CPESN USA is comprised of 49 geographically unique CPESN Networks of community pharmacies

CPESN USA is focused on building and supporting local CPESN networks



Payers Want to Contract With the Providers Who Deliver Care to Your Patients

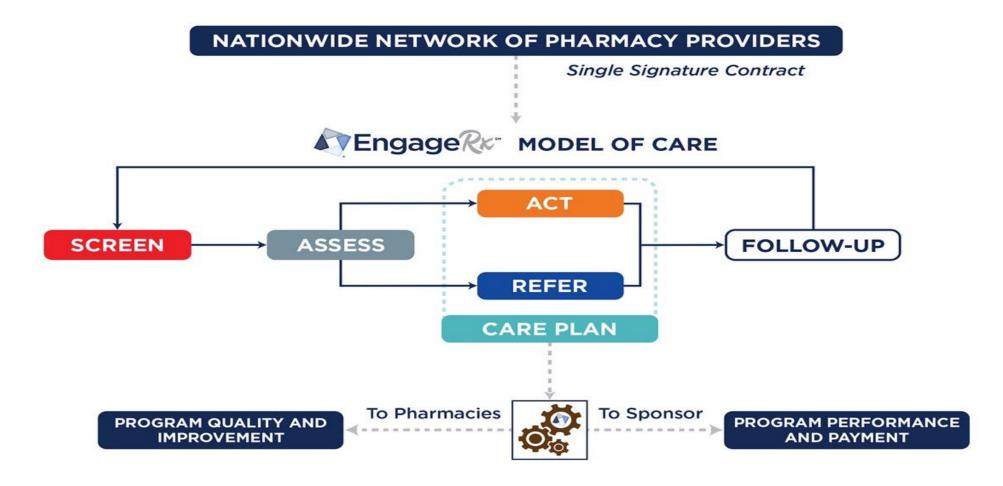


We have:

- Longstanding, local roots
- Local relationships
- Local engagement



CPESN Pharmacies Provide Enhanced Patient Care Services That Go Far Beyond Medication Dispending





CPESN Networks

- Over 3,400 participating pharmacies
- >83% of the U.S. population covered through hand delivery to the home
- Provide 2.5 Million hand deliveries to patients every month (over 28 M each year)
- 49 CPESN® Networks in 44 different states
- 26 networks have elected their own representative to the decision-making Board of Managers who govern CPESN® USA
- 25 networks have contracted with at least one payer to provide enhanced pharmacy services

CPESN Networks Over 3,400 Participating Pharmacies



CPESN USA – Federal Pharmacy Partner for COVID-19 Vaccine Program

Vaccine Allocation Updates

10 million doses per week allotted currently

Rollout #1

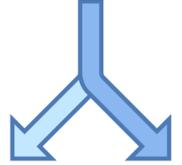
Jurisdictions / States

Vaccine Phases: States are deciding

How Pharmacies access the State's Vaccine Allocation (ongoing):

- 1. Agreements with State Partners/Providers:
 - a. Local Health Departments
 - b. Health Systems
 - c. Pharmacies
 - d. Others





1 million doses for the whole FPP per week to begin with

Rollout #2

CPESN USA as a FPP

Vaccine Phases: Federal is deciding

How Pharmacies access the FPP Vaccine Allocation (beginning week of 2/8):

- 1. Agreements with FPPs Partners/Providers:
 - a. Pharmacies

CPESN USA – Federal Pharmacy Partner for COVID-19 Vaccine Program



FOR IMMEDIATE RELEASE

February 2, 2021

FACT SHEET:

President Biden Announces Increased Vaccine Supply, Initial Launch of the Federal Retail Pharmacy Program, and Expansion of FEMA Reimbursement to States

States, Tribes, and territories will receive a 5 percent supply increase this week, and
Americans will soon have easier access to vaccinations through local pharmacies

As the U.S. surpasses 26 million COVID-19 infections, President Biden took additional steps today to implement his comprehensive National Strategy to combat the COVID-19 pandemic. These steps include increasing the vaccine supply to states, Tribes, and territories and increasing funding to jurisdictions to help turn vaccines into vaccinations. And, the President announced that starting next week, the first phase of the federal pharmacy program will launch and select pharmacies nationwide will start offering vaccinations for their communities.

These new steps will help meet the President's goal of administering 100 million shots in 100 days and expand access to vaccines to more Americans in the coming weeks.

The President is taking the following actions today:

Expanding Vaccine Supply: Building on last week's announcement, the Biden-Harris Administration will increase overall, weekly vaccine supply to states, Tribes, and territories to 10.5 million doses nationwide beginning this week. This is a 22% increase since taking

Network Administrators

 Topco Associates, LLC (including Acme Fresh Markets, Associated Food Stores, Big-Y Pharmacy and Wellness Center, Brookshire's Pharmacy, Super One Pharmacy, FRESH by Brookshire's Pharmacy, Coborn's Pharmacy, Cash Wise Pharmacy, MarketPlace Pharmacy, Giant Eagle, Hartig Drug Company, King Kullen, Food City Pharmacy, Ingles Pharmacy, Raley's, Bel Air, Nob Hill

Pharmacies, Save Mart Pharmacies, Lucky Pharmacies, SpartanNash, Price Chopper, Market 32, Tops Friendly Markets, ShopRite, Wegmans, Weis Markets, Inc.)

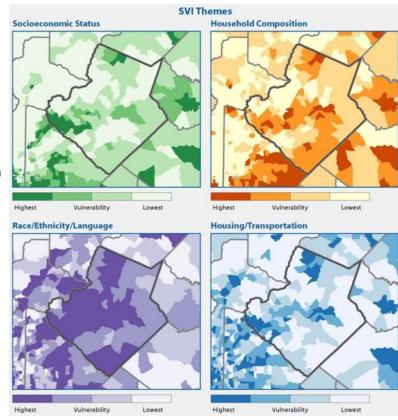
CPESN USA, LLC

- GeriMed (long-term care and retail pharmacies)
- Good Neighbor Pharmacy and AmerisourceBergen Drug Corporation's pharmacy services administrative organization (PSAO), Elevate Provider
- · Health Mart Systems, Inc.
- · Innovatix (long-term care pharmacies)
- · LeaderNET and Medicine Shoppe, Cardinal Health's PSAOs
- Managed Health Care Associates (retail and long-term care pharmacies)

###

Initial Launch

- Considerations for moving to other States:
 - 1. Allocation available to FPPs
 - 2. Pharmacy Readiness: 100%
 Readiness in the CPESN Vaccine Hub
 - 3. Social Vulnerability Index Considerations
 - 1. Social Vulnerability Factors: Grouped into 4 themes (see figure to the right).
 - **4. CDC and State Considerations** for where gaps exist for vaccine need



CPESN Change Package and Sharing of Best Practices



CPESN USA -

Federal Pharmacy Partner for COVID-19 Vaccine Program

- North Carolina was the initial local CPESN Network.
- Currently, there are 282 CPESN Pharmacies in North Carolina.
- 209 CPESN Pharmacies in North Carolina selected CPESN USA as their Federal Pharmacy Partner to receive FPP allocation of the vaccine.
- When taking the Social Vulnerability Index (SVI) into consideration, North Carolina has 143 CPESN Pharmacies or 68% of the CPESN Pharmacies that are above the 50th percentile of the SVI.
- CPESN Pharmacies in North Carolina are ready and awaiting vaccine to be a solution in providing vaccines to those most vulnerable populations.

Keys to Success with CPESN Pharmacies in the Vaccine Rollout

- Established local relationships in the community, where pharmacists are among the most trusted healthcare providers.
- CPESN Pharmacies have been serving vulnerable populations for decades, some for over a century, and they know how to meet the needs of the patient population.
- Ensuring the most vulnerable patients are not being looked over.
 - Example: Those patients who may not have internet access or those that do not know how to utilize online appointment scheduling tools.

Questions?

www.cpesn.com

info@cpesn.com

Sign Up

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@cpesn

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acpesn









Closing

Lindsay Capozziello, PharmD, Chair