

Statewide Advisory Commission on Immunizations

2013 COMMISSION

Chair

Jacqueline Dougé, MD, MPH

Members

Julie Ake, MD

Kathleen Becker, DNP, CRNP

David Blythe, MD, MPH

Gregory Branch, MD, MBA

Anne Bailowitz, MD

Charles Fleming

Jeffrey Kaplan, MD

Alicia Mezu, MSN/Ed, RN

Charles Medani, MD, MBA

J. Crossan O'Donovan, MD

Jim Rice, MD

Deena Speights-Napata, MA

Tiffany Tate, MHS

Jennifer Thomas, Pharm.D.

Sara Vazer, MD

STAFF

Greg Reed, MPA

Tel: 410-767-6679

Fax: 410-333-5893

DHMH.IZInfo@immunizemaryland.org

December 5, 2013

The Honorable Martin O'Malley
Governor
100 State Circle
Annapolis, MD 21401

The Honorable Joan Carter Conway
Chair
Senate Education, Health and Environmental Affairs Committee
Senate Office Building, 2 West Wing
Annapolis, MD 21401

The Honorable Peter A. Hammen
Chair
House Health and Government Operations Committee
House Office Building, Room 241
Annapolis, MD 21401

Re: 2013 Annual Report of the Statewide Advisory Commission on
Immunizations, Health-General Article §18-214(k)

Dear Governor O'Malley, Chair Conway, and Chair Hammen:

In accordance with §18-214(k) of the Health-General Article, the Statewide Advisory Commission on Immunizations (the Commission) is submitting this annual report to the Senate Education, Health, and Environmental Affairs Committee and the House Health and Government Operations Committee.

In CY2013, the Commission completed the following activities:

- Convened three public meetings of the full Commission to fulfill the Commission charges of identifying, addressing, and monitoring vaccine shortages and other immunization-related issues.
- The Commission's Immunization Registry subcommittee established goals for FY2014, which are included in Appendix A (attached).
- On February 20, 2013 the Commission sent a letter to the Maryland General Assembly in support of HB 179/SB 401 Pharmacists – Administrations of Vaccinations – Expanded Authority and Reporting Requirements. HB 179/SB 401 passed and was signed into law on May 2, 2013.

- On August 15, the Commission wrote a letter to the Maryland Department of Health and Mental Hygiene Secretary Sharfstein to encourage individuals under the age of 18 years old to be permitted to proactively seek a human papilloma virus (HPV) vaccination or accept one when offered by a health care provider. The Commission is awaiting response. This letter is included in Appendix B (attached).

This letter shall serve as the Commission's annual report for CY2013. If you have any questions, please contact Mr. Greg Reed, Program Manager, Department of Health and Mental Hygiene, and lead staff to the Commission at 410-767-6679 or greg.reed@maryland.gov.

Sincerely,

Jacqueline Dougé

Jacqueline Dougé, MD, MPH
Chair

Attachment

Cc: Joshua Sharfstein, MD
Laura Herrera, MD, MPH
Christi Megna, Esq
Michelle Spencer, MS
Donna Gugel, MHS
Deborah McGruder, MPH, PMP
David Blythe, MD, MPH
Greg Reed, MPA

Appendix A

Maryland Statewide Advisory Commission on Immunizations, Immunizations Registry Committee Goals for FY2014

1. Re-introduce, educate or re-educate providers on ImmuNet (physicians, pharmacists, health departments and hospitals), through FY2014.
 - a. Notification via mail/email;
 - b. Brochures, FAQs, and access to training videos;
 - c. Supplemental training webinars may be offered based on need and staff availability. Current low staffing level does not make travel to providers for in-person training feasible; and
 - d. Contact information for the ImmuNet help desk.
2. Increase HL7 data exchange reporting by 50 percent by end of FY2014.
 - a. Baseline date from ImmuNet: August 2012-May 2013, by vaccine and provider; and
 - b. Use CY2013 to educate and implement HL7 data exchange with the 20 Vaccines for Children (VFC) providers responsible for shipping the most vaccine.
3. Add pharmacists as VFC providers.
4. By December 2013, add vaccine level accountability to enable vaccine tracking by the dose.
5. Mandatory ImmuNet Registry reporting through 3-tier phase in:
 - a. Mandated sites: health departments and pharmacies, by December 31, 2013 80percent of these sites will be registered and reporting into ImmuNet.
 - b. Physicians begin education with practice registration confirmed in 2013 and reporting by 50 percent of practices by CY2014.
 - c. Hospital reporting to begin in 2013 and be completed by CY2014.

Appendix B

Commission letter to Secretary Sharfstein regarding HPV vaccination

August 15, 2013

Joshua Sharfstein
Maryland Department of Health and Mental Hygiene
201 W Preston St.
Baltimore, MD 21201

Dr. Sharfstein:

We are writing to share our commitment to improving adolescent vaccination rates and ask for your assistance in removing a barrier to adolescents being vaccinated against human papilloma virus (HPV). The Maryland Statewide Advisory Commission on Immunization (MSACI) leads and supports efforts that aim to improve childhood and adult immunization rates. Recently, we have enhanced our focus on adolescent vaccination, forming an Adolescent Subcommittee and an HPV Subcommittee that are collaborating to raise Maryland's HPV rate above the national average. We would like individuals under the age of 18 years old to be permitted to proactively seek an HPV vaccination or accept one when offered by a health care provider.

As you know, HPV is a potentially life-threatening disease as it causes various forms of cancer. Each year in the US, more than 6 million people become infected with HPV. It is the goal of MSACI to reduce the spread of HPV in our state. We hope to accomplish this by educating providers and the public about HPV and removing barriers vaccination.

In Maryland, a minor requires parental consent to be vaccinated against HPV. This precludes adolescents and pre-adolescents from getting the vaccine when independently seeking other health services that do not require parental consent (eg. family planning services).

It is important to note that there is precedent for our request. In 1997, Maryland Secretary of Health Martin Wasserman found that Hepatitis B vaccine could be administered to minors without parental consent. Like Hepatitis B, HPV is a sexually-transmitted disease. Also similar to Hepatitis B, HPV can cause life-threatening illnesses. We believe the rationale outlined in Secretary Wasserman's finding can be applied to HPV.

We appreciate your consideration and look forward to your written acknowledgement of this request. If you would like to discuss this further, please call 301-600-3103 or join us at our next meeting, scheduled for November 12 at 6 p.m.

Sincerely,

Jacqueline Douge, MD, MPH, Chair