

**Meeting Notes  
Vaccine Committee Meeting  
April 8, 2021; 12:00-1:00 p.m. PT**

**I. Attendance.** This meeting was conducted solely by webinar. Participating in all or part of the meeting were the following individuals:

Members & Guests

Ed Marcuse, MD, MPH, FPIDS, Chair  
James Chattra, MD, FAAP  
Jeff Gombosky  
Janel Jorgenson  
Steve Lam, PharmD  
Libby Page, MPH  
Amy Person, MD  
Kristi A. Rice, MD

WVA

Julia G. Zell, MA, Esq., Executive  
Director

Helms & Company, Inc.

Patrick Miller, MPH, WVA,  
Administrative Director  
Leslie Walker, CPA, Mason+Rich  
Alyssa McKeon, Project Lead

Other

Breelyn Young, GSK

**I. Welcome and Introductions**

At 12:01 p.m. Dr. Marcuse called the meeting to order. Ms. Zell provided a notice of recording.

**II. Calendar Consent Items**

Ms. Zell directed the Committee's attention to the consent item submitted for approval. There being no questions or comments, the following items were put to a vote:

Upon motion duly made and seconded, it was unanimously

**VOTED:** To approve the Vaccine Committee minutes of November 5, 2020.

**III. Public comment**

No public comment was given. Breelyn Young of GSK's attendance was noted.

**IV. Updates on Status of Childhood Immunization**

Dr. Marcuse asked Drs. Chattra and Rice to provide an overview of the impact of COVID-19 from a provider's perspective. Dr. Chattra shared that his practice is experiencing a strong correlation between childhood immunization rates and well-child visits. He noted that his practice has implemented operational changes that have enabled them to maintain their usual volume of well-child visits up to 15 months while seeing a decline in visits in adolescents. Dr. Chattra explained that his practice is seeking to optimize vaccination rates through the implementation of outreach and standard work. Dr. Marcuse notes that many practices have seen a decline in sick visits, likely due to social distancing and mask wearing. Dr. Chattra concurred that influenza seemed to be non-existent this year.

Dr. Rice shared that her practice has implemented a practice of reaching out to pediatric patients routinely to ensure age-appropriate follow-up. These efforts have resulted in an increase in well-child visits from patients long overdue for vaccinations and routine examinations. She notes that her practice has also seen a precipitous drop in pediatric flu vaccinations.

39  
40 Dr. Harvey was unable to attend the meeting in-person but submitted a written update to Dr. Marcuse. She  
41 shared that 94% of patients under the age of two have had their first MMR, while flu vaccinations are 15%  
42 lower than prior years.

#### 43 44 Office Practices

45 The Committee discussed COVID-19 vaccine uptake. There is a wide variety of uptake across the various  
46 practices. Ms. Page shared that in King County they have been matching licensing data with the IIS to  
47 summarize vaccine uptake among providers. Dr. Marcuse noted that the COVID-19 vaccine cannot be  
48 required under emergency use authorization (EUA). As the COVID-19 vaccines move through the  
49 traditional approval process they may be added to traditional vaccination lists.

#### 50 51 **V. Department of Health (DOH)**

52  
53 Ms. Jorgenson presented various updates regarding new vaccines, school-based immunization campaigns,  
54 and COVID-19 availability. She provided an overview of two vaccines that will be introduced to the grid  
55 in 2021: MenQuadfi and Vaxelis. MenQuadfi will replace Menactra and will be phased in as Menactra  
56 stocks are depleted. Vaxelis is a new hexavalent vaccine that will replace a combination of individual  
57 vaccines, leading to fewer shots for pediatric patients. Drs. Marcuse, Chattra, and Rice discussed what  
58 uptake may look like for these vaccines and expressed interest in seeing the marketing information the DOH  
59 will be providing.

60  
61 Ms. Jorgenson reviewed the planned DOH campaigns aimed at childhood vaccination: Vax to School and  
62 National Infant Immunization Week. The DOH vaccine ordering data reveals a drop in ordering which  
63 coincides with the COVID-19 pandemic followed by slow improvement towards the end of the year.  
64 Wastage was 2% in 2020, in line with the historical average of 2-2.5%. The DOH will continue to monitor  
65 wastage as vaccines expire. Flu vaccine ordering has been slow which is expected at this time of year. The  
66 DOH has pre-booked 650,000 flu vaccines for the coming year, 260,000 of which are for WVA.

67  
68 Ms. Jorgenson delivered a COVID-19 vaccine update based on data available on the DOH website.  
69 Washington State's 7-day vaccination average is 60,000 per day. The current goal is 45,000 though it may  
70 be raised in the near future. Nearly 30% of Washington State-eligible residents have received one COVID-  
71 19 dose with 20% being fully vaccinated. COVID-19 vaccination will be available to all adults 16+ starting  
72 April 15.

#### 73 74 **VI. COVID-19**

75 Ms. Page shared that they are trying to manage expectations as COVID-19 vaccinations become available  
76 to a larger population. She noted it will take time to find appointments and that they need to continue to  
77 prioritize allocations for the providers that are serving the most at-risk populations. Dr. Marcuse inquired  
78 if Ms. Page was seeing a vaccine preference. Ms. Page confirmed that there seemed to be a preference for  
79 Johnson & Johnson but that it was being prioritized for transient populations.

#### 80 81 **VII. Closing**

82 The meeting adjourned at 12:50 p.m.