

1 **Meeting Notes**
2 **Vaccine Committee Meeting**
3 **November 16, 2022; 1:00-2:00 p.m. PT**
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5 **I. Attendance.** This meeting was conducted solely by webinar. Participating in all or part of the meeting
6 were the following individuals:
7

8 <u>Members</u>	23 <u>WVA</u>
9 Ed Marcuse, MD, Emeritus Professor of	24 Julia G. Zell, MA, Esq., Executive Director
10 Pediatrics, University of Washington, <i>Chair</i>	25
11 Amy Carter, MD, Allegro Pediatrics	26 <u>Helms & Company, Inc.</u>
12 Helen Chea, MD, Molina Healthcare	27 Patrick Miller, MPH, WVA, Administrative
13 John Dunn, MD, Kaiser	28 Director
14 Janel Jorgenson, Washington Department of Health	29 Ashley Ithal, MPH, Project Support Leader
15 Amy Person, MD, Benton-Franklin Health District	30
16 Kristi A. Rice, MD, Providence	31 <u>Other</u>
17 Jamilia Sherls-Jones, DNP, Washington Department	32 Juliet Dang, PhD, Sequirus
18 of Health	33 Carrie Jenner, MD, Pierce County Immunization
19 Sherri Zorn, MD, Independent Consultant	34 Coalition (PCIC)
20 Jeff Gombosky, Pharmaceutical Research and	35 Rick Hourigan, MHA, MD, Market Medical
21 Manufacturers of America	36 Executive, PNW, Cigna
22	37 Breelyn Young, GSK

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39 **II. Summary of Actions Taken and/or Recommended**
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41 Actions Taken (votes adopted)

- 42 i. To approve the April 21, 2022 meeting minutes with requested edit.
43 ii. To approve the changes to the WVA Vaccine Committee Charter.
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45 **III. Minutes**
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47 Welcome and Introductions

48 At 12:03 p.m. Dr. Dunn called the meeting to order and took roll call. Ms. Zell announced that the meeting would be
49 recorded for the benefit of the minute taker, to be deleted once the minutes are approved. Dr. Dunn then welcomed
50 the committee attendees and asked that they introduce themselves, before previewing the agenda.
51

52 Calendar Consent Items

53 Dr. Dunn asked for a motion to approve the minutes. Dr. Rice requested her organization name be corrected in the
54 minutes. Upon motion duly made and seconded, it was unanimously

55 **VOTED: To approve the April 21, 2022 meeting minutes with requested edit.**
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57 **IV. Department of Health (DOH) Updates**
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59 Ms. Jorgenson introduced Ms. Sherls-Jones as the new Washing State Immunization Director. She has been in this
60 role for about four months.
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62 Ms. Jorgenson addressed a rumor circulating in Washington that there is an influenza vaccine shortage. This is not the
63 case and seems to stem from access issues to receive these vaccines as opposed to shortages in the vaccine supply
64 chain. The Washington State Department of Health (DOH) continues to promote other points of access. Dr. Rice
65 reported that they are not experiencing supply issues either, but staffing shortages, particularly with the nursing staff,
66 have impacted the distribution of the vaccines.

67 Ms. Jorgenson reported that two new vaccines will become available through the Childhood Vaccine Program (CVP)
68 starting in in January 2023. These vaccines include an MMR vaccine from GSK (Priorix) and a pneumococcal

69 conjugate fifteen valent vaccine from Merck (Vaxneuvace). Ms. Jorgenson reported that these vaccines were approved
70 in June 2022, however, the CDC just added them to their state contract.

71 Ms. Jorgenson notified the committee that K – 12 school coverage rate data are available on the WA DOH website.
72 She reported that school coverage rates remained steady over the last few years. Ms. Jorgenson reported that childhood
73 influenza coverage rates are similar this year to 2021 rates but are down from 2020 and 2019.

74
75 Ms. Jorgenson stated that the Washington State Vaccine Advisory Committee’s (VAC) formal request to promote and
76 encourage HPV vaccinations to begin at age nine has been granted as the CDC permits it. The DOH has begun their
77 external messaging campaign, including sending a letter to Tribal leaders. The DOH clinical outreach team is planning
78 provider training opportunities. The DOH will begin to communicate with providers soon and will add a prompt to
79 the Washington State Immunization Information System (IIS). Dr. Sherls-Jones reported that the goal is for the prompt
80 to be implemented in early January in the ISS and that coverage data may be made available in mid-2024.

81 Ms. Jorgenson reported that the latest Centers for Disease Control (CDC) influenza surveillance map indicates the
82 highest rates of influenza that she has seen in recent history, especially in the southeastern states
83 (<https://www.cdc.gov/flu/weekly/usmap.htm>).

84 Ms. Zell reported that the anticipated assessment receipts for October are approximately \$2 million dollars less than
85 expected and suggested a potential correlation between the drop in assessments with perhaps fewer influenza vaccines
86 being administered. Ms. Zell expects that the assessment rates will show an increase in November 2022, and the
87 Finance Committee has been apprised.

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89 **V. HPV Taskforce Update**

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91 Dr. Zorn presented the latest information from the National HPV Vaccination Roundtable, Best Practices Task
92 Group to the committee. The HPV vaccination recommendations start at age nine, which provides for two doses of
93 the vaccine to be administered before the age of thirteen. This shift to start at age 9 has become a national best
94 practice to improve HPV vaccination rates and is supported by the American Academy of Pediatrics, the American
95 Cancer Society, and the National HPV Vaccination Roundtable. Dr. Zorn showed a short YouTube video
96 (<https://www.youtube.com/watch?v=hCpNJIRv9YQ>) created by the American Cancer Society and the National
97 HPV Vaccination Roundtable which highlighted the nine benefits of starting the HPV vaccine series at age nine.

98

99 In July 2022, a formal request was made to Secretary Shah by the VAC to:

- 100 • encourage providers to consider starting HPV vaccination at age nine in accordance with CDC guidance;
- 101 • to update the IIS forecasting function to prompt providers to begin this vaccination series for patients
102 starting at age nine;
- 103 • and to track and public state and county-level data on HPV vaccine coverage rates for children ages 9-10
104 annually.

105

106 Ms. Jorgensen reiterated that the DOH is working on a comprehensive provider education plan and toolkit for
107 starting vaccination at age nine in partnership with the VAC.

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109 **VI. WVA Updates**

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111 COVID Roll-out Plan

112 Ms. Zell provided an update on the joint DOH-WVA planning efforts to prepare for the commercialization of the
113 COVID vaccine. She reported that the intent is to add the COVID vaccines to the Vaccine Assessment Grid (Grid) at
114 a blended dollar amount. Ms. Zell reported that the addition of the COVID vaccines will be off-cycle grid additions,
115 and will mimic a process that the WVA undertook with the recent additions of Priorix and Vaxneuvance to the Grid
116 earlier in November 2022.

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120 Provider Stakeholder Liaison Update

121 Ms. Zell provided an update on the hiring process for the provider stakeholder liaison. She reported that while an
122 interview process has been finalized and a draft employee handbook has been written and awaits Board approval, the
123 intent is to hire someone by March 2023.

124

125 Vaccine Committee Charter Update

126 Ms. Zell provided an overview of the Vaccine Committee Charter (Charter) including prior discussions in 2021 by
127 the Committee regarding membership and voting rights. Outside Counsel reviewed the Charter and determined that
128 the WA's statute specifically outlines who is considered a voting member of the Committee. Non-board committee
129 members can participate in the Committee, but in a non-voting capacity.

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131 Dr. Dunn asked for a motion to approve the WVA Vaccine Committee Charter updates. Upon motion duly made and
132 seconded, it was unanimously

133 **VOTED: To approve the changes to the WVA Vaccine Committee Charter.**

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135 **VII. Public Comments**

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137 No public comments.

138 **VIII. Closing**

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140 The meeting adjourned at 1:48 p.m. PT.