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# SHOT TALK

San Antonio Immunization Program Newsletter - April 2019



## High-Deductible Insurance & Vaccine Coverage

Reviewing the Basics of TVFC Eligibility

We recently received a question from a provider whose patients visit for vaccines and have a high-deductible insurance plan, and are therefore insured and not VFC-eligible. However, the provider stated some of these patients have to pay out of pocket costs for vaccines, creating a barrier to care.

We want to remind you that most insurance plans (including high deductible plans) should cover vaccines without charging a copayment or coinsurance as mandated by the Affordable Care Act. Please see the [HealthCare.gov website](http://HealthCare.gov) for the list of preventive care benefits for children.

There may be scenarios where insurance plans will only cover required vaccines and not all ACIP-recommended vaccines, or will not cover any ACIP-recommended vaccines at all. In those cases, a child or adolescent would be VFC-eligible as underinsured.

If you have any questions about VFC eligibility, please [check the TVFC website](#) for eligibility requirements. You can also reach out to your San Antonio VFC contact at any time.

The program is in place to remove every barrier possible for families with children who need immunizations. We remain ready to assist all of our providers in this responsibility with any necessary support.

Megan Miller  
Metro Health  
Immunization Program Manager

## Immunize SA April Meeting Reminder



As a reminder, Immunize SA (IZSA) will be holding their April meeting on April 3, 2019 at Education Service Center Region 20. The address is 1314 Hines Avenue, San Antonio 78208, from 1-2 PM. If you have any questions, please contact [Sarah.Williams@sanantonio.gov](mailto:Sarah.Williams@sanantonio.gov) for more information.

## New Staff Updates

Welcome Our Three New Team Members to the Immunization Program!



This month we have not one, not two, but three new staff members to welcome to the Metro Health Immunization Program!

Lourdes Arroyo (left) has joined the team as our Immunization Information System (IIS)/Provider Relations specialist. She is responsible for conducting IIS trainings, site visits, and provider outreach, as well as educating the public on state IIS laws.

Jeanette Vosquez (center) will be our QA/AFIX Health Program Specialist. She will be responsible for conducting VFC Compliance Site visits and AFIX QI visits to help providers raise their immunization coverage rates for both childhood and adolescent vaccines.

Roxanne Diaz (right) will be taking over as the new Administrative Associate for the Immunization Outreach, and Education Partnership (IOEP) team. Having worked at Metro Health for three years, she brings welcomed experience and support to the IOEP team.

## Training Webinar LIVE on April 3rd!

Childhood trauma is a critical public health issue, and one of the top priorities for San Antonio Metro Health District in the years to come. Referred to as Adverse Childhood Experiences (ACEs), ACEs are stressful and traumatic events, such as abuse or neglect, that have been linked to poor life-long health outcomes.

On April 3, 2019 from 12:00 - 1:00 PM, Dr. Colleen Bridger, Interim Assistant City Manager, will be presenting the webinar, "10 Things to Know about Adverse Childhood Experiences", hosted by the Michael & Susan Dell Center for Healthy Living in collaboration with Live Smart Texas.

As the number of ACEs increases, so does the likelihood for developing chronic diseases like diabetes, heart disease and cancer, as well as risky health behaviors; low life potential; and, early death. During the presentation, attendees will be introduced to ACEs, the impact they have on health, and what can be done to overcome them.

To attend the webinar, [click here to register](#).



# Why are vaccinations important?

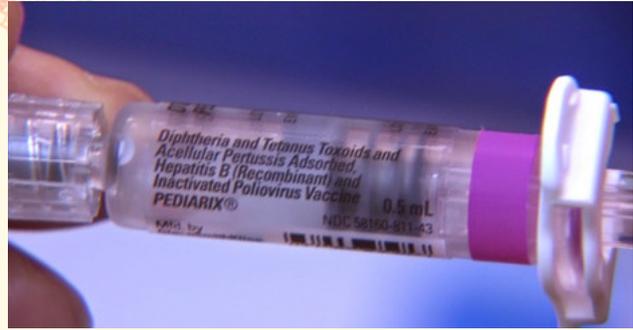
Recently published CDC report highlights risk of being unvaccinated

Vaccine refusal by parents continues to be a growing trend in the state of Texas. With the first confirmed case of measles for the year in San Antonio recently being diagnosed, many local residents have taken notice, asking about the true risks and benefits of MMR-V and other vaccines. While there is extensive news coverage and debate about recent measles outbreaks across the country - and worldwide - there are other noteworthy examples of why all childhood vaccines are important.

A case study from 2017 recently published in the CDC Morbidity & Mortality Weekly Report (MMWR) demonstrates the risks and consequences of an unvaccinated child being exposed to tetanus.

The Oregonian published an article the same day the MMWR study was released, detailing the severity of symptoms he endured, as well as the extensive treatment required for his recovery. The boy required 57 days of inpatient acute care, including 47 days in the ICU. Inpatient charges totaled \$811,929.

This incident serves as a stark reminder that tetanus is just one infection of many that can lead to serious health problems and even death. Make sure that patients at every child and adolescent well visit are up to date with their DTaP, Tdap, and all recommended vaccines.



**"The boy required 57 days of inpatient acute care, including 47 days in the ICU. The inpatient charges totaled \$811,929."**

**HPV-associated cancers have increased to nearly 43,000 people annually in the US.**

Most can be prevented by the HPV vaccine.

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**"Vaccines are the most cost-effective health care interventions there are. A dollar spent on a childhood vaccination not only helps save a life, but greatly reduces spending on future healthcare."  
- Ezekiel Emanuel MD, PhD**



## March Provider Training

On March 8, 2019 VFC providers from several sites joined with the San Antonio Metro Health Immunization Program for a training event entitled "Championing Immunizations to Improve Rates in Your Clinic". The presentation was given by Dr. Cherise Rohr-Allegrini, San Antonio Program Director for The Immunization Partnership (TIP). The training provided a refresher on HPV and adolescent vaccinations, as well as strategies to improve coverage at the provider level and successful presentation strategies for the HPV vaccine. Dr. Rohr-Allegrini fielded questions from providers and addressed some of the challenges they face presenting HPV vaccination as cancer prevention. Because of the successful turnout, there will be an additional training opportunity provided in the coming weeks. Be sure to check your site's email and the Shot Talk newsletter for more details!

Additionally, in April TIP will be organizing an Immunization Advocacy and Rally Day at the State Capitol in Austin. For more information, [visit their Events page on the TIP website.](#)



## TVFC Program & Inventory News

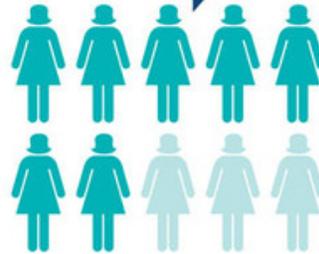
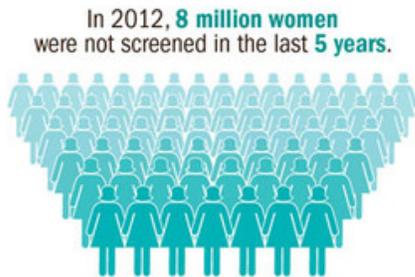
News from Texas Vaccines for Children and Vaccine Management

April is fast approaching, which means that we are less than 30 days away from Fiesta San Antonio! Like many businesses and institutions in the city, some of our providers and clinics will have closures or modified hours during our city's premier spring event. We would like to remind all of our providers to plan ahead and **arrange all vaccine deliveries around any planned closures during Fiesta.** This will prevent returns to the manufacturer or, worse yet, spoilage and loss of VFC vaccines. Make sure your shipping and receiving hours are correct in EVI, make a plan, and ¡VIVA FIESTA!



*As a reminder, Friday April 26th is a city holiday, and all City of San Antonio offices will be closed, including our Eastside and Frank Garrett Center clinics.*

## Missed opportunities for cervical cancer screening



**7 out of 10 women** who were not screened had a regular doctor and health insurance.

SOURCE: Behavioral Risk Factor Surveillance System, 2012.

## How HPV infection can lead to cervical cancer

It could take years to decades



SOURCE: American Journal of Clinical Pathology, 2012.

## Current vaccination and screening recommendations

### Use HPV Vaccination



#### Vaccinate both girls and boys ages 11 to 12 against HPV

- Girls and boys have the best protection when they receive all doses as recommended before they are exposed to HPV.
- Girls ages 13-26 and boys ages 13-21 should get the vaccine if they have not received it already.

### Screen Women for Cervical Cancer



#### Use Pap tests every 3 years for women ages 21-29

- Doctors or nurses collect cells for the Pap test during an exam.
- The Pap test can find abnormal cells that may develop into cancer, if left untreated.



#### Choose 1 of 2 options for women ages 30-65

Doctor and patient decide together which screening approach is preferred:

- 1) Pap test every 3 years, or;
- 2) Pap test plus HPV test every 5 years. The HPV test can find the HPV virus by testing cells collected at the same time as a Pap test.



- Women should get screened as recommended. More frequent screening does not provide more protection.
- Some women may need a different screening schedule because of their health history.
- Women over age 65 should ask their doctor if they need to continue screening.
- Women should talk with their doctors and nurses to understand their screening results.
- Women who had the HPV vaccine should still start getting screened when they reach age 21.

SOURCES: Advisory Committee on Immunization Practices and US Preventive Services Task Force.



**National Public Health Week**  
Creating the Healthiest Nation: For science. For action. For health.

April 1 - 7, 2019

## National Public Health Week 2019

(Source: [American Public Health Association](#)) Everyone deserves to live a long and healthy life in a safe environment. To make that possible, we need to address the causes of poor health and disease risk among individuals and within our communities. Where we live, learn, work, worship and play affects each of us and can determine our health and life expectancy. In the workplace, we partner across public and private sectors to make sure decisions are made with the public's health in mind. Within our communities, let's start new conversations with our neighbors and become advocates for positive change. Working together, we can build healthier communities and eventually, the healthiest nation. But we need your help to get there.

During each day of National Public Health Week, we focus on a particular public health topic. Then, we identify ways each of us can make a difference on that topic. We hope you'll use each topic to spark new conversations and engage new stakeholders in your community. These areas are critical to our future success in creating the healthiest nation, and everyone can do their part to help.

NPHW 2019 DAILY THEMES (Click each link for discussion and resources from the APHA):

[Monday — Healthy Communities](#)

[Tuesday — Violence Prevention](#)

[Wednesday — Rural Health](#)      [Thursday — Technology and Public Health](#)

[Friday — Climate Change](#)      [Saturday and Sunday — Global Health](#)



## The Flu Season Hasn't Been This Bad This Late in 20 Years

(Source: [MSN/Wall Street Journal](#)) The percentage of doctor visits for flulike symptoms in March, 4.4%, is the highest figure for this time of the year since 1998, the first season the Centers for Disease Control and Prevention began tracking flu prevalence this way.

While this season hasn't been as extreme as some in recent years, it has been a long one. It is still widespread in 42 states, though that's down from 47 states and Puerto Rico last week, the CDC says.

"When you get to spring, people stop thinking about the flu because they think the flu is a wintertime illness," said Lynnette Brammer, the head of the CDC's Domestic Influenza Surveillance team. "There's still a lot of flu out there." Flu season typically begins in October, peaking in between December and February. This year follows that trend, with the percentage of doctor visits for flulike symptoms peaking around mid-to-late February. Just over 5% of visits were for flulike symptoms at that time.

Usually, the flulike symptoms drop quickly after the peak of the season, said Ms. Brammer, but this season those symptoms have plateaued.

"It looks like we still have a ways to go," she said.

The peak was due largely to the prevalence of the H1N1 virus, a strain of influenza A that tends to take less of a toll than some other strains, especially for people aged 65 and older.

But the spread of a second strain, H3N2, has been on the rise since early February. The influenza A subtype is known for its severity and was the predominant strain during the severe 2017-18 flu season, which had an estimated 959,000 hospitalizations and 79,400 flu-related deaths, according to the CDC.

During this flu season, the CDC estimates that as many as 454,000 people were hospitalized with the flu from the beginning of October through March 16, 2019. The estimated deaths so far range from 25,000 to 41,500, and there have been 76 confirmed pediatric deaths.

On average, the flu kills between 12,000 and 56,000 people in the U.S. each season, according to the CDC.

# Measles

IT ISN'T JUST A LITTLE RASH



Measles can be dangerous, especially for babies and young children.

## MEASLES SYMPTOMS TYPICALLY INCLUDE

- High fever (may spike to more than 104° F)
- Cough
- Runny nose
- Red, watery eyes
- Rash breaks out 3-5 days after symptoms begin



## Measles Can Be Serious



About 1 out of 4 people who get measles will be hospitalized.



1 out of every 1,000 people with measles will develop brain swelling due to infection (encephalitis), which may lead to brain damage.



1 or 2 out of 1,000 people with measles will die, even with the best care.

## You have the power to protect your child.



Provide your children with **safe and long-lasting protection** against measles by making sure they get the **measles-mumps-rubella (MMR) vaccine** according to CDC's recommended immunization schedule.

[WWW.CDC.GOV/MEASLES](http://WWW.CDC.GOV/MEASLES)



American Academy of Pediatrics  
DEDICATED TO THE HEALTH OF ALL CHILDREN™



AMERICAN ACADEMY OF FAMILY PHYSICIANS  
STRONG MEDICINE FOR AMERICA

# MEASLES



is **highly contagious** and spreads through the air when an infected person **coughs or sneezes**.



It is so contagious that if one person has it, **9 out of 10 people** of all ages around him or her will also become infected if they are not protected.

Traveling abroad for spring or summer break? Not protected against measles? **Get your measles vaccination.**

**Measles is a plane ride away.** Since measles is still common in many countries, **unvaccinated travelers** continue to **get measles in other countries and bring it into the U.S.**, and spread it to others.



**Get Vaccinated:** Bring home fun souvenirs, photos, and fantastic memories – **NOT measles!**



Make sure you are up to date on your **measles-mumps-rubella (MMR) vaccine**, including before travelling internationally. Ask your doctor, if you have received all recommended doses of MMR for best protection against measles.

[www.cdc.gov/Features/MeaslesInternationalTravel/](http://www.cdc.gov/Features/MeaslesInternationalTravel/)



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention



## Grant Ends, Shot Talk Continues

April 30, 2019 marks the successful conclusion of our HPV/Adolescent AFIX grant after three years of work in San Antonio. While this newsletter began as a project within that grant, we have decided to keep publishing Shot Talk as an official means of communicating with our providers. While we will continue to keep you informed of news from our program and concerning immunizations nationwide, we will also be looking for information about milestones, events, questions and information from you!

If you have any stories to share, questions to ask, or coworkers to celebrate, please let us know! You can send any news items for Shot Talk to [jared.dugger@sanantonio.gov](mailto:jared.dugger@sanantonio.gov) or [peniel.molina@sanantonio.gov](mailto:peniel.molina@sanantonio.gov) for inclusion in our next issue.

### Got a Story? Let Us Know!

Do you have an inspiring story, technical tip, lesson learned, or someone you want to highlight for recognition? Let us know, and we might feature your item in the next issue of Shot Talk. Contact Jared Dugger at (210) 207-2870 or [jared.dugger@sanantonio.gov](mailto:jared.dugger@sanantonio.gov) for more information.

### Your Metro Health HPV/Adolescent AFIX Team



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CITY OF SAN ANTONIO  
**METROPOLITAN HEALTH DISTRICT**