

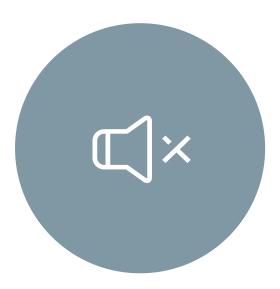
AIRA Discovery Session: IIS and Long-Term Care Onboarding and Access

Discovery Session August 23, 2021 4 PM EST

AIRA Discovery Session



This meeting is being recorded and will be posted in the AIRA repository



All phone lines are muted



Technical Support

If you experience any technical issues during the meeting, please contact

Sarah Stein via direct message in the Chat.



New and Evolving Guidance

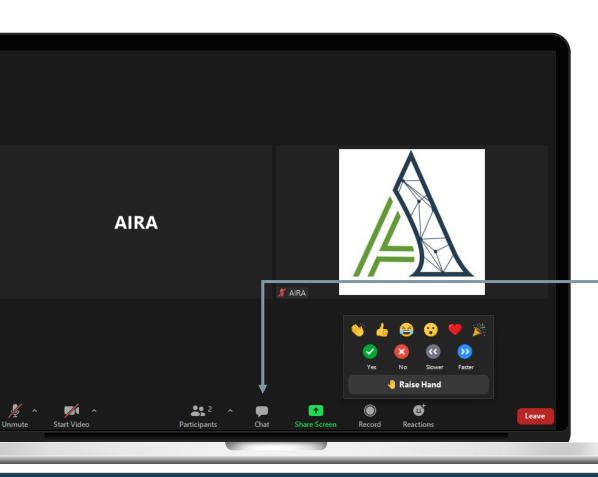
- Recommendation for 3rd dose of COVID-19 for immunocompromised: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/immuno.html
- Recommendation for booster dose for all recipients of Moderna and Pfizer vaccine: Formal guidance anticipated, but in the meantime: https://www.nytimes.com/2021/08/16/us/politics/booster-shots.html
- Requirement for all Skilled Nursing Facility (SNF) staff and residents to be vaccinated for COVID-19: https://www.cms.gov/newsroom/press-releases/biden-harris-administration-takes-additional-action-protect-americas-nursing-home-residents-covid-19

Today's Speakers

- Dr. David Gifford, AHCA
- Dr. Nimalie Stone, CDC
- Mary Woinarowicz, North Dakota
- Meghan Quinn, Maryland



Questions



How do I ask a question?

There will be time allotted for Q&A following the presentations.

If you think of a question during the presentations:



Select the chat icon and type your question into the chat box.



Dr. David Gifford (for Urvi Patel)

AHCA



COVID-19 Vaccine Access in LTC

Urvi Patel
Senior Director Quality Improvement









Improving lives by delivering solutions for quality of care.





Long Term Care

- Provide care for millions of older Americans
- SNFs
- ALs
- ICFs/IID





- 15,331 facilities
- 92% of counties in the US have a SNF
- Number of residents/patients: 1,116,786
- Number of staff: 3,267,550





Resident Demographics

| Gender | |
|---------------------------------|--------|
| Women | 61.52% |
| Male | 38.48% |
| Age | |
| 18-65 | 17.20% |
| 65-70 | 9.60% |
| 70-75 | 11.50% |
| 75-80 | 12.80% |
| 80-85 | 14.30% |
| 85-90 | 15.10% |
| 90+ | 19.60% |
| Race | |
| White | 72.60% |
| Black / African American | 15.64% |
| Hispanic or Latino | 5.65% |
| Asian / Pacific Islander | 2.33% |
| Native American / Alaska Native | 0.49% |



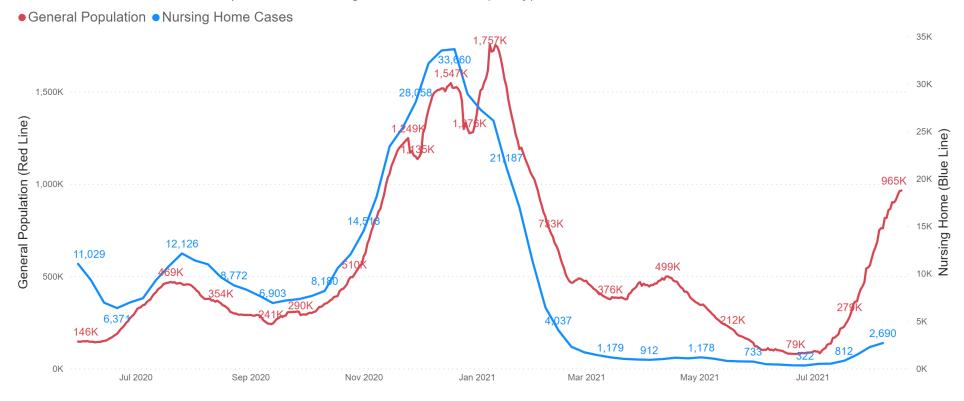
Staff Demographics

| Women | 83.60% |
|---------------------------|--------|
| White | 64.60% |
| Black or African American | 27.70% |
| Asian | 5.10% |
| Hispanic or Latino | 10.70% |

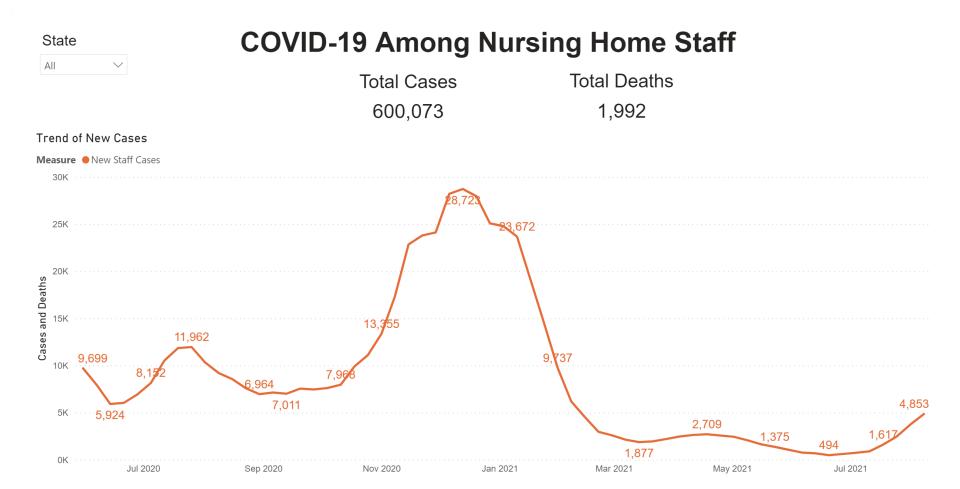
State

COVID-19 New Cases: General Population & Nursing Homes

New Case Trends: General Population & Nursing Home Residents (7-day)



Data Through: Nursing Home - Aug 8, 2021 (*Latest week's data is preliminary); Community - Aug 11, 2021 Sources: NHSN and Johns Hopkins University



Data Through: Week ending Aug 8, 2021 (*Latest week's data is preliminary and represents fewer nursing homes than other weeks) **Source:** NHSN **Notes:** May 24, 2020 includes collective historic data and is excluded from the graph since it does not capture that specific week.



COVID-19 Vaccines



- Resident vaccination rate: 82.9%
- Staff vaccination rate: 61%





Vaccine Coalition

 Identify challenges preventing rapid, reliable access to COVID-19 vaccine in LTC facilities and identify recommendations to improve access.





Recent Developments

- Third Dose
- Booster Shot
- Mandatory Vaccination





Vaccine Mandates

| Effective Dates | | | | | | |
|-----------------|------------|------------|------------|--|--|--|
| June | Septe | October | | | | |
| MS* - 6/14 | CA - 9/30 | MD* - 9/1 | ME – 10/1 | | | |
| | CT - 9/7 | NM - 9/19 | MA - 10/10 | | | |
| | DC - 9/30 | NY - 9/27 | RI - 10/1 | | | |
| | DE* - 9/30 | OR* - 9/30 | WA - 10/18 | | | |

^{*}mandate includes provision to allow testing in lieu of vaccine





Getting the Vaccine

- 1. SNF is the vaccine provider (32%)
- 2. Working with a LTC pharmacy
- 3. Working with a commercial pharmacy





Registering with an IIS

- Determine appropriate time for second dose or booster shots for residents
- Determine which staff members have received the COVID-19 vaccine
- Submit vaccine administration information
- State requirement





- SNFs concerned about additional data submission burden
- SNFs don't feel like they are being prioritized by IIS
- SNF EMR vendor is not willing to work with an IIS





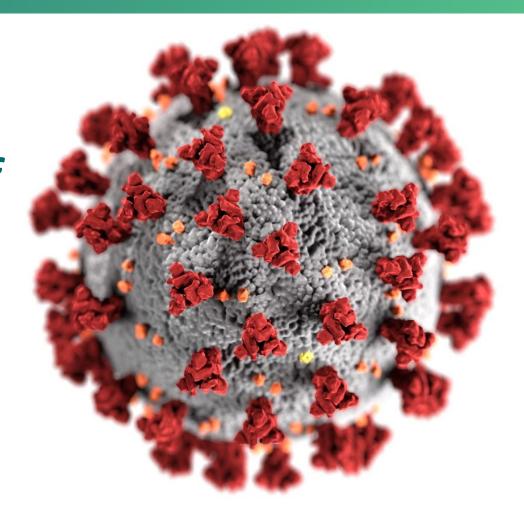


IMPROVING LIVES by DELIVERING SOLUTIONS for QUALITY CARE

Dr. Nimalie Stone



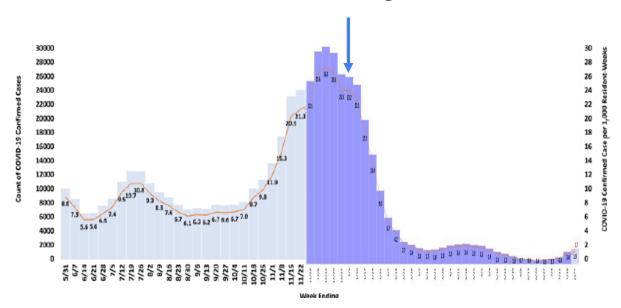
Ensuring Access to COVID-19 vaccine for LTC residents and staff



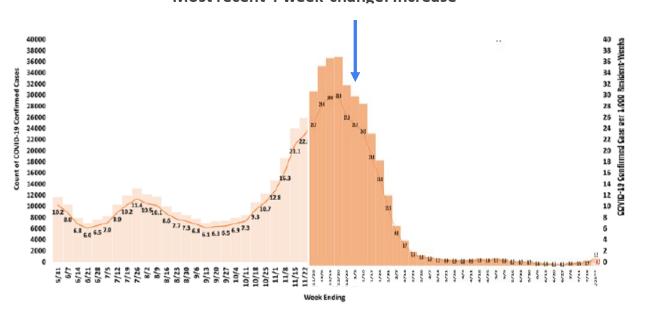


COVID-19 Rates among Residents and Staff in U.S. Nursing Homes: May 2020-July 2021, Inferred Data





Residents: Cases per 1,000 Resident-Weeks, U.S. (Number of facilities=15,380) Most recent 4 week-change: Increase



Blue arrows indicates roll-out of federal pharmacy partnership program vaccine clinics in nursing homes

Inferred Data: For the purpose of best epidemiological understanding, data that fail quality checks or appear inconsistent with surveillance protocols are assigned a value based on their patterns of data-entry or excluded from analysis

^{*}Number of facilities reporting may vary from week to week

^{**} Pattern-fill represents potential incomplete data due to reporting lag from facilities

COVID-19 Vaccination Coverage in CMS-Certified Nursing Homes Reporting within <u>last 2 Weeks</u> through Week Ending August 15, 2021*

Among **14,962** facilities reporting*

Residents: 85.7%

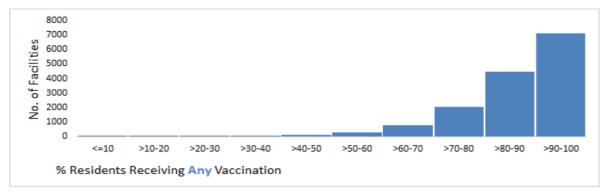
Any COVID-19 vaccination (1,006,234 residents)

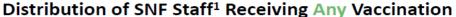
Among **14,978** facilities reporting*

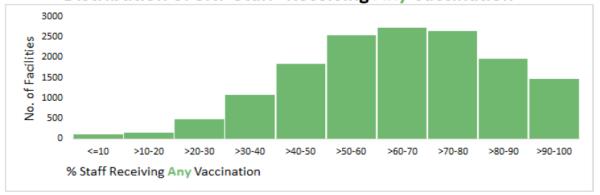
HCP: 65.1%

Any COVID-19 vaccination (1,143,536 HCP)

Distribution of SNF Residents¹ Receiving Any Vaccination





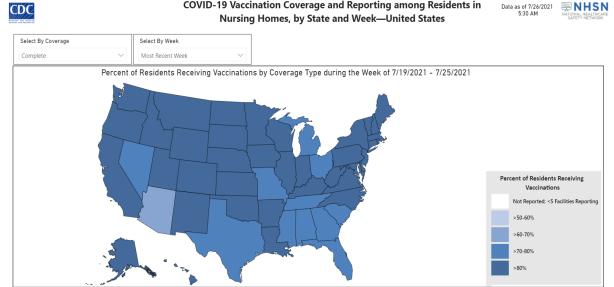




*Includes data collected for week of August 9 - 15, 2021 or the most recent week reported within 2 weeks

CDC Nursing Home COVID-19 Vaccine Dashboard

COVID-19 Vaccination Coverage and Reporting among Residents in Nursing Homes, by State and Week - United States



All data can be modified from week-to-week by facilities. Exclusions: For best epidemiological understanding, data that appear inconsistent with surveillance protocols are excluded. Vaccination coverage is calculated as the total number of residents vaccinated divided by (the total number of residents minus the number of residents with medical contraindications or exclusions to vaccination) multiplied by 100. Differences in how each facility implements this COVID-19 vaccination data collection, including variation in which staff collect the data, may affect facility reporting patterns. Definitions: Partial vaccination: 1 dose of vaccination series. Complete vaccination: All doses required for vaccination.

Data source: Centers for Disease Control and Prevention, National Healthcare Safety Network

For more information: https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html

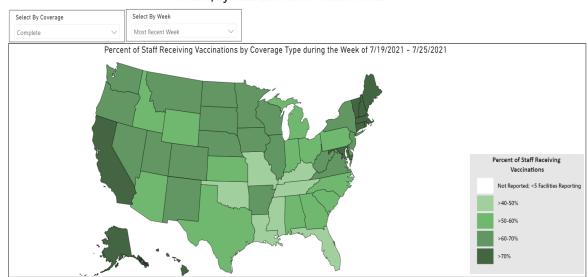
Accessibility: [Right click on the graph area to show as table]

COVID-19 Vaccination Coverage and Reporting among Staff in Nursing Homes, by State and Week - United States

 CDC

COVID-19 Vaccination Coverage and Reporting among Staff in Nursing Homes, by State and Week—United States ta as of 7/26/2021





All data can be modified from week-to-week by facilities. Exclusions: For best epidemiological understanding, data that appear inconsistent with surveillance protocols are excluded. Vaccination coverage is calculated as the total number of staff vaccinated divided by (the total number of staff minus the number of staff with medical contraindications or exclusions to vaccination) multiplied by 100. Differences in how each facility implements this COVID-19 vaccination data collection, including variation in which staff collect the data, may affect facility reporting patterns. Definitions: Partial vaccination: 1 dose of vaccination series. Complete vaccination: All doses required for vaccination.

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Accessibility: [Right click on the graph area to show as table]



Nursing Home COVID-19 Vaccination Data Dashboard | NHSN | CDC

Increasing Staff COVID-19 Vaccination Protects Residents



COVID-19 in Residents of CMS-Certified Skilled Nursing Facilities

Crude Rate per 1,000 Resident Weeks, Stratified by Vaccination Coverage of Staff Data from the two weeks ending 11 July 2021

| Quartile of Staff Vaccination Coverage (percentile) | Staff Vaccination Coverage | Crude Rate of COVID in Residents per 1,000 Resident-weeks, for the two weeks ending 11 July | |
|--|----------------------------------|--|--|
| 1 (0 th -25 th) | 0-44% | 0.77 | - Mi |
| 2 (26 th -50 th) | 45-59% | 0.54 | nificant reductions in incidence these strata, P<0.0001 |
| 3 (51st-75th) | 60-74% | 0.26 Reduction | between these strata |
| 4 (76 th -100 th) | 75+% | 0.31 not signifi | cant |
| Overall, national | | 0.4 | |

- There was a 29% significant reduction in the case rate from Q1 to Q2 of staff vaccination coverage
- There was a 52% significant reduction in the case rate from Q2 to Q3 of staff vaccination coverage

Data limited to facilities reporting vaccination coverage.

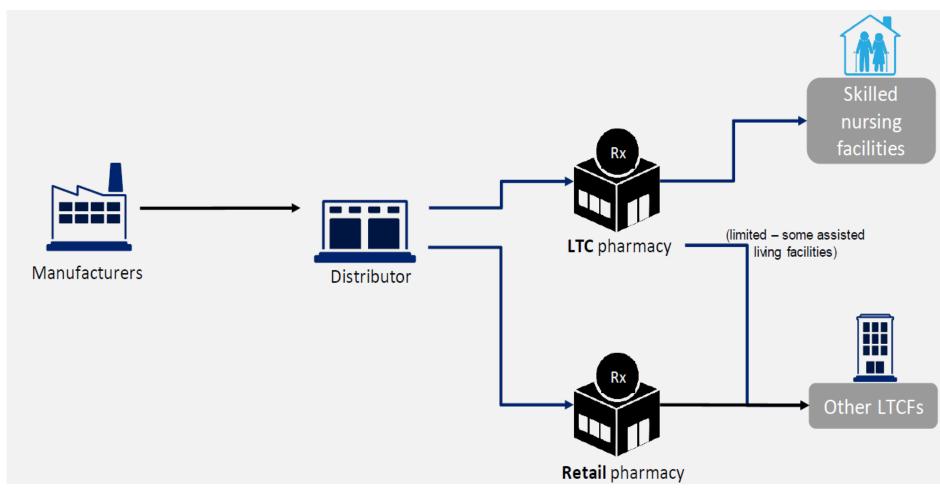
- Preliminary NHSN data analysis; includes facilities reporting both infection and vaccination data
- COVID-19 crude infection rate among residents are lowest in nursing homes with >75% staff vaccine coverage

Considerations for Federal LTCF Vaccine Access Program

- Significant vaccine supply and options for accessing doses
- Eligibility and interest primary vaccine doses or boosters will be broad
 - LTCF vaccine access will be implemented in coordination with community-based vaccine programs
- Long-term care facilities have experience working with pharmacy and jurisdictional partners to provide vaccine to residents and staff
 - Program will build on existing infrastructure to maximize flexibility for providing the best options for residents and staff



Strategies for Accessing COVID-19 Vaccine in LTCFs



Options for access:

- Pharmacy distributes, facility receives and administers
- Pharmacy provides onsite support for administration
- Residents travel to vaccine site (pharmacy or provider office)



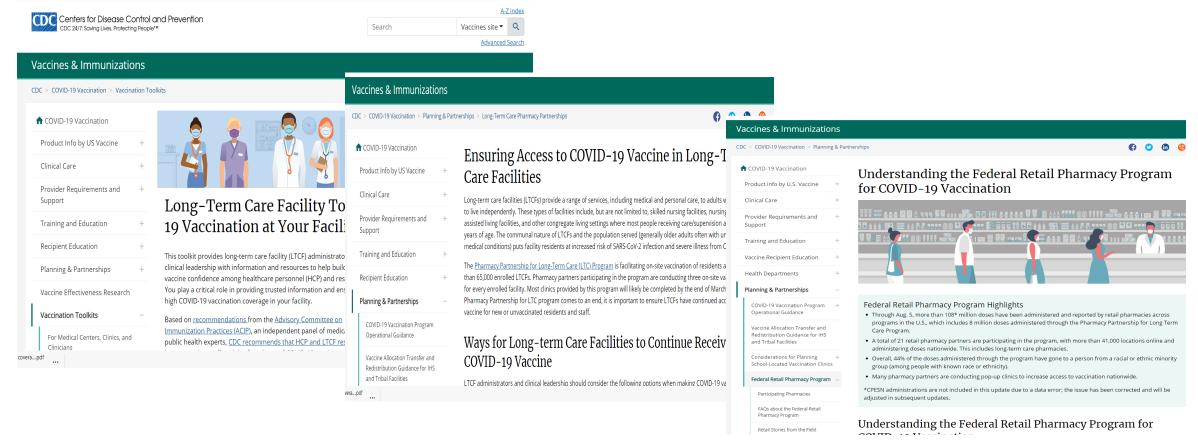
State/local jurisdictions provide critical support to facilities, including monitoring progress and coordinating access to vaccine

Importance of Immunization Information Systems (IIS) Engagement by LTCFs

- Could IIS data assist LTC providers to track COVID-19 vaccination status for residents and staff, especially new admissions or hires?
- Could IIS data support jurisdictions to monitor vaccine administration rates in long-term care facilities?
- Could enrollment and reporting into IIS by long-term care facilities lead to increased adult immunization data for other vaccine-preventable infections (e.g., influenza, pneumococcus)?



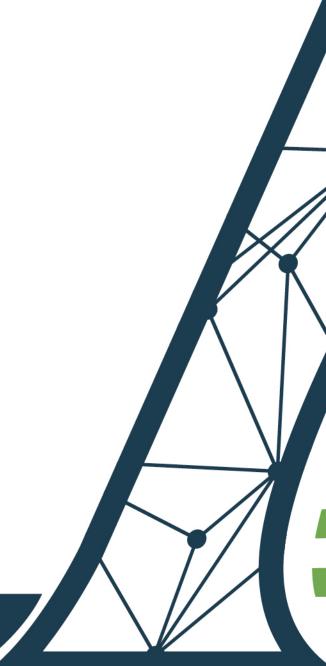
COVID-19 vaccine education and access resources for LTCFs



Long-Term Care Facility Toolkit: Preparing for COVID-19 Vaccination | CDC Ensuring Access to COVID-19 Vaccine in Long-Term Care Facilities | CDC COVID-19 Vaccination Federal Retail Pharmacy Partnership Program | CDC

Mary Woinarowicz

North Dakota





North Dakota Long-Term Care and IIS

Mary Woinarowicz, MA

AIRA August 2021 Discovery Session

BEFORE COVID

- As of September 30, 2020:
 - 102 of 215 LTC enrolled in IIS
 - 39 LTC submitting data to IIS in first 6 months of 2020
- LTC outreach
 - IIS training
 - Focused on benefits of IIS for LTC
 - Offered help creating flat file uploads
- 100% adult participation in NDIIS

LTC AND IIS

- North Dakota has skilled nursing, basic care, and assisted living facilities
 - Don't sub-categorize
 - All levels of facility are categorized as long-term care in the IIS
- LTC can have read/write access to the IIS
 - Are able to access to all immunization provider functionality
- LTC have access to records for individuals 14 years of age and older
- Can only access records for staff if administering vaccines to staff
 - Cannot use IIS to verify vaccination status solely for employment purposes

CHALLENGES – BEFORE COVID

- Staffing shortages
 - LTC that received IIS outreach reported having limited staff available to administer and report vaccines
- Staff turn-over
 - Staff the received IIS outreach and enrolled to use the IIS would leave and no transfer of information was occurring at the provider site
- Technical capacity for data exchange
 - ND health information exchange and IIS have tried working with LTC EHR systems but have had no success getting electronic data exchange enabled
 - Offered assistance to set up flat file export but no facilities accepted

COVID VACCINE

- Surveyed sites to assess how many were planning to vaccinate own residents and staff and how many wanted/needed outside assistance
 - Sites that did not respond to the survey were called
- Assessed LTC facility
 - storage capacity
 - administration capacity
 - data reporting capacity

CHALLENGES – COVID

- Staffing shortages
 - Staff not available for large-scale vaccination campaign
 - Not enough resources for vaccination and data reporting
- No electronic data exchange established
 - EHR systems not interested in setting up electronic data exchange
- Limited or no vaccine storage space
 - Staff had limited or no experience with vaccine storage and handling
 - Did not have ultra-cold storage
 - Had very limited refrigerator/freezer storage space that could not hold enough vaccine for facility staff and residents

SUCCESSES

- LTC outreach
 - Worked through LTC association to reach all facilities in ND
- Contracted with North Dakota State University Center for Immunization Research and Education to conduct COVID vaccine education at LTC
- Developed a LTC-specific resource page on COVID vaccine website
 - Included educational materials specific for LTC

SUCCESSES

- Made sure all 215 ND facilities had plan for their own vaccination program OR were partnered with a local pharmacy or local public health
 - Some pharmacies were participating in the Federal LTC-Pharmacy Partnership Program
 - Some pharmacies and LPH were enrolled to get vaccine from ND
- With new recommendation for additional doses and anticipated coming recommendation for booster doses, working to reach out to LTC again to make sure they have a vaccination plan or partner facility

SUCCESSES

- Pharmacies that vaccinated LTC are electronically connected to IIS
- LPHU that vaccinated LTC have EHR electronically connected to IIS or used PrepMod to submit vaccination data to IIS
- Have 17 LTC enrolled as COVID vaccine providers
- Have 112 of 215 LTC enrolled in IIS
- 55 LTC submitting data to IIS since October 2020

LESSON LEARNED

- With outside vaccinators giving COVID vaccine to LTC residents and staff, all doses administered are entered under the vaccinator's IIS provider ID and not the LTC
 - Difficult to use the IIS to assess LTC COVID vaccination rates
- Used a weekly survey of LTC to assess and monitor LTC vaccination rates weekly
 - Able to track COVID vaccination rates for LTC residents and staff for all 215 ND LTC

RECOGNITION

- Recognize COVID-19 Staff
 Vaccination Ambassadors on
 COVID-19 vaccine website
 - Publish list of ND organizations that have a COVID-19 staff vaccination rate of 75% or higher
 - Done in coordination with Quality Improvement Organizations and the Great Plains Quality Innovation Network



Persistence and education are key. We also had a mandatory
PowerPoint presentation and education meeting discussing the science
and facts on the vaccines. We included testimonials from staff who are
suffering from long hauler COVID symptoms, as well as those who had
family members were with severe COVID. We also used resident
testimonials on reasons why they hope staff will get vaccinated and
what they are looking forward to post vaccine. We have actively worked
with local pharmacies and the county to get people vaccinated when
we don't have doses on hand. If someone wants a vaccine I will find
them one.





THANK YOU



Mary Woinarowicz: mary.woinarowicz@nd.gov

Meghan Quinn

Maryland





SKILLED NURSING FACILITIES

Amended Directive Order 6/15/2021

Per the amended Secretary of <u>Health order</u>, Skilled Nursing Facilities must be successfully registered in ImmuNet as a COVID-19 vaccine provider.

What does that mean for my facility?

Your point of contact will need to:

- 1. Enroll in ImmuNet Enrollment form
- 2. Apply for a Covid PIN through ImmuNet (Create a Non-VFC Profile)

https://www.mdimmunet.org/prd-IR/portalHeader.do

- This requires the make and model of your cold storage unit capacity (This is <u>not</u> asking how many vaccines you would like to order, just the capacity of the combination of the refrigerator/freezer unit)
- 3. Report to ImmuNet through an Electronic Health Record vendor (EHR)
 - a. Contact the EHR vendor to make sure that you are mapped correctly with the ImmuNet Org ID
 - b. Have your EHR send the below test message to ImmuNet

EHR Test Message: HL7 specification in the links below:

HL7 - 2.5.1 Real-time Transfer Specifications

(mdimmunet.org)ImmuNet COVID19 MDH-Required-Data-Elements.pdf (maryland.gov)

<u>OR</u>

- 4. **PrepMod** If your EHR is PointClickCare (PCC)
 - a. Attend PrepModTraining (this is because PCC is not participating in reporting to ImmuNet)

The final training will be on **Friday, August 6th at 9am**

To register, please click on the link below:

https://us02web.zoom.us/meeting/register/tZYsceivrjwvEtEkEhoxstpmnm4RaBXJfQTs

b. Identify the Super User (<u>Needs to attend the training</u>) and send the information to Georgette Harrison <u>georgette.harrison@maryland.gov</u>

Super User required contact information

Name:

Email address:



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|---|---|---|---|---|---|---|---|----|---|---|---|--|

Position:

Facility name:

Facility Address:

ImmuNet Org ID:

What is ImmuNet?

ImmuNet is Maryland's HIPAA compliant secure vaccine database which will allow the following:

- Flexibility in ordering Covid-19 vaccine
- Helps in the prevention of missed/duplicate vaccinations records
- Access to a patient's vaccine history

FAQs

I am happy with my Pharmacy partnership. Does this mean I can't use their services?

Most SNFs have a contract with a pharmacy and will continue to use them. But to be compliant, per the Secretary's order they must be able to have the infrastructure to be independent of their pharmacy.

I already manually order/report to ImmuNet, does this apply to me?

Yes, Covid-19 vaccine <u>cannot be manually entered</u> like other vaccines and must go through an EHR or PrepMod.

What if I have multiple skilled nursing facilities?

Each one would need to register as a separate facility.

Does this apply to Assisted Living facilities?

No, the order is just for SNFs but ALF are encouraged to apply.

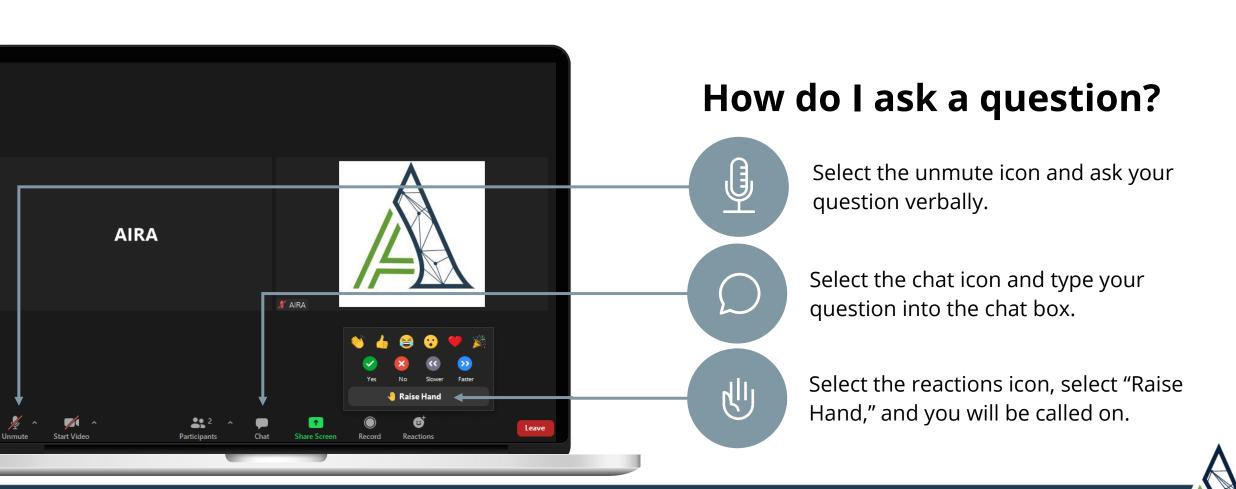
Contact information:

Meghan Quinn - Project lead - meghan.quinn@maryland.gov cell 603-568-3995

Georgette Harrison - Assistant lead - georgette.harrison@maryland.gov

Wesley Huntemann - Project Manager - wesley.huntemann@maryland.gov

Question & Answer



Thank you to our presenters, and thanks to all of you for joining us!

Please complete a brief evaluation survey.

The next Discovery Session will be on September 27, 2021