



**AIRA**  
AMERICAN IMMUNIZATION  
REGISTRY ASSOCIATION

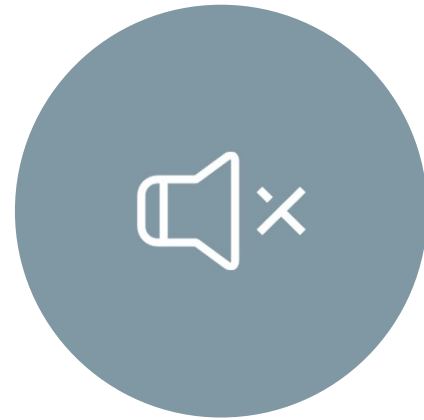
# AIRA Members & Partners Quarterly Meeting

January 31, 2022

# Welcome – Christy Gray, President



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



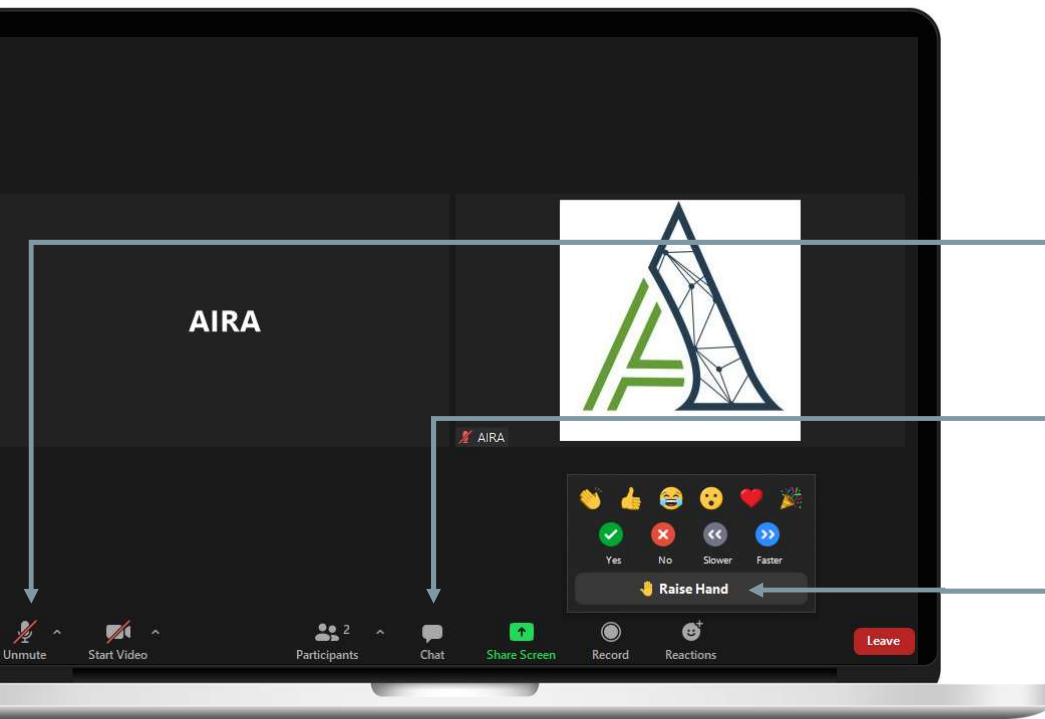
All phone lines  
are muted



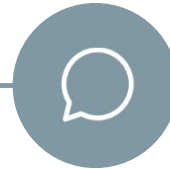
# Welcome – Christy Gray, President

## How do I ask a question?

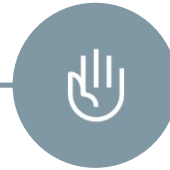
There will be time allotted for Q&A following each of the updates.



Select the unmute icon and ask your question verbally.



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



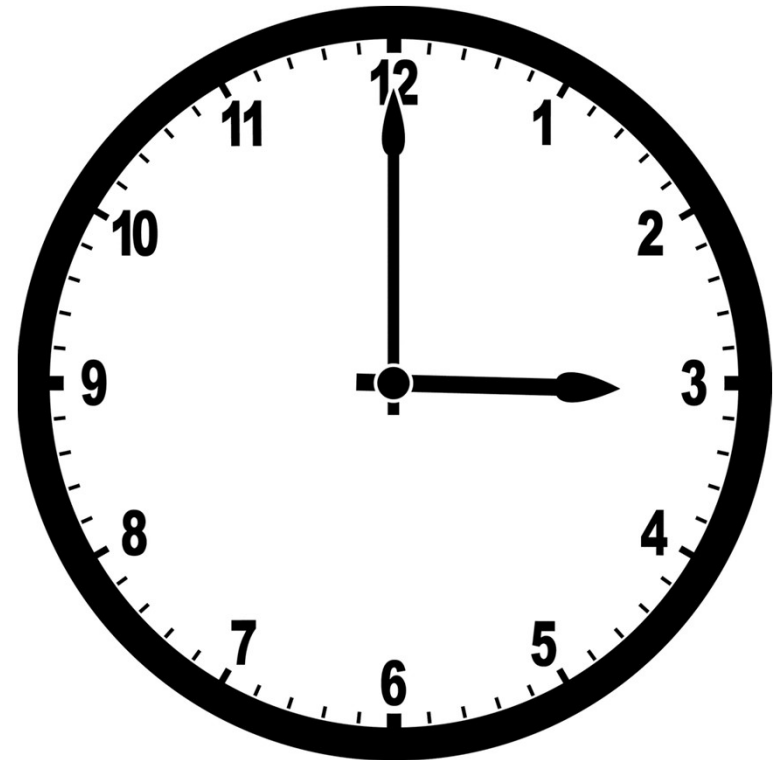
Select the reactions icon, select "Raise Hand," and you will be called on.



# Meeting Schedule

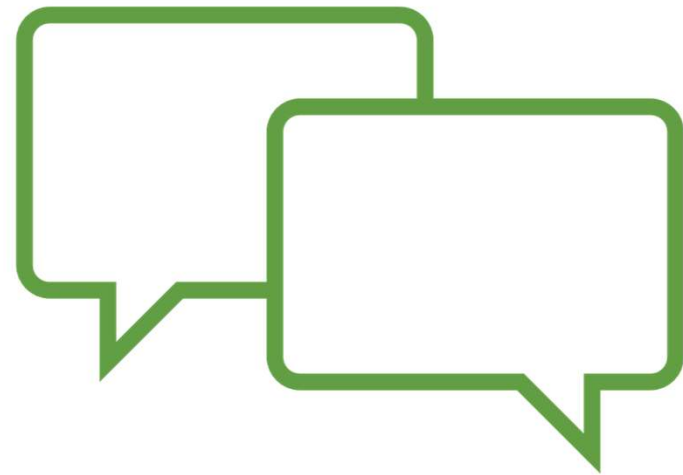
Today's meeting will  
end at 3 p.m. ET.

The meeting may  
appear on some  
calendars as ending at  
3:15 p.m. ET



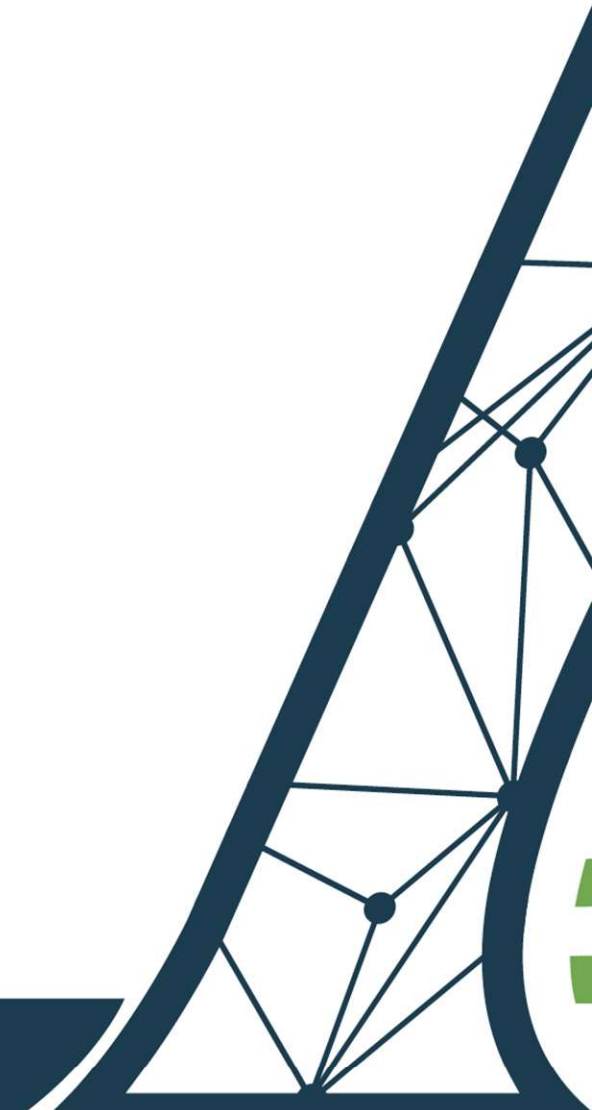
# Technical Support

If you experience any technical issues during the meeting, please contact the **Jo Turcotte** via direct message in the Chat.



# American Immunization Registry Association (AIRA) Update

Mary Beth Kurilo



# Immunization Integration Program (IIP)

- **Goal:** **Improve interoperability between EHRs and IIS**
- **Strategies:**
  - **Testing & Recognition Initiative** - demonstrate and be tested on immunization capabilities
  - **Collaborative** - **diverse** forum to develop interoperability recommendations and solutions
- Partners: CDC, AIRA, HIMSS, Drummond Group, SME Consultants & Volunteers



# IIP Testing & Recognition

Goal: Facilitates adoption of consensus immunization-related capabilities within EHRs to improve clinical decision-making and information sharing with IIS.

- IIP tests EHRs for adopting and meeting core capabilities
- Parallels AIRA's Measurement and Improvement initiative to measure and test IIS alignment with recognized standards
- Relaunch with comprehensive programmatic and technical updates is underway
- Pilot vendor testing to start in February 2022

IMMUNIZATION INTEGRATION  
PROGRAM:  
IMMUNIZATION-RELATED  
CAPABILITIES AND GUIDANCE  
UPDATE - SEPTEMBER 14, 2020





# 2022 IIP Collaborative Priorities

1

## *Access Bulk Query Data from IIS*

Large provider organizations and health payers would benefit from a standardized way to access large amounts of IIS data for their patients/members

2

## *Data Validation & Reasons for IIS Rejections*

Inconsistency in how data is entered (e.g., dates entered in the future, birth date discrepancies, or missing fields) can cause IIS to reject immunization messages

3

## *Capture of Race & Ethnicity*

The capture of race and ethnicity is uneven across the immunization information ecosystem

4

## *Regular Updates of Code Sets*

When one party of the data exchange has implemented new codes (e.g., NDCs for flu vaccine) and the other party has not, it can impede data interoperability including preventing patients' vaccinations from being recorded properly

Interested in participating in these topics? Email [IIP@HIMSS.ORG](mailto:IIP@HIMSS.ORG)



# Data At Rest Project Outline



1. De-identified patient and vaccination extract on 0–2-year-old cohort pulled from IIS data
2. Extract files transformed with a command line tool into aggregate detection file
3. Encrypted aggregate detection file loaded through AART
4. AIRA creates and releases Data Quality report in AART

Interested? Visit <https://www.immregistries.org/data-at-rest>

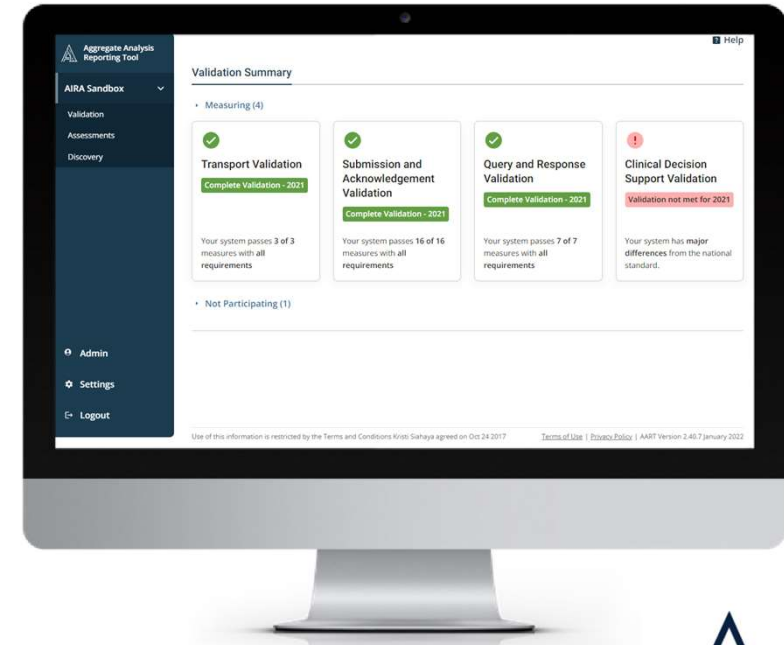
Email Assi at [adiallo@immregistries.org](mailto:adiallo@immregistries.org) to participate



# New AART User Interface Coming in February



- Clean and modern look; easy to use and navigate
- Seamless workflow and more intuitive design
- Continued support of high-level and detailed views
- Enhanced dashboard to access pertinent data



# Vaccinate with Confidence 2022

## Data visualization trainings

(Tableau AND Power BI)

- Beginner + intermediate levels
- Immunization data used
- Instructor-led
- Delivered remotely

## Data visualization user groups

- Tableau – 1/26 at 12 pm ET
- Power BI – 2/ 22 at 12 pm ET



# Vaccinate with Confidence 2022



## **Epi Shared Services**

- Onboarding support
- Trainings on IIS data analysis
- Peer-to-peer mentorship
- March 2022 launch



## **Data quality technical assistance (TA)**

- Provide 1:1 support to two IIS
- Custom data quality plans



# Interjurisdictional MOU

AIRA is the administrator for the Interjurisdictional Memorandum of Understanding (MOU)

- **52** jurisdictions have now signed the MOU
  - Florida was most recent to come on board on 1/7/2022
- **If you haven't yet signed**, the fillable-form MOU and the compiled, signed MOUs can both be found on the AIRA repository – search on MOU!

<https://repository.immregistries.org/>



# National Meeting

2022  
AIRA National  
Meeting  
Advancing IIS Together

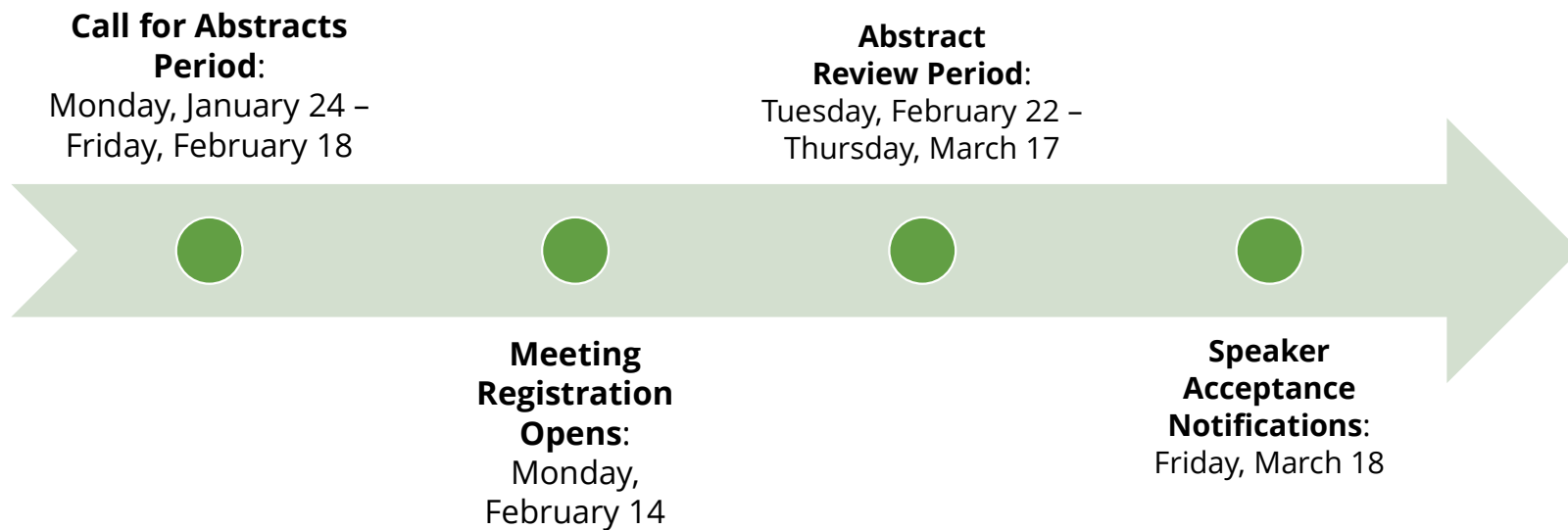
**save  
the date**

**April 26 - 27**  
VIRTUAL EVENT

 **AIRA**  
AMERICAN IMMUNIZATION  
REGISTRY ASSOCIATION



# Timeline





# Publication Project

## Goals

- Foster increased publication of peer-reviewed IIS-related research
- Publish a journal supplement

## Status

- Charter has been drafted for the workgroup
- SME invites and community invitation are coming soon



# Centers for Disease Control and Prevention (CDC) Update

Lynn Gibbs-Scharf on behalf of Stuart Myerburg



# National Center for Immunization and Respiratory Diseases (NCIRD) Update

Lynn Gibbs-Scharf

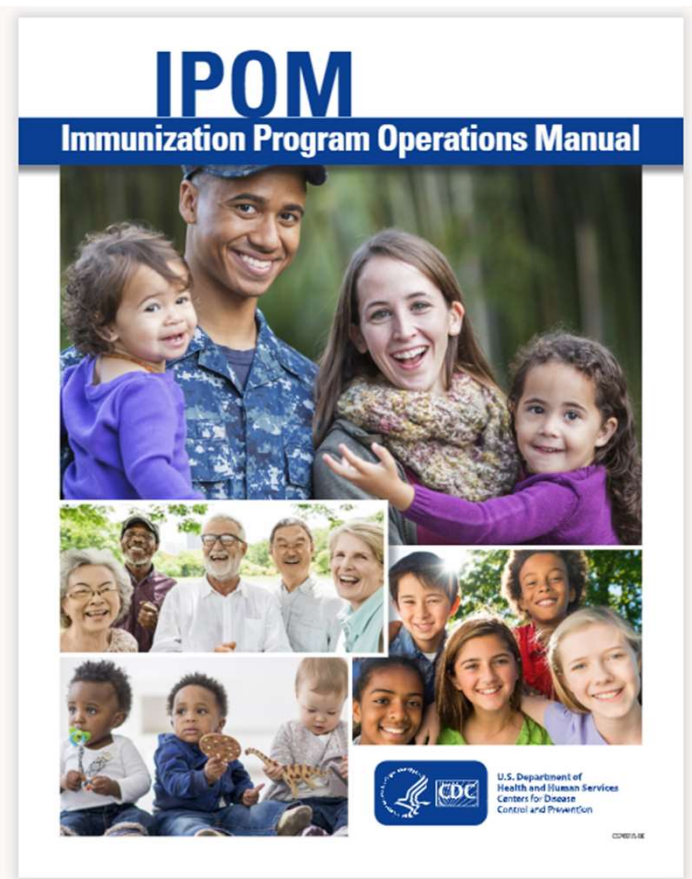




## NCIRD IIS Update

January 31, 2022

# IPOM Chapter D: IIS Strategies and Activities



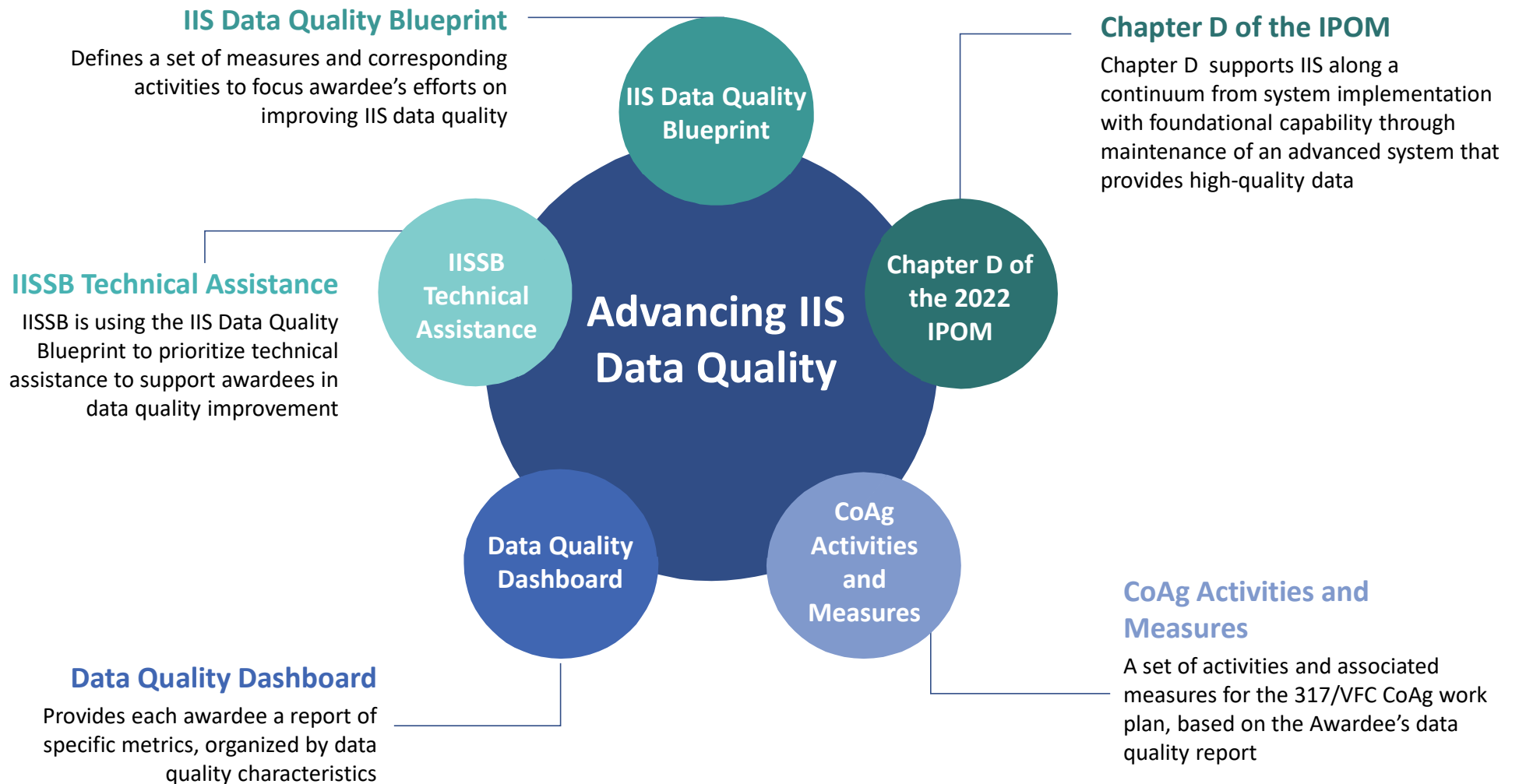
## IPOM Chapter D

- Describes the role of data quality in IIS and program operations
- Outlines functional, data, integration, technology, and security priorities
- Provides activities that support an IIS's progression along the developmental continuum
- Offers a variety of resources to support workplan development

## Chapter II-D: Immunization Information Systems (IIS) and Technology

### Strategies:

1. Support information needs of the Immunization Program and key stakeholders through provision of high-quality data and reports.
2. Advance immunization information system (IIS) capabilities to support Immunization Programs by implementing the CDC IIS Functional Standards and IIS best practices and evaluating performance.
3. Adhere to industry information technology standard practices.

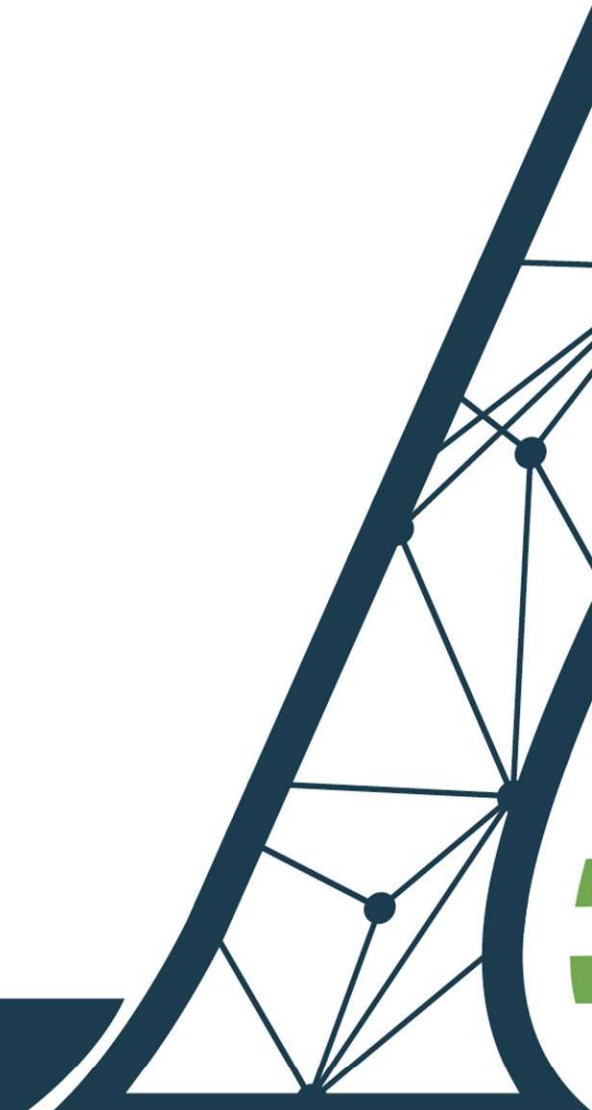


## IIS SME Jurisdiction Assignments 2022

IIS SME Contact Information (2022)				
<b>Beth Cox</b> <a href="mailto:NHY7@cdc.gov">NHY7@cdc.gov</a> 404-718-5698	<b>Jan Hicks-Thomson</b> <a href="mailto:HBV8@cdc.gov">HBV8@cdc.gov</a> 404-718-1555	<b>Paul Klintworth</b> <a href="mailto:OAX3@cdc.gov">OAX3@cdc.gov</a> 404-498-5270	<b>Michelle Ruslavage</b> <a href="mailto:QBC5@cdc.gov">QBC5@cdc.gov</a> 404-718-3981	<b>Bobbie Strickland</b> <a href="mailto:GQC9@cdc.gov">GQC9@cdc.gov</a> 404-639-8427
District of Columbia Delaware Maryland New Hampshire New Jersey New York New York City Pennsylvania Philadelphia Puerto Rico US Virgin Islands Virginia West Virginia	California Colorado Iowa Kansas Missouri Montana Nebraska New Mexico North Dakota South Dakota Utah Wyoming	Arkansas Chicago Houston Illinois Indiana Louisiana Michigan Minnesota Ohio Oklahoma San Antonio Texas Wisconsin	Alaska American Samoa Arizona CNMI FSM Guam Hawaii Idaho Marshall Islands Nevada Oregon Palau Washington	Alabama Connecticut Florida Georgia Kentucky Maine Massachusetts Mississippi North Carolina Rhode Island South Carolina Tennessee Vermont
HHS Regions 1, 2, 3	HHS Regions 6, 7, 8, 9	HHS Regions 5, 6	HHS Regions 9, 10	HHS Regions 1, 4

# Association of Immunization Managers (AIM) Update

Katie Palmer





# AIM Updates

January 31, 2022



Association of  
Immunization  
Managers

# Immunization Program Environment

- COVID vaccination
  - Boosters in LTCFs, increasing uptake in kids, preparing for Pfizer under 5 vaccine
- 2022 IZ Program Operations Manual (IPOM)
  - New requirements:
    - All doses administered reported to CDC
    - IZ Gateway Onboarding and participation
    - Adoption of PPRL
    - Public facing dashboards for all immunizations
- Coming up on grant writing cycle
- Beginning of legislative season for jurisdictions
  - COVID vaccine mandates, school requirements

# AIM/CDC Listening Sessions

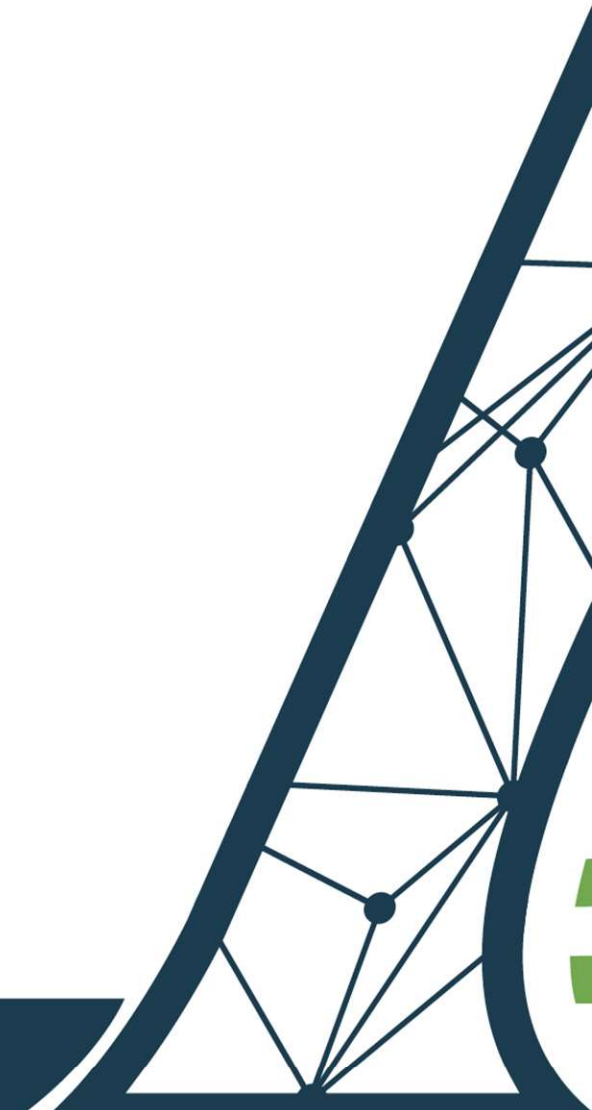
- AIM is facilitating listening sessions with members and CDC to gain insights from Members on challenges encountered during the 5 to 11-year-old rollout and how these challenges were overcome.
- CDC will use these lessons learned to address current challenges and begin to make plans for a potential COVID-19 vaccination program for children under 5 years of age.
- Total of four sessions with the last one scheduled for this week.
- Topics include:
  - COVID-19 Vaccine Lessons Learned from the Pediatric COVID-19 Program Rollout
  - Ensuring an Adequate Pediatric Provider Network
  - Building Vaccine Confidence in Pediatric Vaccination

# Other AIM Updates

- **AIM Conference (In-Person!)**
  - Currently looking at June/August
- **National Conference for Immunization Coalitions and Partnerships (In-Person)**
  - September 13<sup>th</sup> – 15<sup>th</sup>
  - Minneapolis, MN
- **Upcoming Conferences AIM is Attending:**
  - STC Vaccine Intelligence Task Force and Thought Leadership Consortium meetings
  - HIMSS Conference

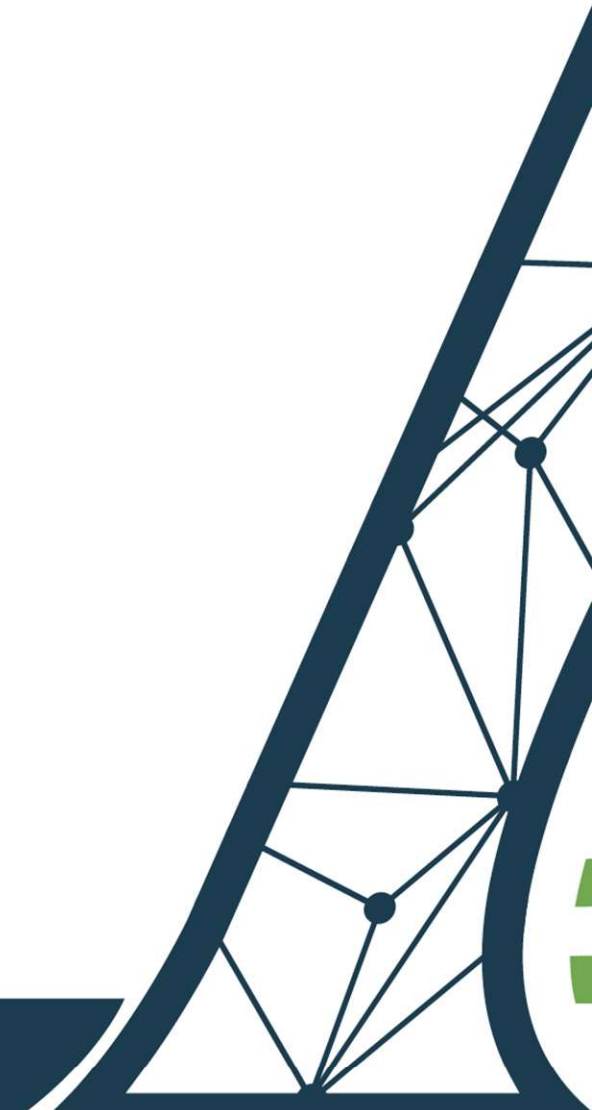
# Association of State and Territorial Health Officials (ASTHO) Update

Kim Martin



# Public Health Informatics Institute (PHII) Update

Vijay Pathangi



# AIRA Members and Partners Quarterly Update

**Public Health Informatics Institute**

Vijay Pathangi, PHII Project Team Lead

January 31, 2022

# PHII Updates

- IIS Leadership workshop
  - May 17th-19th, 2022
- Transition Learning Community (TLC)
  - TLC restarted this month after a year of hiatus
  - 1st TLC webinar completed on 01/26
- Updates to Requirements Traceability Matrix (RTM)
- IIS resources available on the new redesigned PHII webpage @ [www.phii.org](http://www.phii.org)



# National Association of County and City Health Officials (NACCHO) Update

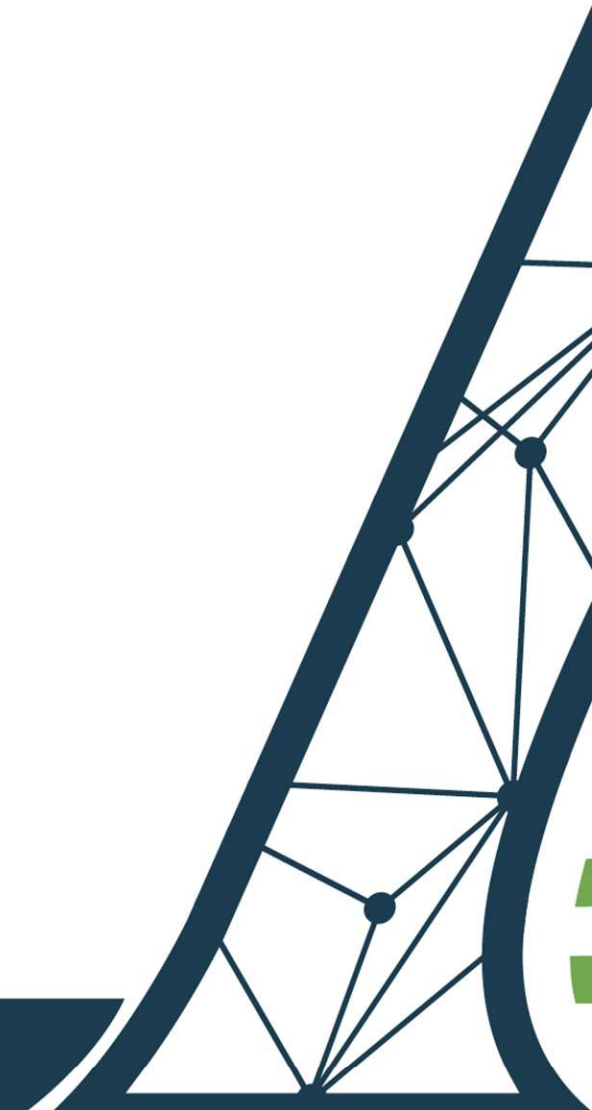
Michelle Cantu

Lilly Kan



# Office of the National Coordinator for Health Information Technology (ONC) Update

Rachel Abbey



## ONC AIRA Update (January 31, 2022)

1. ONC Annual Meeting—Starts this week! Register [here](#). There will be a special Public Health and Health IT session on Wednesday February 2, 2022, 3-4PM ET. More to come **April 13-14, 2022**: Panel Sessions, Exhibit Hall, and Networking.
2. The Trusted Exchange Framework, Common Agreement - Version 1, and Qualified Health Information Network (QHIN) Technical Framework - Version 1 were released on January 18, 2022
  - [The Recognized Coordinating Entity \(the Sequoia Project\)](#) is where you can view TEFCA documents, register for educational sessions, and review requirements to apply to become a QHIN
  - February 17, 2022 (3-4PM ET) ONC, CDC and the RCE will hosting a webinar specifically for the public health community on TEFCA—please email [phdi@cdc.gov](mailto:phdi@cdc.gov) if you would like participate.
3. The Office of the National Coordinator for Health Information Technology (ONC) and the Centers for Disease Control and Prevention (CDC) in coordination with HL7 have launched a Fast Health Interoperability Resources (FHIR) Accelerator called Helios. For those who are interested in participating please visit: <http://www.hl7.org/helios/>
4. ONC continues to work with our [Strengthening the Technical Advancement & Readiness of Public Health via Health Information Exchange Program \(STAR\) HIE awardees](#) and our Immunization Data Exchange, Advancement and Sharing (IDEAS) grant with ASTHO, to help communities improve the sharing of health information related to vaccinations.

# New Data Classes and Elements Added to Draft United States Core Data for Interoperability (USCDI) v3

Please visit [here](#) to view the entire USCDI v3. It is open for public comment through April 30, 2022.

<p><b>New Data Class</b></p> <p><b>Health Insurance Information</b></p> <ul style="list-style-type: none"> <li>• Coverage Status</li> <li>• Coverage Type</li> <li>• Relationship to Subscriber</li> <li>• Member Identifier</li> <li>• Subscriber Identifier</li> <li>• Group Number</li> <li>• Payer Identifier</li> </ul>	<p><b>New Data Class</b></p> <p><b>Health Status</b></p> <ul style="list-style-type: none"> <li>• Functional Status</li> <li>• Disability Status</li> <li>• Mental Function</li> <li>• Pregnancy Status</li> </ul>	<p><b>Laboratory</b></p> <ul style="list-style-type: none"> <li>• Specimen Type</li> <li>• Result Status</li> </ul>
<p><b>Patient Demographics</b></p> <ul style="list-style-type: none"> <li>• Date of Death</li> <li>• Tribal Affiliation</li> <li>• Related Person's Name</li> <li>• Related Person's Relationship</li> <li>• Occupation</li> <li>• Occupation Industry</li> </ul>	<p><b>Procedures</b></p> <ul style="list-style-type: none"> <li>• Reason for Referral</li> </ul>	

## USCDI+ for Public Health: Goals & Objectives

ONC and CDC are establishing the USCDI+ for public health to address core data and interoperability for public health needs beyond the scope of USCDI.

- Capture the data needs of public health that fall outside the scope of USCDI core and **aim to improve data quality and availability, helping to save time and resources for end users and PH officials.**
- Enable health IT vendors to send more consistent, harmonized data to **improve the quality of data available to public health to conduct disease surveillance and disease investigation.**
- Establish datasets that can support **a unified response across local partners, jurisdictions, and all levels of government.**
- Follow a more flexible and rapid lifecycle than USCDI, **allowing flexibility to meet changing and emerging needs of public health.**



The Office of the National Coordinator for  
Health Information Technology

# Contact ONC

Rachel Abbey, MPH

Public Health Analyst

[Rachel.Abbey@hhs.gov](mailto:Rachel.Abbey@hhs.gov)



**Phone:** 202-690-7151



**Health IT Feedback Form:**

<https://www.healthit.gov/form/healthit-feedback-form>



**Twitter:** @onc\_healthIT



**LinkedIn:** Search “Office of the National Coordinator for Health Information Technology”

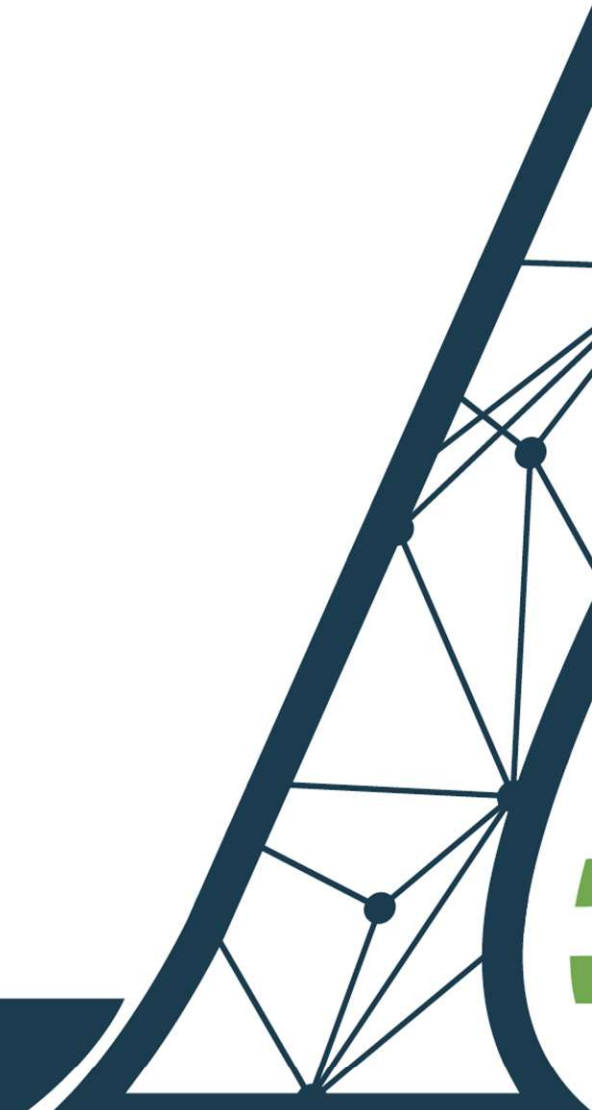


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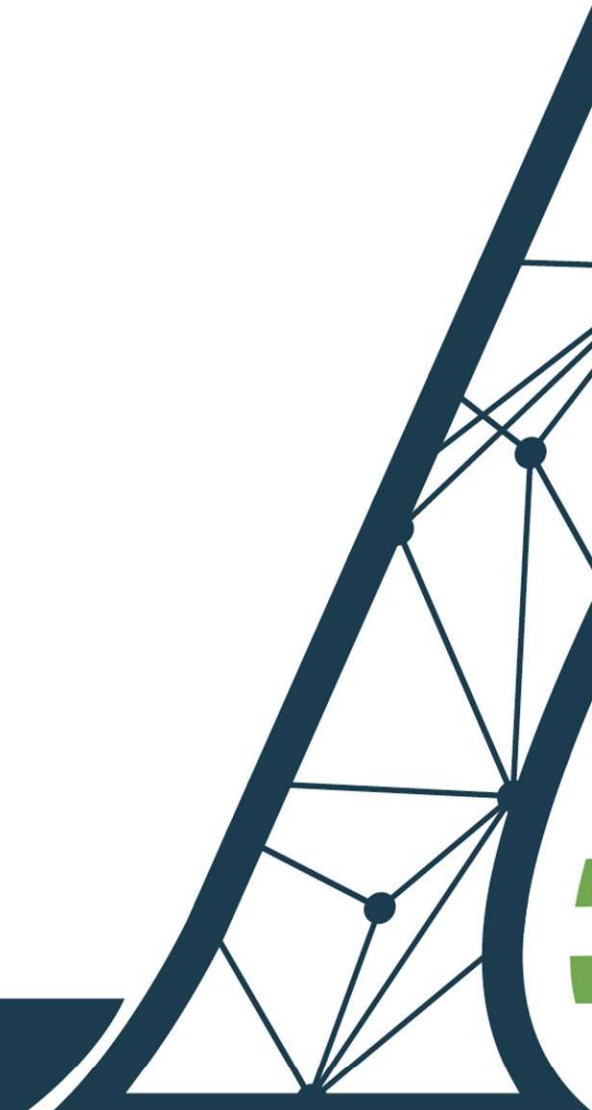
# American Academy of Pediatrics (AAP) Update

Dana Bright



# Immunize.org Update

Laurel Wood







# Immunize.org Update

AIRA Members & Partners Call

January 31, 2022

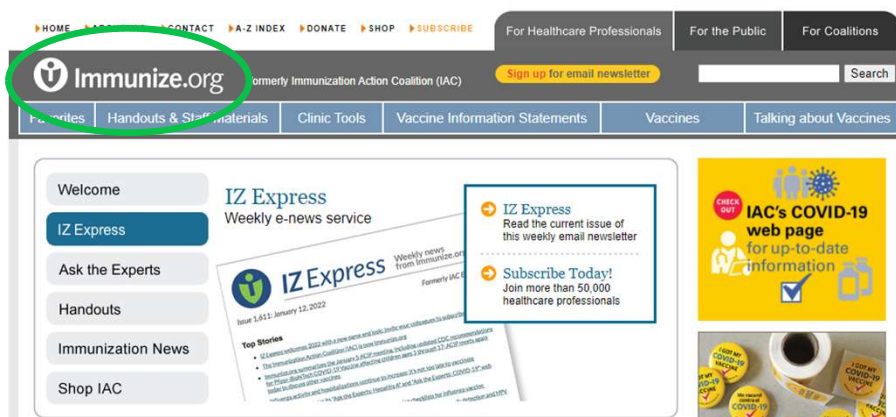
# Immunization Action Coalition is now...





- Name change and rebranding envisioned by our founder and executive director emerita Deborah Wexler, MD
- With this rebrand, reaffirming our mission to support frontline healthcare professionals with immunization education and vaccine advocacy
- Website name already familiar to healthcare professionals (more than 35,000 daily visitors)
- Makes it easier for frontline healthcare vaccinators to find us and our resources
- Will take time to fully incorporate throughout our website and materials
- In coming months, will unveil *new website platform* with improved searchability

For now...



**IZ Express** Weekly news from Immunize.org

Delivered via email every Wednesday, *IZ Express* (formerly *IAC Express*) keeps you informed about new and updated vaccine recommendations from the Centers for Disease Control and Prevention and new vaccine licensures by the Food and Drug Administration. You'll read about newly posted Vaccine Information Statements (VISs) and their translations, educational materials from Immunize.org, and the latest resources from CDC and other organizations.



▶ Join more than 50,000 subscribers today!

### *Coming in this week's issue:*

Tables to help HCPs ensure they are using the *most current* COVID-19 vaccination schedules and tools, e.g., EUA Fact Sheets and standing orders

[www/immunize.org/subscribe](http://www/immunize.org/subscribe)

# New handouts of interest

## Not Sure If You Can Get an Influenza Vaccine?

**Updated recommendations may mean you can – even if you were told no in the past.**

Influenza (“flu”) vaccination prevents thousands of deaths and millions of medical visits every year. But some people have been told they can’t be vaccinated when that might not be the case now. If you fall into this category, it is important to learn more. New vaccine options and updated recommendations mean that more people than ever can get the protection that the vaccine offers. The information below shows some of these reasons along with what is known that makes influenza vaccination a must for you!

If you...	Can you get an influenza vaccine?
<b>Have an egg allergy</b>	<b>Yes.</b> People with all kinds of egg allergies can get any influenza vaccine. Some types are completely egg free, but even the ones made in eggs contain so little egg protein that they are unlikely to cause any reaction. But just to be safe, people whose allergy to egg is more severe than just hives should choose an egg-free vaccine option or be vaccinated in a clinic setting where medical treatment is available if an allergic reaction should happen. Talk to your healthcare provider to see what options are available for you.
<b>Had Guillain-Barré syndrome (GBS)</b>	<b>It depends.</b> Influenza vaccines are a very rare cause of GBS. If your GBS symptoms began within 6 weeks of getting an influenza vaccination and no other cause was identified, we generally would not recommend influenza vaccine to you. However, if you are at high risk of severe illness or complications from the flu, your doctor may still recommend the vaccine. Most cases of GBS are completely unrelated to influenza vaccination. People whose GBS is not influenza vaccine-related can get the influenza vaccine.
<b>Are pregnant or breastfeeding</b>	<b>Yes.</b> Getting the influenza vaccine while pregnant or breastfeeding is not only safe, it’s recommended because it protects both mom and baby. The only type of influenza vaccine you should not get while pregnant is the live nasal spray vaccine. The live vaccine is fine if you are breastfeeding.
<b>Had a severe allergic reaction after getting influenza vaccine in the past</b>	<b>It depends.</b> If you had a severe allergic reaction the same day you got an influenza vaccine, you should not get that specific type of vaccine again. However, you might be able to get a different type of influenza vaccine. Be sure to talk to your doctor about your allergic reaction and if you could get an influenza vaccine.
<b>Have a weakened immune system</b>	<b>Yes.</b> Influenza vaccine is recommended for people with a weakened immune system because they are at higher risk of getting severe influenza illness. You can get any type recommended for your age except for the live nasal spray vaccine.
<b>Have a loved one with cancer or weakened immune system</b>	<b>Yes.</b> Getting the influenza vaccine protects both you and your loved one, even if their immune system is weakened. You can get any vaccine recommended for your age. It’s even okay to get the live nasal spray vaccine as long as you wait 7 days to have close contact with a hospitalized patient in a special unit (such as a bone marrow transplant unit).

CONTINUED ON THE NEXT PAGE ►

**Immunize.org** FOR PROFESSIONALS: [www.immunize.org](http://www.immunize.org) / FOR THE PUBLIC: [www.vaccineinformation.org](http://www.vaccineinformation.org)  
[www.immunize.org/catg.d/p3120.pdf](http://www.immunize.org/catg.d/p3120.pdf) • Item #P3120 (1/22)

[www.immunize.org/catg.d/p3120.pdf](http://www.immunize.org/catg.d/p3120.pdf)

## How to Administer Multiple Intramuscular Vaccines to Adults During One Visit

It is not unusual for adults to need more than one vaccination at an office visit. When that occurs, CDC recommends giving all needed vaccines at the same visit to reduce missed opportunities.

**These vaccines commonly administered to adults<sup>1</sup> are administered via the intramuscular route:**

- COVID-19
- Hepatitis A (HepA)
- Hepatitis B (HepB)
- Human papillomavirus (HPV)
- Influenza
- Pneumococcal
- Tdap and Td
- Zoster

**Determine vaccines to be administered.**

- Review each patient’s vaccine history and determine needed vaccines (see CDC’s recommended schedule of immunizations for adults at [www.cdc.gov/vaccines/schedules/downloads/adult/adult-combined-schedule.pdf](http://www.cdc.gov/vaccines/schedules/downloads/adult/adult-combined-schedule.pdf)).

**Determine which vaccines to give in separate limbs.**

- Administer vaccines more likely to cause a local reaction in separate limbs, if possible. Vaccines that cause injection site pain in at least half of recipients include COVID-19, zoster, HepA, HPV, pneumococcal (PCV, PPSV), and tetanus-containing vaccines (Tdap, Td).<sup>2</sup>
- If administration in separate limbs is not feasible or desired, administration in the same limb, separated by at least 1” (inch), is appropriate.

**Select the injection site(s) for intramuscular injections.**

- Determine which vaccine(s) will be administered in each limb (see options in diagrams at right). You can administer 1, 2, or 3 injections per deltoid, spaced at least 1” apart.
- Deltoid muscle:** Locate the central and thickest portion of the deltoid muscle – above the level of the armpit and approximately 2” below the acromion process (see diagram at right).
- Anterolateral thigh muscle:** Locate the outer portion of the middle third of the thigh (see diagram at right).

**Prepare to administer IM injections.**

- Choose the needle gauge and length needed for the patient’s age and weight (see “Administering Vaccines to Adults: Dose, Route, Site, and Needle Size” at [www.immunize.org/catg.d/p3084.pdf](http://www.immunize.org/catg.d/p3084.pdf)).
- Draw up each vaccine using a separate, new needle and syringe.
- Label each vaccine syringe and clearly indicate on the label or tray the planned injection site (e.g., right arm [RA], left arm [LA], right thigh [RT], left thigh [LT]).
- Administer injection at a 90° angle (see “How to Administer Intramuscular and Subcutaneous Vaccine Injections to Adults” at [www.immunize.org/catg.d/p2020a.pdf](http://www.immunize.org/catg.d/p2020a.pdf)). If more than one injection is given in a single limb (arm or leg), separate the injections by a minimum of 1”.

<sup>1</sup> Additional vaccines may be indicated for an adult due to missed childhood vaccinations, medical conditions, exposure risk, travel plans, or occupational risk.  
<sup>2</sup> According to clinical trial data provided in prescribing information.

The diagrams below illustrate options for administering one, two, or three vaccinations in a single arm, spaced at least 1” apart. Additional injections can also be administered in the opposite arm.

Use anatomical landmarks to determine the injection site in the deltoid muscle (a large, rounded, triangular shape). Find the acromion process, which is the bony point at the end of the shoulder. Then, locate the injection site which will be approximately 2” below the bone and above the axillary fold/armpit.

**Single IM injection in deltoid**

**Two IM injections in deltoid**

**Three IM injections in deltoid**

**A single IM injection may also be administered in the anterolateral thigh muscle as shown below.**

**Immunize.org** FOR PROFESSIONALS: [www.immunize.org](http://www.immunize.org) / FOR THE PUBLIC: [www.vaccineinformation.org](http://www.vaccineinformation.org)  
[www.immunize.org/catg.d/p2030.pdf](http://www.immunize.org/catg.d/p2030.pdf) • Item #P2030 (1/22)

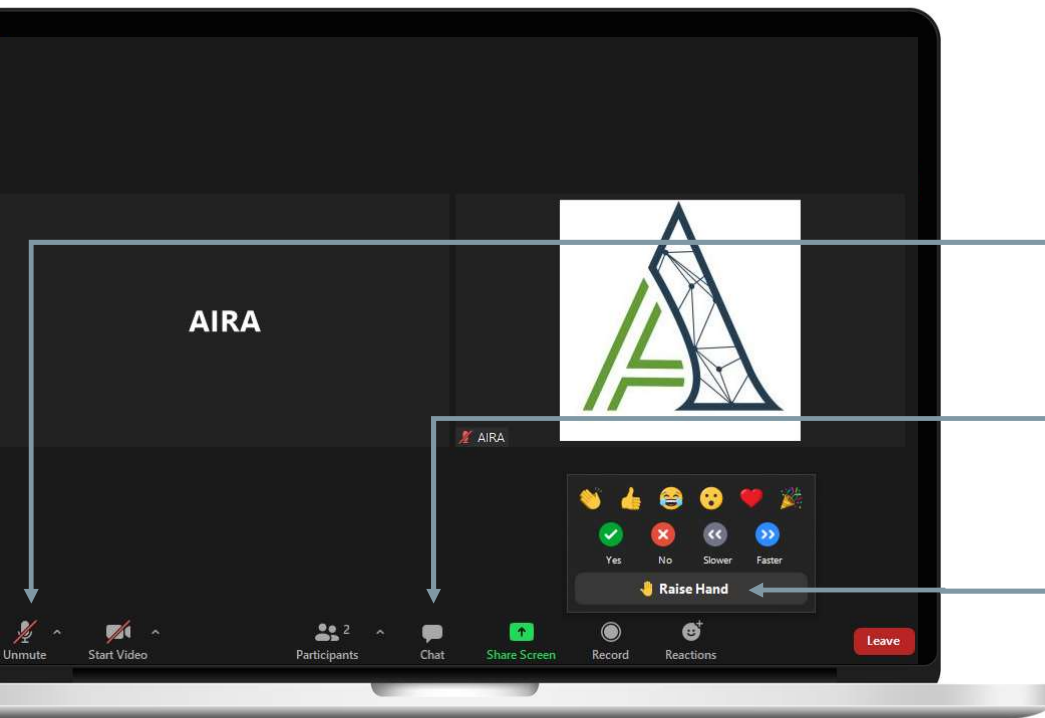
[www.immunize.org/catg.d/p2030.pdf](http://www.immunize.org/catg.d/p2030.pdf)



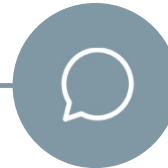
# Additional Questions?

## How do I ask a question?

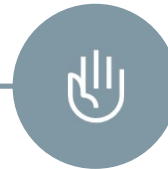
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Select the unmute icon and ask your question verbally.



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



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# Thank you for joining us!

Next Meeting: April 18, 2022 at 2 pm ET

