

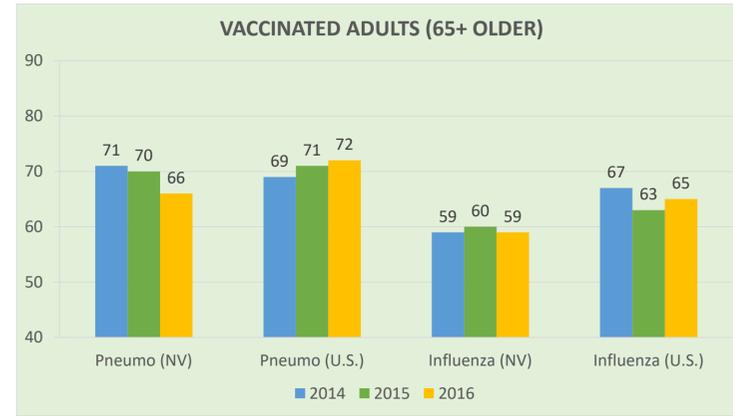
NV'r Miss a Shot: A Collective Approach to Boosting Nevada's Adult Immunization Rates

BACKGROUND

Nevada's population is fast growing, geographically diverse, and has a disproportionate number of older adults (expected to reach 1 million by 2030). High rates of poverty and uninsured, a large number of Medicaid expansion enrollees, provider shortages, and racial/ethnic disparities present significant immunization and access to healthcare barriers.

As a result, Nevada's adult immunization rates are well under Healthy People 2020 targets and in some cases, actually decreasing; while our cases of vaccine-preventable diseases such as pneumococcal and influenza are on the rise. Both are top-ten leading causes of death in Nevada.

Data source: CDC VaxView



TOP SELECTED QUALITY IMPROVEMENT STRATEGIES

- Establish process for inactivating patients in Nevada WebIZ
 - One community health nursing site improved their Tdap rates (19-35 years) from 29% to 98% in four months by cleaning their patient roster data.
- Establish process for assessing patient vaccination status
 - One community health clinic added an intake form box for the receptionist to check if she viewed the patient's Nevada WebIZ record. Their Tdap rate improved from 66% to 86% in six months.
- Conduct reminder/recall
 - A LHD targeted young adults aged 19-21 for HPV doses 1, 2, and/or 3. In six months, the rates for each dose improved 4%.
- Increase patient education about vaccine preventable diseases and vaccine recommendations
 - Strategies at participating pharmacies include posters in patient waiting areas, handouts in pharmacy prescription bags, and ensuring the VIS is provided.

PATIENT EDUCATION & OUTREACH

Multi-channel approach including: social media advertising, smart targeting website advertising, radio/TV PSAs, health condition tip cards in ENG/SPA, provider toolkit, clinic posters, checklists, OpEds, blog posts, and media interviews.

Facebook health condition-specific ads averaged 5,200 reach, 11,600 impressions, and 119 link clicks over 60 day period

Facebook general message ads reached 25,000 with 46,100 impressions, and 234 link clicks over 60 day period

PROJECT

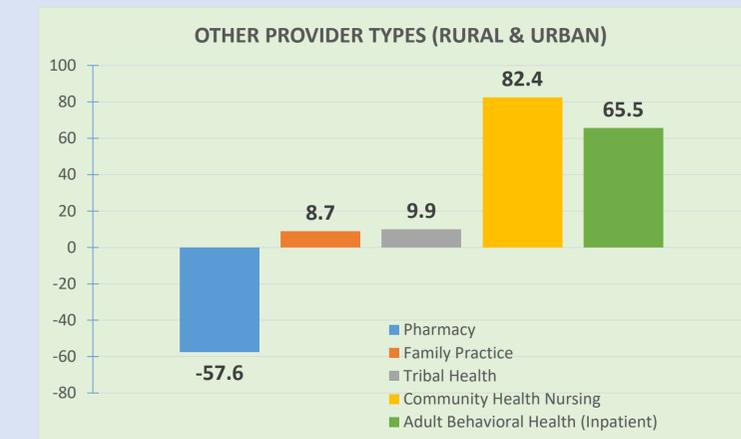
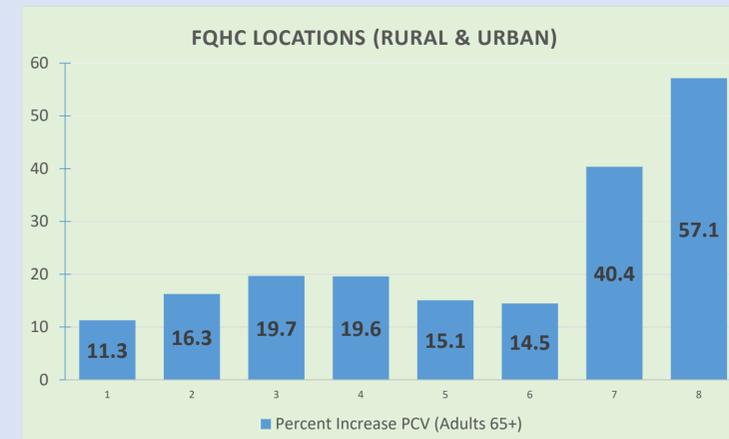
The Nevada State Immunization Program and Immunize Nevada (a non-profit immunization and health coalition) collaborated to increase adult immunization rates by fostering community engagement, building partnerships, expanding quality improvement activities, and strengthening provider capacities.

By utilizing a coalition partnership model and concurrent grants to the Nevada State Immunization Program from the CDC and to Nevada's QIN-QIO (HealthInsight) from CMS; interventions included AFIX-modeled provider visits, multiple communication channels, printed and digital toolkit, consumer health resources, community task force, healthcare provider web-based trainings, and data monitoring through Nevada's IIS – Nevada WebIZ. Over forty sites were selected for intervention including federally qualified health centers (FQHC), local health districts (LHD), primary care offices, large healthcare systems, retail pharmacy locations, and tribal health.

PROJECT CHALLENGES

- Medicaid expansion coupled with healthcare professional shortages created a population of adults with coverage, but unable to secure appointments in a timely manner.
- Nevada's uninsured rate dropped resulting in a smaller eligible population for 317 vaccine, making it a challenge to find eligible patients.
- Documentation in Nevada WebIZ is a state mandate, but not all vaccinators are in compliance. There is no enforcing body or consequences for those not reporting.
- No current function available in Nevada WebIZ to identify when an adult patient has passed away so their record can be closed.
- Inadequate reimbursement from Medicaid plans for adult vaccines force many practices to refer to LHDs or FQHCs to avoid the revenue loss.

PERCENT INCREASE for PCV13 (65+ older) – 6 month assessment interval



PHARMACY DOSES
(Most retail pharmacies stock and administer all recommended and travel vaccines)



21% increase overall
(4/2016 - 3/2017 to 4/2017 - 3/2018)



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