

Pandemic H1N1 Vaccine Distribution and Program Implementation

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Vaccine Purchase, Allocation, and Distribution

- Five manufacturers contracted to produce pandemic influenza vaccine for this fall
- Vaccine procured and purchased by US government
- Vaccine will be allocated across states proportional to population
- Vaccine will be sent to state-designated receiving sites: mix of local health departments and private settings

Vaccine planning assumptions

- H1N1 vaccine anticipated for mid-October
- Up to 45 million doses of vaccine expected for the US population
- An estimated 20 million additional doses expected each week
- 2 doses may be required for full protection
- Vaccine formulations & supply
 - 85% will come as 10 dose (multi-dose) vials
 - 15% will come as pre-loaded, single dose syringes and a live, attenuated nasal spray

Vaccine Planning Assumptions

- Preservative free, single dose syringes available for young children and pregnant women
- Syringes, needles, sharps containers and alcohol wipes provided free of charge
- Immunization shot card provided with each dose of vaccine; includes reminder for 2nd dose
- Vaccines will be shipped to providers sites using existing centralized distribution mechanism (currently used to ship pediatric vaccines through the state's Vaccines for Children Program)

Vaccine and Insurance Reimbursement

- Private providers may bill a vaccine administration fee
- Public providers cannot bill health insurance plans or 3rd party payer for the vaccine or the administration fee
- Private providers cannot bill health insurance plans or 3rd party payer for the vaccine

Public Health Planning: Pre-registration

- CT DPH recruiting licensed health care providers interested in administering H1N1 vaccine to pre-register with the state
- No cost and no obligation to vaccinate if provider pre-registers
- To pre-register to receive vaccine, providers must sign a Provider Profile and Provider Agreement
- Registration materials are posted on CT Flu Watch website at www.ct.gov/ctfluwatch/providers
- Providers can also call 860-509-7929 to request registration materials

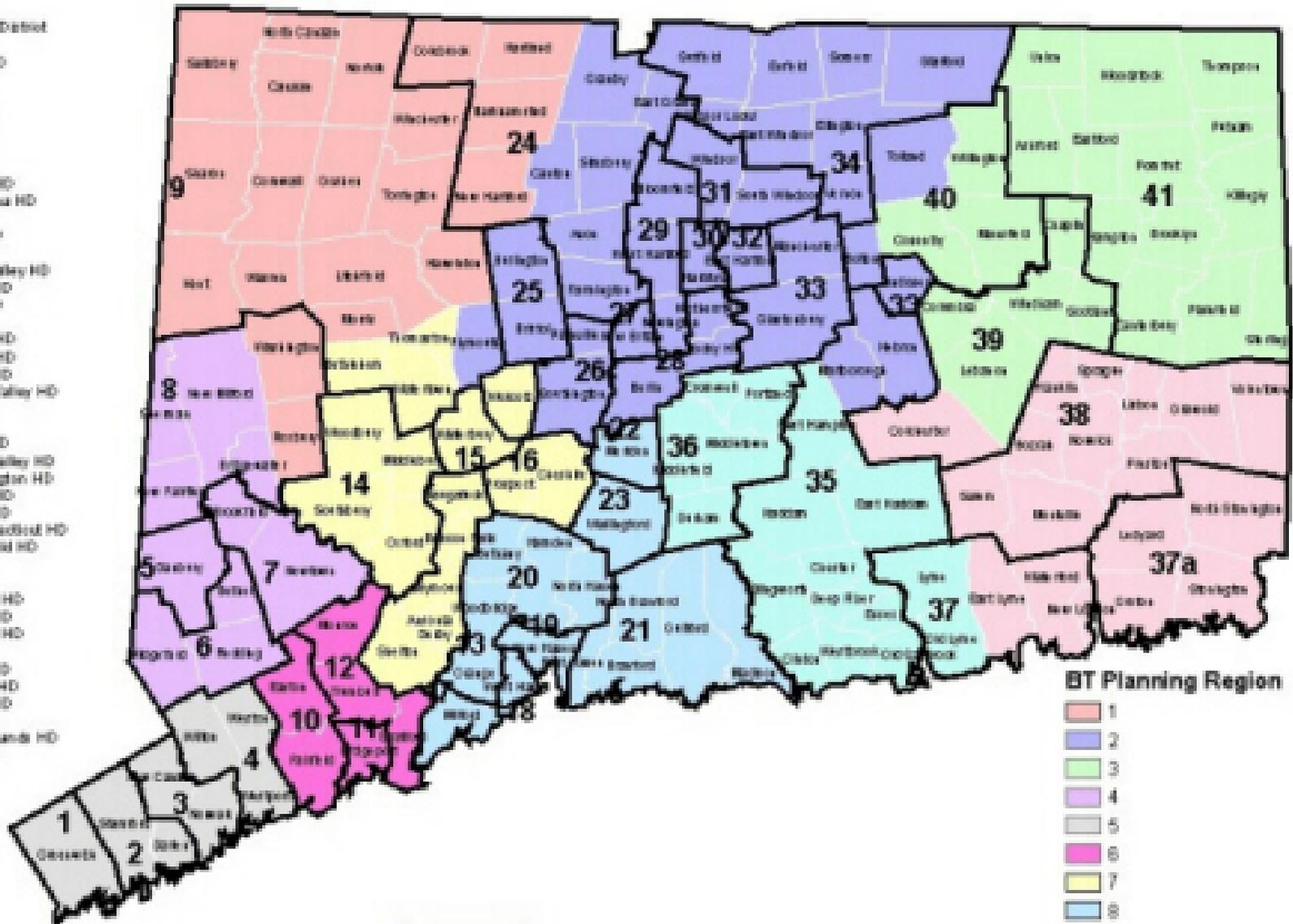
Who can Pre-register

- Any licensed health care provider can pre-register; targeting those that service target groups for H1N1 immunization
- H1N1 vaccination a blend of local public health-organized clinics and private sector immunization
- Goal is to have vaccine available in a variety of venues to ensure that H1N1 vaccine is delivered to as many recommended individuals as possible
 - Includes doctor's offices, ambulatory clinics, health care facilities, pharmacies, occupational and retail settings

State of Connecticut Mass Dispensing Areas and Public Health Planning Regions

MBA Lead Health
Number Department/District

- 01 Greenwich HD
- 02 Stamford HD
- 03 Norwalk HD
- 04 Westport HD
- 05 Danbury HD
- 06 Bethel HD
- 07 Naugatuck HD
- 08 New Milford HD
- 09 Torrington Area HD
- 10 Fairfield HD
- 11 Bridgeport HD
- 12 Shelton HD
- 13 Naugatuck Valley HD
- 14 Pompanoag HD
- 15 Waterbury HD
- 16 Milford HD
- 17 West Haven HD
- 18 West Haven HD
- 19 New Haven HD
- 20 Quinnipiac Valley HD
- 21 Ourland HD
- 22 Meriden HD
- 23 Wallingford HD
- 24 Farmington Valley HD
- 25 Bristol/Burlington HD
- 26 Southington HD
- 27 New Britain HD
- 28 Central Connecticut HD
- 29 Wm/Stamford HD
- 30 Hartford HD
- 31 Windsor HD
- 32 East Hartford HD
- 33 Manchester HD
- 34 North Central HD
- 35 Chatham HD
- 36 Middletown HD
- 37 New London HD
- 37a Ledge Light HD
- 38 Uncas HD
- 40 Eastern Highlands HD
- 41 Northford HD



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After Pre-registration

- Pre-registered providers will receive e-mail or blast fax vaccine updates; information and forms will also be posted on the DPH website
- When H1N1 vaccine is ready for distribution, DPH will email / blast fax vaccine order forms and ordering instructions to providers
- H1N1 vaccine will be sent only to providers who pre-registered and completed a vaccine order form

Monitoring and Reporting Vaccine Administration Data

- Public sector / mass vaccinators report information on vaccine administered via scannable form created by DPH
- Private sector report similar type of information but in aggregate form; specifics under development

Target Populations for Vaccination*

- Pregnant women
- Persons who live with or provide care for infants less than 6 months old (e.g. parents, siblings and day care providers)
- Health care and emergency medical services personnel
- Persons aged 6 months – 24 years, and
- Persons aged 25-64 years who have medical conditions that put them at higher risk for influenza-related complications

* Based upon adequate vaccine supply; estimated 159 million persons

Priority Populations for Vaccination*

- Pregnant women
- Persons who live with or provide care for infants less than 6 months old (e.g. parents, siblings and day care providers)
- Health care and emergency medical services personnel
- Children aged 6 months – 4 years
- Children and adolescents aged 5 – 18 years who have medical conditions that put them at higher risk for influenza-related complications

* Based upon limited vaccine supply; estimated 42 million persons

Expanding Vaccination Efforts Beyond Initial Target Groups

- Once target populations have been vaccinated, can expand efforts to include those aged 25 – 64 years
- Once demand for vaccine for younger people have been met, can begin offering vaccine to people aged 65 years and older

Monitoring vaccine safety

- Vaccine Adverse Event Reporting System – monitoring system for adverse events following vaccination (<http://vaers.hhs.gov/contact.htm>)
- Vaccine Safety Datalink – population-based provider network monitoring vaccine safety
- Active surveillance for Guillain-Barre Syndrome through states participating in Emerging Infections Program

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