

**Ohio Department of Health
H1N1 Briefing
1100 09 October 23**

Forward

This briefing contains provisional or sensitive information from ODH as well as abstracted information from the CDC. It may be shared with response partners.

The purpose of this briefing is to bring you up to date on the H1N1 virus and its spread. It covers the characteristics of the pandemic and the critical information elements. It also covers current planning considerations that are subject to change as conditions change.

Specific details are included as attachments but may not be briefed.

Regular Situational Awareness Elements

Interventions:

The HHS PREP Act declaration remains in effect allowing for the movement of the federal antiviral stockpiles. The PREP Act also provides immunity for all but reckless behavior for those engaged in planning for and distributing antiviral medications and vaccine (amended 15 June 09). An Emergency Use Authorization allows the use of antiviral medications for younger children. An amendment to the EUA extends the use of the pediatric suspension past the labeled expiration date. Department of Health and Human Services Secretary Kathleen Sebelius renewed the public health emergency declaration for novel H1N1 influenza on July 24, 2009. The original declaration was made on April 26, 2009. To read the declaration, visit <http://www.hhs.gov/disasters/discussion/planners/prepact/>.

Expenditures:

- Ohio expects to receive \$ 50.7 million (CDC Phase I, II, and III \$47.3 million; ASPR 3.4 million) in federal funding for H1N1 preparedness and response.
- Attached are the payroll and procurement data files as of 10/23/09. The total payroll cost is \$215,749.96 for 90 staff and total procurement cost is \$219,325.00.

Impact on People:

National activity levels and more information can be found at the following CDC pages:

- <http://www.cdc.gov/flu/weekly/usmap.htm>
- <http://www.cdc.gov/flu/>

Please see attached document entitled: H1N1 Hospital Graph

Planning Updates

Antiviral Medication – Mark.Keeler@odh.ohio.gov & Tom.Wilson@odh.ohio.gov

The SNS RSS has shipped out all of its materiel. Two medical countermeasure situation reports for local health departments to complete on a weekly basis has been posted on OPHAN and training to LHDs were conducted via a webinar. There is an additional OPHAN webinar training at 1:00 today. Access information is posted on OPHCS. ODH has requested additional N-95 masks from the CDC SNS; we are awaiting further information about our request from CDC.

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All four Retail Pharmacy Chains have signed and completed MOU's with the state. We are still working with Wal-Mart.

Vaccine – Amy.Bashforth@odh.ohio.gov

National vaccine availability estimates decreased for month of October from a projected 43 million doses to 27 million doses. One of the vaccine manufacturers experienced problems in the fill and finish stage of production, which included an incorrect calibration of the vaccine. Correcting this took longer than anticipated, and also resulted in a sizeable reduction in the total volume of vaccine available through this manufacturer. This problem is being addressed, however, and CDC reported on yesterday's vaccine implementation call that at this time, they do not believe there will be a permanent reduction in the total amount of vaccine available, but rather that supply will just be delayed. Other manufacturers have also experienced smaller delays in the fill and finish stage of production, which have been resolved or are in the process of being addressed. These delays are not safety related. The vaccine will continue to go through all the normal testing and FDA clearances and be made available for use as quickly as possible.

Doses available for Ohio to order on October 23 are:

- 72,300 in multi-dose vials
- 66,100 LAIV (mist)
- 21,700 in .5 ml prefilled syringes

Because the pandemic H1N1 vaccine has been purchased with federal funds, please do not impose residency restrictions.

Please do not place orders for pandemic H1N1 flu vaccine in ImpactSIIS. These orders are being rejected. Allocations are based on the estimated order quantities specified through the registration process.

In order to expedite the approval process of H1N1 providers in Ohio, local health departments are expected approve all pre-registered H1N1 providers that meet the criteria for H1N1 vaccine approval by close of business October 23. Subsequently, on October 26, the Ohio Department of Health will notify *unapproved* H1N1 providers that vaccine *cannot* be allocated nor shipped to them until their local health department approves them as a provider. After this date, inquires to ODH regarding the approval process for unapproved H1N1 providers will be referred to the respective local health department for response. This will assure that providers are approved and ready for shipment of vaccine as H1N1 vaccine product becomes available. This information was sent out as an OPCHS alert earlier in the week.

A Vaccine Allocation link is now available on your county home page, which can be accessed under the table that displays county population data. The table displays weekly shipments to providers, with shipment amounts.

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The updated list of retail pharmacy chains working with ODH are as follows. Sites are part of these retail pharmacy chains do not need to receive site visits.

- Maxim Health System (multiple pharmacies, including Target and CVS)
- CVS Minute Clinics
- Giant Eagle
- Walgreens (not the Take Care Clinic)
- Discount Drugmart
- Meijer
- Kroger
- Rite Aid
- Kmart
- Mollen immunization Clinics (Walmart)

As of October 22, 2009:

Pre-registered providers	5,540
Providers that completed registration	2,940
Providers registered and cold-chain verified	2,328
Providers registered, verified, and approved	2,275
Individuals pre-registered	121,682

CDC has issued guidance regarding the CMS free-care rule. Medicaid's long-standing policy requires that legally liable third parties be billed for the services for which Medicaid is to be billed. In the face of the H1N1 national healthcare emergency, the free care policy will be applied in the following way:

- Per CDC guidelines, health care providers accepting CDC funds to immunize all patients, regardless of insurance, will rely on those CDC funds and will not bill Medicaid for the cost of administering H1N1 vaccines.
- Per CDC guidelines, health care providers accepting CDC funds to immunize only patients without insurance will be permitted to bill Medicaid for the cost of administering H1N1 vaccines to Medicaid beneficiaries based on the following criteria:
 - o Providers with systems capabilities to bill legally liable third party private insurance must continue to do so.
- Providers without systems capabilities to bill legally liable third party private insurers may bill Medicaid for services provided to Medicaid eligible individuals.

The complete Medicare Q&A from which this information is drawn is available at:

http://www.cms.hhs.gov/Emergency/Downloads/H1N1_Medicare_FFS_Emergency_QsAs.pdf

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Community Containment– [Maureen. Murphy@odh.ohio.gov](mailto:Maureen.Murphy@odh.ohio.gov)

There are currently 5 school closings scattered throughout Ohio.
There is currently 1 child care center closing in Eaton, Ohio.

Multiple hospitals and doctor's offices throughout the state continue to voice concern regarding the number of patient visits to their respective facilities for return to school notes. To date, combined efforts to mitigate these unnecessary visits have included: ODH letters to ODE in August and again in October, ODE website/messaging to partners, ODJFS website message for their licensed child care providers, ODH school nurse bulletin board

In an effort to reinforce previous messages, ODH sent an OPHCS alert on 10/21/09:

- The Centers for Disease Control and Prevention (CDC) and ODH discourage child care centers from requiring a doctor's note for children or staff to validate their illness or to return to the early childhood setting.
- The Ohio Department of Job and Family Services (ODJFS) child care licensing rules do not require a note from a doctor for children to return after having an illness, except in the case of a few specific infectious diseases specified on the ODH Communicable Disease chart.
- ODJFS recently sent out a message on its RSS feed reminding programs that notes are not required. Even though child care providers may be striving to protect children by requesting a formal authorization to return to care, this is creating a significant burden on clinics and emergency rooms during a time when they are already overwhelmed.
- This results in longer waits for ill individuals and could be particularly detrimental for those with the highest risk of experiencing complications from H1N1 Pandemic flu, such as young children.
- ODH asks that programs consider revising their policy if they currently require notes for readmission. Early childhood professionals can protect themselves and the children for whom they care by conducting daily health checks and observing children throughout the day, isolating and discharging ill children and staff, covering coughs and sneezes, washing hands frequently and getting vaccinated when vaccines are available. Additional guidance is available at <http://www.flu.gov> (see "school planning" tab).
- Please take every opportunity available to reinforce this message to child care providers, schools, and businesses in your community.

Risk Communication – Robert.Jennings@odh.ohio.gov or Bret.Atkins@odh.ohio.gov

No current updates.

Epidemiology– Amy.Bashforth@odh.ohio.gov

The influenza activity level reported for Ohio is again widespread.

Health Preparedness – Steve.Meese@odh.ohio.gov

No current updates.

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Supporting Materials

List of Associated Links:

- 1) Declaration: <http://www.hhs.gov/disasters/discussion/planners/prepact/>
- 2) National activity levels and more information can be found at the following CDC pages:
<http://www.cdc.gov/flu/weekly/usmap.htm>
<http://www.cdc.gov/flu/>
- 3) Medicare Q&A:
[http://www.cms.hhs.gov/Emergency/Downloads/H1N1 Medicare FFS Emergency Qs As.pdf](http://www.cms.hhs.gov/Emergency/Downloads/H1N1_Medicare_FFS_Emergency_Qs_As.pdf)
- 4) Additional guidance: <http://www.flu.gov> (see “school planning” tab)