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STATE BOARD OF HEALTH
OKLAHOMA STATE DEPARTMENT OF HEALTH
1000 N.E. 10th
Oklahoma City, Oklahoma 73117-1299

Tuesday, February 10, 2015 11:00 a.m.

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Dr. Ronald Woodson, President of the Oklahoma State Board of Health, called the 396th regular meeting of the Oklahoma State Board of Health to order on Tuesday, February 10, 2015 at 11:08 a.m. The final agenda was posted at 11:00 a.m. on the OSDH website on February 9, 2015, and at 11:00 a.m. at the building entrance on February 9, 2015.

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ROLL CALL

Members in Attendance: Ronald Woodson, M.D., President; Cris Hart-Wolfe, Secretary-Treasurer; Jenny Alexopoulos, D.O.; Timothy E. Starkey, M.B.A.; Robert S. Stewart, M.D.
Absent: Martha Burger, M.B.A., Vice-President; Terry Gerard, D.O.; Charles W. Grim, D.D.S.; R. Murali Krishna, M.D.

Central Staff Present: Terry Cline, Commissioner; Julie Cox-Kain, Chief Operating Officer; Henry F. Hartsell, Deputy Commissioner, Protective Health Services; Toni Frioux, Deputy Commissioner, Prevention and Preparedness Services; Mark Newman, Director of Office of State and Federal Policy; Don Maisch, Office of General Counsel; Jay Holland, Director of Internal Audit and Office of Accountability Systems; Tony Sellars, Director of Office of Communications; Officer; VaLauna Grissom, Secretary to the State Board of Health; Janice Hiner, Sr. Advisor to the Commissioner of Health; Felesha Scanlan, Commissioner's Office.

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Visitors in attendance: (see sign in sheet)

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Call to Order and Opening Remarks

Dr. Woodson called the meeting to order. He welcomed special guests in attendance.

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REVIEW OF MINUTES

Dr. Woodson directed attention to review of the minutes of the January 13, 2015 Regular Board meeting.

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Ms. Wolfe moved Board approval of the minutes of the January 13, 2015, regular Board meeting, as presented. Second Dr. Alexopoulos. Motion carried.

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AYE: Alexopoulos, Stewart, Starkey, Wolfe, Woodson

ABSENT: Burger, Gerard, Grim, Krishna

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APPOINTMENTS

Hospital Advisory Council Appointment (Presented by Henry F. Hartsell, Jr.)

Appointment: Dale W. Bratzler, DO, MPH, FACOI, FIDSA

Authority: Title 63 O.S. Section 1-707.

Members: The Advisory Council has (9) nine members, consisting of: two hospital administrators of licensed hospitals; two licensed physicians or practitioners who have current privileges to provide services in hospitals; two hospital employees; and three citizens representing the public who: are not hospital employees, do not hold staff appointments, and are not members of hospital governing boards. Members are appointed by the Commissioner with the advice and consent of the State Board of Health.

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Dr. Alexopoulos moved Board approval of the recommended appointment, as presented. Second Ms. Wolfe. Motion carried.

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AYE: Alexopoulos, Stewart, Starkey, Wolfe, Woodson

ABSENT: Burger, Gerard, Grim, Krishna

OKLAHOMA IMMUNIZATION UPDATE PRESENTATION: Toni Frioux, MS, APRN-CNP, Deputy


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OKLAHOMA STATE BOARD OF HEALTH

IMMUNIZATIONS AND VACCINE PREVENTABLE DISEASES UPDATE


February 10, 2015

Toni D. Frioux, MS, APRN-CNP
Deputy Commissioner for Prevention and Preparedness



OBJECTIVES

- Why vaccines are important
- Emerging vaccine preventable diseases
- Vaccination rates in Oklahoma
- Strategies for improving immunization rates




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Public Health's Ten Greatest Achievements in the 20th Century


- **Vaccinations**
- Motor-vehicle safety
- Safer workplaces
- Communicable disease
- Heart disease and stroke
- Safer and healthier foods
- Healthier moms and babies
- Family planning
- Fluoridation
- Tobacco as a hazard



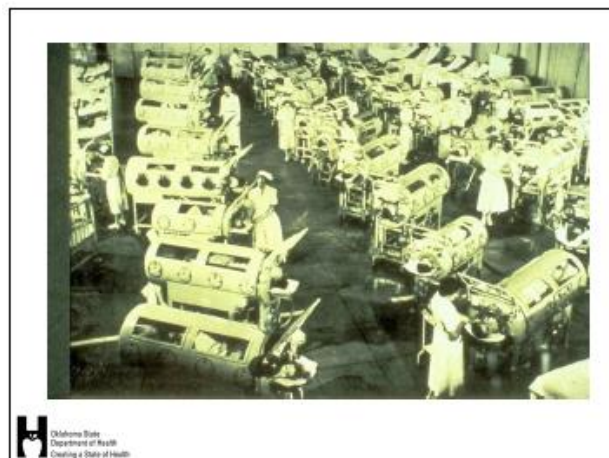
Vaccines Protect Individuals and the Community



The diagram illustrates two scenarios of virus spread. On the left, 'If only SOME get vaccinated...', a virus (red figure) spreads to many others (blue figures), labeled '...the virus spreads.' On the right, 'If MOST get vaccinated...', the virus spread is contained, labeled '...spreading is contained.' The legend indicates: blue for healthy, unvaccinated; yellow for healthy, vaccinated; red for hospitalized, sick, contagious.



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Oklahoma Immunization Program

Immunization Service – \$4.2M

VFC Vaccine Supply and Assurance-\$62M


Federal Vaccines for Children Program (VFC) - based on population estimates

- Medicaid Eligible
- American Indian/Alaska Native
- Uninsured
- Underinsured (Health insurance does not include vaccines or covers only select vaccines)

Federal 317 Funds – Approximately \$800K (CHDs only)

State Funds – Approximately \$600K

- Vaccine for CHD's (Does not include Flu and Pneumonia)



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Measles

January 1 – December 31, 2014

- 644 cases identified in the U. S. in 27 states
- 23 outbreaks in the U.S.
- 60 importations
- Majority of cases brought in from the Philippines, which experienced a large measles outbreak in 2014
- Highest number of cases since 1996

Ohio Measles Outbreak

- Outbreak began with unvaccinated travelers to the Philippines
- 383 primarily among unvaccinated Amish communities
- Onset dates 3/22/2014 - 7/23/2014
- Age range: 6 months to 53 years

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<http://ohs.health.ok.gov>

Measles

January 1 – February 6, 2015

- 121 cases identified in the U. S. in 17 states
- 103 (85%) cases associated with the Disneyland outbreak
- 4 importations from 8 countries
 - 2 epidemiological links to imported cases
- 2 cases unknown where exposed to virus
- 15 % hospitalized (as of January 29, 2015)



California Disneyland Outbreak

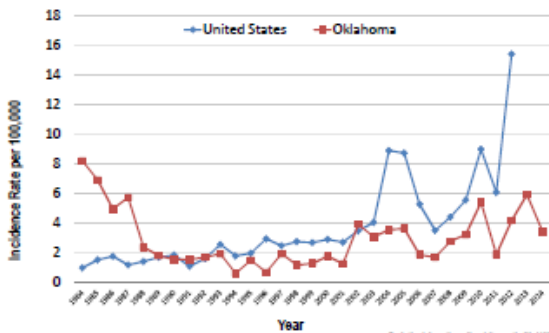
- 114 cases from 7 states (as of February 6, 2015)
- Median Age = 16 years
- 43% of cases were unvaccinated
- 69% of unvaccinated had personal belief exemption
- 44 % of cases had unknown vaccination status



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Pertussis Incidence Rate by Year, Oklahoma and United States, 1984-2014*



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Pertussis, Oklahoma, 2010 – 2014*

- Tulsa County experienced a high incidence of pertussis cases during 2010 and 2013

Year	Oklahoma State Rate (per 100,000 pop)	Tulsa County Rate (per 100,000 pop)
2010	5.40	18.54
2013	6.54	15.30

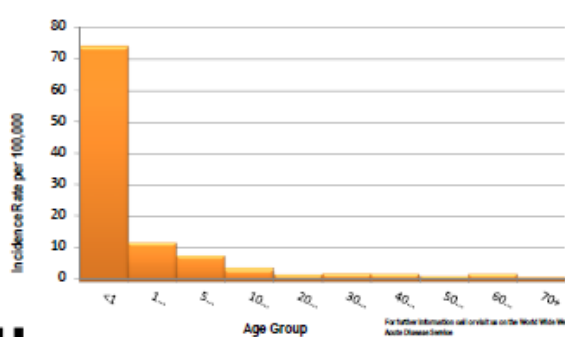
- Increasing median age of cases observed over the last 5 years

Year	Median Age	Age Range
2010	5.5 years	11 days – 84 years
2011	7.8 years	1 day – 75 years
2012	12.7 years	7 days – 91 years
2013	10.3 years	11 days – 74 years
2014	9.5 years	14 days – 80 years

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Pertussis Annual Average Incidence Rate by Age Group, Oklahoma, 2010-2014*



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Oklahoma's Immunization Rates

Determined by:

- National Immunization Survey (NIS)
- Oklahoma State Immunization Information System (OSIIS)
- United Health Foundation (UHF)

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National Immunization Survey (NIS)

- Represents the proportion of children 19 – 35 months ACIP recommended vaccines that protect against dangerous childhood diseases.
 - 4:3:1:3:3:1 Series for Children 19-35 Months of Age
 - 4:3:1:3:3:1:4 Series for Children 19-35 Months of Age
- Annual gauge of how well Oklahoma children are protected against these childhood diseases:
 - Diphtheria, Tetanus and Pertussis
 - Polio
 - Measles, Mumps and Rubella
 - Hepatitis B
 - Haemophilus influenzae type b
 - Chickenpox (Varicella)
 - Pneumococcal disease



Oklahoma’s Immunization Rates

Oklahoma State Immunization Information System (OSIIS)

- Statewide Immunization Registry

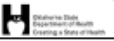
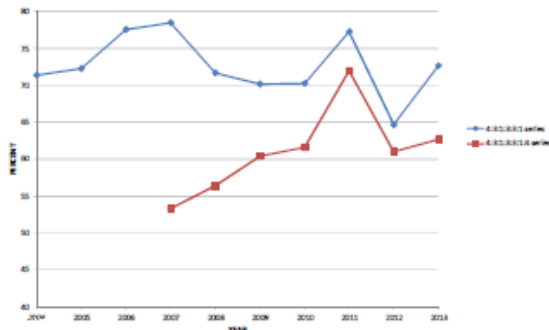
United Health Foundation (UHF)

- Uses 4:3:1:3:3:1:4 series to rank states for America’s Health Ranking Report
- National Ranking - 47th

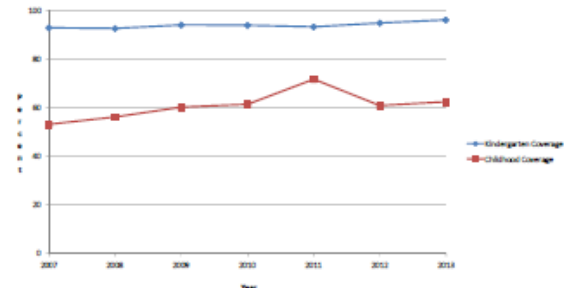


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Oklahoma Childhood Immunization Coverage 19-35 Months
2004 to 2013
4:3:1:3:3:1 Series Compared With 4:3:1:3:3:1:4 Series

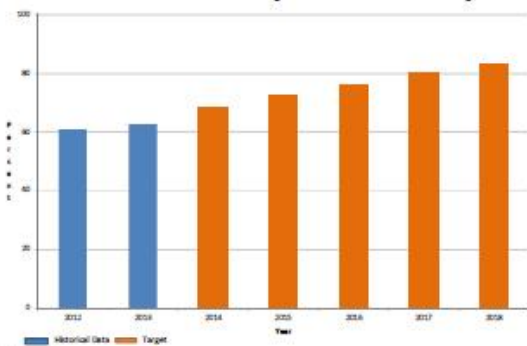


Two year old immunization coverage compared with five year old coverage in Oklahoma: 2007 to 2013

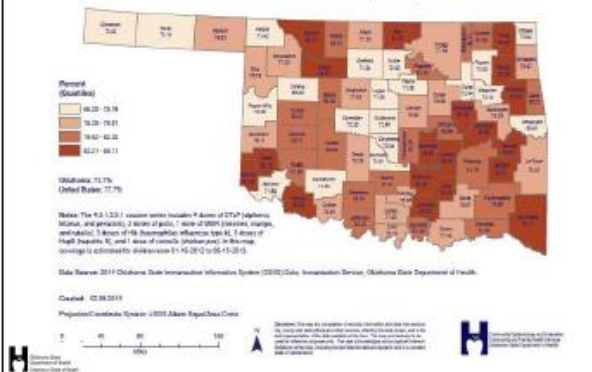


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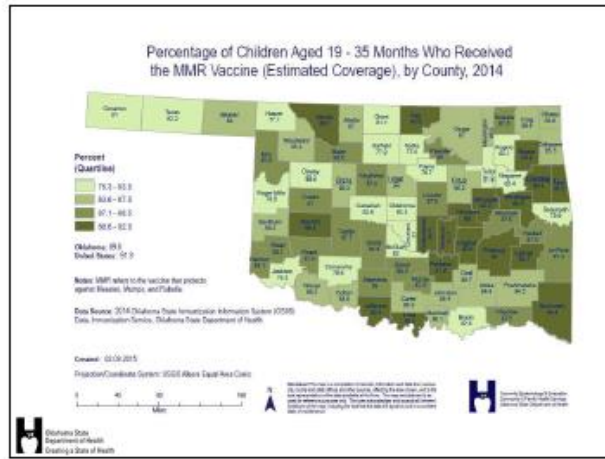
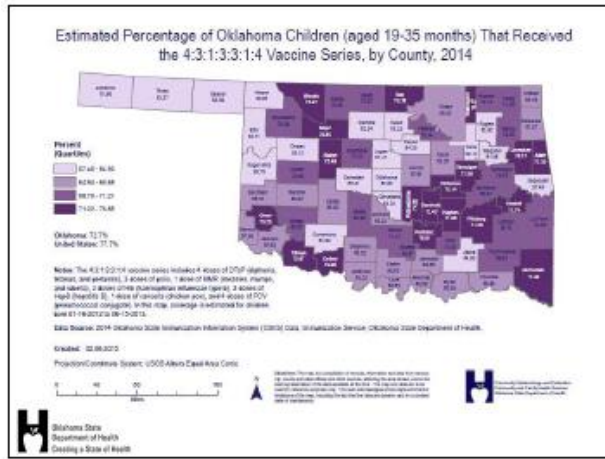
4:3:1:3:3:1:4 Immunization coverage for children 19 - 35 months of Age



Estimated Percentage of Oklahoma Children (aged 19-35 months) That Received the 4:3:1:3:3:1 Vaccine Series, by County, 2014



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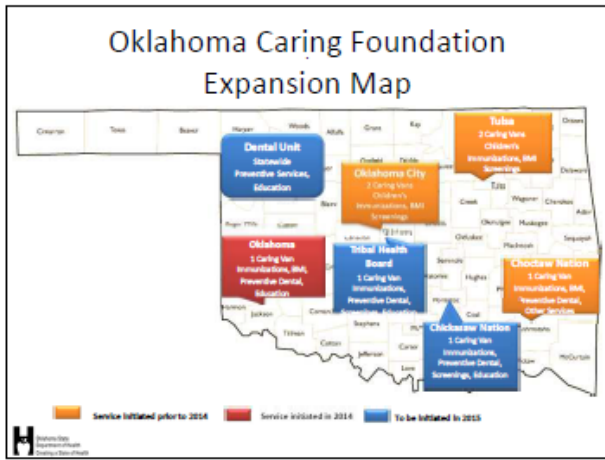


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Increase coverage rates from 61% in 2012 to 80% by 2018

- Promotion and Utilization of Reminder/Recall for children who are due or past due for needed immunizations
- Decrease missed opportunities to vaccinate during physician/clinic encounters
- Child Care record audits to identify children who are not up-to-date on required immunizations
- Partnership with Oklahoma Caring Van Program - provides immunizations for no charge to children in working families across the state who cannot afford private health insurance

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National Immunization Survey (NIS) Adolescent Series

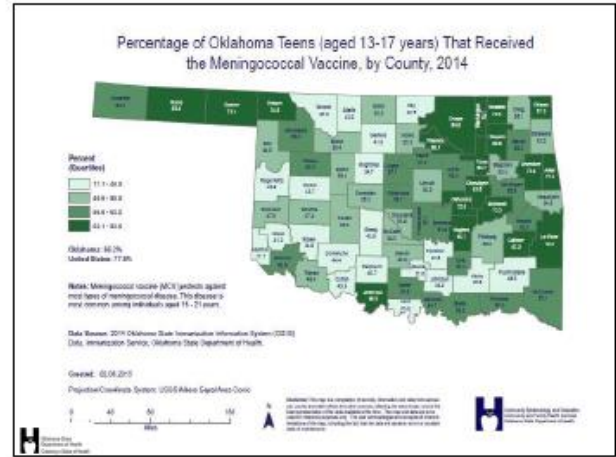
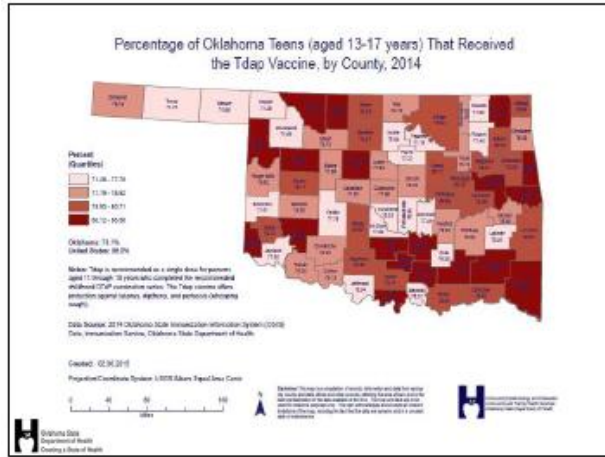
1:2:3 Series for Teens 13 – 17 Years of Age

In Oklahoma HPV Coverage Levels lag behind Tdap and MCV

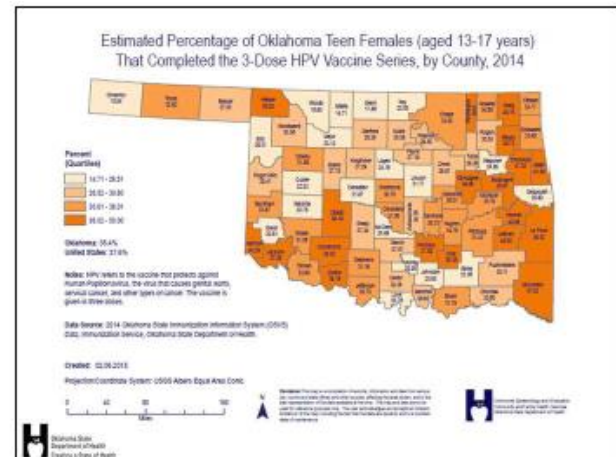
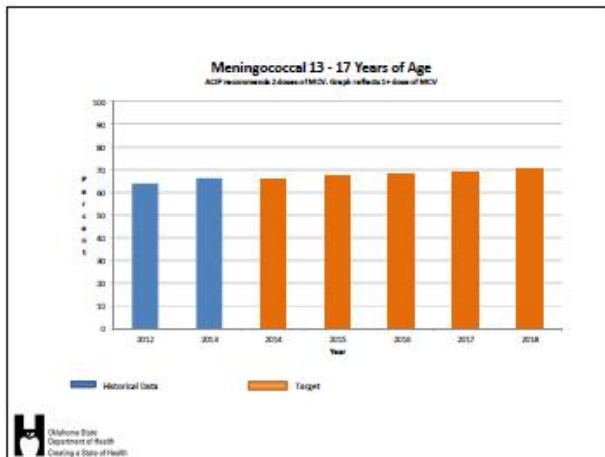
Vaccine	2013 NIS Teen Data	2014 OSIS Data
Tdap	78.1	78.8
MCV	66.2	59.1
HPV (Female)	35.4	31.4
HPV (Male)	17.3	21.5

ACIP recommends 2 doses of MCV. Table reflects 1+ dose of MCV

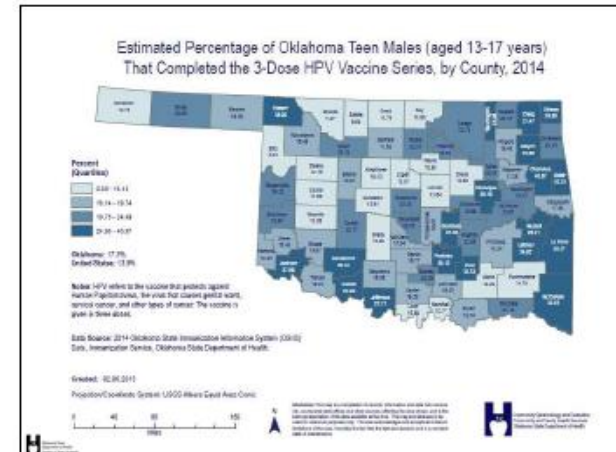
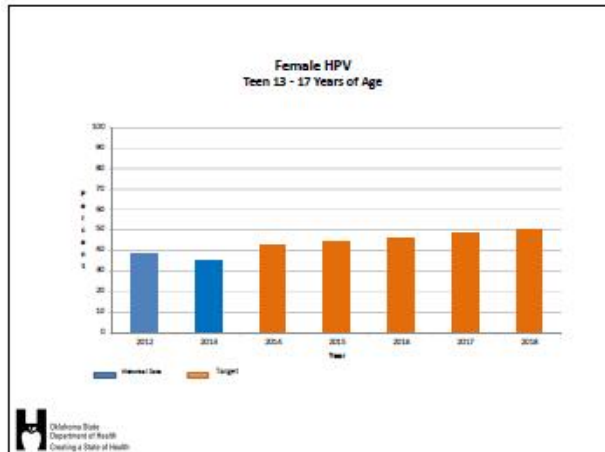
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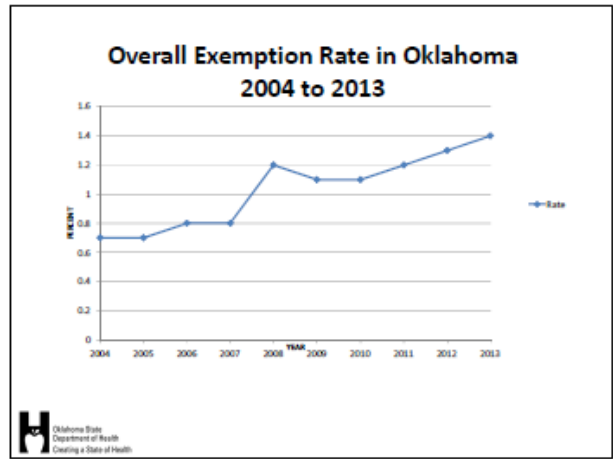
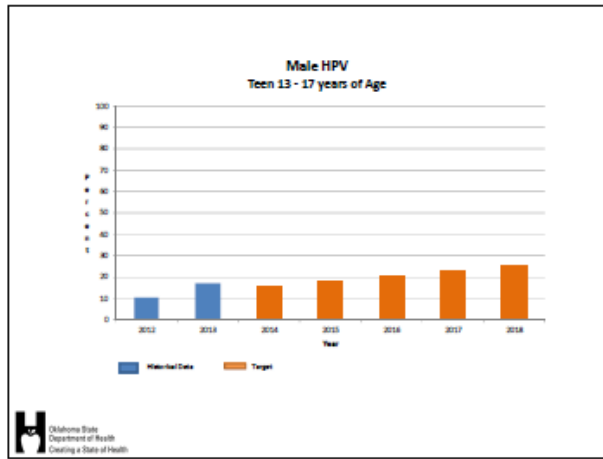
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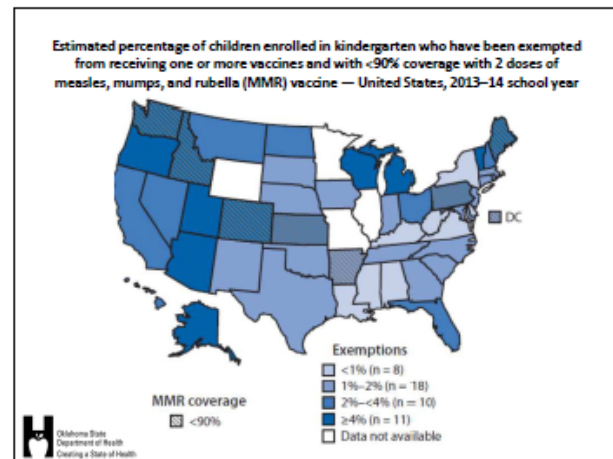
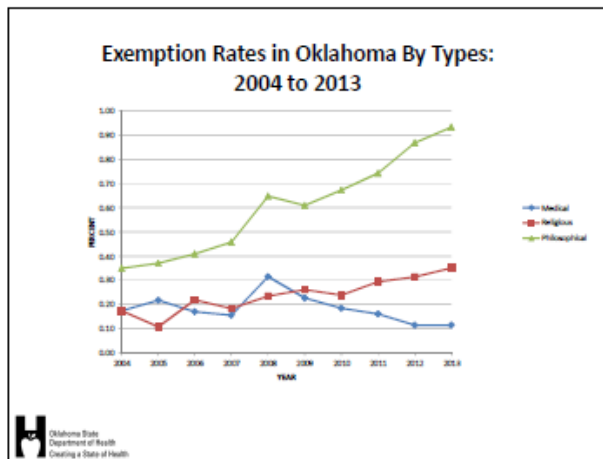
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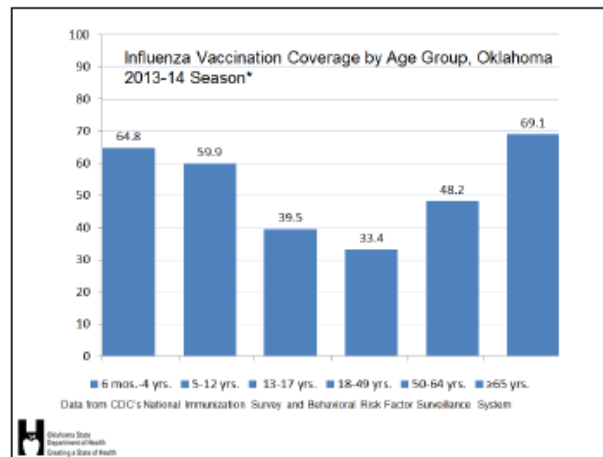
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2015 Quality Improvement Projects to Increase Childhood Coverage Rates


- Child Care Record Audits
 - 2014: To improve overall compliance from 77% to 87%-reached overall compliance of **86.3%**.
 - 2015: To increase overall compliance from 86.3% to 90%
 - Oklahoma County: To improve compliance with state law requiring children ≤3 years of age placed in child care centers to be up-to-date with age-appropriate immunizations.

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2015 Quality Improvement Projects to Increase Childhood Coverage Rates

- **Assessments (AFIX Model)**
 - To demonstrate improvement in coverage levels from 72% to 80% for selected VFC Providers (27 total) using the 4:3:1:3:3:1:4 childhood immunization series for children 19 -35 months of age.
- **2015 Teen Vaccine Series QI Project**
 - To improve HPV vaccine coverage rates for teens 13 – 17 years of age in Oklahoma through targeted actions.



FY 2016 Budget Request-\$2,687,645


- **Safety net** - protects children, adolescents and the public at large from the spread of vaccine preventable diseases and/or life threatening outbreaks.
- **Access** - Strengthens immunization capacity through “seed” money for both required and recommended vaccines for children and adolescent
- **Sustainability** - vaccine supplies and reduced disparities in child and adolescent coverage rates.
- **Cost savings**-Every dollar spent on childhood vaccines saves \$10.00 in future health care costs.



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Immunize to save lives!

Questions?



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Dr. Stewart and Tim Starkey thanked the Department for their efforts related to the Oklahoma State Immunization System (OSIIS). Mrs. Frioux indicated that as they move closer to bidirectional exchange, updates to the OSIIS registry will be released.

Tim Starkey inquired as to who funds the VFC program and if there were anticipated cuts to Immunizations given the potential budget shortfall? Mrs. Frioux indicated the VFC program is a federally funded program by the Centers for Disease Control. Further, if the budget request of 2.6 million for vaccines were not approved, the Department would not have the revenue to purchase the vaccine inventory as proposed in the budget request. Dr. Cline added that the Department anticipates the needed funding to be reduced by 30% over the next three years until the program is sustainable.

The report concluded.

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CONSIDERATION OF STANDING COMMITTEES’ REPORTS AND ACTION

Executive Committee

Dr. Woodson reminded the Board that the March Board meeting will be held in Carter County. Meeting details to be sent by VaLauna.

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Finance Committee

Ms. Wolfe directed attention to the Financial Brief provided to each Board member and presented the following SFY 2015 Finance Report and Board Brief as of January 23, 2015:

- Approximately \$425 million budgeted for state fiscal year 2015
- Overall green light status
 - Overall budget decrease due to grant “close out” process

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- 1 ○ Public Health Infrastructure - Last month in "yellow light" status due to vacancies now in process of
- 2 refill
- 3 ○ Information Technology - Last month in "yellow light" status, budget has been reduced to contract
- 4 ○ amount
- 5 ○ Health Improvement Services - Last month in "yellow light" status due to vacancies which are now in
- 6 process or filled

7 The *Financial Brief* focused on the Annual State Appropriations and the annual development of funding
8 reduction scenarios to manage a three, five, or ten percent reduction in funding for the current fiscal year.
9 The scenarios are developed after core public health services and mandates, agency strategic plan and
10 business plan priorities and revenue availability.

11 **Accountability, Ethics, & Audit Committee**

12 The Accountability, Ethics, & Audit Committee met with Jay Holland. Dr. Alexopulos indicated there were
13 no known significant audit issues to report at this time.

14 **Public Health Policy Committee**

15 The next meeting of the Policy Committee will be prior to the March Board Meeting.

16 **COMMISSIONER'S REPORT**

17 Dr. Cline highlighted the opening of the Oklahoma Biocontainment Care Unit in Garrison Tower at the OU
18 Medical Center on January 21st. The new Unit is designed to isolate and care for pediatric and adult patients
19 in the state who test positive for dangerous infectious diseases like Ebola. It is in the best interest of the state
20 to have one center to coordinate such efforts as we have seen mobilization and training can be costly and
21 presents many challenges. He thanked the Oklahoma Hospital Association as well for their coordination
22 efforts with Oklahoma Hospitals.

23 The Legislative session has begun and currently in second week. The Department has conducted budget
24 hearings with the Office of Management Enterprise Services, the House, and the Senate. The budget forecast
25 doesn't look promising; however, we are hopeful that the Department of Health will be held harmless if
26 budget reductions are necessary. As you know, last fiscal year with cuts and the transfer of revolving funds,
27 there were impacts to programs and so education the Legislature to those impacts is critical.

28 Lastly, Dr. Cline highlighted the annual Mission of Mercy event that took place in Tulsa. Previously, this
29 event has been held in Enid McAlester, Lawton, Tulsa, and Oklahoma City. Over the two day event,
30 approximately 1609 patients were seen and 13 thousand procedures conducted. The event is operated by
31 volunteers from multiple organizations. To date over 5 million in funding has been donated to operate the
32 event which speaks to the great unmet need in the state. Dr. Cline thanked all the volunteers and supports
33 who make the event possible.

34 The report concluded.

35 **NEW BUSINESS**

36 No new business.

37 **PROPOSED EXECUTIVE SESSION**

38 No Executive Session.

39 **ADJOURNMENT**

40 **Tim moved Board approval to Adjourn. Second Dr. Stewart. Motion carried.**

41 **AYE: Alexopulos, Stewart, Starkey, Wolfe, Woodson**

42 **ABSENT: Burger, Gerard, Grim, Krishna**

43 The meeting adjourned at 12:08 p.m.

44 Approved

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Ronald W. Woodson, M.D.
President, Oklahoma State Board of Health
March 10, 2015