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Raising the Rates

A Newsletter from the American College of Physicians

November 2016

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Talking About Zoster

by Mike Soppet, MD

Happy, November! And I hope everyone is in the midst of a busy influenza and

pneumococcal immunization season.

This month, let's talk about immunization against Varicella Zoster. As you know, we were blessed to receive news of a “new” vaccine against Zoster in 2006. This is a concentrated partially attenuated live virus vaccine, and it has been projected to be about 50% effective in reducing the occurrence of Zoster in adults older than 50 and 60% effective in reducing the risk of post herpetic neuralgia. Immunity wanes over 5-8 years.

Seniors less than Medicare age have no financial responsibility for this vaccine as it is under “first dollar coverage” per the terms of the Patient Protection and Affordable Care Act of 2010. However, as is true for all “newly” approved vaccines, under Medicare it is covered as a Part D benefit rather than a traditional Part B benefit. Therefore, it is not paid under the usual Part B claims process.

Some physician offices find this cumbersome, which has contributed to discouraging its widespread adoption. Current CDC estimates are that less than 20% of eligible adults have been vaccinated with Zostavax.®

The current maximum you should be paying for Zostavax® through your Group Purchasing Organization or Vaccine Discount Supplier is \$181. If purchased for no more than that price, there would still be a calculated 16% Return on Additional Investment for that vaccine in the practitioner's office.

For those wishing to implement a full Zostavax® implementation strategy, we have the following advice.

Immunize Early

Endeavor to immunize all patients ages 50-60 while they are still under their commercial insurance plans. Not only will it provide them with important protection

against shingles, it will also obviate the need to worry about Part D reimbursement. I personally favor trying to vaccinate patients as close to age 60 as possible, but each patient and physician must weigh the risk of “outliving the vaccine protection” versus the risk of early reactivation if the vaccine is given later rather than earlier.

Use TransactRx™

For those seniors who are already covered under Medicare Part D and who have not been previously immunized, sign up for the TransactRx™ website to adjudicate Part D coverage for each patient’s Part D plan before their office appointment. This takes less than 5 minutes and will let you get a printout of that particular patient’s Part D coverage amount for the Zostavax® vaccine and the applicable co-payment by the patient, if any is due. That printout will allow you to proactively inform the patient of his/her responsibility and your office to receive directly the payment for that vaccine via the website. To sign up for the program, use this URL: www.transactrx.com

Once you have signed up and been approved, which takes very little time, you can then access <https://www.mytransactrx.com> from that point forward to query and post a claim to the TransactRx™ website for your payment. **Please note the difference between the website you use for ongoing adjudication and the one you use for initially signing up for the program.**

Looking Forward

We note the recent publication of an initial Phase III trial involving the herpes Zoster subunit vaccine (Shingrix®- an adjuvanted vaccine attached to a varicella glycoprotein E subunit) reporting a 97% reduction in disease compared to placebo in adults 50 years of age and older. (N Engl J Med. 2016 Sep 15;375(11):1019-32. doi: 10.1056/NEJMoa1603800) A second subgroup of patients 70 years of age and older showed an 89% reduction in disease in those patients given two doses two months apart. Initial indications are that there is no waning of immunity over time and there may be some other benefits for immunocompetent patients. This may potentially have

some benefit over the current Zostavax® vaccine, but like Zostavax® it will likely be relatively or absolutely contraindicated in immunocompromised patients.



Chief Vaccination Officer Webinar

This is the first of three training webinars for Chief Vaccination Officers. If your practice has not yet appointed a CVO, it's not too late.

This webinar will provide CVO's with training on the importance of adult immunizations and how team members can help protect all of the practice's patients. It will be led by nurses and other team members who have been CVOs.

Chief Vaccination Officer Webinar

Friday, December 9, 2016

3:00 pm | Eastern Standard Time (New York, GMT-05:00) | 1 hr 30 mins

Register at:

<https://acpmeetings.webex.com/acpmeetings/j.php?RGID=r50aac93084f54756f04ed05565a1dfa4>

After your request has been approved, you'll receive instructions for joining the meeting. If you already registered for this meeting, you do not need to register again.

Audio:

[1-877-419-8419](tel:1-877-419-8419) (US) Call-in toll-free number

Conference Code: 685 884 3985

Research shows that involving the whole healthcare team, including office staff, can have a dramatic effect on improving immunization rates in a practice. All staff need to be on board to convey the importance of vaccines to patients, streamline workflows, and optimize billing.

ACP invites all I Raise the Rates champions to nominate a member of their health care team to be their Chief Vaccination Officer. Nurses, medical assistants, practice managers or pharmacists working in your practice are all eligible. In addition to these training webinars, CVO's will:

- Receive telephone support for implementing a change to improve vaccinations within the practice
- Be recognized nationally as a CVO
- Have an opportunity to win an iPad and attend ACP's Internal Medicine Meeting in San Diego, CA from March 30-April 1, all expenses paid

In addition, champions who nominate a CVO will receive \$150 to provide lunch for their clinic staff - a great way to promote immunization and celebrate the team who does it.

If you are interested in participating, contact Michele Duchin at

MDuchin@mail.acponline.org



ACP Quality Connect: Coaching Calls

The Center for Quality is excited to announce upcoming new dates for our popular ACP Quality Connect: Coaching Call series. These 1-hour calls are designed to provide support to participants across all of our Quality Improvement (QI) programs, including adult immunization, diabetes, and chronic pain. Expert faculty will provide guidance on general quality improvement and practice transformation strategies as well as focus on specific clinical programs. These calls are free of charge and are open to all QI Champions. We invite you to participate in one or more of these coaching calls. Biweekly calls will go through the end of January. Please visit <https://www.surveymonkey.com/r/CoachingCalls2016> to sign up. Thank you and we look forward to your continued participation.



Thinking about Flu?

Download the CDC Influenza AP for your phone today!

FluView is a mobile application created by the Centers for Disease Control and Prevention (CDC) that allows you to track flu activity across the US and view trends over several weeks. It also features on-demand access to state health department websites for local surveillance information.

For more information, please

visit: <http://www.cdc.gov/flu/weekly/overview.htm#Outpatient>

For questions and comments, contact us at MTorresUrquidy@cdc.gov



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