

September 14, 2009

Each issue of AzHHA's H1N1 Advisory includes links to useful news about novel H1N1. This issue features:

**Medicare Billing
Procedures for H1N1
Vaccine Administration**

Want to add a colleague to AzHHA's *H1N1 Advisory*? Contact AzHHA's Communications Department with the name, title, organization and e-mail address of the co-worker you would like added to the distribution list.

HHS Launches Poll to Measure Stress on Hospitals

The U.S. Department of Health and Human Services (HHS) will launch a nationwide "situational awareness" poll to monitor hospital as well as ventilator demand during the second wave of the H1N1 virus. Using the existing HAvBED federal reporting system, HHS will poll hospitals weekly beginning each Tuesday at noon and concluding at 8 am on Wednesday, Arizona time. HHS has not announced when the ongoing polls will begin, but AzHHA will notify hospitals when this information becomes available.

The Arizona Department of Health Services (ADHS) and EMSsystem, Inc., the state's emergency communication system, are upgrading Arizona's system to allow the new poll to be available through hospitals' respective EMSsystem accounts. ADHS hopes to have the capability to notify hospital staff carrying the EMSsystem pager immediately after HHS launches a poll.

AzHHA is advocating for streamlined data collection with the new poll, particularly as hospital staffs will be stretched thin caring for patients during the pandemic. Additionally, AzHHA is encouraging ADHS to use the data collected to determine if regulatory relief is needed to allow hospitals to appropriately care for patients during the pandemic.

For more information, contact AzHHA's Debbie Johnston (602-445-4300, ext. 4304, or djohnston@azhha.org).

ADHS Issues H1N1 Clinical Guidelines

Healthcare practitioners are receiving direction on testing and treating novel H1N1 as well as for infection control measures from ADHS' updated clinical guidelines. ADHS emphasizes that providers should treat patients based on clinical symptoms and encourages them to use clinical judgment as well as the guidelines. The ADHS guidance covers:

Testing—The Arizona State Public Health Laboratory (ASPHL) will continue to limit testing for novel H1N1 to hospitalized patients and unexplained deaths in febrile patients, except for special arrangements with facilities pre-approved by ASPHL. To avoid rejection for a test, specimens sent to ASPHL must be accompanied by a submission form marked "hospitalized" or "death."

Treating H1N1 & Use of Prophylaxis—ADHS clinician guidance on treating novel H1N1 and prescribing prophylaxis draws heavily on guidance from the Centers for Disease Control and Prevention (CDC), which was updated Sept. 8.

Both organizations emphasize the need for speedy treatment for severely ill patients as well as patients at high risk for complications. These patients should be considered priority for antiviral treatment. The CDC suggests prescribing prior to the onset of illness for patients at higher risk for influenza-related complications, such as those with neuromuscular disease. The prescription may then be filled by the patient following a telephone consultation with the provider.

The CDC guidance emphasizes early treatment versus prophylaxis. However, the guidelines also suggest prescribing prophylaxis in the case of:

- high-risk individuals who are in close contact with a person suspected, or confirmed, to have influenza during the infectious period; and
- healthcare workers who have had unprotected, close contact with a person with suspected or confirmed influenza during the infectious period.

Infection Control—ADHS guidance on infection control reiterates the Department’s July 7 guidance that healthcare workers wear N-95 masks when performing aerosol-generating medical procedures. Additionally, healthcare workers should wear surgical masks within 6 feet of a patient with febrile respiratory illness. This differs from recent Institute of Medicine recommendations, which suggests that healthcare workers in close contact with persons with novel H1N1 influenza or influenza-like illnesses wear N-95 masks. However, it is similar to recommendations by the Association for Professionals in Infection Control and Epidemiology, the Society for Healthcare Epidemiology of America, the Infectious Diseases Society of America and American College of Occupational and Environmental Medicine.

Providers: H1N1 Vaccine Pre-Registration Update

Pre-registration for the Arizona Novel H1N1 Influenza Vaccine Distribution Program closed Sept. 11. ADHS and county public health departments are now reviewing H1N1 vaccine pre-registration forms and will contact providers regarding orders of the vaccine in coming weeks. Providers that did not complete the online form by Sept. 11 may still do so. However, these providers may not receive priority ordering for the vaccine.

AzHHA Forms H1N1 Work Groups

AzHHA members will meet in two separate work groups to discuss issues pertaining to novel H1N1:

Altered Standards of Care Task Force

September 22

1:30–3:30 pm

Work Group’s Mission: To evaluate standards of care in the hospital setting that may need to be altered during a pandemic or other disasters, natural or man-made.

Central Region Memorandum of Understanding (MOU) Work Group

September 24

1:30–3:30 pm

Work Group’s Mission: To review the MOU that describes how Central Arizona hospitals will share resources in a disaster. This work group was convened at the request of ADHS and Maricopa County Public Health Emergency Management.

To join either work group, contact AzHHA's Debbie Johnston (602-445-4300, ext. 4304, or djohnston@azhha.org).

Arizona Public Health & Medical Communities Collaborate on Information Campaign

AzHHA has joined ADHS, the Arizona Medical Association (ArMA) and county public health department representatives in the H1N1 Joint Information System (JIS) established by ADHS. The goal of the JIS is to coordinate H1N1-related public information activities. Some of the priorities include:

- developing statewide branding of H1N1 materials (e.g., logo and design);
- creating messages that are incorporated into documents (e.g., message points);
- establishing a document library for all healthcare partners to access; and
- recruiting healthcare professionals to participate as spokespersons.

Please use the message points referenced in the second bullet point above for media interviews. Additionally, AzHHA encourages all members to identify healthcare professionals to participate in media interviews or community group presentations. Please provide professionals you recruit the link in the fourth bullet point. For more information, contact AzHHA's Bridget O'Gara (602-445-4300, ext. 4318, or bogara@azhha.org).

H1N1 In the News!

Novel H1N1 is making headlines. Stories grabbing attention recently include:

- The new H1N1 vaccine is getting good reviews from researchers. HHS reports that clinical trials show the vaccine triggers antibodies in most people within 8 to 10 days. The results also suggest that in healthy adults it may take only one dose of the new H1N1 vaccine. Previous reports had speculated that two doses may be required. This is good news because it not only will reduce confusion during the upcoming mass vaccination campaign, but it also will mean there is more of the vaccine available.
- Healthcare professionals who say they will forego the new H1N1 vaccine are making news and raising concerns about the availability of medical professionals during the pandemic.
- H1N1 "parties" are popping up. People who believe they are increasing their immunity to novel H1N1 are deliberately exposing themselves to the virus.
- Reporters are asking if all anti-virals are equally effective. The Environmental Protection Agency has provided some recommendations, which you may provide to reporters and others who ask.

Follow media coverage of novel H1N1 in AzHHA's daily publication, Health-E-News.