# Shingrix® Vaccine Program for Elders in BC First Nations Communities Q&A for Health Care Staff

#### PROGRAM ELIGIBILITY & FUNDING:

- 1. Which Elders are eligible?
  - a. Elders between 65-69 years of age, inclusive
  - b. Elder is eligible for coverage through FNHA Health Benefits
  - c. Elder reports childhood history of chickenpox (serological confirmation NOT required. If Elder has serological confirmation of NO historical chickenpox, offer Varicella vaccine (as per BCCDC Immunization Manual)
  - d. Elder has not had live attenuated zoster vaccine (Zostavax®) or Shingles disease in the past 12 months
  - e. Elder requests vaccine when FNHA Shingrix® informed consent document reviewed
  - f. Elder does not have any contraindications to receipt of Shingrix® vaccine

# 2. Is there exceptional coverage available for Elders who do not qualify above?

Yes, coverage may be considered on a case-by-case basis for Elders who are between 50-65 years of age, and have documented complex health conditions, and have primary care provider referral.

Please contact FNHA Health Benefits to determine how to submit a client for coverage consideration by email <a href="https://example.com/HealthBenefits@fnha.ca">HealthBenefits@fnha.ca</a> or call 1-855-550-5454.

# 3. What are the parameters for vaccination of those between 50-65 years of age with immunosuppression due to disease or medication?

As Shingrix® is a newer vaccine, clients who are immunosuppressed by disease or medication should be assessed by the health care provider most responsible for their care (specialist or primary care physician or nurse practitioner, depending on condition) to ensure vaccination is appropriate.

"Per NACI," [Shringrix, not Zostavax] may be considered for immunocompromised adults ≥50 years of age based on a **case-by-case assessment of the benefits vs risks**. (Discretionary NACI Recommendation, Grade I evidence). NACI will monitor results from ongoing trials in those who are immunocompromised and will reassess recommendations as evidence becomes available."

NACI defines "Immunocompromised" as those with HIV, post-organ or Hematopoietic Stem Cell Transplant (HSCT) or in those receiving high-dose corticosteroids, chemotherapy or immune suppressing medications. Clients with these or other Immunosuppressive health conditions or medications must be assessed and have a prescription from a physician as above. For a more comprehensive list, please see: <a href="Immunocompromised individuals BCCDC">Immunization Manual</a>.

# 4. Is there exceptional coverage for Community members younger than 50 years of age who have documented complex health conditions, and primary care provider referral?

Shingrix® is licensed for adults 50 years of age and older. Use outside of this age parameter would be considered an off-label use, and is not covered in the BCCDC Immunization Manual, which is the DST for RNs in immunization practice. Administration of Shingrix® outside of the licensure would be up to the discretion of the primary physician.

FNHA Health Benefits may or may not decide to offer this type of coverage for clients. Please contact FNHA Health Benefits if these case by case situations come up by emailing <a href="https://healthBenefits@fnha.ca">healthBenefits@fnha.ca</a> or calling 1-855-550-5454.

#### 5. Can community members receive this vaccine at the pharmacy?

Yes. Elders meeting the eligibility requirements can obtain the vaccine and injection directly from their Pharmacist. Both the Shingrix® vaccine and the injection fee will be fully reimbursed by FNHA Health Benefits. No prescription is required.

## 6. How can I obtain funding for Shingrix® vaccine to be given in Community?

BC First Nations Health Service organizations with Registered Nurses (RN) who have current Immunization Competency Program (ICP) certification are eligible to obtain Shingrix® for their community members. If a Community does not have an ICP-certified RN, they can partner with another community or local public health nurse or pharmacist to deliver the program.

The reimbursement for this vaccine is client-specific; therefore, the CHN and Pharmacist will require the following information to be eligible for reimbursement:

- Name
- DOB
- Personal Health Number (PHN)
- Individual pharmacy receipts per client are needed for reimbursement

#### 7. How many doses should I request?

A RN with current ICP certification at BC First Nations Health Service organizations can order and obtain this vaccine from a local pharmacy. Since the **vaccine** is **reimbursed on an individual basis**, you will only be able to obtain vaccines for Elders in your community requesting the vaccine.

Shingrix® requires two doses, provided 2-6 months apart; however, it is recommended to only obtain one dose for immediate use. It is recommended to not hold stock of this vaccine in biological fridges for extended amounts of time. Planned clinics/appointments are required to ensure that no vaccine expires or is lost due to cold chain breaks. There is no extended temperature cold chain data available on Shingrix®, for every dose exposed outside of 2-8° C please contact immunize@fnha.ca.

#### 8. Can our Community be reimbursed for doses given previously?

Yes, for clients who meet the eligibility criteria above, doses of Shingrix® provided from October 1, 2018 and after can be reimbursed through FNHA Health Benefits. Please submit a Reimbursement Request and include the Official Pharmacy Receipt. Must have individual pharmacy receipts per client. Third-party reimbursement (i.e., payment to communities' health services) will be considered for claims with the date of service of October 1, 2018 or after. Questions about reimbursement? Contact FNHA Health Benefits by email HealthBenefits@fnha.ca or call 1-855-550-5454.

#### **ACCESS TO SHINGRIX®:**

#### 1. How do I obtain doses of Shingrix® vaccine?

- a. Determine eligible Elders in your community and calculate number of vaccine doses required (please purchase first dose only to avoid holding excessive stock)
- b. Contact Elders in your community who meet the criteria to confirm their eligibility and interest in receiving the vaccine
- c. Contact <a href="mmunize@fnha.ca">immunize@fnha.ca</a> to work with the FNHA immunization team on how to plan and deliver Shingrix® vaccine.

**Questions about reimbursement?** Contact FNHA Health Benefits by email HealthBenefits@fnha.ca or call 1-855-550-5454.

#### 2. There is limited vaccine supply at my local pharmacy, what should I do?

Vaccine supply has been a challenge since Shingrix® was introduced in January 2018. The supply expanded in January 2019, however temporary supply interruptions may occur. It is recommended to let Elders know that supply may be limited and clinics may be held later than initially hoped.

# 3. What if an Elder for whom I have obtained vaccine is not able to receive the dose? What do I do with leftover doses of Shingrix®?

Please contact <u>immunize@fnha.ca</u> as coverage is limited to two doses of Shingrix® per individual per lifetime.

The Shingrix® vaccine has been dispensed to an individual and it can only be provided to that individual. If you find you have a dose that you cannot provide to the individual who requested it, the dose will need to be safely disposed of, or returned to the pharmacy for destruction.

#### SHINGRIX® DOCUMENTATION & REPORTING:

#### 1. What reporting is required?

Doses given should be documented in your community's legal charting system (paper or electronic), as with other vaccines. A record of doses given should be given to the client for their personal records.

Monthly, submit either the FNHA Shingrix® Vaccine Log or Panorama report to FNHA Health Benefits. Submitted information to FNHA Health Benefits will be shared with Health Protection for data entry into Panorama.

#### 2. What are the required reporting elements?

Please see the attached FNHA Shingrix® Vaccine Log, for required reporting elements. This information will be entered into Panorama for client safety and FNHA Health Benefits will use this information for program analysis.

## 3. How to I document Shingrix® vaccine doses given in Panorama?

Since Shingrix® is not publicly funded by the province/ distributed by BCCDC, the lot numbers will not be pre-populated into Panorama. For CHNs entering Shingrix® into Panorama, they will need to enter this as a historical vaccine under **Zoster-Inactivated**. The lot number and other details can be entered in the comments section.

## TRANSPORTING AND STORAGE:

#### 1. How do I store Shingrix® vaccine?

Shingrix® should be stored as all other vaccines (2-8°C). A dedicated biological fridge, temperature monitoring and transport equipment are required. See <u>FNHA Cold Chain</u> <u>Equipment Catalogue</u> for recommended products. A min-max thermometer and data-logger with daily am/pm checks, and a plan for vaccine monitoring is required. This plan includes primary/secondary cold chain monitors and does not have to be done by a RN.

# 2. What do I require to safely transport the vaccine?

The vaccine must be picked up from the pharmacy in a hard-sided cooler with refrigerated gel blankets, a frozen ice pack and a min-max thermometer. Refer to <a href="Appendix E">Appendix E</a> in the BCCDC <a href="Immunization Manual">Immunization Manual</a>. There is no extended temperature cold chain data available on Shingrix®, for every dose exposed outside of 2-8° C please contact <a href="Immunize@fnha.ca">Immunize@fnha.ca</a>

#### **PRACTICE SUPPORTS:**

#### 1. What BCCNP Decision Support Tool do I use to direct my practice?

The BCCDC Immunization Manual is the BCCNP designated decision support tool (DST) for RNs; please refer to the Shingrix® biological product page. Please note that the FNHA Shingrix® program criteria are more limited than the age recommendations provided in the DST.

# 2. Does a RN need to have completed the FNHA ICP certification to give Shingrix® vaccine?

Yes, the nurse delivering Shingrix® vaccine must have completed the ICP certification through FNHA or a regional health authority. For more information about the FNHA ICP program please contact <a href="mailto:Brian.oikawa@fnha">Brian.oikawa@fnha</a>.

#### 3. What recall system do I use for the second dose of Shingrix®?

If you have an existing recall system (generally targeted towards childhood vaccines), it should be utilized to ensure that Elders are recalled for their second dose of Shingrix® 2-6 months after their first dose.

#### 4. Are the side effects the same for Shingrix® as other inactivated vaccines?

Shingrix® vaccine has an adjuvant. This means clients may experience a more robust site reaction and/ or may feel tired, have muscle pain, a headache, shivering, fever, stomach pain or nausea. Informing clients of these possible side effects and how to manage them at the time of immunization can help them to know what to expect.

If an AEFI is reported that meets temporal criteria as per the BCCDC Immunization Manual, Part 5 and following normal reporting process. Please contact <a href="mailto:immunize@fnha.ca">immunize@fnha.ca</a> with any questions.

#### 5. What other resources are available for support?

- a. The FNHA Immunize team has provided all their supporting documents on Gathering Space
- b. For all clinical questions and cold chain please e-mail <a href="mailto:immunize@fnha.ca">immunize@fnha.ca</a>
- c. For all reimbursement questions please contact FNHA Health Benefits by email HealthBenefits@fnha.ca or call 1-855-550-5454