



MEMORANDUM

TO: Anthem Blue Cross Member Districts
FROM: Nancy Panks, Benefits Administrator
DATE: November 12, 2009
SUBJECT: H1N1 Vaccine

At their November 6, 2009 meeting, the Board of Directors approved a change to your employees' benefits through Anthem Blue Cross. While regular immunizations are not covered for adults, it was decided that the H1N1 Vaccine would be beneficial to the membership to lessen the impact of potential illness, hospital stays, and lost time from work if they were provided at no cost to the membership. Therefore, please inform your employees that they may receive the H1N1 Vaccine by calling an Anthem Blue Cross provider. CDC Guidelines for the vaccine will be followed, so not everyone will be eligible. This will not be an office visit. The member is simply to schedule the Vaccine with the office and go in to receive their Vaccine. If an office visit is scheduled for any other reason, an office visit copay will be charged. By simply going into the office for the Vaccine, the cost of the visit and the Vaccine will be waived.

The JPA is committed to the wellness of the group and trust this added benefit will be helpful to the overall health and wellbeing of your employees.

If you have any questions or concerns, please do not hesitate to contact me at 530/221-4816 or stsignpanks@gmail.com.

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vaccination should be vaccinated with the 2009 H1N1 vaccine regardless of whether they had a flu-like illness earlier in the year. If you have had 2009 H1N1 flu, as confirmed by an RT-PCR test, you should have some immunity against 2009 H1N1 flu and can choose not to get the 2009 H1N1 vaccine. However, vaccination of a person with some existing immunity to the 2009 H1N1 virus will not be harmful. For more information on flu tests, see [Influenza Diagnostic Testing During the 2009-2010 Flu Season](#).

Any immunity from 2009 H1N1 influenza infection or vaccination will not provide protection against seasonal influenza. All people who want protection from seasonal flu should still get their seasonal influenza vaccine.

Prevention

Are there other ways to prevent the spread of illness?

Take everyday actions to stay healthy.

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water, especially after you cough or sneeze. If soap and water are not available, use an alcohol-based hand rub.*
- Avoid touching your eyes, nose or mouth. Germs spread that way.
- Stay home if you get sick. CDC recommends that you stay home from work or school and limit contact with others to keep from infecting them.

Follow public health advice regarding school closures, avoiding crowds and other social distancing measures. These measures will continue to be important after a 2009 H1N1 vaccine is available because they can prevent the spread of other viruses that cause respiratory infections.

What about the use of antivirals to treat 2009 H1N1 infection?

CDC has issued [interim guidance for the use of antiviral drugs](#) for this season. CDC also has published [Questions & Answers related to the use of antiviral drugs](#) for this season.

Are natural remedies (also referred to as “complementary” or “alternative” medicine) recommended to prevent the 2009 H1N1 flu virus?

The first and most important step to prevent the flu is to get vaccinated. Vaccination stimulates an immune response using a killed or weakened virus that uses the body's own defense mechanisms to prevent infection. CDC's current recommendations to protect against 2009 H1N1 virus do not include natural remedies as a sole prevention method. If you want to use a natural remedy to reduce symptoms, CDC recommends that you talk to your healthcare provider about options.

Alternative medicine should not be used as a replacement for proven conventional care, or to postpone seeing a doctor about a medical problem. The National Institutes of Health (NIH) provides information at <http://health.nih.gov/topic/AlternativeMedicine> on specific alternative options, including scientific information, potential side effects, and cautions for each.

The Federal Trade Commission (FTC) warns consumers to be cautious about products that claim to prevent, treat, or cure 2009 H1N1 influenza, specifically products like pills, air filtration devices, and cleaning agents can kill or eliminate the virus.

Canadian Study Reponse

I heard that getting a seasonal flu vaccine increases a person's chances of getting the 2009 H1N1 flu virus. Is this true?

CDC has reviewed data from studies done in the United States, and these studies along with a published study from Australia found that receipt of seasonal influenza vaccine neither increased nor decreased the risk of getting 2009 H1N1 influenza. In contrast, a small published study from Mexico found that seasonal vaccine provided some protection against 2009 H1N1. There has been recent media coverage about research conducted in Canada that suggests getting a season flu vaccination increases a person's chances for becoming infected with the 2009 H1N1 flu virus. No other country has reported that seasonal vaccine has any positive or negative effect on the risk of getting 2009 H1N1 influenza. CDC is continuing to review the data as it becomes available.

Should I still get a seasonal flu vaccination?

All influenza viruses may cause serious illness and vaccination is the first and most important step in protecting against flu. CDC recommends seasonal flu vaccination for anyone who wants to reduce their chances of getting seasonal flu.

What groups are recommended for seasonal flu vaccine?

Vaccination is particularly important for people who are at high risk of having serious seasonal flu-related complications or people who live with or care for those at high risk for serious seasonal flu-related complications, including:

- Children aged 6 months up to their 19th birthday
- Pregnant women
- People 50 years of age and older
- People of any age with certain chronic medical conditions
- People who live in nursing homes and other long-term care facilities
- People who live with or care for those at high risk for complications from flu, including:
 - Health care workers
 - Household contacts of persons at high risk for complications from the flu
 - Household contacts and out of home caregivers of children less than 6 months of age (these children are too young to be vaccinated)

Additional information on the Canadian studies can be found at <http://www.cdc.gov/media/pressrel/2009/s091007.htm>

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