



Preparing Businesses for the H1N1 Pandemic

Your Presenters

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Our Purpose

1. Help you understand H1N1 and its prevention and treatments
2. Offer ways your business can mitigate the impact of the pandemic
3. Let you know about the Broadspire resources at your disposal

The Flu



Feb 24, 2009

Patient 0 in Mexico City

March 3

Initial recognition of cases in Mexico

April 26

**US declares a public health emergency
2,000+ cases identified in 13 countries**

July 1

WHO reports 95,000+ cases, 429 deaths

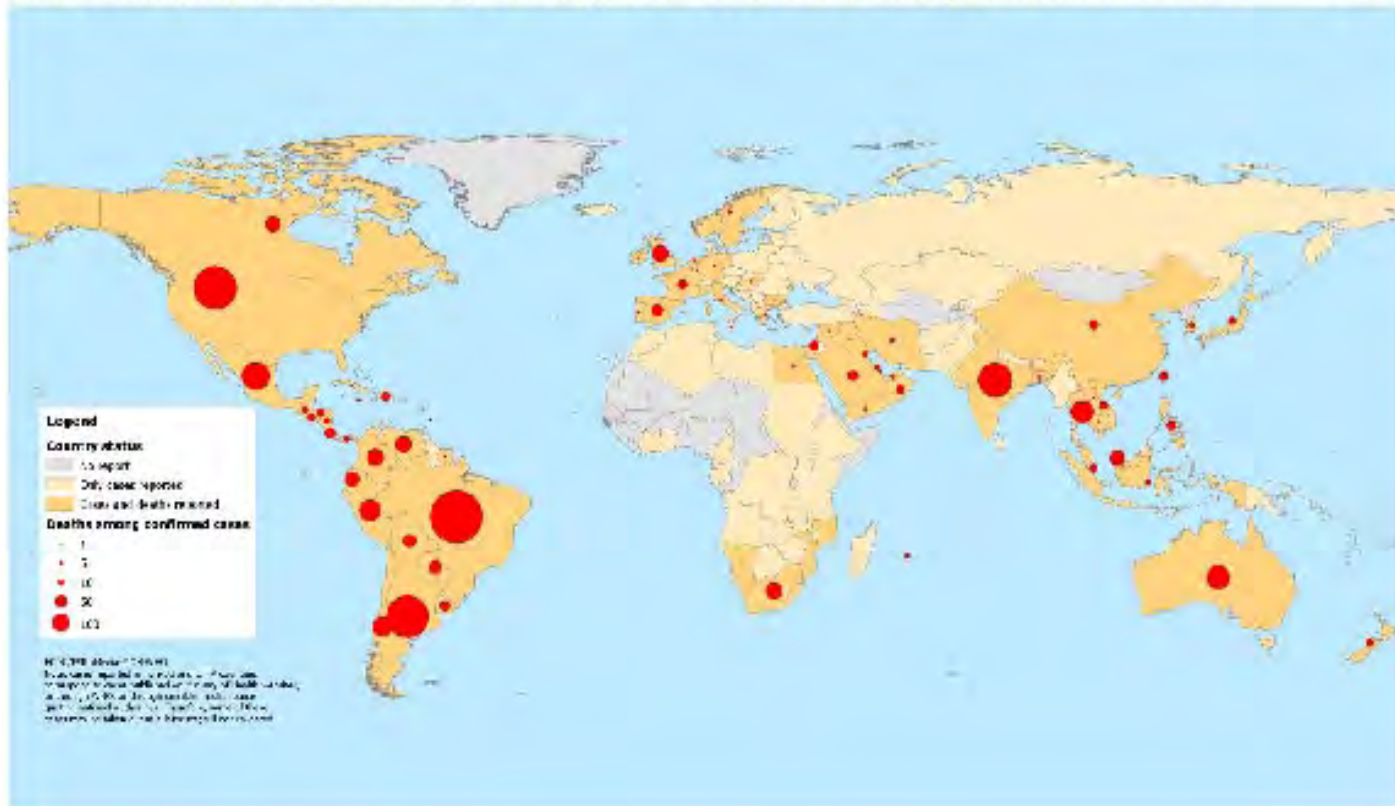
August 25

**Presidents Council anticipates 50% of the
US population may be affected**

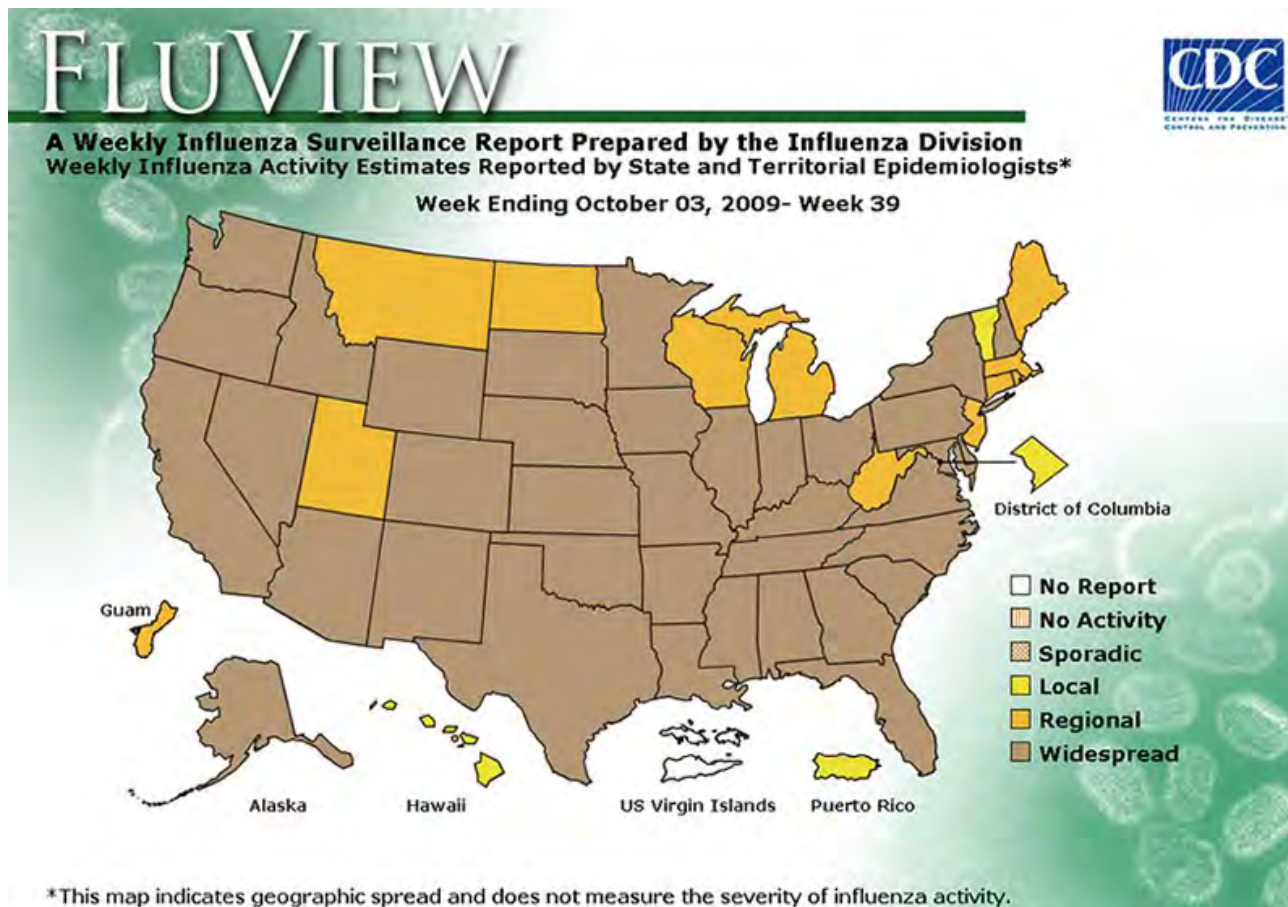
<http://www.medscape.com/viewarticle/709540>

The Pandemic

Reported cumulative number of confirmed fatal cases of influenza A(H1N1)v and country reporting status by country, as of 11 October 2009, 16:00 hours CEST



The United States and H1N1



Past Influenza Pandemics

1917 – 1918 “Spanish Flu”

Between 40 million and 100 million deaths globally
500,000 deaths in United States; 20 million were sick
American deaths greater than in any war in our history

1957 – 1958 “Asian Flu”

70,000 deaths in United States
Two waves, with second beginning 3 months after first

1968 – 1969 “Hong Kong Flu”

36,000 deaths in United States
Two waves, 12 months apart

1977 – 1978 “Swine Flu”

8,300 deaths in United States
National vaccination program, but pandemic never developed

Seasonal Flu Versus H1N1 Flu

SEASONAL FLU

- Category: Influenza A
- Yearly occurrence
- Symptoms: fever, cough, congestion, sore throat, aches, chills, and fatigue
- Estimated death rate of .06-.25%

H1N1 FLU

- Category: Influenza A
- Strain recognized in 2009
- Same as seasonal flu though possibly more severe and with diarrhea more expected
- Est. death rate of 1-4% (WHO)

High Risk Categories

Priority Risk Groups

Seasonal Flu	H1N1 Flu
Children < 2 years	Pregnant Women
65 years and older	Household contacts/caregivers for children < 6 mos.
Chronic medical conditions (e.g.heart/lung disease /diabetes/cancer/blood disorders)	Healthcare workers
HIV Infected	6 mos. old through 24 years
	25 - 64 with chronic medical conditions
	Any age with chronic medical conditions

The H1N1 Vaccine

"The most important tool that we have to fight this pandemic is the vaccine. We would hope that everyone who has a chance to get vaccinated does get vaccinated."

- WHO spokesman Gregory Hartl

The H1N1 Vaccine

The H1N1 Vaccine is different from the regular seasonal vaccine.

- Only one dose is required for almost everyone. Children under 9 being vaccinated for the first time should receive 2 doses.
- Children 6 months or younger should not be vaccinated.
- Side effects may include minor muscle cramps and headaches.
- High-risk patients should be vaccinated first.
- High-risk individuals should also receive the pneumococcal vaccine.

(Source: http://www.cdc.gov/h1n1flu/vaccination/public/vaccination_qa_pub.htm)

The Safety of the H1N1 Vaccine

There are several rumors causing concern about the H1N1 Vaccine.

- The H1N1 Vaccine has been tested and shown to be safe.
- Flu vaccinations do not cause the flu.
- It can be administered at the same time as a seasonal flu shot.
- Thimerosal is a preservative used in the vaccine injection and has been approved by the AMA, Institute of Medicine, FDA and CDC.

(Source: CDC spokesman Bill Gallo)

Distribution of the Vaccine



- There are two forms of the H1N1 Vaccine
- Injection (killed/inactivated virus)
- Inhaled (live/attenuated virus)
- Both are paid for by the federal government but distributed by your state public health department.

Treatments

Anti-viral Drugs



RELENZA[®]
ZANAMIVIR FOR INHALATION



Tamiflu[®]
oseltamivir phosphate

- Should be taken only on the advice of a physician
- Can be taken after exposure, but before symptoms show
- Need to be taken only for the recommended number of days
- Works best when taken within 48 hours of an exposure or within 48 hours of the onset of symptoms

What Businesses Can Do

“Businesses and employers, in general, play a key role in protecting their employees’ health and safety, as well as in limiting the negative impact of influenza outbreaks on the individual, the community, and the nation’s economy.”

(Source: “Guidance for Businesses and Employers,” CDC.gov)

Corporate Pandemic Planning

Pandemic Planning:

Education

Prevention

Treatment

Resources Available

Planning is the Best Prevention

Creating a pandemic plan can be crucial in keeping your company healthy.

1. Establish a leader and team with the support of Senior Management
2. Evaluate the risk in the area and absentee rates as compared to previous years.
3. Assess the critical elements of your business
 - Identify key employees and assign back ups
 - Look at a health pandemic affect on demand
 - Examine logistics and travel alternatives
 - Develop an emergency communications list
4. Create a mild, moderate and worst case response
5. Educate employees on prevention, treatments and resources

(Source: Buck Consultants)

Prevention



The main prevention methods:

- 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. Alcohol-based hand cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread this way.
- Avoid close contact with sick people.
- Stay home if you are sick for seven days after your symptoms begin or until you have been symptom-free for 24 hours, whichever is longer. This is to keep from infecting others and spreading the virus further.

(Source CDC)

When An Employee Becomes Sick

What is the sick leave policy and benefit plan?

Do you have a succession plan?

Are all emergency contacts updated?

Is there an internal communication plan for managers?

What are the health care alternatives?

Can you quickly distribute hand sanitizer, masks and gloves?

Is anyone monitoring absence rates, school closings or area resources?

Should employees be penalized for sick days?



Know the Danger Signs

Know when it's an emergency. Seek urgent medical attention:

- Have fast breathing or trouble breathing
- Have bluish or gray skin color
- Are not drinking enough fluid
- Are not waking up or not interacting
- Have severe or persistent vomiting
- Have flu symptoms that improve but then return with fever and a worse cough
- Have fever with a rash
- Have a fever and then have a seizure or sudden mental or behavioral change
- Pain or pressure in the chest or abdomen
- Sudden dizziness (Source WebMD)

Social Distancing



Social Distancing

Expand telecommuting

Flexible work schedules

Travel restrictions

Conference calls vs. meetings

Keeping people six feet apart

Use a cloth to touch elevator buttons

Avoid the elevators

Your Resources



Broadspire's goal is to help our clients maintain a healthy and safe workplace.

We are flexible and quick to respond in order to meet your needs during the H1N1 pandemic.

Broadspire is a proactive resource for you. Please contact your account Executive or claims manager with any requests or questions.

Broadspire Prepared

1. Formulary modifications
2. Preparing our clinical resources
3. Education materials
4. Additional training for your employees

Broadspire Resources

DME Vendor Network

We can work with you to provide a variety of supplies for prevention

Hand Sanitizer
Medical Masks
Gloves

Respirators
Signage

Broadspire Resources

Flu Shot Resources

Once the vaccine becomes available to the public, we can help guide your employees to distribution locations.

Broadspire Resources

PPO Provider Network

Should there be an exposure or someone becomes ill, we have an extensive, nationwide network of medical providers, specialists, hospitals and walk-in clinics.

Other Resources



Centers for Disease Control and Prevention
Your Online Source for Credible Health Information

http://www.cdc.gov/flu/swineflu/key_facts.htm



FLU.GOV Know what to do
about the flu.

<http://www.flu.gov/>



World Health
Organization

<http://www.who.int/csr/disease/swineflu/en/>

For more information or additional questions....AskDrJake@choosebroadspire.com

Questions & Answers

Q: Has the vaccine been adequately tested?

A: While there are fears that it has been rushed to market, these fears are unfounded. The H1N1 vaccine received the same levels of rigorous testing as the regular flu vaccine. Had the testing been completed sooner - the H1N1 vaccine could have been included in the seasonal flu shot.

Q: Is there a guideline on how many hours or days to give an employee off from work after receiving the H1N1 flu vaccine?

A: The answer is no. Because you do not get the flu from the flu vaccine, there is no need to take time off from work after receiving the vaccine. That being said - if a person does receive the nasal form of the flu vaccine, they need to be sure to avoid close contact with people who have compromised immune systems. The period should last for the next 8 hours after receiving the vaccine.

Questions & Answers

Q: How do I know if an employee who gets H1N1 got it in the course of their employment, or if they can file a workers compensation claim?

A: The rules and laws of each state are different. You should consult with your claim team manager or Account Executive to determine the best course of action.

Q: Is there a national state of emergency for H1N1 and how will it impact the delivery of the vaccine?

A: Subsequent to the Broadspire presentations, President Obama has declared a national state of emergency regarding H1N1. This has enabled hospitals, county health departments, and other health care providers to speed up the delivery of the vaccine to necessary populations.



Thank You!



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