



**TO:** Regional Directors, Public Health Regions  
Regional Immunization Program Managers, Health Service Regions  
Directors, Local Health Departments  
Immunization Managers, Local Health Departments

**FROM:** Karen Hess, Manager  
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**DATE:** July 29, 2010

**SUBJECT:** Texas Vaccines for Children (TVFC) Program: Adult Safety Net Vaccine Update

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Memo Distribution: This memo is intended for Local Health Departments, Health Service Regions, Federally Qualified Health Centers (FQHC) and Family Planning Clinics only; please do not disseminate to other private providers.

The adult safety net eligibility criteria have been updated and are outlined below. The Adult Safety Net Eligibility Chart format has changed and now includes a brief description of eligibility directly on the chart. It is attached at the end of this memo for your convenience. The chart will also be located on [www.immunizetexas.org](http://www.immunizetexas.org). Note that Human Papillomavirus (HPV) vaccine for males is now included in the eligible groups. Refugee Health Program Contractors are also now eligible to receive Hepatitis B and Varicella vaccines.

To be eligible for the adult safety net vaccine program, providers must be enrolled in the Texas Vaccines for Children (TVFC) program. An enrollment form is available at <http://www.dshs.state.tx.us/immunize/forms/6-102.pdf>. Providers must also complete a Vendor Profile Form (attached). The Vendor Profile Form should be completed and submitted to your LHD or HSR prior to receiving adult vaccines. Providers must report all state-provided adult vaccine doses administered using the Monthly Biological Report (EC-33) under the "19+" Doses Administered column. Providers may charge uninsured or underinsured patients a reasonable administration fee, but the vaccine should not be denied if patients are unable to pay.

Each of the adult vaccines available through the adult safety net program is listed below with its respective eligibility criteria. Underinsured is defined as any adult who: (1) has insurance that does not cover the cost of vaccines, (2) has a co-pay or deductible the person cannot meet, or (3) has insurance that provides limited or capped vaccine coverage.

### **Hepatitis A**

All uninsured and underinsured adults.

### **Hepatitis B**

All uninsured and underinsured adults.

### **Human Papillomavirus (HPV)**

1. All uninsured and underinsured women between the ages of 19-26.

Note: Ideally, vaccine should be administered before potential exposure to HPV through sexual activity; however, women who are sexually active should still be vaccinated.

Sexually active women who have not been infected with any of the HPV vaccine types receive the full benefit of the vaccination. Vaccination is less beneficial for women who have already been infected with one or more of the four HPV vaccine types. HPV4 or HPV2 can be administered to females with a history of genital warts, abnormal Papanicolaou test, or positive HPV DNA test, because these conditions are not evidence of prior infection with all vaccine HPV types.

2. Vaccination is not recommended during pregnancy. If a woman is found to be pregnant after initiating the vaccination series, the remainder of the 3-dose regimen should be delayed until after completion of the pregnancy.
3. HPV4 may be administered to males aged 19 through 26 years to reduce their likelihood of acquiring genital warts. HPV4 is most effective when administered before exposure to HPV through sexual contact.

### **Influenza**

All eligible persons as defined by the ACIP, excluding those at residential or occupational risk of exposure where the organization, proprietor, or employer is required to offer the vaccine by law. DSHS only provides influenza vaccine for adults to its regional health departments.

### **Measles, Mumps, Rubella (MMR)**

All uninsured and underinsured adults who meet the following criteria:

1. Persons born during or after 1957 should receive at least one dose of MMR unless they have documentation of at least one dose, a history of measles based on healthcare provider diagnosis, or laboratory evidence of immunity. Women whose rubella vaccination history is unreliable or who lack laboratory evidence of immunity should also receive one dose of MMR.
2. A second dose of MMR is recommended for adults who 1) have been recently exposed to measles or in an outbreak setting; 2) have been previously vaccinated with killed measles vaccine; 3) have been vaccinated with an unknown type of measles vaccine during 1963-1967; 4) are students in postsecondary educational institutions; 5) work in a healthcare facility; or 6) plan to travel internationally.

NOTE: Adults born before 1957 generally are considered immune to measles and mumps.

### **Meningococcal Vaccine (MCV)**

Uninsured and underinsured adults 19-55 yrs who are risk. The following groups are considered at risk:

1. Medical indications: adults with anatomic or functional asplenia or terminal complement component deficiencies.
2. Revaccination after 5 years might be indicated for adults previously vaccinated with MPSV4 who remain at high risk for infection.
3. Other: first-year college students living in dormitories
4. Uninsured and underinsured persons who travel to or live in countries in which meningococcal disease is hyperendemic or epidemic.

### **Pneumococcal Polysaccharide (PPSV)**

Uninsured and underinsured adults:

1. 65 years of age or older, including one-time revaccination of those who have not received vaccine within 5 years and were less than 65 years of age at the time of primary vaccination.
2. All persons over 65 who have unknown vaccination status should receive one dose of vaccine.
3. Adults 19-64 who are at risk per ACIP recommendations, which includes the following:
  - Chronic disorders of the pulmonary system (including asthma)
  - Cardiovascular diseases
  - Persons who smoke cigarettes
  - Diabetes mellitus
  - Chronic liver diseases, including liver disease as a result of alcohol abuse (e.g., cirrhosis)
  - Chronic renal failure or nephritic syndrome
  - Functional or anatomic asplenia (e.g., sickle cell disease or splenectomy) [if elective splenectomy is planned, vaccinate at least 2 weeks before surgery]
  - Immunosuppressive conditions (e.g., congenital immunodeficiency, HIV infection [vaccinate as close to diagnosis as possible when CD4 cell counts are highest], leukemia, lymphoma, multiple myeloma, Hodgkin disease, generalized malignancy, or organ or bone marrow transplantation)
  - Chemotherapy with alkylating agents, antimetabolites, or high-dose, long-term corticosteroids
  - Cochlear implants and cerebrospinal fluid leaks
  - Residents of nursing homes or long-term care facilities.
  - American Indians/Alaska Natives and persons aged 50 through 64 years who are living in areas where the risk for invasive pneumococcal disease is increased.

### **Tetanus, Diphtheria, and Acellular Pertussis (Td/Tdap)**

All uninsured or underinsured adults.

1. Tdap should replace a single dose of Td for adults aged 19-64 years who have not received a dose of Tdap previously.
2. Td is indicated for adults 65 and older.
3. The booster dose of tetanus and diphtheria toxoid-containing vaccine should be administered to adults who have completed a primary series and if the last vaccination was received  $\geq 10$  years previously.

4. Adults with uncertain or incomplete history of primary vaccination series with tetanus and diphtheria toxoid-containing vaccines should begin or complete a primary vaccination series. Tdap can substitute for any one of the doses of Td in the 3-dose primary series.
5. If a woman is pregnant and received the last Td vaccination  $\geq 10$  years previously, administer Td during the second or third trimester. If the woman received the last Td vaccination  $< 10$  years previously, administer Tdap during the immediate postpartum period.
6. A dose of Tdap is recommended for postpartum women, close contacts of infants aged  $< 12$  months, and all health-care personnel with direct patient contact if they have not previously received Tdap. An interval as short as 2 years from the last Td vaccination is suggested; shorter intervals can be used.
7. Consult the ACIP statement for recommendations for giving Td as prophylaxis in wound management.

### **Varicella**

Uninsured or underinsured adults:

1. Born after 1980\* who are without evidence of immunity to Varicella should have received two doses of Varicella vaccine. Those who have received only one dose should receive the second dose.
2. Do not vaccinate women who are pregnant or might become pregnant within 4 weeks of receiving the vaccine. Varicella vaccine is to be administered upon completion or termination of pregnancy and before discharge from the health-care facility. The second dose should be administered 4-8 weeks after the first dose.

\*For healthcare workers, pregnant women, and those born outside the U.S., birth before 1980 should not be considered evidence of immunity.

### **Herpes Zoster (Shingles)**

Uninsured or underinsured adults:

1. 60 years of age and older whether or not they report a prior episode of herpes zoster.
2. Persons with chronic medical conditions may be vaccinated unless a contraindication or precaution exists for their condition. Contraindications and precautions for use of zoster vaccine are available at:  
<http://www.fda.gov/BiologicsBloodVaccines/Vaccines/QuestionsaboutVaccines/ucm070418.htm>

If you have questions regarding this policy, please contact your TVFC Consultant or Health Service Region.

Attachments: Vendor Profile Form  
Adult Safety Net Eligibility Chart

**Venue Profile:**  
**Enrollment in 317 Expanded Adult Safety Net Vaccine Initiative**

The purpose of this form is to collect background information on venues receiving vaccine through the 317 Adult Hepatitis B Vaccine Initiative and the Expanded Adult Safety Net Vaccine program. You only need to complete an enrollment form for this program once. You must already be enrolled in Texas Vaccines for Children (TVFC) or complete the TVFC enrollment in addition to this form, even if you intend to only offer vaccines to adults.

**Please submit via email, fax, or regular mail to your Health Service Region or Local Health Department contact.**

<b>Date</b>		<b>VFC PIN</b> (if enrolled already)
<b>Venue Name</b>		
<b>Address</b>		
	street	Suite #
	<b>TX</b>	
	city	zip code
	county	
<b>Main Phone</b>		
<b>Contact Person</b>		
	name	
	phone	email

1. Please check all that apply

- |   |   |
|---|---|
| <input type="checkbox"/> 1. STD clinic<br><input type="checkbox"/> 2. Jail<br><input type="checkbox"/> 3. Syringe Exchange Program<br><input type="checkbox"/> 4. Primary care<br><input type="checkbox"/> 5. HIV C&T<br><input type="checkbox"/> 6. Prison | <input type="checkbox"/> 7. Substance abuse treatment center<br><input type="checkbox"/> 8. Local/Regional Health Department<br><input type="checkbox"/> 9. Federally Qualified Health Center (FQHC)<br><input type="checkbox"/> 10. Family Planning Center<br><input type="checkbox"/> 11. Other (specify) _____ |
|---|---|

2. Approximately how many total adult client visits were there in this venue during Jan–Dec 2009? \_\_\_\_\_

3. Did this venue provide vaccine to adults during **2006**?     Yes     No

4. If you provided Adult Hepatitis B and/or Twinrix during **2006**, how many doses of each were ordered?

Adult Hep B \_\_\_\_\_ Twinrix (Hep A/Hep B) \_\_\_\_\_     None

## ADULT SAFETY NET ELIGIBILITY CHART

	DSHS Health Service Regions	Local Health Departments (LHD)*	Providers Enrolled in Adult Safety Net Program**	TVFC-only Providers
<b>Hepatitis A</b>	Un/underinsured	Un/underinsured	Un/underinsured	Only continuation of series begun before 19th birthday
<b>Hepatitis B</b>	Un/underinsured	Un/underinsured	Un/underinsured	Only continuation of series begun before 19th birthday
<b>Human Papillomavirus (HPV)</b>	Women and men ages of 19-26 for HPV4 (Gardasil). Women only ages 19-26 for HPV2 (Cervarix-available Fall 2010).			Only continuation of series begun before 19th birthday
<b>Influenza</b>	Excludes those at residential or occupational risk of exposure where the organization, proprietor, or employer is required to offer the vaccine by law.	None. DSHS does not provide adult flu vaccine to LHDs.	None	None
<b>MMR</b>	At least one dose for all born during or after 1957. Second dose for international travelers, persons attending colleges and other post-high school educational institutions, and persons who work at health-care facilities.			Only continuation of series begun before 19th birthday
<b>MCV4</b>	19-55 at risk including college students in dorms, functional or anatomic asplenia, travel to hyperendemic or epidemic areas.			None
<b>Pneumococcal Polysaccharide (PPSV)</b>	All 65 and older. 19-64 at high risk including smokers and those with asthma.			None
<b>Td/Tdap</b>	Tdap is licensed for adults through age 64 and should replace one booster dose of Td. Td should be used for adults 65 and older.			Only continuation of series begun before 19th birthday (not including booster)
<b>Varicella (chickenpox)</b>	All adults without evidence of immunity including all patients born after 1980. Birth before age 1980 is not evidence of immunity for healthcare workers, pregnant women, immune-compromised persons, and people born outside the US. Do not vaccinate during pregnancy.			Only continuation of series begun before 19th birthday
<b>Zoster</b>	60 Years and older			None

\* agencies which are contracted with a LHD to provide vaccines may immunize adults under the same guidelines as the LHD.

\*\*Adult Safety Net enrollment is open to STD and HIV clinics, Title V-, X-, or XX-funded Family Planning Sites, FQHCs, and State-contracted substance abuse clinics.

