HoosierVax Health: Vaccine Insights for Clinicians

January 2024

Spotlight

Cervical Cancer Awareness Month

Human papillomavirus (HPV), a group of more than 150 viruses, infects approximately 13 million individuals annually. Some of these viruses can lead to cervical, vulvar, vaginal, anal, penile and throat cancers. The introduction of the HPV vaccine has led to a significant decline in HPV-associated cancers and genital warts by with an 88% decrease among teenage girls and an 81% decrease among young adult women.



The Vaccines for Children (VFC) program provides assistance to families who lack access to vaccines, including the HPV series. The program offers free vaccinations to children younger than 18 who are uninsured, Medicaideligible, or Native American/Alaskan Natives.

As we recognize Cervical Cancer Awareness Month, it is imperative to focus on outreach to increase vaccination rates. Studies have shown that a medical provider's recommendation for vaccines is an effective approach to increasing HPV vaccination rates and ultimately preventing cancer later in life.

The Advisory Committee on Immunization Practices (ACIP) recommends two doses of the HPV vaccine for individuals between the ages of 9 and 14, and three doses for those aged 15 to 26. High-risk adults between the ages of 27 and 45 should consult their provider about the benefits of the vaccine. More information on the HPV dosing schedule can be found here.

Decline in Childhood Vaccine Coverage

Recent data indicates a decline in childhood vaccine coverage across various counties in Indiana. This decrease poses significant health risks, to unvaccinated children and the broader community due to the potential resurgence of vaccine preventable diseases.

Providers play the key role in ensuring children receive timely vaccinations. To combat the decline, healthcare providers are encouraged to:

- Provide educational outreach: Providing accurate, clear information to parents to address vaccine misconceptions
- 2. **Enhance access:** Establishing mobile clinics and extended hours, especially in rural and underserved communities
- 3. Practice proactive communication: Using reminder recalls and follow-ups for vaccinations due
- 4. **Utilize community engagement:** Collaborating with local leaders and influencers to promote positive vaccination messages
- 5. Leverage technology: Utilizing telehealth and digital platforms for information sharing and scheduling

Medicaid Billing for COVID-19 Vaccine

All claims for Medicaid eligible individuals receiving COVID-19 vaccines need to be billed to traditional Medicaid and not to any Medicaid managed care partner. Call Indiana Medicaid Customer Assistance at 800-457-4584 with guestions.

Pfizer and Moderna

<u>Bulletin BT2023179</u> outlines new billing codes for Pfizer and Moderna COVID-19 vaccine and administration fees. This document provides important information about new billing codes that went into effect on Nov. 1, 2023. These new codes must be used to receive payment for all dates of services from Nov. 1, 2023, to present.

Novavax

<u>Bulletin BT2023181</u> outlines new billing codes for Novavax COVID-19 vaccine and administration fees. This document provides important information about new billing codes that went into effect on November 1, 2023. These new codes must be used to receive payment for all dates of services from Nov. 1, 2023, to present.

Monitoring vaccine loss and wastage helps ensure that there are enough vaccines available for public health

Vaccine Returns

needs. Therefore, all healthcare providers who partner with the Immunization Division to administer vaccines are **required** to report any incidents of vaccine loss or wastage within 30 days of the loss. These incidents can be reported by returning the vaccine to the manufacturer and recording the return in VOMS.

There are a number of circumstances under which vaccine doses may need to be returned:

Spoiled - Vaccine that is unusable due to the following:

Natural disaster/ power outage

- Refrigerator/freezer too warm or cold
- Vaccine spoiled in transit
- Storage unit failure
 Expired Non-viable vaccine in its original container (vial/syringe) that was not administered prior to the

expiration date. This includes vaccine that was ordered but unable to be administered or transferred prior to the expiration date, as well as unused influenza vaccines.

Wasted - Any vaccine that is unaccounted for which can be due to vaccine ordered but not delivered or loss

• Vaccine drawn into the syringe but not administered

- Vaccine in an open vial but all doses weren't administered
 Compromised or broken vial (e.g. due to a drop causing damage to vial integrity or sterility)
- Lost or unaccounted vaccines
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 If you have vaccine that fits these criteria, create a return for it. The learning management system (LMS) has a
- If you have vaccine that fits these criteria, create a return for it. The learning management system (LMS) he course that can guide you through the return process. Contact your vaccine accountability specialist with

Bridge Access Program Updates

CDC Bridge Access Program providers are authorized to receive \$40 administration fees for **all** doses administered through the program. If you have charged any fees to patients, please refund those fees.

Please complete this <u>REDCap survey</u> **as soon as possible** so that program administrators can begin

processing your reimbursement. Forms that need to be uploaded to this survey have been sent through

email.

Please reach out to Ahmad Abdalla at aabdalla@health.in.gov with any questions.

VFC Training Opportunities

Whether you are new to Vaccines for Children (VFC) or a seasoned pro in need of a refresher, the Quality

Assurance Team offers in-person training opportunities for the VFC program. Topics include VFC overview, storage and handling, and VOMS/Inventory.

Virtual training modules for all of these topics and more are also available on the learning management

system (LMS), <u>INvest</u>.

The VFC Annual Provider Training module is required training every year for primary and backup VFC

coordinators. This module saves your progress as you work through it, so it does not need to be completed in one sitting.

The most updated VFC Policies and Procedures for Indiana can be found here.

If you have questions, or to schedule training for your office, please reach out to your regional quality assurance specialist or Diana Taylor at ditaylor@health.in.gov.

To **promote**, **protect**, and **improve** the health and safety of all Hoosiers

Indiana Department of Health

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