

Talking with Family PACT Clients About HPV Immunization Webinar Q&A August 17, 2022

HPV Immunization Reimbursement

- 1. How do we acquire the HPV vaccine for our Family PACT patients? Do we have to purchase it in advance and get reimbursed?**

Answer: Providers can place orders directly through the Merck website, a Merck representative, or through a wholesaler. Vaccines are not considered outpatient drugs through the 340 B program, but some of the clinics enrolled in 340 B may be eligible to purchase through the Prime Vendor APEXUS program. Local health departments may be eligible to purchase from a state contract called Minnesota Multi-state.

Merck representatives should be able to assist providers in identifying appropriate options that may lower the cost.

- 2. For patients 18 and younger getting HPV vaccine under Family PACT is it okay to use VFC stock? And for 19+ I assume we give private vaccine stock and get reimbursed by Family PACT?**

Answer: Family PACT does not cover HPV immunization in people under 19 years of age because the HPV vaccine is available (as are many others) through the Vaccines for Children Program (VFC). Your clinic or practice must be signed up with the California VFC program to be reimbursed for the administration of the vaccine. You can find out more information, and to apply as a provider at <https://eziz.org/vfc/>

For clients 19 to 45 years of age, obtain a supply of the vaccine from Merck or other sources as described question #1, then bill Family PACT once the vaccine dose is given.

HPV Immunization for Minors

- 3. Will VFC cover for HPV vaccine even for older than 18 years old?**

Answer: Through 18 years old, up to the 19th birthday.

- 4. Do minors need consent from parents to get vaccine?**

Answer: In California, minors 12 and older can give consent to HPV immunization. There are different age limits in other states. Reference: <https://www.vaxteen.org/california>

- 5. Just want to clarify. For patients under 19 we are seeing under Family PACT only, confirming Family PACT will not pay for those vaccines, correct?**

Answer: Correct.

- 6. VFC programs require parental consent. For patients 18 and under who are unable to utilize HPV immunization using the VFC program due to lack of parental consent are left at risk. Is there any chance Family PACT will eventually cover those patients who want/need immunization and require confidentiality?**

Answer: Family PACT coverage is for individuals 19 to 45 years of age. Please refer to the California VFC Program provider manual for consent requirements (see pages 14-15): <https://eziz.org/assets/docs/IMM-1248.pdf>.

- 7. What about payment from a minor for vaccine if Merck is for adults only?**

Answer: The Merck vaccine (Gardasil-9) is licensed by the US Food and Drug Administration (FDA) for people who are **9 to 45 years of age**. Please see response to Question #2 regarding reimbursement for HPV vaccine administration for patients 18 and under.

HPV Immunization for Males

- 8. As for men, who are immunocompromised, older than 45 years old, and are sexually active having sex with other men, would this vaccine be recommended for them?**

Answer: The Merck Vaccine (Gardasil-9) is licensed by US FDA for people 9 to 45 years of age. For Males (and females) 46 years of age and older, the HPV vaccination is not recommended by the Centers for Disease Control (CDC) for anyone (including males, females, MSM, or immunocompromised people) and it is not covered by either Family PACT or Medi-Cal for individuals over the age of 45.

- 9. Can we bill for HPV vaccine for males?**

Answer: Yes (19 to 45 years of age).

Vasovagal Response

- 10. Can you use the same interventions to prevent vasovagal in adults?**

Answer: Yes! It works in people of any age.

- A vasovagal can occur not only after a painful injection, but other procedures like IUD and implant placement and cervical and endometrial biopsy
- Also watch out for a vasovagal in the person who is accompanying a client during a client's procedure (listed above)
- It's a good idea to teach both the client and the person who accompanies them how to prevent a vasovagal **before** the procedure is started

- 11. Can these interventions be used in immunizations and blood draws?**

Answer: Yes.

HPV Immunization Billing Codes

12. Do those codes need modifiers?

Answer: No.

13. Is Family PACT currently covering the HPV immunization or is this coming soon?

Answer: HPV vaccination was added as a Family PACT clinic benefit effective July 1, 2022.

14. Is it mandatory for all Family PACT clinics to offer HPV immunization? Page 11 of the Family PACT Standards: *HPV vaccination is covered for females and males 19 to 45 years of age and shall be administered consistent with CDC Advisory Committee on Immunization Practices (ACIP) recommendations.*

Answer: No. The “shall” means that *if* you decide to make vaccination available, you must follow ACIP recommendations.

15. Will you be able to confirm the CPT code we can bill Family PACT for the HPV vaccine?

Answer:

- CPT 90651 for HPV vaccine
- CPT 90471 for administering the HPV immunization

16. Does Family PACT pay for both codes? Or just the admin code?

Answer: Both.

17. Does HPV vaccine education and counseling get billed or just the product and administration?

Answer: An E/M visit with a clinician or an E&C visit with a counselor (or both, if performed and documented) can be billed.

18. Is HPV immunization covered with all the contraceptive methods?

Answer: Please refer to the Family PACT Policies, Procedures, and Billing Instructions (PPBI) manual for diagnosis codes that may be billed with the HPV vaccine.

19. I know the immunization must be billed with the ICD-10-CM diagnosis code that identifies the contraceptive method for which the client is being seen but when the patient comes back for the 2nd dose and 3rd dose, does that have to be a clinician visit or can it be a nurse visit?

Answer: It can be either a clinician visit or a nurse-only visit. In addition to CPT 90651 (vaccine) and 90471 (vaccine administration),

- If it is a clinician visit, and E/M code can be used if an issue other than HPV vaccination is discussed or managed.

If the visit is with a nurse or MA for the injection only, use E/M 99211

Please refer to the *Office Visits: Evaluation and Management and Education and Counseling Services* section of the PPBI.

20. What ICD-10-CM diagnosis code should be used for the 2nd dose or 3rd dose? For example, if a patient comes in for initial prescription of contraceptive pill and gets first dose, would the diagnosis code for the 2nd dose be Z30.41?

Answer: Yes if the client's method of contraception still is oral contraceptives. Please refer to the PPBI for diagnosis codes that may be billed with the HPV vaccine.

HPV Testing

21. HPV Testing Only VS cytology. For a 45-year-old with normal result, many labs do not check for high risk-HPV, even when the provider requested for it. Any suggestions?

Answer: The question is not clear, but below is the Family PACT policy on cervical cytology and HPV testing, derived from national guidelines:

- Age 21-29; cervical cytology only, every 3 years
- Age 30 and older: either cytology-alone every 3 years, HPV-alone every 5 years, and co-testing (hrHPV and cytology on same sample) every 5 years.
 - If *cytology-alone* is done, labs *do not* perform a reflex hr-HPV test unless the cytology is abnormal (e.g., an ASCUS result)
 - If *co-testing* is ordered, the lab routinely should run both cytology and an hr-HPV test

22. Will Family PACT Reimburse for HPV Testing Only for ages 35 and above?

Answer: Please refer to the *Benefits: Family Planning-Related Services* section of the PPBI.

23. When you say recurrence, is that because the patient may have a new partner down the road or because the original infection returns?

Answer: Both are possible. When someone has a positive HR HPV test after having had negative HR HPV test(s) the possibilities are:

- They became infected by a new partner
- They were infected by a partner who is not new but who has a new HPV infection
- They were infected by a partner that is not new but who has a reactivation of a prior infection
- The test is reflecting an HPV infection that the immune system had previously suppressed below the threshold of detection of the HR HPV test and now is not suppressing the infection as well as previously

HPV Immunization

24. I know recently the age was increased until 45 for both sexes. Can you confirm?

Answer: Yes.

25. If patient receives first dose of HPV at age 14 and then comes back at age 16, do they need 1 or 2 more doses?

Answer: One more dose, given that the first dose was given before age 15. With the 2-dose scheme, dose #2 needs to be given no less than 5-6 months after the first dose, but there is no upper time limit on the second dose. The CDC states "This person needs one more dose to complete a 2-dose series, which is recommended because the vaccination series was started before their 15th birthday. In a 2-dose series, the second dose is recommended 6–12 months after the first dose, but there is no upper time limit. In this case, the first dose was given several years ago, so the second dose can be given right away."

<https://www.cdc.gov/hpv/hcp/schedules-recommendations.html>

26. Are people over 45 forbidden from HPV immunization?

Answer: No; however, the FDA has licensed Gardasil-9 through age 45 only, the CDC does not recommend it in people older than 45 years of age, and Family PACT and Medi-Cal do not cover HPV vaccination in people 46 years of age and older

27. Do the 19-45 get the entire series?

Answer: Yes. The only people who are eligible for the 2-dose regimen are those who start the series at 9-14 years of age.

28. I'm concerned about overloading the immune system by sandwiching too many immunizations on the same day. You talked about normalizing and saying you are due for your MMR, HPV and meningococcal today. Is that safe to do?

Answer: According to the CDC Advisory Committee on Immunization Practices (ACIP) advice, it is acceptable to give Gardasil-9 on the same date of service as other vaccinations.

29. If someone got the first dosage and never got the second and they are over the age of 26, should they get the second dosage? Should they start all over? What is their protection against HPV at this point?

Answer: When there is a delay in receiving the second or third dose, the CDC ACIP recommends restarting the series as soon as possible, but *not* starting over. A person could choose to stop after the first dose, but the protection will not be nearly as robust as in someone who has completed the series.

30. For those that were diagnosed with HPV, and over 27, do you recommend an HPV immunization? If never given a vaccine?

Answer: Yes, that person can be offered HPV immunization based on a shared decision-making conversation. The pros and cons of immunization of a person between 27 and 45 years of age should be discussed, including advice that the degree of protection is related to the number of hrHPV strains, and the specific hrHPV types, that the person was infected with previously and their age. The final decision should be left to the client.

31. What about a woman who is 60 with HPV DNA + test and needing repeat colposcopy? Even though immunization is not licensed, can she still get it?

Answer: Yes, but it is not advisable according to the CDC or covered by either Family PACT or Medi-Cal.

Other

32. Where can I find easy to understand HPV vaccine handouts in Spanish?

Answer: Here is a link to a patient education piece in Spanish from the Immunization Action Coalition: https://www.immunize.org/vis/spanish_hpv.pdf

33. Can you elaborate on the recommendation for health care providers (HCP) to get HPV vaccine due to possible exposure?

Answer: A few clinicians who perform procedures involving vaporization of cervical lesions (especially with laser and LEEP) have been reported to develop HPV-induced papillomas of the skin (especially face and forearms), as well as laryngeal papillomas. It is thought that HPV vaccination may protect clinicians from infections resulting from these exposures as well as wearing a face mask and a gown that cover the arms.

34. Will the HPV vaccine help in a person diagnosed with URI?

Answer: There is no reason this believe that HPV immunization will treat or prevent upper respiratory tract infections, since URIs in the bronchi and lungs are not due to HPV.

35. If prescribed by a clinician, can a Family PACT client receive Gardasil-9 injection by a pharmacist at a Medi-Cal contracted pharmacy?

Answer: No.