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TO: Vaccines for Children (VFC) Providers

FROM: Carol Glaser, DVM, MPVM, MD *Carol A. Glaser, M.D.*  
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SUBJECT: 2014 Recommended Immunization Schedule for Persons 0 Through 18 Years

### NEW IMMUNIZATION SCHEDULES AND FOOTNOTES

The [2014 Recommended Immunization Schedule for Persons Aged 0 Through 18 Years](#) has been approved by the Advisory Committee on Immunization Practices (ACIP), Centers for Disease Control and Prevention (CDC), American Academy of Pediatrics, American Academy of Family Physicians, and the American College of Obstetricians and Gynecologists. A summary of the updates to the 2014 immunization schedule was published in the [MMWR](#) on February 7, 2014, and the figures, footnotes, and tables are posted on the [CDC website](#). For each vaccine, the footnotes summarize the current recommendations for routine and catch-up immunizations and those for high-risk persons.

In keeping with your VFC provider agreement, providers should follow the [recommended 2014 ACIP immunization schedule](#). We encourage providers to review the 2014 immunization schedule, complete footnotes, and catch-up schedule together with all staff, especially those who order and administer vaccines. We recommend that the 2014 schedules, including footnotes, be posted for reference in the office.

### UPDATES TO THE 2014 SCHEDULE

- **Meningococcal conjugate vaccines:** Recommendations were updated to reflect recent recommendations and current age indications, including the use of Menveo<sup>®</sup> (MCV4-CRM) and the newly available MenHibrix<sup>®</sup> (Hib-MenCY) in high-risk infants. We encourage providers to review the details in the footnotes of this section carefully.
- **Pneumococcal Conjugate Vaccine, 13-Valent [PCV13] and Pneumococcal Polysaccharide Vaccine, 23-Valent [PPSV23]:** Recommendations were updated to include guidance for immunization of persons with high-risk conditions. Providers should review the details of this section and [full ACIP recommendations](#) carefully since recommendations differ based on the degree of risk and age:
  - Catch-up immunization with PCV13 is updated and clarified for both high-risk populations (based on degree of risk) and healthy children.

- A single dose of PCV13 is now a full recommendation for those with *certain* high-risk conditions ages 6 years and older.
- The timing of and specific populations indicated for additional dose(s) of PPSV23 are also clarified.
- For high-risk individuals indicated to receive both PCV13 and PPSV23, all PCV13 doses are recommended to be completed prior to any doses of PPSV23.
- Additional information for Tdap, Hib, influenza, hepatitis A, HPV, meningococcal, PCV13, and PPSV23 has also been updated in the footnotes.

#### **REMINDER: ONGOING RECOMMENDATIONS**

- [Routine HPV vaccination is recommended for all females and males](#), at age 11-12 years. VFC vaccine may be used through the age of 18 years to catch-up both females and males to complete the full 3-dose series.
  - HPV vaccine should be given along with Tdap and meningococcal conjugate vaccines at the preteen health visit.
  - A strong recommendation from the provider is important in increasing immunization.
  - HPV vaccination is most effective if given PRIOR to onset of sexual activity. The fact that a child is not sexually active is NOT a reason to delay HPV vaccination.
  - Providers should utilize reminders and recall patients for their 2<sup>nd</sup> and 3<sup>rd</sup> doses to complete the HPV series.
- [Routine MCV4 booster](#) is recommended at age 16 years, in addition to the routine preteen 11-12 year old dose.
- [Tdap is recommended during EACH pregnancy](#), preferably during weeks 27 through 36 weeks gestation, regardless of time since previous Tdap vaccination. The goal of this recommendation is to decrease pertussis and its serious complications in young infants.
- A total of [two doses of varicella vaccine](#) are recommended for anyone who hasn't had varicella disease. Many adolescents haven't yet received their second dose.

#### **AFFORDABLE CARE ACT (ACA) PRIMARY CARE PHYSICIAN RATE INCREASE**

Based on the provisions of the federal Affordable Care Act (ACA), primary care physicians with a specialty designation of family medicine, general internal medicine, or pediatric medicine will receive increased payments by Medi-Cal for specified primary care services, including vaccine administration. The Department of Health Care Services (DHCS) will also be increasing managed care capitation payments to include the primary care service increases. Increased payments will be retroactive for dates of service on or after January 1, 2013.

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Primary care providers must submit the ACA Self Attestation Form (SAF) by December 31, 2014, to receive the increased payments. This form is available online at [http://files.medi-cal.ca.gov/pubsdoco/aca/aca\\_form\\_landing.asp](http://files.medi-cal.ca.gov/pubsdoco/aca/aca_form_landing.asp).

For additional information, see the DHCS FAQs on the ACA Increased Payments for Primary Care Physicians at [http://files.medi-cal.ca.gov/pubsdoco/aca/aca\\_form\\_landing.asp](http://files.medi-cal.ca.gov/pubsdoco/aca/aca_form_landing.asp).

## **NEW PROCESS FOR PERSONAL BELIEFS EXEMPTIONS FOR REQUIRED VACCINES**

**Starting on January 1, 2014**, a new California law modified the process for obtaining exemptions to student immunizations based on personal beliefs. [Assembly Bill \(AB\) 2109](#) requires documentation that authorized health care practitioners have informed parents about vaccines and diseases to obtain a personal belief exemption to required vaccines for school or child care. A form developed by the California Department of Public Health that fulfills the requirements of the new personal beliefs exemption law may be downloaded and is available in multiple languages. This form should be signed no *earlier* than six months before the student is first subject to the requirement, typically the first day of school or child care. Additional information regarding the new law may be found at <http://www.shotsforschool.org/immunizationlaws/>.

## **REMINDERS**

The Institute for Safe Medicine Practices (ISMP) has an online system for reporting vaccine administration errors. Providers may report any errors confidentially at <http://verp.ismp.org>. ISMP will use the information obtained to make recommendations for improving the safety of vaccine administration.

Please make sure to use the most up-to-date [Vaccine Information Statement \(VIS\)](#) for each vaccine at every immunization visit. The most current VIS may be downloaded at <http://www.eziz.org>.

Providers should ensure that all staff who administer and handle vaccines have completed the EZIZ training modules at [www.eziz.org](http://www.eziz.org) as part of comprehensive staff development and competency assessment.

## **QUESTIONS?**

If you have any questions, please call your VFC Field Representative or the VFC Program at 877-243-8832 (877-2GET-VFC) or visit [www.eziz.org](http://www.eziz.org).

Encl: 2014 Advisory Committee on Immunization Practices (ACIP) Recommended Schedule for Persons Aged 0 through 18 years