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GAVIN NEWSOM
Governor

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TO: California Vaccines for Children (VFC) Providers

FROM: Robert Schechter, M.D., Chief 
Center for Infectious Diseases
Division of Communicable Disease Control, Immunization Branch

SUBJECT: **Addition to the VFC formulary: Priorix, a new formulation of MMR**

Dear VFC Provider,

The US Food and Drug Administration (FDA) has licensed and the federal Advisory Committee on Immunization Practices (ACIP) has issued recommendations for Priorix (GlaxoSmithKline, or GSK), a second formulation of MMR vaccine. Priorix can be used interchangeably with other MMR-containing vaccines indicated for prevention of measles, mumps, and rubella in accordance with [ACIP immunization schedules](#). The vaccine virus strains are similar to the longstanding M-M-R II vaccine, as described in the recent [ACIP recommendations](#).

Per [VFC resolution](#) 10/17-3, both M-M-R II and Priorix will be available through the VFC program. VFC supplies of Priorix may be given to any VFC-eligible child:

- 12 months through 18 years of age for routine immunization.
- As young as 6 months of age in an outbreak or prior to international travel.

STORAGE AND HANDLING

Detailed information can be found in the [Priorix FDA package insert](#).

After reconstitution, a single dose of Priorix is approximately 0.5mL.

- Priorix is supplied in a box containing
 - 10 single-dose vials of lyophilized antigen
 - 10 single-dose prefilled ungraduated syringes of sterile water diluent
- Storage prior to reconstitution
 - Lyophilized antigen: 36° to 46°F (2° to 8°C). Protect vials from light.
 - Prefilled syringes of diluent: 36° to 46°F (2° to 8°C) OR at controlled room temperature up to 77°F (25°C).



- Storage after reconstitution
 - If not used immediately, store reconstituted vaccine between 36° to 46°F (2° to 8°C) and administer within 8 hours. Discard if not used within 8 hours.
 - **DO NOT FREEZE** – Unlike M-M-R II, Priorix must **NEVER** be frozen.

VFC ORDERING

In addition to the existing MMR product (M-M-R-II; Merck) currently available for ordering through the California VFC Program, Priorix will be added to VFC's vaccine order form and will be available starting December 1, 2022, for VFC Providers to order through their [MyVFCvaccines](#) account.

If your practice plans on switching to Priorix from another vaccine product, submit a "[Provider Request Form to Update Vaccine Brand Products Administered](#)" to the VFC Program and keep the following information in mind:

- Careful consideration should be given when selecting alternative brands or products in order to minimize the impact on provider practices.
- Implementation of a different vaccine brand or product should be approved by your practice's medical director or Provider of Record.
- Staff should be thoroughly informed and educated on changes to vaccines and its impact on vaccine ordering, storage, administration, and documentation.
- As your practice transitions to a new product, managing on-hand inventory appropriately is a key factor in preventing unnecessary vaccine wastage. Your initial request for a new vaccine product may be reduced to help minimize vaccine waste as you transition from the product currently being used by your practice.
- A plan to deplete excess inventory must be in place prior to transitioning to a new product. It is the provider's responsibility to ensure all VFC-supplied vaccines are used prior to their expiration date or transferred to another VFC Provider who can use them. Viable unused doses of these individual vaccines cannot be returned to the VFC Program.

BILLING FOR VFC VACCINE

CHDP:

Claims may be submitted for VFC-supplied doses of Priorix administered to CHDP-eligible patients through age 18 years. Please refer to the CHDP Provider manual and relevant [CHDP Provider Information Notice](#).

CHDP providers with additional questions are advised to contact their [County CHDP Program](#).

Medi-Cal Fee-For-Service (FFS):

To bill Medi-Cal FFS for administration of VFC-supplied doses of Priorix, use the appropriate CPT-4 code for **Priorix (90707)**, the same as **MMR-II**, followed by the “-SL” modifier, in total **90707-SL**. Providers will only be reimbursed for the administration fee when using VFC vaccines for Medi-Cal FFS-eligible patients.

For specific information and details on Medi-Cal billing, please refer to the [Medi-Cal provider manual on VFC](#). Providers with questions on Medi-Cal billing policies and procedures and Provider manual information may call the Telephone Service Center (TSC) at 1-800-541-5555.

Medi-Cal Managed Care

Please contact the specific Medi-Cal managed care health plan for information on immunization billing and reimbursement.

Other codes for the use of Priorix not supplied by VFC:

- The CPT-4 code for **Priorix** and **MMR-II** is **90707**.
- The ICD-10-CM code for an encounter for immunization is **Z23**.

Resources

- [ACIP Child and Adolescent Immunization Schedule](#)
- [Measles, Mumps, Rubella Vaccine \(PRIORIX\): Recommendations of the Advisory Committee on Immunization Practices — United States, 2022 | MMWR \(cdc.gov\)](#)
- [Priorix FDA Package Insert](#)
- [VFA/VFC Vaccine Eligibility Guidelines Table](#)
- [VFC resolutions](#)