

**AUSTIN TEXAS
INTER-OFFICE Memo**

TO: Regional Directors, Public Health Regions
Regional Immunization Program Managers, Public Health Regions

THRU: Casey S. Blass, Chief, Bureau of Immunization and Pharmacy Support

FROM: Patricia E. Feagin, M.A.H.S., Acting Director, Immunization Division

DATE: January 8, 2004

SUBJECT: Texas Vaccines for Children Program: Changes to Doses Administered Reporting and New Vaccine Combinations Now Available

This notice is to inform you of a change in reporting doses administered data and of the addition of two combination vaccines.

Effective immediately, the Texas Department of Health (TDH), Texas Vaccines for Children Program (TVFC), is changing the way doses administered are reported to the state. The *Number of Doses of Public Sector Vaccines/Toxoids/Biologicals Administered by and Distributed to Public and Private Providers* form, also known as the C-5 form, is no longer required. The Monthly Biological Report form, C-33, has been revised to include new age groupings for reporting doses administered. Doses administered will be reported for two age groups: **18 years of age and younger, and 19 years of age and older**. The revised C-33 form is attached and should be implemented immediately.

Also effectively immediately, providers enrolled in the TVFC may begin ordering two combination vaccines. The vaccine may only be administered to children born on or after January 1, 2004. The two combination vaccines are: Pediarix™ that provides protection against diphtheria, tetanus, pertussis, hepatitis B, and polio; and Comvax® that provides protection against hepatitis B and *Haemophilus influenzae* type b.

Pediarix®

Pediarix™ is licensed for administration to children who are six weeks through 6 years of age for the primary series when all of the antigens are recommended. It is not currently licensed for use as a booster dose for any antigen that needs boosting at 12-18 months of age and again at 4-6 years of age. Providers who choose to order and vaccinate using Pediarix™ will use this combination vaccine at 2 months, 4 months, and 6 months of age. Once a child is started on this vaccine, providers should complete the primary series with this vaccine, when feasible. The package insert including dosage and administration information is available via the internet at http://us.gsk.com/products/assets/us_pediarix.pdf

Comvax®

Comvax® is licensed for administration to children who are six weeks through 15 months of age. Comvax® should only be administered when both antigens are recommended. Providers who choose to order and vaccinate using Comvax® will use this combination vaccine at 2 months, 4 months, and 12-15 months of age. Once a child is started on this vaccine, providers should complete the series and booster with this vaccine, when feasible. The package insert including dosage and administration information is available via the internet at http://www.merck.com/product/usa/pi_circulars/c/comvax/comvax_pi.pdf

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The TVFC is excited to offer providers their choice of using these combination vaccines or to continue with products that are already available through the TVFC. Providers are not required to use these vaccine combinations. They are provided as a service to you to reduce the number of injections a child receives.

The birth dose of hepatitis B single antigen vaccine continues to be strongly recommended and encouraged. Staff in regional and local health departments should take steps to ensure that birthing centers only order and receive single antigen hepatitis B vaccine.

Forms that are produced and distributed by the TDH for recording vaccines administered are being updated. Pediarix™ will appear as DTaP-Hep B-IPV and Comvax® will appear as Hib-Hep B. The Biological Order form, C-68, has been revised and is also attached for immediate use.

Medicaid billing codes are not currently available for these vaccine combinations. The estimated time for the codes to be made available is 90 days. Providers who begin using these vaccine combinations will need to use the "other immunization" code outside of a Texas Health Steps visit. Be aware that until the codes are available, data will not electronically migrate into ImmTrac, the statewide immunization registry. In order to avoid duplicate data entry or a loss of data, clinics may choose to begin using the vaccine combinations after the billing codes are available. Medicaid providers should consult future issues of the Medicaid Bulletin for billing procedures and codes.

Please contact your Texas Vaccines for Children Program consultant if additional information is needed.

cc: Nick Curry, M.D., M.P.H., Executive Deputy Commissioner
Sharilyn K. Stanley, M.D., Associate Commissioner, Disease Control and Prevention

Attachments