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SUBJ: GARDASIL - HUMAN PAPILLOMAVIRUS (HPV) VACCINE

1. THE FOOD AND DRUG ADMINISTRATION (FDA) HAS APPROVED GARDASIL (MANUFACTURED BY MERCK & CO). THIS IS THE FIRST VACCINE DEVELOPED TO PREVENT CERVICAL CANCER, PRECANCEROUS GENITAL LESIONS AND GENITAL WARTS DUE TO HUMAN PAPILLOMAVIRUS (HPV) TYPES 6, 11, 16 AND 18. GARDASIL IS A RECOMBINANT VACCINE (CONTAINS NO LIVE VIRUS) THAT IS GIVEN AS THREE INJECTIONS OVER A SIX-MONTH PERIOD.

2. THE VACCINE IS APPROVED FOR USE IN FEMALES 9-26 YEARS OF AGE.

3. IMMUNIZATION WITH GARDASIL IS EXPECTED TO PREVENT MOST CASES OF CERVICAL CANCER DUE TO HPV TYPES INCLUDED IN THE VACCINE. HOWEVER, FEMALES ARE NOT PROTECTED IF THEY HAVE ALREADY BEEN INFECTED WITH ANY OF THE HPV TYPE(S) LISTED ABOVE PRIOR TO VACCINATION, AFFIRMING THE IMPORTANCE OF IMMUNIZATION BEFORE POTENTIAL EXPOSURE TO THE VIRUS. GARDASIL DOES NOT PROTECT AGAINST LESS COMMON HPV TYPES NOT INCLUDED IN THE VACCINE, THUS ROUTINE AND REGULAR PAP SCREENING REMAIN CRITICALLY IMPORTANT TO DETECT PRECANCEROUS CHANGES IN THE CERVIX TO ALLOW TREATMENT BEFORE CERVICAL CANCER DEVELOPS.

4. THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES (ACIP) RECOMMENDATIONS CAN BE FOUND AT:

[HTTP://WWW.CDC.GOV/NIP/ACIP/DEFAULT.HTM](http://www.cdc.gov/nip/acip/default.htm).

5. GARDASIL IS NOT A MANDATORY VACCINE FOR ACTIVE DUTY/SELRES. HOWEVER, COAST GUARD CLINICS AND SICKBAYS CAN (IF RESOURCES PERMIT) ADMINISTER THE VACCINE TO TRICARE BENEFICIARIES WHO MEET THE FDA/ACIP REQUIREMENTS. PATIENTS, IF ELIGIBLE TO BE SEEN AT A COAST GUARD FACILITY, MUST CONTACT THE CLINIC FRONT DESK FOR INFORMATION REGARDING THE IMMUNIZATION SCHEDULING PROCESS.

6. GARDASIL HAS BEEN APPROVED AS A TRICARE COVERED BENEFIT FOR TRICARE BENEFICIARIES. GUIDANCE FROM TRICARE MANAGEMENT AUTHORITY IS AS FOLLOWS:

A. BENEFICIARIES WHO ARE NOT ENROLLED IN TRICARE PRIME CAN OBTAIN THEIR IMMUNIZATION FROM ANY TRICARE AUTHORIZED PROVIDER FOR THE USUAL CO-PAY AND IT WILL BE A COVERED BENEFIT.

B. TRICARE PRIME (NON-ACTIVE DUTY) BENEFICIARIES CAN OBTAIN THEIR GARDASIL IMMUNIZATION FROM A NETWORK PROVIDER WITHOUT PRIOR AUTHORIZATION (NONE OF THE SERVICES LISTED UNDER THE CLINICAL PREVENTIVE SERVICES BENEFIT REQUIRE PRE-AUTHORIZATION). IF THEY GO TO A NON-NETWORK PROVIDER THEY MIGHT BE CHARGED FOR POINT OF SERVICE. THERE IS NO CO-PAY FOR THE PREVENTIVE SERVICES COVERED UNDER TRICARE PRIME.

C. TRICARE PRIME (ACTIVE DUTY) BENEFICIARIES, REQUIRE REFERRAL/AUTHORIZATION IF THEY WANT TO OBTAIN THEIR GARDASIL IMMUNIZATION FROM OUTSIDE OF THE MILITARY MEDICAL TREATMENT FACILITY.

D. BENEFICIARIES WHO RECEIVED THIS IMMUNIZATION ON OR AFTER 16 OCTOBER 2006 SHOULD HAVE HAD A CLAIM FILED AS PER THE USUAL ROUTINE, UNLESS THEY WENT TO A PROVIDER WHO IS NOT A TRICARE-AUTHORIZED PROVIDER (IN WHICH CASE TRICARE WILL NOT PAY FOR THE CLAIM). IF THE BENEFICIARY RECEIVED THE IMMUNIZATION BEFORE 16 OCTOBER 2006, THEN IT WAS A NON-COVERED BENEFIT AND CANNOT BE PAID.

E. DETAILED INFO ON HOW TO FILE A CLAIM IS AVAILABLE THROUGH:

HEALTH NET FEDERAL SERVICES:

[HTTPS://WWW.HNFS.NET/BENE/HOME](https://www.hnfs.net/bene/home) (THEN GO TO THE TOP TOOL BAR, CLICK ON "CLAIMS" AND THEN IN THE RIGHT TEXT BOX, CLICK ON "CLAIM") HUMANA

MILITARY HEALTHCARE SERVICES:

[HTTP://WWW.TRICARE.MIL/SOUTH/DEFAULT.CFM](http://www.tricare.mil/south/default.cfm) (THEN GO TO THE RIGHT TEXT BOX AND CLICK ON "CLAIMS") TRIWEST HEALTHCARE ALLIANCE:

[HTTP://WWW.TRICARE.MIL/WEST/](http://www.tricare.mil/west/) (THEN GO TO THE RIGHT TEXT BOX LABELED, TRICARE WEST REGIONAL INFORMATION, AND CLICK ON "CLAIMS")

7. POINTS OF CONTACT AT CG-1121 LCDR SCHWARTZ 202-475-5172, AT CG-1122 CAPT FONG 202-475-5181, AT MLC LANT CAPT LEW 757-628-4338, AT MLC PAC CDR HUNTZINGER 510-637-1237, AND FOR ANY TRICARE PROBLEMS CALL 1-800-942-2422 (1-800-9 HBA HBA).

8. INTERNET RELEASE AUTHORIZED.

9. RADM PAUL J. HIGGINS, DIRECTOR OF HEALTH AND SAFETY, SENDS.

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