



Medical Services Division
601 Potrero Grande Drive
Monterey Park, CA 91755

PCP Name (First Name Last Name)
PCP Street Address
PCP City, CA MD Zip Code

October 1, 2008

RE: INFLUENZA VACCINE 2008-2009

Dear Care1st Direct-Contracted Primary Care Physician:

The Centers for Disease Control (CDC), based on the recommendations of the Advisory Committee on Immunization Practices (ACIP), published updated guidelines for the use of influenza vaccine for 2008-2009 season. A link to this report and other information can be accessed at <http://www.cdc.gov/flu>

Principal changes include:

- 1) Beginning with the 2008-09 influenza season, annual vaccination of all children aged 5--18 years is recommended.
- 2) Children and adolescents at high risk for influenza complications should continue to be a focus of vaccination efforts as providers and programs transition to routinely vaccinating all children.
- 3) It is important to administer 2 doses of influenza vaccine for children aged 6 months--8 years who were previously unvaccinated or who received only 1 dose in their first year of vaccination.
- 4) The 2008-09 trivalent vaccine virus strains are A/Brisbane/59/2007 (H1N1)-like, A/Brisbane/10/2007 (H3N2)-like, and B/Florida/4/2006-like antigens.

Annual influenza vaccination is now recommended for the following groups:

- Persons at high risk for influenza-related complications and severe disease, including
 - children aged 6 months to 18 years
 - pregnant women,
 - persons \geq 50 years,
 - persons of any age with certain chronic medical conditions, and
 - residents of nursing homes and other chronic-care facilities that house persons of any age who have chronic medical conditions
- Persons who live with or care for persons at high risk, including
 - household contacts who have frequent contact with persons at high risk and who can transmit influenza to those persons at high risk, and
 - healthcare workers

Persons Who Should Not Receive Influenza Vaccine :

- People with a severe allergy (i.e., anaphylactic allergic reaction) to chicken eggs
- People who previously had onset of Guillain-Barré syndrome during the 6 weeks after receiving influenza vaccine.
- People who have had a severe reaction to an influenza vaccination in the past
- Children less than 6 months of age

- People who have a moderate or severe illness with a fever should wait to get vaccinated until their symptoms subside.

Antiviral Therapy

- Resistance level to amantadine and rimantidine continue to remain high
- Oseltamivir (Tamiflu) resistant influenza A (H1N1) strains have been identified in the United States and some other countries

Approved inactivated influenza vaccines – United States, 2008-09 season

Manufacturer	Vaccine	Formulation	Contains thimerosal preservative	Age Indication	Number of Doses
Sanofi Pasteur, Inc.	Fluzone [®] (TIV)	<ul style="list-style-type: none"> • Multidose vial • Single-dose prefilled 0.5ml syr or vial • Single-dose prefilled 0.25ml syr 	<ul style="list-style-type: none"> • Yes • No • No 	<ul style="list-style-type: none"> • ≥6 mths • ≥36 mths • 6-35 mths 	1 or 2 [†]
Novartis (formerly Chiron)	Fluvirin [™] (TIV)	<ul style="list-style-type: none"> • Multidose vial 	<ul style="list-style-type: none"> • Yes • 	<ul style="list-style-type: none"> • ≥ 4yrs • 	1 or 2 [†]
GlaxoSmithKline, Inc.	Fluarix [™] (TIV)	<ul style="list-style-type: none"> • Single-dose prefilled 0.5ml syr 	<ul style="list-style-type: none"> • Trace 	<ul style="list-style-type: none"> • ≥ 18yrs 	1
GlaxoSmith Kline, Inc.	FluLuval	<ul style="list-style-type: none"> • 5.0 ml multidose vial 	<ul style="list-style-type: none"> • Yes 	<ul style="list-style-type: none"> • ≥18yrs 	1
CSL Biotherapies	Afluria	<ul style="list-style-type: none"> • 0.5ml prefilled syringe • 5.0 ml multi-dose vial 	<ul style="list-style-type: none"> • No • Yes 	<ul style="list-style-type: none"> • ≥ 18 yrs 	1

[§]These preparations contain traces of thimerosal from the production process (<1.0 mcg Hg/0.5ml dose)

[†]Two doses administered at least 1 month apart are recommended for children aged 6 months-<9years who are receiving influenza vaccine for the first time

Care1st Claims Submission Procedures:

	Administration Fee	Vaccine Reimbursement	Claim Form and Billing Code
Managed Medi-Cal Member (Age 6mths-18yo)	Bill Care1st.	Obtain vaccine supply from VFC	Utilize the HCFA 1500 (code 90471)
Managed Medi-Cal Member (>18yo)	Bill Care1st	Bill Care1st	Utilize the HCFA 1500 (CPT4 code 90656, 90657, or 90658)
Healthy Families Member (all ages)	Bill Care1st	Bill Care1st	Utilize the HCFA 1500 (CPT4 code 90656, 90657, or 90658)

Prior authorization is not required as long as the above guidelines are met. The above reimbursement only applies to Care1st members assigned to you through a direct Care1st contract. If you have Care1st members through an IPA, you must contact the IPA for their reimbursement policy.

Note: The guidelines of the Vaccine for Children (VFC) Program may vary slightly.

If you have any questions, you may contact the Care1st Pharmacy Department (877-RXCARE1) or the Care1st Claims Department (1-626-299-4299, ext 6130).

Sincerely,

Jorge Weingarten, M.D.
Chief Medical Officer