



ADULT HPV VACCINATION TIPS FOR PROVIDERS

Updated April 2020

In June 2019, the Advisory Committee on Immunization Practices (ACIP) voted to recommend that adults 27-45 years of age who have not been adequately vaccinated previously may be vaccinated utilizing shared clinical decision making.

HPV vaccination is routinely recommended for all adolescents at age 11-12 years; vaccination can be given starting at age 9 years. Catch-up HPV vaccination is recommended for all persons through age 26 years who are not adequately vaccinated.

HPV vaccines are not licensed for use in adults older than 45 years of age.



SHARED CLINICAL DECISION MAKING

Shared Clinical Decision Making” was formally known as a “Category B” or “permissive” recommendation from the ACIP. Other vaccines with this similar recommendation include meningococcal B vaccine in adolescents 16-23 years and PCV13 vaccine for adults ≥65 years.

These recommendations are used in the context of a clinician-patient conversation to determine if vaccination may be appropriate for that patient.

It is important to understand that a shared clinical decision-making recommendation is still a recommendation; as opposed to a non-recommendation, meaning silence or dismissiveness on the topic. Shared clinical decision making cannot occur if a patient does not know about the vaccine and disease. Therefore, it is important to discuss the vaccine and disease with patients and determine if vaccination is right for that patient.



TALKING POINTS TO CONSIDER

- Even if a person has been infected with one type of HPV, the vaccine may help protect from infections and cancers caused by other types of the virus covered by the vaccine which you haven't been exposed to yet. Infection with one type of HPV does not mean a person is immune to all types.
- The HPV vaccine can only help prevent new infections, not slow or cure already existing infections. Infections may be acquired years in the past.
- This means that a patient can still be impacted by the effects of HPV disease – warts, abnormal Pap Smears, and HPV-related cancers of the cervix, throat, vagina, penis, vulva, and anus.
- Discuss risk factors for HPV transmission, such as new sexual partners.
- Adults should still follow screening recommendations for HPV-related diseases regardless of vaccination status.
- Ideally, HPV vaccination should be given in early adolescence because vaccination is most effective before any exposure to HPV.



AFFORDING HPV VACCINATION

- Section 2713 of the Public Health Service Act requires non-grandfathered commercial health plans and state Medicaid expansion programs to cover all ACIP recommended vaccines without cost sharing – this includes vaccines with a clinical decision-making recommendation.
- Merck Helps – confidential program provides vaccine free of charge to eligible individuals, primarily the uninsured who could not afford the needed vaccines (<https://www.merckhelps.com/gardasil%209>).
- The Vaccines for Uninsured Adults (VUA) program does not cover HPV vaccination.