



County of Santa Cruz

HEALTH SERVICES AGENCY

PO BOX 962, 1060 EMELINE AVE., SANTA CRUZ, CA 95061-0962
PHONE: (831) 454-4114 AFTER HOURS: (831) 471-1170 FAX: (831) 454-5049 TDD: 711

COMMUNICABLE DISEASE UNIT

June 27, 2017

Community Clinic Directors:

Santa Cruz County is currently experiencing a large Hepatitis A outbreak, with new cases being reported at an increasing rate each week. Our County typically has 1-2 confirmed cases per year. In the last 10 weeks, the County has identified 20 confirmed cases. The confirmed cases share one or more of the following characteristics: illicit drug use (injection and non-injection), homelessness, and/or dense living conditions. Of concern is the fact that there have been recent, serious and widespread outbreaks of Hepatitis A in similar populations in other counties. The outbreak in Santa Cruz County has been genotypically linked to the current San Diego County outbreak which has affected 202 individuals (74% have been hospitalized), including 4 deaths.

I am asking that all safety net clinics vaccinate persons who are in the high risk population and have not already been vaccinated.

- 1. Please provide Hepatitis A vaccine to homeless individuals, illicit drug users (IDU), patients with chronic liver diseases, men who have sex with men (MSM), people who have blood clotting disorders, and other at-risk people who are not already vaccinated against Hepatitis A (HAV).**
 - Homeless individuals and IDUs are also at higher risk for other vaccine-preventable diseases and should be brought up-to-date with recommended vaccines per the recommended CDC schedule.
- 2. Provide the Communicable Disease Unit (CDU) with a list of patients your facility vaccinated who meet the current high-risk definition.**
 - The information provided should include patient name, DOB, date of vaccine or declination, and identified risk factors.
 - Outbreak control and epidemiologic information will be greatly enhanced with such reporting from the safety net clinics and emergency departments.
 - For public health activities, such information disclosure to the County of Santa Cruz CDU is permitted by The Privacy Rule in 45 Code of Federal Regulations §164.512(b).
- 3. Consider Hepatitis A infection in individuals with discrete symptom onset and jaundice or elevated liver function tests, particularly in the high risk group (homeless and IDUs).**
 - Symptoms may include nausea, vomiting, anorexia, fever, malaise, dark urine, diarrhea, light-colored stool, and abdominal pain.
 - A complete serology panel with testing for hepatitis A, B, and C is recommended in symptomatic patients. HIV testing is also recommended for those with an undocumented HIV-status.
 - Serologic testing for HAV infection is not recommended in asymptomatic individuals or as screening before vaccination.



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4. **Promptly report all confirmed and suspect HAV cases to the Communicable Disease Unit.**
 - Please fax a Confidential Morbidity Report (CMR) to **831-454-5049** (Monday-Friday, 8 AM-5 PM) or call **831-454-4114** with any questions.
 - Since this outbreak involves homeless individuals, **providers are urged to contact the Communicable Disease Unit while suspected cases are still at the healthcare facility.** This action will ensure that a public health investigator can interview the patient by phone for a risk history and will facilitate serum specimen submission to the Santa Cruz County Laboratory to send for possible genotyping.
5. **Provide post-exposure prophylaxis (PEP) for close contacts of confirmed HAV cases.**
 - Susceptible people exposed to HAV should receive a dose of single-antigen HAV vaccine or intramuscular (IM) immune globulin (IG) (0.02 mL/kg), or both, as soon as possible within 2 weeks of last exposure.
 - The efficacy of combined HAV/Hepatitis B virus (HBV) vaccine (Twinrix®) for PEP has not been evaluated, so it is not recommended for PEP.
 - Detailed information on PEP may be found on the CDPH Hepatitis A Post-exposure Prophylaxis Guidance Quick Sheet (link on page 3).
6. **Consider occupational health.**
 - Remind employees of the importance of hand-washing with soap and warm water after each patient contact. In addition, wear disposable gloves after each encounter with patients who are at risk for Hepatitis A. For employees who are in very close contact with the high risk population, they may consider getting vaccinated for HAV through their primary care provider. Coordinate with your occupational health provider to determine if HAV vaccine should be offered to employees.
 - Maintain routine and consistent environmental cleaning of bathrooms using a chlorine-based disinfectant (bleach) with a ratio of $\frac{3}{4}$ cup of bleach to one gallon of water. Include bathrooms that are for employees only and those that are open to the public.

See attached billing information for patients who have Alliance Medi-Cal and for adult patients who are uninsured/underinsured.

Thank you for working with us to reach out to this high risk population and vaccinate some our community's most vulnerable individuals. Everyone can play a role in addressing this significant public health threat.

Sincerely,

Arnold S. Leff MD



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REFERENCES

- Santa Cruz County Health Services Agency's Health Alert page
<http://www.santacruzhealth.org/HSAHome/HealthAlerts.aspx>
- CDC MMWR "Prevention of Hepatitis A through Active or Passive Immunization"
<https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5507a1.htm>
- CDPH Hepatitis A PEP Guidance Quick Sheet
https://archive.cdph.ca.gov/programs/immunize/Documents/CDPH_HAV%20PEP%20Clinical%20Guidance.pdf

BILLING FOR COMMERCIAL VACCINES WITH MEDI-CAL PATIENTS

Hepatitis A Vaccine - The HAV vaccine is reimbursable when billed with the following CPT-4 codes. CPT-4 code 90632 must be billed with modifier SK (high risk). For additional information about CPT-4 code 90633, see "Hepatitis A Vaccine" in the *Vaccines for Children (VFC) Program* section of the Medi-Cal manual.

<u>CPT-4 Code</u>	<u>Description</u>
• 90632	Hepatitis A vaccine (<u>Hep A</u>), adult dosage, <u>for intramuscular use</u>
• 90633	Hepatitis A vaccine (<u>Hep A</u>), pediatric/adolescent dosage (<u>2 dose schedule, for intramuscular use</u>)

For information about the combination hepatitis A and hepatitis B vaccine, see "Hepatitis A and Hepatitis B Combination Vaccine" in the Medi-Cal manual.

Medical Necessity

When billing code **90632**, providers must document medical necessity in the *Remarks* field (Box 80)/*Additional Claim Information* field (Box 19) of the claim, or as an attachment, as defined by any of the following conditions. If the recipient:

- Is a native American Indian or native Alaskan (Eskimo)
- Is receiving clotting factor concentrates, especially solvent-detergent treated preparations
- Has chronic liver disease
- Is a user of illicit injectable or non-injectable "street" drugs
- Is a male having sex with other males
- Resides in a high-rate hepatitis A community (epidemic occurs every 5 – 10 years, the epidemic lasts for several years, and rates of disease exceeds 700 cases a year per 100,000 population during the outbreaks, and a few cases occur among persons over 15 years of age)
- Resides in an intermediate rate hepatitis A community (epidemics often occur at regular intervals and persist for several years with rates in excess of 50 cases a year per 100,000 population)

In the current situation, a homeless patient's medical necessity would be residing in a high-risk community.

USING VACCINES FOR ADULTS (VFA) VACCINES: For uninsured/underinsured adults, Federally Qualified Health Centers (FQHCs) can use state-supplied vaccines from the Vaccines for Adults (VFA) supply.

Questions on billing? Contact your CCAH Provider Services Representative at (800) 700-3874 ext. 5504.

If your clinic is having difficulties meeting the demands for vaccination using the normal vaccine resources, the Communicable Disease Unit can be contacted at (831) 454-4114 to coordinate efforts for receiving additional supplies