



# Hepatitis Vaccine Program Guidelines (2019)

## About SFDPH Hepatitis Vaccine Program

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The San Francisco Department of Public Health (SFDPH) Hepatitis Vaccine Program provides hepatitis A and B vaccine to local public health centers and private, nonprofit organizations at no charge. In exchange the recipient organizations agree to administer the vaccine:

- at no cost **or** for an administration fee only
- to patients at accessible locations; and
- by order of risk priority.

## How to Enroll

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Open enrollment applications will be accepted through **February 1, 2019**. Filling out an application does not guarantee receipt of vaccine. The decision is based on eligibility of applicants and availability of vaccine. Program participants are required to re-apply every year. Continuing participation is based on accurate record-keeping and appropriate use of vaccine.

## Hepatitis Vaccine Program – Who is Eligible?

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To be eligible, providers must:

- be nonprofit organizations; and
- serve clients who are at high risk for the infection or transmission of hepatitis; and
- agree to administer vaccine only to clients who are low-income, under-insured or uninsured.

Ineligible providers:

- private, for-profit organizations;
- organizations with the means to purchase hepatitis vaccine for their low-income, under-insured or uninsured clients;
- organizations able to bill Medicare, MediCal or other insurance for hepatitis vaccine for their clients;
- organizations whose entire client base is fully-insured.

## Requirements of Program Participants

### ***As an SFDPH Hepatitis Vaccine Program recipient, you must comply with these requirements:***

1. Your organization must only administer SFDPH-supplied hepatitis vaccine to clients who are low-income, under-insured or uninsured. Preference should be given to patients at high risk for the infection or transmission of hepatitis.

Target Populations for Adult Hepatitis Vaccines		
Hepatitis A	Hepatitis B	Combined Hepatitis A & B
<ul style="list-style-type: none"> <li>▪ Men who have sex with men</li> <li>▪ Persons experiencing homelessness</li> <li>▪ Users of street drugs</li> <li>▪ Persons who are HIV+, HCV+, chronically infected with Hepatitis B, or have chronic liver disease</li> <li>▪ Persons with clotting-factor disorders</li> </ul>	<ul style="list-style-type: none"> <li>▪ Men who have sex with men</li> <li>▪ Users of injection drugs</li> <li>▪ Persons who are HIV+, HCV+ or have chronic liver disease</li> <li>▪ Persons with a recently diagnosed sexually transmitted disease (STD)</li> <li>▪ Persons with more than one sex partner in a 6-month period</li> <li>▪ Hemodialysis patients and patients with renal disease</li> <li>▪ Household contacts and sexual partners of acutely and chronically HBV infected persons</li> <li>▪ Persons with diabetes mellitus who are aged 19-59 years (<math>\geq 60</math> years at discretion of the treating clinician)</li> <li>▪ Persons and their families from areas of high endemicity whose blood screening shows they are susceptible.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Men who have sex with men</li> <li>▪ Users of injectable and/or psychoactive drugs</li> <li>▪ Persons who are HIV+, HCV+ or have chronic liver disease</li> <li>▪ Persons and their families from areas of high endemicity whose blood screening shows they are susceptible.</li> </ul>

2. Do not charge the vaccinee or a third-party insurer any fee for the vaccine itself.
3. Exercise medical judgment in prescribing immunization for each person receiving hepatitis vaccine and screen patients for contraindications before vaccine administration.
4. Provide, in the appropriate language, copies of the Hepatitis Vaccine Information Statement (VIS) to each person receiving hepatitis vaccine. Allow each person receiving vaccine adequate time to read the information and ask questions before vaccination. (Copies of the hepatitis VIS in multiple languages are available online at [www.immunize.org/vis](http://www.immunize.org/vis)).
5. Complete and submit the SFDPH Hepatitis Vaccine Semi-Annual Usage Report in **January** and **July**.
6. Retain a record for each hepatitis immunization given (see below for record keeping information).
7. Develop a workable inventory method to ensure vaccine quality and to distinguish SFDPH-supplied vaccines from other vaccines. Follow proper vaccine storage and handling practices as outlined in the 2018-19 SFDPH Vaccine Management Plan.
8. Make every reasonable effort to conduct both HbsAg and anti-HBs testing prior to vaccination for persons who are from areas where chronic HBV is considered endemic (>8% infection rate) to determine vaccine eligibility. These areas include Asia, Pacific Islands, Middle East, Eastern Europe and Russia, Sub-Sahara Africa, Amazon Basin, Caribbean, and indigenous populations of Alaska and Canada. Please visit [www.sfhepbfree.org](http://www.sfhepbfree.org) for additional information.

## Picking Up Hepatitis Vaccines

Eligible program participants will be instructed on when and where to pick up hepatitis vaccine. Please bring a hard-sided cooler, bubble wrap, and ice packs with you for pick up. Proper handling of vaccine after receipt is essential for

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ensuring that the vaccine remains viable and will protect the clients or patients who receive them. Vaccines must be refrigerated immediately upon receipt.

Vaccine will be distributed to awardees throughout the year, based on the needs of each organization and the availability of vaccine. Organizations should place orders as needed using the Adult Vaccine Request Form and faxing it to (415) 554-2579. Please allow at least one week for orders to be filled.

## Required Record Keeping

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It is imperative that all hepatitis doses be recorded. For each hepatitis immunization given, providers should retain a record that includes:

- Vaccine Manufacturer
- Vaccine Lot number
- Vaccine Expiration date
- Patient's name and age-range
- Date of immunization given

Records should be maintained for a period of at least 3 years. Providers may choose to use the Hepatitis Vaccination Authorization Record form developed by SFDPH. An electronic copy of this form can be found on our website at [www.sfdcp.org/hepiz](http://www.sfdcp.org/hepiz). Providers who prefer the ease of electronic record keeping in the California Immunization Registry (CAIR) should contact the CAIR Help Desk at (800) 578-7889.

## Vaccine Storage & Administration

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Hepatitis vaccines should be refrigerated at 2°- 8° C (36°-46°F) and cannot be frozen. Please refer to the "Checklist for Safe Vaccine Storage and Handling" document for detailed guidance on how to safeguard your vaccine supply. The SFDPH Immunization Program has a limited capacity to loan equipment to programs that don't currently meet storage and handling requirements. Please contact us directly if you have any questions or concerns about your vaccine storage unit or temperature monitoring devices.

For hepatitis vaccines, the intramuscular (IM) route is recommended and it should be administered in the deltoid muscle. A 23-25 gauge needle is appropriate and the usual needle length is 1-1½ inches. Needles < 1 inch are most likely of insufficient length to penetrate muscle tissue.

**If your organization experiences storage and handling issues with any vaccine, place the vaccine in question in a paper bag, mark DO NOT USE, place in the refrigerator and call the SFDPH Immunization Program for further instructions at 554-2955. Do not discard any vaccines without consulting the SFDPH Immunization Program.**

## Returning Hepatitis Vaccines

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Providers are responsible for the Hepatitis vaccine in their possession. Do not return vaccine to the SFDPH office without prior approval. If you have vaccine that has expired or spoiled, call SFDPH Immunization Program for instructions. Do not discard vaccine. If you have vaccine that you will not be able to use before its expiration, please give us at least 3 months notice so that we may properly redistribute it.