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**Sent:** Tuesday, June 18, 2024 4:28 PM

**Subject:** HPV vaccine expansion on July 1, 2024



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This communication is being sent to all key contacts at provider organizations enrolled in the CT Vaccine Program (CVP). Please share it with others in your organizations who may benefit from the update. All our communications are archived on our website [Provider Communications \(ct.gov\)](#).

Dear CVP providers,

As a reminder on July 1, 2024, the CVP will be expanding HPV vaccine to include all 15- and 16-year-old privately insured children. We have received several requests asking about expanding access for privately insured 9 and 10-year-old children. **As of July 1, 2024, the CVP will also be making HPV vaccine available for all children 9 and 10 years of age.**

Please keep in mind that children who initiate the HPV series at age 9 through 14 years only need 2 doses of vaccine, with a 6-month minimum interval separating doses. Children who initiate the HPV series at 15 years of age or older need 3 doses of vaccine. A link to the schedule can be found [here](#).

A revised CVP eligibility criteria form is enclosed for your records.

For the CT DPH Immunization Program, visit: [Contact Us](#)

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**Connecticut Vaccine Program (CVP) Eligibility Criteria as of July 1, 2024**

Vaccine	Age Group	Status of Children VFC and State Supplied Vaccine				CPT Code(s)
		VFC Eligible <sup>1</sup>	Non-VFC Eligible Privately Insured <sup>2</sup>	Non-VFC Eligible Under- Insured <sup>2</sup>	S-CHIP <sup>2</sup>	
Hepatitis B	Newborns in hospital	YES	YES	YES	YES	90744
	Children 0–18 yrs	YES	YES	YES	YES	
Varicella	12 months–18 yrs	YES	YES	YES	YES	90716
Td	7–18 yrs <sup>3</sup>	YES	YES	YES	YES	90714
MMR	12 months–18 yrs	YES	YES	YES	YES	90707
	College (any age)	YES	YES	YES	YES	
MMRV	12 months–12 yrs	YES	YES	YES	YES	90710
DTaP	2 months–6 yrs	YES	YES	YES	YES	90700
Hib	2–59 months	YES	YES	YES	YES	90647, 90648
IPV	2 months–18 yrs	YES	YES	YES	YES	90713
DTaP/IPV	4–6 yrs	YES	YES	YES	YES	90696
DTaP/IPV/Hep B	2–83 months	YES	YES	YES	YES	90723
DTaP/IPV/Hib	2–59 months	YES	YES	YES	YES	90698
DTaP/IPV/Hib/Hep B	2–59 months	YES	YES	YES	YES	90697
MCV high risk	2 months–10 yrs	YES	YES	YES	YES	90619, 90734
MCV routine	11–18 yrs	YES	YES	YES	YES	90619, 90734
Tdap	7–18 yrs	YES	YES	YES	YES	90715
PCV20	2 months–18 yrs	YES	YES	YES	YES	90677
PCV15	2 months–18 yrs	YES	YES	YES	YES	90671
PPSV23	2–18 yrs	YES	YES	YES	YES	90732
Influenza	6 months–18 yrs	YES	YES	YES	YES	90672, 90674, 90686
Hepatitis A	12 months–18 yrs	YES	YES	YES	YES	90633
MenABCWY	10–18 years	YES	YES	YES	YES	90623
Rotavirus	6 weeks–8 months	YES	YES	YES	YES	90680, 90681
HPV	9–18 years	YES	YES	YES	YES	90651
MenB high risk	10–18 yrs	YES	YES	YES	YES	90620, 90621
MenB routine	16–18 yrs	YES	YES	YES	YES	90620, 90621
RSV	Infants < 8 months	YES	YES	YES	YES	90380, 90381
RSV high risk	8–19 months	YES	YES	YES	YES	90380, 90381
COVID-19	6 months–18 yrs	YES	YES	YES	YES	91304, 91318, 91319, 91320, 91321, 91322

- VFC eligibility is as follows: (a) Medicaid enrolled; (b) uninsured; (c) American Indian/Alaskan native; or (d) underinsured seen at an FQHC.
- Non-VFC children refers to patients who have private insurance that covers the cost of immunizations, patients that are under-insured for some or all vaccines seen by a private provider; and S-CHIP children (those children enrolled in HUSKY B).
- Td vaccine may be given to children 7–18 years of age who 1) cannot receive Tdap, or 2) need to complete their primary series.