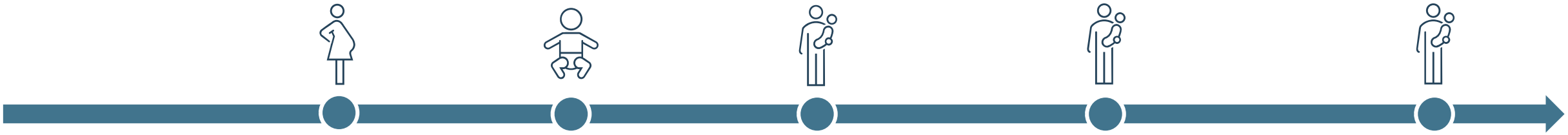
New ACIP Hepatitis B Vaccine Recommendations

Disparate and Disrupted Access Along the Patient Journey



	Prenatal Period	Birth	1 Month Well-Baby Pediatrician Visit	2 Month Well-Baby Pediatrician Visit	6-15 Month Well-Baby Pediatrician Visits
HEP B POSITIVE OR STATUS UNKNOWN MOTHERS*	**HepB testing at first prenatal visit**	**Dose 1**	**Dose 2**		**Dose 3**
HEP B NEGATIVE MOTHERS	**HepB testing at first prenatal visit**	**DOSE 1** **SCDM**	**DOSE 1** **Not recommended:** Babies that did not receive birth dose **DOSE 2** **Unclear** if babies who received birth dose via SCDM may receive second dose before 2 months **SCDM**: Anti-HBs serology testing to evaluate need for and administration of any subsequent doses	**DOSE 1** **SCDM**: Babies that did not receive birth dose may receive initial dose no earlier than 2 months of age **DOSE 2** **SCDM**: Anti-HBs serology testing to evaluate need for and administration of any subsequent doses	**SUBSEQUENT DOSES** **SCDM**: Anti-HBs serology testing to evaluate need for and administration of any subsequent doses **Unclear** when a third dose would be administered

LEGEND

- **Routine recommendation**
- **Shared clinical decision-making: (SCDM)**
- **Not recommended**
- **Unclear**

*Aligns with prior ACIP recommendations for all babies

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Unanswered Questions Following ACIP Vote on HepB Recommendations

Implications for Screening, Coverage and Access

HepB Serology Testing

- Prenatal testing is recommended by United States Preventive Services Task Force, therefore covered by insurance
- In practice, prenatal testing is inconsistent
- Recommendations related to serology testing is outside the remit of ACIP
- Serology testing after initial dose introduces logistical burden from the accessibility of the test in pediatrician offices, delays in turnaround time from processing the test

Insurance Coverage

- Insurance plans may or may not cover vaccines, serology tests with shared clinical decision-making (SCDM)
- SCDM-recommended vaccines should be covered as a part of the labor and delivery bundled payment; in practice, it is unclear if and possibly unlikely that this will happen universally
- Anti-HBs titer testing is an ancillary service, coverage may vary
- If families decline the birth dose and begin the series at 2 months, it is unclear how payers will treat the first dose

Access and Implementation

- States and providers may encounter Vaccines for Children challenges
- SCDM conversations at/around birth are infeasible, especially challenging for vulnerable populations with health disparities or those lacking health literacy
- Revised recommendation assumes only maternal birth transmission risk while downplaying potential transmission from other sources
- Multiple options for initial and subsequent doses complicates vaccine data tracking
- Serology testing and Hep B birth dose delay could delay series initiation for combination vaccines, including for diseases such as DTaP, IPV, and Hib

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