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August 1, 2014

Dear Medical Director:

The American Academy of Pediatrics (AAP), dedicated to the health of infants, children and adolescents, recently released updated guidance for the use of Palivizumab for respiratory syncytial virus (RSV). I am pleased to share with you a copy of this AAP policy statement published in the August 2014 Pediatrics, "[Updated Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection](#)," and an accompanying [technical report](#). The updated recommendation targets the infants most likely to benefit from Palivizumab prophylaxis based on a comprehensive review of the literature, which is included in the technical report.

For all infants, particularly those born at preterm, the AAP emphasizes it is important to minimize the risk of infection with RSV and other viruses by offering breast milk, immunizing members of the household against influenza, practicing good hand and cough hygiene, avoiding smoke exposure, limiting attendance in large group child care during the first winter season whenever possible, and avoiding contact with anyone who is ill. In that regard payers are urged to provide benefits coverage and adequate payment for the following services provided by pediatricians:

- Breast feeding counseling, equipment and supplies
- Vaccines and immunization administration, including recommended prophylaxis such as Palivizumab
- Smoking cessation counseling and treatment

On behalf of our nation's children and the over 62,000 members of the AAP, health plans and employers are encouraged to provide benefits coverage for recommended pediatric services. If you need any additional information on this policy, please contact Jennifer Frantz, AAP Manager Committees and Sections at jfrantz@aap.org or 800/433-9016 ext 7939.

Sincerely,

/S/

James M. Perrin, MD, FAAP
President

JMP/lt

cc: Jennifer Frantz

Enclosures: Update Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection
Technical Report

