HPV vaccination is recommended for routine vaccination at age 11 or 12 years and may be started at age 9. Adults age 27 to 45 should talk to their doctors to see if HPV vaccination is recommended for them.

State Profile: California

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HPV VACCINATION RATES FOR 13–17 YEAR-OLDS AS OF 2022:

- U.S. OVERALL ≥1 HPV: 76%
- CALIFORNIA ≥1 HPV: 72%
- U.S. OVERALL HPV UTD: 63%
- CALIFORNIA HPV UTD: 61%

California has decreased HPV vaccination coverage of ≥1 dose by 0.4% and increased up-to-date (UTD) by 12% since 2016. However, coverage remains lower than the U.S. average and below the Healthy People 2030 goal of 80% UTD. Compared to meningitis and whooping cough (Tdap) vaccines routinely recommended for adolescents, HPV vaccination coverage lags. California vaccination rates among 13–17 year olds were 82% for meningitis vaccine and 83% for Tdap vaccine in 2022.

HPV vaccination data sources: CDC NIS-TEEN, 2022; TeenVax View, 2022
HPV VACCINATION RATES FOR 13–17 YEAR-OLDS AS OF 2022:

State Profile: California

HPV vaccination data sources: CDC NIS-TEEN, 2022; TeenVax View, 2022
HPV CANCERS:
HPV is a common virus linked to six types of cancer. The two most common HPV-associated cancers are oropharyngeal and cervical cancers. **Incidence rates of HPV cancers overall and for oropharyngeal and cervical cancers are lower in California compared to the U.S. averages.**

<table>
<thead>
<tr>
<th></th>
<th>All HPV Cancers</th>
<th>Oropharyngeal Cancer</th>
<th>Cervical Cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States Overall</td>
<td>11.8</td>
<td>5.0</td>
<td>6.5</td>
</tr>
<tr>
<td>California Overall</td>
<td>10.1</td>
<td>4.0</td>
<td>6.3</td>
</tr>
<tr>
<td>United States</td>
<td>Male: 10.8, Female: 12.9</td>
<td>Male: 8.8, Female: 1.6</td>
<td>California ranks in the Top 25 Nationally in cervical cancer incidence rates.</td>
</tr>
<tr>
<td>California</td>
<td>Male: 9.0, Female: 11.2</td>
<td>Male: 7.0, Female: 1.2</td>
<td></td>
</tr>
</tbody>
</table>

Incidence rates shown are cases per 100,000 persons.

**ACTION STEPS:**
Identify and engage key partners in HPV vaccination to develop, implement, and evaluate priority evidence-based interventions to increase HPV vaccination coverage in clinical, community and policy settings in California:

- Encourage starting HPV vaccination at age 9 to increase series completion by age 13.
- Increase the number of clinicians strongly recommending HPV vaccination at the same time they administer meningitis and whooping cough vaccinations.
- Incorporate evidence-based strategies to improve HPV vaccination in clinics serving adolescents, including issuing standing orders, electronic health record (EHR) prompts for providers, scheduling the next appointment the same day as the first dose is given, offering vaccine-only appointments.
- Partner with Medi-Cal Managed Care and commercial health plans to use available data to identify providers with low HPV vaccine coverage and provide support and assistance to them.
- Support improved access to HPV vaccination through school-based clinics, pharmacies, local health departments, and other vaccination clinics (e.g., vaccine only appointments).

