September 8, 2016

TO: Vaccines for Children (VFC) Providers

FROM: Sarah Royce, M.D., M.P.H., Chief Center for Infectious Diseases Division of Communicable Disease Control, Immunization Branch

SUBJECT: VFC 2016-17 Seasonal Influenza Vaccine Information

SUMMARY


Routine annual influenza immunization with inactivated influenza vaccine (IIV) or recombinant influenza vaccine (RIV) continues to be recommended for all persons 6 months and older who do not have contraindications. Influenza causes significant illness, medical visits, hospitalizations, and death each year. Influenza vaccines continue to be the best way to prevent influenza.

The ACIP voted at its June 22, 2016 meeting that live attenuated influenza vaccine (LAIV), also known as the “nasal spray” flu vaccine or Flumist®, should not be used during the 2016-2017 influenza season. The ACIP vote follows data showing low effectiveness of LAIV against influenza A(H1N1)pdm09 in the United States during the 2013-14 and 2015-16 influenza seasons.
seasons, as summarized at http://www.cdc.gov/media/releases/2016/s0622-laiv-flu.html and in the 2016-17 recommendations.

In response to this interim recommendation, LAIV will not be available from the VFC Program for the 2016-17 influenza season. The VFC Program has replaced doses of LAIV with single-dose syringe doses of several different influenza vaccine formulations: Fluzone®, Fluarix®, and Flucelvax®.

Optimally, influenza vaccination should occur before onset of influenza activity in the community. Health care providers should begin offering vaccination as soon as vaccine is available, and for as long as influenza viruses are circulating and unexpired vaccine is available.

Children younger than 9 years of age who have not been previously immunized with at least two doses of influenza vaccine before July 1, 2016, need two doses of influenza vaccine this season for optimal protection. All children aged 6 months through 8 years who are recommended for two doses should receive their first dose as soon as possible after vaccine becomes available; these children should receive the second dose 4 weeks or more after the first dose.

Recommendations for influenza vaccine for persons with egg allergy have been modified. Please review the appropriate section in this letter and the ACIP recommendations for full details.

We encourage your practice to implement strategies to achieve high influenza vaccination coverage rates of your patients and decrease missed opportunities for vaccination. This may include plans to remind patients to come in for their annual influenza vaccination and mechanisms to track patients who will be due for a second dose.

**ELIGIBILITY FOR VFC-SUPPLIED SEASONAL INFLUENZA VACCINE**

VFC-supplied seasonal influenza vaccine can only be administered to VFC-eligible children. All VFC-eligible children aged 6 months through 18 years of age in your practice should be vaccinated according to ACIP recommendations.

As with all other VFC-supplied vaccines, influenza vaccine doses:
- Can only be used for VFC-eligible children.
- CANNOT be used for privately insured children or adult patients 19 year of age and older under any circumstance; this may constitute fraud or abuse of VFC-supplied vaccines.
- Doses may be administered to under-insured children ONLY at a Federally Qualified Health Center or Rural Health Center.

**VACCINE ABBREVIATIONS**

- IIV4 = Inactivated influenza vaccine, quadrivalent.
- ccIIV4=Cell-culture based, inactivated influenza vaccine, quadrivalent.
- LAIV=live, attenuated influenza vaccine.

**2016-17 INFLUENZA VACCINE COMPOSITION AND FORMULATIONS**

For the 2016-17 influenza season, the California VFC Program is offering only quadrivalent influenza vaccines representing the following strains:
- A/California/7/2009 (H1N1) pdm09-like.
- A/Hong Kong/4801/2014 (H3N2)-like*.
- B/Brisbane/60/2008-like (B/Victoria lineage).
- B/Phuket/3073/2013-like (B/Yamagata lineage) – [Not in trivalent influenza vaccines].

*change in strain from the 2015-16 formulation.

There are two new formulations available through the California VFC Program for 2016-17 influenza season:
- Fluzone® (Sanofi Pasteur), Quadrivalent, inactivated [IIV4], 0.5 mL single-dose pre-filled syringes.
- Flucelvax® Quadrivalent (Sequiris), Quadrivalent, cell-culture derived, inactivated [ccIIV4], 0.5 mL single-dose pre-filled syringes. This vaccine was licensed in May 2016 for persons ages 4 years and older. Flucelvax® Quadrivalent contains no preservatives or antibiotics. The tip caps and plungers of the pre-filled syringes are NOT made with natural rubber latex.

VFC Program options for the 2016-2017 influenza season include:

<table>
<thead>
<tr>
<th>Ages</th>
<th>Product</th>
<th>Special Use VFC Program Instructions</th>
<th>Administration</th>
<th>CPT Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>VFC-eligible children ages 6 - 35 months</td>
<td>Fluzone® PF Pediatric (Sanofi Pasteur), Quadrivalent- inactivated [IIV4], 0.25mL pre-filled syringes.</td>
<td>No preservative.</td>
<td>IM injection</td>
<td>90685</td>
</tr>
<tr>
<td>VFC-eligible children and adolescents through 18 years</td>
<td>Fluzone® (Sanofi Pasteur), Quadrivalent, inactivated [IIV4], Multi-dose vial.</td>
<td>Preservative-containing. <strong>DO NOT USE</strong> in children under 3 years of age or pregnant adolescents.</td>
<td>IM injection</td>
<td>90688</td>
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<tr>
<td></td>
<td>Fluzone® (Sanofi Pasteur), Quadrivalent, inactivated [IIV4], 0.5 mL single-dose pre-filled syringes.</td>
<td>No preservative. Use for children and youth ages 3 through 18 years (including pregnant teens).</td>
<td>IM injection</td>
<td>90686</td>
</tr>
<tr>
<td></td>
<td>Fluarix® (GlaxoSmithKline), Quadrivalent, inactivated [IIV4], 0.5 mL single-dose pre-filled syringes.</td>
<td>No preservative. Use for children and youth ages 3 through 18 years (including pregnant teens).</td>
<td>IM injection</td>
<td>90686</td>
</tr>
<tr>
<td></td>
<td>Flucelvax® (Sequiris), Quadrivalent, cell-culture derived, inactivated [ccIIV4], 0.5 mL single-dose pre-filled syringes.</td>
<td>Use for children and youth ages 4 through 18 years (including pregnant teens).</td>
<td>IM injection</td>
<td>90674</td>
</tr>
</tbody>
</table>

More information on VFC influenza vaccines offered for 2016-17 is available in the FDA information and ACIP recommendations.

**According to California law**, pregnant women or children younger than 3 years old may only receive vaccine doses that contain no more than trace levels of mercury [Health and Safety (H&S) Code Section 124172, Chapter 837, Statutes of 2004 (AB 2943, Pavley)]. **All multi-dose vials of influenza vaccine currently exceed the legal limit of mercury content and should not be used in these groups.** Preservative-free influenza vaccine formulations should be used for administration to VFC-eligible children younger than 3 years of age and pregnant teens younger than 19 years of age.
DOSAGE AND ADMINISTRATION

Inactivated Seasonal Influenza Vaccine

Children aged 6 months through 18 years:
- For children 6 through 35 months of age, one dose is 0.25 mL.
- For children and youth 36 months of age and older, one dose is 0.50 mL.

The vaccine syringe or vial should be shaken well before administration. Vaccine should be inspected visually for particulate matter and discoloration prior to administration. If either of these conditions exists, the vaccine should not be administered.

Inactivated influenza vaccine should be administered intramuscularly in the anterolateral aspect of the thigh for infants and young children. Older children and adults should be vaccinated in the deltoid muscle.

Vaccine Type

If more than one type of vaccine is appropriate and available for a specific person, ACIP does not express a preference for use of any particular vaccine product over another. An age-appropriate vaccine formulation should be used. ACIP did not recommend use of the LAIV for the 2016-17 influenza season. Providers should not delay vaccination to procure a specific vaccine preparation.

Number of doses of 2016-17 seasonal influenza vaccine recommended

Children 9 years and older: One dose.
Children 6 months through 8 years of age:

- Has the child received ≥2 total doses of trivalent or quadrivalent influenza vaccine before July 1, 2016? (Doses need not have been received during the same season or consecutive seasons.)
  - Yes: 1 dose of 2016–17 influenza vaccine
  - No or don’t know: 2 doses of 2016–17 influenza vaccine (administered ≥4 weeks apart)
Current ACIP Recommendations for Persons with Egg Allergy

- Providers should consider observing all patients for 15 minutes after vaccination to decrease the risk for injury if syncope occurs, per the ACIP General Recommendations on Immunization. (In prior years, egg-allergic recipients were recommended to be observed for possible allergic reactions for 30 minutes postvaccination; this has been revised.)

- Persons with a history of severe allergic reaction to egg (i.e., any symptom other than hives) should be vaccinated with any licensed and recommended influenza vaccine (for the patient’s age and health status) in an inpatient or outpatient medical setting (including but not necessarily limited to hospitals, clinics, health departments, and physician offices), under the supervision of a health care provider who is able to recognize and manage severe allergic conditions.

- Persons with a history of egg allergy who have experienced only hives after egg exposure should continue to receive influenza vaccine (i.e., any age-appropriate IIV or RIV3) that is otherwise appropriate for the recipient’s age and health status.

- A previous severe allergic reaction to influenza vaccine, regardless of the component, continues to be a contraindication to future receipt of the vaccine.

For more details, please see ACIP’s 2016-2017 Prevention and Control of Seasonal Influenza with Vaccines.

Reporting of Suspected Vaccine Reactions or Errors

Providers should report suspected reactions to influenza vaccines or any other vaccine to the Vaccine Adverse Events Reporting System (VAERS) at 800-822-7967 (toll-free) or http://vaers.hhs.gov.

Providers should report any vaccine administration error and associated contributing factors to the National Vaccine Errors Reporting Program (VERP) at http://verp.ismp.org/. Examples of potential errors include a 0.5 mL influenza vaccine pre-filled syringe dose administered to a 1 year old or a vaccine licensed only for adults 65 years and older administered to an 8 year old. As a part of the report, providers can make recommendations for error prevention. This surveillance program aims to prevent future errors by identifying trends, creating targeted education efforts, and making changes to product labeling and design.

VACCINE INFORMATION STATEMENTS (VISs)

The inactivated influenza Vaccine Information Statement must be provided to a parent or guardian before the child receives each dose of influenza vaccine. Each time a VIS is provided the following information must be included in each patient’s permanent medical record:

1. Edition date of the current Vaccine Information Statement that was provided.
2. Date that the VIS was provided.

Copies of the latest influenza VISs are attached. There has been no change in the VIS since last season. The current inactivated influenza vaccine VIS version date is 8/7/15.
VACCINE MANAGEMENT AND TRAINING

Vaccine Storage
Influenza vaccines must be stored at a temperature range of 35°F to 46°F (2°C to 8°C). Do not freeze or expose vaccines to out-of-range temperatures. Vaccine doses deemed spoiled due to exposure to out-of-range temperatures may not be readily replaced.

Prior to the receipt of vaccines:

- Review your clinic’s temperature logs to ensure your vaccine refrigerator is maintaining adequate temperatures. Any inactivated influenza products that are exposed to freezing temperatures cannot be used.
- Prepare room in your vaccine storage unit to receive initial vaccine shipments. Pre-designate areas and label them appropriately in order to be ready to receive and readily store doses.
- Ensure all unused and expired influenza products from the previous season have been removed from the refrigerator and returned to VFC’s national vaccine distributor.

Vaccine Shipments
All vaccine shipments must be inspected, verified, and stored in the appropriate refrigerator unit immediately upon receipt.

Proper receipt of shipment includes the following steps:

- Check the temperature monitors included in your shipment. If the monitors indicate the vaccine has been exposed to out-of-range temperatures during transit:
  - Contact the VFC Program immediately.
  - Instruct clinic staff to label the vaccines “Do not use”.
  - Refrigerate the vaccines until you have received further instructions from the VFC Program.
- Verify that the number and type of vaccine doses received matches the information both in your shipment’s packing slip and in the e-mailed order confirmation. Contact the VFC Program immediately to report any discrepancy in your order.
- Label vaccine doses as VFC, and place vaccines in the pre-designated VFC Vaccine Supply area of your refrigerator.
- Keep vaccines in their original packaging until they are ready to be administered. (DO NOT take vaccine vials or syringes out of their packaging).

Staff Training
Prior to beginning the administration of this season’s influenza vaccines at your practice, providers should review the following areas with all staff administering and managing influenza vaccines:

- Review all (VFC, non-VFC) influenza vaccine products that you will be administering in your facility this year, including their dosages, age indications, and administration techniques. Use the “Influenza Vaccine Identification Chart” to help you identify all available influenza vaccines, including formulations that are not provided by the VFC Program.
- Review VFC eligibility, documentation, and tracking guidelines.
• Implement a yearly competency review of all staff administering any vaccine formulation, including influenza, as well as staff who have temperature monitoring responsibilities.

VACCINE ORDERING INSTRUCTIONS AND ACCOUNTABILITY

Ordering Instructions
VFC’s Online Order Confirmation System was open for the submission of requests for 2016-2017 seasonal influenza vaccine from August 2 through August 12, 2016. All confirmed orders were reviewed and approved. Notification of final vaccine allocations have been sent electronically to the clinic’s Provider of Record.

Order Fulfillment
All confirmed orders will remain in queue until doses become available. Be prepared to receive multiple vaccine shipments during the initial part of the influenza season. Vaccine supply arrives at McKesson in multiple shipments. Similarly, all provider orders are also shipped in multiple increments as different products become available.

Shipments for the remaining order balances for partial shipments are automatically processed and shipped as additional vaccine doses become available.

Supplemental Influenza Vaccine Orders
Providers who did not confirm orders by the August 12th deadline or who wish to order additional doses may submit a supplemental vaccine request. Supplemental ordering information will be sent to providers in mid to late fall, once the online site is ready to receive provider orders.

Vaccine Accountability
Review vaccine eligibility and tracking procedures with all staff that will be managing and administering vaccines. All VFC-administered doses must be logged in either the VFC Program’s 2016-2017 Flu Usage Log, in an Immunization Information System, or your clinic’s own system. Your clinic is required to accurately account for all doses of influenza vaccines received through the VFC Program. Providers will be required to report the total number of vaccine doses administered at the end of the influenza season. VFC’s 2016-2017 Flu Usage Log is enclosed.

RETURN OF UNUSED INFLUENZA VACCINE AT THE CONCLUSION OF THE SEASON

VFC Providers must return all expired, unused or spoiled seasonal influenza vaccine doses received from VFC to the program during the 2016-2017 influenza season. VFC Returns must be submitted through MYVFCVaccines prior to sending vaccines to our national vaccine distributor McKesson Specialty.

PROMOTING INFLUENZA VACCINATION IN YOUR OFFICE

A number of influenza promotion materials are available for you, your staff, and your patients. We encourage you to post them around your office. To see what’s available this year, visit the flu resources page on EZIZ.org: http://eziz.org/resources/flu-promo-materials/.
BILLING NOTES

Child Health and Disability Prevention Program (CHDP)

For inactivated, injectable influenza vaccine (IIV4) provided by the VFC Program and administered to a Fee For Service (FFS) CHDP patient, please refer to relevant CHDP Provider Information Notices on influenza vaccines and any relevant Medi-Cal Bulletin Newsflashes.

In addition, CHDP providers with additional questions are advised to contact their County CHDP Program at http://www.dhcs.ca.gov/services/chdp/Pages/CountyOffices.aspx

Medi-Cal FFS

To bill Medi-Cal for administration of VFC-supplied influenza vaccines, use the appropriate CPT-4 code followed by the “-SL” modifier. Providers will only be reimbursed for the administration fee when using VFC vaccines.

For specific information and details on Medi-Cal billing, please refer to the Medi-Cal provider manual on VFC. Providers with questions on Medi-Cal billing policies and procedures and Provider manual information may call the Telephone Service Center (TSC) at 1-800-541-5555.

Medi-Cal Managed Care

Please contact the specific Medi-Cal managed care health plan for information on immunization billing and reimbursement.

CPT Codes (Quadrivalent VFC Influenza Vaccine)

<table>
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<th>Presentation</th>
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<tr>
<td>Fluzone® Quadrivalent</td>
<td>0.25 mL (single-dose syringe)</td>
<td>6 through 35 months</td>
<td>90685</td>
</tr>
<tr>
<td>Fluzone® Quadrivalent</td>
<td>5.0 mL (multi-dose vial)</td>
<td>3 years and older</td>
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A complete list influenza vaccine products and CPT codes may be found at http://www2a.cdc.gov/vaccines/IIS/IISStandards/vaccines.asp?rpt= cpt. The Immunization Action Coalition’s resource on influenza vaccines for the 2016-17 influenza season is posted at: http://www.immunize.org/catg.d/p4072.pdf.

QUESTIONS?

If you have any questions, please call your VFC Field Representative, the VFC Program at 877-243-8832 (877-2GET-VFC), or visit www.eziz.org.
Resources
AAP Influenza Resources and Recommendations
ACIP 2016-17 Recommendations: Prevention and Control of Seasonal Influenza with Vaccines
Influenza Vaccine Information Statement:

Enclosures
Influenza Vaccine Identification Guide (IMM-859, 8/16)
Flu Usage Log (IMM-1053F, 7/16)
Inactivated Influenza Vaccine VIS (8/7/15)