California Department of Public Health Immunization Updates for Providers

Friday, October 20, 2023

9:00AM - 10:30AM





Housekeeping

Reminder to Panelists:



Please mute yourself when not speaking.

Please monitor the Q&A panel for questions you may be able to answer.

Reminder to Attendees:

Today's session is being recorded. For slides, webinar recordings, and other postings, see the CDPH Weekly Immunization Updates for Providers



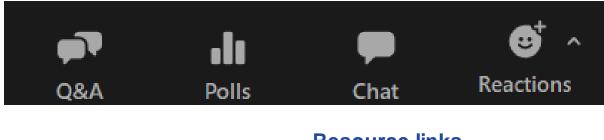
To be added to the CDPH email messaging listserv for providers, please email your request to billiedawn.greenblatt@cdph.ca.gov

If you have post-webinar-related questions, please email leslie.amani@cdph.ca.gov





During today's session, please use the Q&A panel to ask your questions so CDPH subject matter experts can respond directly.



Resource links will be dropped into, "Chat"





Agenda: Friday, October 20, 2023

No.	Item	Speaker	Time (AM)
1	Welcome and Announcements	Leslie Amani (CDPH)	9:00 – 9:05
2	Vaccine Administration Data	Josh Quint (CDPH)	9:05 – 9:10
3	Respiratory Syncytial Virus (RSV) Ordering, 317 Order Update, and VFC Flu	Claudia Aguiluz (CDPH)	9:10-9:20
4	Pharmacy	Edward Salaguinto, PharmD, RPh (CDPH)	9:20 - 9:25
5	COVID-19 Vaccine Access	Claudia Aguiluz (CDPH)	9:25 – 9:35
6	Vaccine Management	Josh Pocus (My Turn) and Maria Volk (myCAvax)	9:35 – 9:45
7	Resources	Leslie Amani (CDPH)	9:45 – 9:50
8	Q&A	CDPH Subject Matter Experts	9:50 - 10:30

Thank you, California Providers!



Announcements

Leslie Amani, CDPH



State General Fund Flu Vaccine Management 102

When: Monday, October 23, 2023

Time: 12PM – 1PM, PT

Audience: Providers and LHDs

Register <u>here</u>



Are you a provider participating in the SGF program in myCAvax? You are invited to join CDPH for a one-hour 'State General Fund (SGF) Flu Vaccine Management 102 for Providers' session, which is a follow-up to the 'SGF Ordering 101 for Providers' session. This webinar will be focused on vaccine management tasks like reporting waste, excursions, and shipment incidents in myCAvax. There will be an opportunity for Q&A with CDPH.



Bridge Access Program myCAvax Office Hours

When: Thursday, October 26, 2023

Time: 11AM – 11:30AM

Audience: Providers and LHDs

Register <u>here</u>



If you a provider or LHD participating in the Bridge Access Program (BAP) in myCAvax, you are invited to join CDPH for a 30-minute session on Thursday, October 26, 2023, from 11:00 AM – 11:30 AM, PT. After hearing brief BAP updates from CDPH, you will have an opportunity to engage directly with subject matter experts to get your questions answered around BAP allocations, ordering, and vaccine management.





When: Thursday, October 26, 2023 Time: 12PM – 1PM, PDT Register <u>here</u>

Learning Objectives

- Identify the clinical and epidemiological factors leading to mpox infection, transmission, and severity as well as treatment options.
- Apply the latest information and research on mpox, including transmission characteristics, vaccine equity, and vaccine effectiveness, to your clinical practice to ensure patients are appropriately vaccinated, diagnosed, tested, and treated for mpox.

CA MPOX Provider & LHJ Alerts

October 3, 2023

California Mpox Update for Healthcare Providers -October 2023

The California Department of Public Health (CDPH) continues to see statewide Mpox activity, including a large cluster in Los Angeles County. This webinar, presented by the California Prevention Training Center (CAPTC), features CDPH's Mpox Clinical and Epidemiology teams, who will provide a clinical update and epidemiological overview of Mpox, and discuss new research findings relevant to primary care and other healthcare providers, including data on transmission, vaccine equity, and vaccine effectiveness. A question-and-answer session will follow. 1.5 CME units will be offered at no cost (details below).

California Mpox Update for Healthcare Providers

Thursday, October 26, 2023 12:00 - 1:30 PM (PDT) REGISTER TODAY!





CDC Storage and Beyond-Use Date Tracking Labels

Apply storage and beyond-use-date tracking labels to reduce administration errors!

- Use storage labels to help staff easily identify the correct product based on recipient's age
- Use BUD tracking labels to identify beyond-use-date limits to prevent administration of expired vaccine
- See <u>Pfizer</u> and <u>Moderna Storage and BUD Labels</u> (Novavax coming soon!)

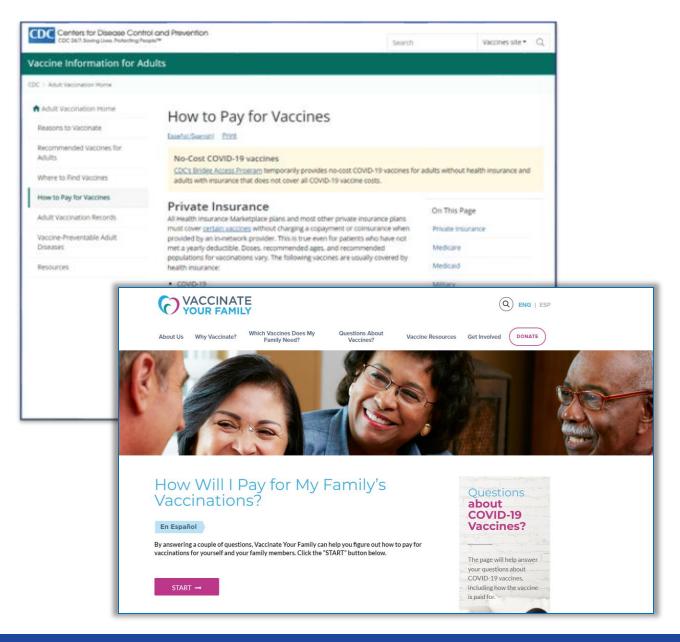
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How to Pay for Vaccines

New CDC resource covers:

- Private Insurance
- Medicare
- Medicaid
- Military
- No Insurance (for adults and children)





COVID-19 Vaccine Resources

How to Pay for Vaccines (CDC)

How Will I Pay for My Family's Vaccinations? - Vaccinate Your Family

Vaccine Administration Data Josh Quint, CDPH



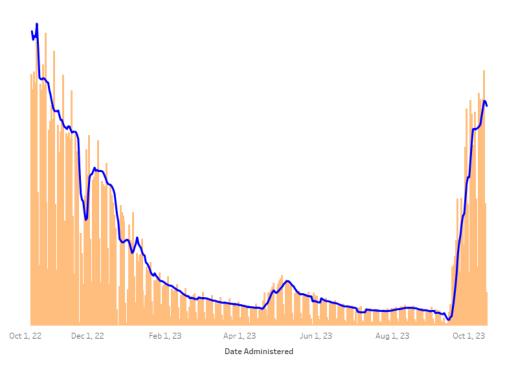
Vaccine Administration Summary

as of October 16, 2023

91,435,453 Total Doses Administered:

Daily Doses Administered: Statewide

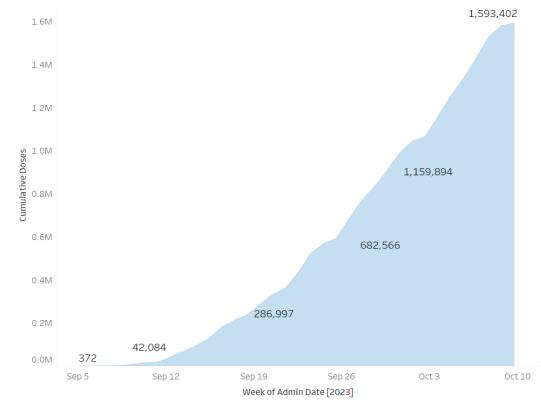
Public Dashboard Link



1,593,402

Total Updated 2023-2024 Doses Reported

Cumulative Total of Updated 2023-2024 Doses Reported



Trends in Vaccine Administration

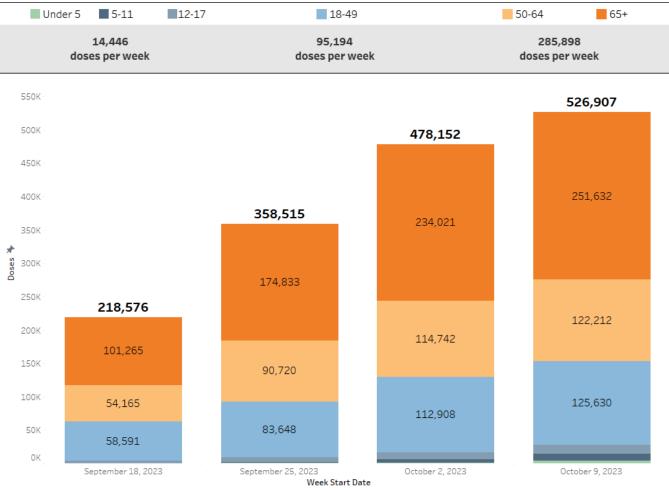
as of October 16, 2023

Most Recent Eligibility Groups

 Updated 2023-2024 vaccine for 6 months and older



Doses Administered by Age Group, Past 4 Weeks





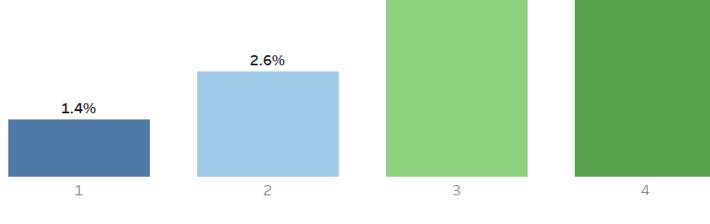
Updated 2023-2024 Doses by HPI

as of October 16, 2023

By HPI

Highest uptake in Healthy Places Index Q4

Percent uptake of the Updated 2023-2024 Dose in Healthy Places Index Q4 is <u>5.5 times</u> greater than in Healthy Places Index Q1



4.5%

Community Conditions

←Less Healthy More Healthy→



7.7%

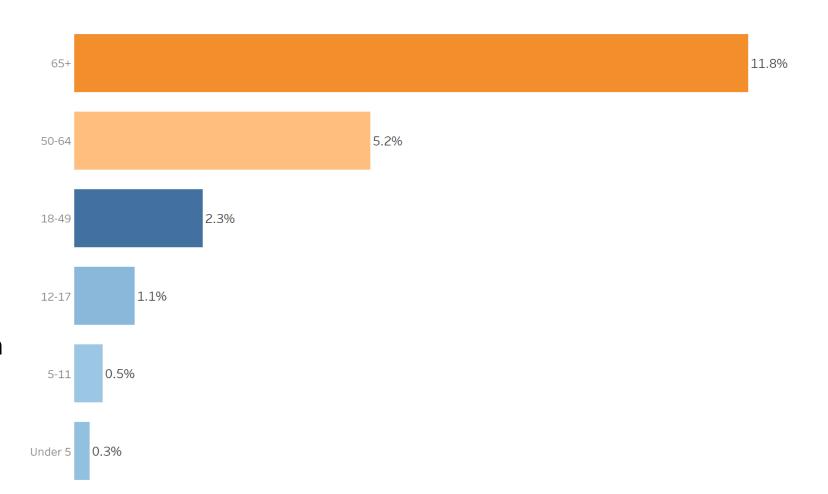
Updated 2023-2024 Doses by HPI

as of October 16, 2023

By Age

Highest uptake in 50-64 and 65+

Percent uptake of the Updated 2023-2024 Dose 65+ (11.8%) is <u>2.2 times</u> greater than 50-64 (5.2%) and <u>10+ times</u> greater than all other age groups (0.3-1.1%)





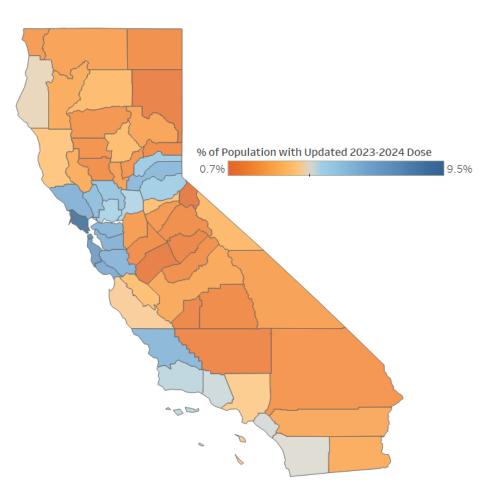
Updated 2023-2024 Doses by County

as of October 16, 2023

Geography: % of Population Received Updated 2023-2024 Dose by County

By geography

Uptake varies geographically Ranges from **0.7%-9.5%** of county population

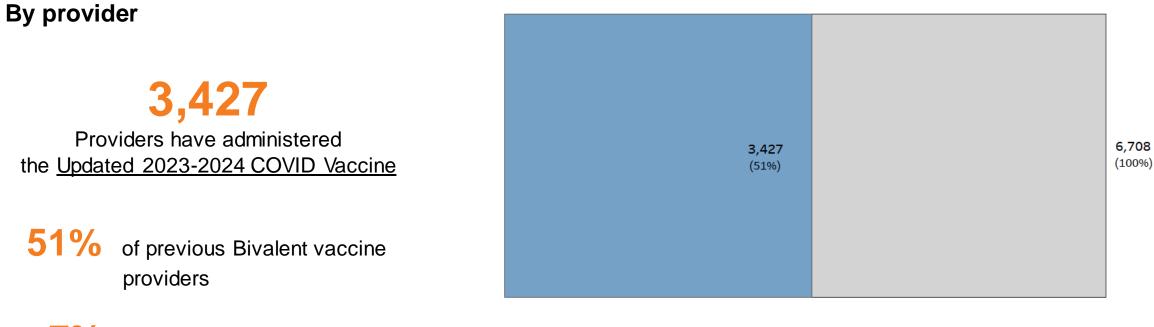




Updated 2023-2024 Doses by Provider

as of October 16, 2023

Number of Updated 2023-2024 Dose Providers vs Bivalent Dose Providers



+7% pt increase from last week





as of October 16, 2023

Key Metrics

91.4 million doses administered4.0% Statewide with Updated vaccine1.4% HPI Q1 with Updated vaccine

+527K doses administered last week
1.6 million Updated vaccine recipients
134K HPI Q1 Updated vaccine recipients

System Notes

- Public dashboard Up-to-Date status will include the Updated 2023-2024 guidelines beginning Friday, October 20, 2023
 - o Public dashboard updated monthly
- Email <u>cdphvaccinedatateam@cdph.ca.gov</u> for questions and comments



Respiratory Syncytial Virus (RSV) Ordering 317 Order Update and VFC Flu

Claudia Aguiluz, CDPH



Vaccines for Adults (VFA) Ordering is Open!

- October 16 27: VFA Providers can now place quarterly vaccine orders!
- Due to our limited 317 budget, vaccine dose requests for the HPV, PCV, and Zoster vaccines will be reduced to 40% of your April 2022 (pre-cap) quarterly order. Order caps for all other vaccines have increased.
- If you would like to request doses beyond the caps, please include on the order form comment section the vaccine(s), amount and reason. These special requests will be reviewed and approved on a case-by-case basis.
- Vaccine requests should be based on the needs of your eligible uninsured/underinsured adult patient population.



Pediatric RSV in VFC!

- Beyfortus[™] became available for ordering through the Vaccines for Children (VFC) Program on October 11, 2023.
- On Friday October 13, 2023, CDC announced a temporary stop in Nirsevimab ordering for ALL states in light of high demand and limited supply.
- Limited VFC ordering is expected to resume by the end of this week, <u>with</u> <u>vaccine allocations</u> in place for each state to ensure equitable availability across the US for VFC supply.
- The % of doses allocated to each state will be in accordance with VFC vaccine ordering history for vaccines used in a comparable cohort and available vaccine supply.



Beyfortus[™] Vaccine Supply & Ordering Update-VFC

Impact on CA VFC Nirsevimab ordering as a result of the pause in ordering, limited vaccine supply and expected allocations:

- Ordering for Nirsevimab is currently unavailable in myVFCVaccines. Providers were notified on 10/16/2023.
- Ordering will resume as soon as CDC allows ordering, allocations are in place, and supply can support ordering.
- Vaccine requests will be reviewed and approved based on the state's allocated supply, and the provider's reported VFC patient population; orders may be reduced based on available allocated supply.
- Given that VFC vaccine supply will be allocated, doses of Nirsevimab (Beyfortus™) must be administered to VFC eligible patients only. Borrowing is <u>not</u> allowed.



Beyfortus[™] Vaccine Supply & Ordering Update-VFC (cont.)

Already approved orders:

- Most VFC approved orders placed from <u>October 11 to October 12, 2023</u>, and sent to McKesson for fulfillment were placed in a backorder. Orders with be partially filled as supply becomes available.
 - Requests for the 50mg (0.5 ml) formulation have begun to ship this week
 - Request for the 100mg (1.0 mL) formulation will be fulfilled upon supply availability
- Orders placed Friday October 13 through Monday October 16, 2023, after CDC's pause on Nirsevimab ordering, will be partially filled only for the 50mg (0.5 ml) formulation. If the order included requests for the 100mg (1.0 mL) formulation, these will be cancelled.



Beyfortus [™] Vaccine Supply Update

- State Allocations:
 - CDPH has received a limited allocation of Beyfortus[™] 50mg ٠ (0.5 ml) formulation, expected to support ordering for the next 2-3 weeks. Doses will be made available primarily to birthing hospitals.
 - -0- doses for the 100mg (1.0 mL) formulation have been • allocated, as supply is not available.
- A program communication regarding current ٠ supply limitations, clinical guidance, and ordering instructions will be shared with VFC providers shortly.

weight, and health condition. View CDC's RSV page for web version and additional guidance. All Infants <8 Months Entering 1st RSV Season without prenatal vaccination during 32-36 weeks gestational age* Weight < 5kg Weight ≥5kg If born October-March 1 dose in <1 week of birth Nirsevimab Nirsevimab OR 50mg 100mg If born April-September 1 dose in October/Novembe or as soon as possible during the RSV season High-Risk Children 8-19 Months Entering 2nd RSV Season Nirsevimab* Nirsevimab** 200mg dose 100mg 100mg before RSV season (Two 100mg syringes, same day, different sites, or as soon as possible during regardless of weight) the RSV season High-risk conditions include: Chronic lung disease of prematurity that required medical support (chronic corticosteroid) therapy, diuretic therapy, or supplemental oxygen) any time during the 6-month period before the start of the RSV season Cystic fibrosis with either: 1. Manifestations of severe lung disease (previous hospitalization for pulmonary exacerbation in the 1st year if life or abnormalities on chest imaging that persist when stable OR 2. Weight-for-length <10th percentile Severe immunocompromis CDPF American Indian or Alaskan Native children * In limited situations, an infant may be recommended to receive RSV immunization after prenatal vaccination ** If nirsevimab is unavailable and the child is eligible to receive palivizumab, then palivizumab should be administered. If < 5 doses of palivizumab are administered and nirsevimab becomes available, the child should receive 1 dose of nirsevimab California Department of Public Health, Immunization Branch EZIZ.org IMM-1480 (10/2/23)



Nirsevimab (Beyfortus) Guide to Prevent Severe RSV in Infants and Toddlers

Nirsevimab should be given before the start of RSV season (usually October-March). The dosage depends on age,

Nirsevimab, Hospitals, and Vaccines for Children

- This fall, birthing institutions can play a critical role in increasing equitable access to birth dose immunizations, including RSV protection prior to discharge
 - o Number of births January- August 2023: 263,908 births
 - $_{\odot}$ ~45% of CA infants 0-1 year of age are eligible to receive VFC supplied vaccines
 - o Approximately 10% of all U.S. VFC provider enrollments are "birthing hospitals".
 - o For California, only 4% of provider enrollments are identified as birthing hospitals.
- Implementation of birth dose pediatric RSV could help with vaccine supply limitations during the initial rollout of nirsevimab. Beyfortus[™] supply for the 50 mL formulation for babies under 5kg may not be as limited as that for babies over 5 kg.
- Participation in VFC will significantly reduce supply up-front costs- VFC provides vaccines at no cost to enrolled providers for VFC-eligible children:
 - $\,\circ\,$ Number of Medi-Cal births in 2020: ~173K
 - Private sector Hepatitis B Vaccine cost: \$4.7M
 - Private sector Nirsevimab vaccine cost: \$85.5M





Enrollment Checklist for Birthing and Pediatric Hospitals

- CDPH has developed a check list to assist providers in meeting VFC enrollment requirements and preparing them to receive nirsevimab.
- Contains useful links to CDPH, VFC, CDC, and CAIR resources as well as a brief summary of nirsevimab clinical guidance.
- This document will be available through <u>RSV –</u> <u>California Vaccines for Children (VFC) (eziz.org)</u>

Enrollment Checklist for Birthing and Pediatric Hospitals: Nirsevimab (BeyfortusTM)



This planning checklist is for birthing hospitals and hospitals with birthing wards who want to enroll in <u>California's Vaccines. For Children (VFC) Program</u> which offers eligible newborns no-cost immunizations at birth to prevent respiratory syncytial virus (RSV) and Hepatitis B. This checklist will help your site meet VFC enrollment requirements and prepare to receive RSV immunization nirsevimab (Beyfortus^{IM}). A brief summary of nirsevimab clinical guidance is available at the end of this document.

Nirsevimab Planning Checklist

Ensure that your facility is enrolled in the <u>California VFC Program</u> . Your facility should establish a process to document <u>VFC eligibility</u> in your EMR/patient record and/or CAIR for each dose administered. Email program enrollment guestions to <u>MyVFCVaccines@cdph.ca.gov</u> .
Update billing processes for private insurance and VFC-eligible children if needed.
Establish a process to make birthing hospital and clinic staff aware of nirsevimab availability and recommendations. Download the <u>CDPH Nirsevimab timing tool</u> . Dosage depends on patient age and weight:
 Age 0-8 months old: 50 mg if <5 kg, 100 mg if <5 kg Age 8-19 months old at high risk of severe RSV: 200 mg (2x100 mg)
Plan how to communicate nirsevimab availability, priority groups, safety, and efficacy to patients. Share nirsevimab <u>effectiveness</u> and safety information from <u>CDC</u> , including <u>Nirsevimab</u> <u>Immunization Information Sheet (IIS)</u> , and the <u>EDA</u> .
Ensure education on documentation needs (EMR, electronic birth certificate, etc.) are provided to staff.
Develop a process to screen newborns for birth parent's RSV vaccine status during pregnancy.
Establish a process to obtain parental consent for nirsevimab. Share with parents the CDC's. Nirsevimab Immunization Information Sheet (IIS).
Update current facility vaccination/medication administration protocols, if needed.
Implement standing orders for your practice, if applicable. See templates and FAQs.
Determine when nirsevimab will be administered post-delivery and pre-discharge at the hospital Infants with prolonged hospitalization (e.g., preterm infants) should be immunized ideally shortly before discharge or promptly after discharge.
Develop a process for outpatient clinic administration to eligible infants born outside of RSV season (well-child visits, walk-in clinics, influenza clinics, etc.), including outreach to parents/ caregivers about coming to clinic for RSV immunization ahead of their first RSV season. Providers should use every opportunity to administer nirsevimab to eligible infants. This includes administration during well-child visits as well as other visits to ensure no missed opportunities for immunization.
Develop a process for administration to children 8 to 19 months old at increased risk of severe RSV entering their second RSV season. Note: ACIP recommendations for second RSV season administration include all American Indian and Alaska Native children. Report adverse events:
 If nirsevimab is administered alone, report adverse events to <u>MedWatch</u>. If nirsevimab is co-administered with a vaccine, report adverse events to <u>VAERS</u> only.



2023-2024 Additional VFC Flu Ordering Is now Open!

- VFC has completed shipments of initial orders of 2023-2024 flu vaccine, which comprises 50% of what VFC providers pre-booked earlier this year.
- The remaining 50% of doses pre-booked can be ordered as needed through the remainder of the season via the Additional Flu Vaccine Order System.

Reminder!

Your VFC October Flu Progress Report Will Arrive Soon! In the coming days, we will be emailing each VFC practice their October VFC Flu Vaccine Progress Report.







CDC's Digital Campaign "Wild to Mild"

The digital campaign "Wild to Mild" visually shows how flu vaccination can 'tame' flu's symptoms from being 'wild' to 'mild' in people who get vaccinated but still get sick.

The flu vaccine campaign toolkit includes social media resources (Pinterest, Twitter, Facebook, Instagram), posters, and more.







Pharmacy Edward Salaguinto, PharmD, RPh, CDPH



Find BAP Pharmacies



	COVID-19 Access
	G teacturguage *
	Register for a COVID-19 Vaccine
	Register
Everyone, including children, m	uet REGISTER for an account in their own name. If you have an existing account used for COVID-19 testing, you must create a new account for vaccination.
COVID-19 Vaccinatio	n
The Bridge Access Program is I	unded by the U.S. Department of Health and Human Services and Centers for Disease Control and Prevention.
The vaccine is free for eligible u	ninsured and underinsured individuals, ages 18 and sider.
Search By Zip Code	Search
Vaccine Day	
8 T T S () 19 T S S	d printing your voucher, check the vaccine location's hours of operation to plan your visit accordingly. You can search for the
	call them to determine their hours of operation.



COVID-19 Access (covidaccess.com)

- Work directly with eTrueNorth to enroll your pharmacy location in the Bridge Access Program.
- eTrueNorth makes participation easy by providing a secure online platform for convenient patient sign-up and participating pharmacy reimbursement.
- Interested pharmacies can visit www.joinetruenorth.com to enroll.

To register, visit: www.joinetruenorth.com



The Bridge Access Program is funded by the U.S. Department of Health and Human Services and the Center for Disease Control and Prevention.

All pharmacy applications are subject to approval by HHS.

Bridge Access Program

eTrueNorth, in partnership with HHS,* is helping expand free COVID-19 vaccine access in communities across the U.S.

Through the Bridge Access Program, pharmacies enrolled with eTrueNorth can receive reimbursement for administering no-cost COVID-19 vaccines to uninsured and underinsured adults.

By encouraging enrollment, you can:



Help pharmacies expand access to the underserved members of your community.



Streamline access to reimbursement for vaccinations administered to the uninsured population.



Support more robust IIS reporting.





• Bill Status - AB-1286 Pharmacy. (ca.gov)

• This bill would additionally authorize a pharmacy technician under the direct supervision and control of a pharmacist to administer influenza and COVID-19 vaccines.

• Bill Status - AB-1341 Public health: oral therapeutics. (ca.gov)

- This bill, until January 1, 2025, would authorize a pharmacist to furnish COVID-19 oral therapeutics, as defined, following a positive test for SARS-CoV-2, the virus that causes COVID-19, as specified.
- This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety and shall go into immediate effect when signed by the governor.



Patient Access to Paxlovid: HHS and Pfizer Agreement

• Protecting individuals in public programs, particularly Medicare

- Individuals on Medicare, Medicaid, and those who are uninsured will continue to be able to access Department of Health and Human Services (HHS)-procured Paxlovid for free through the end of 2024 via a patient assistance program.
- From 2025-2028, Pfizer will continue to run a patient assistance program for individuals who are uninsured or underinsured with HHSprocured Paxlovid.
- In parallel, Pfizer will operate a copay assistance program for individuals with commercial insurance through 2028.
- Ensuring no HHS-procured product is lost to expiry
 - Up-to-date product will be refreshed from Pfizer through 2028, ensuring that the HHS inventory of Paxlovid will not expire and will include all new formulations of Paxlovid authorized or approved for use in the U.S.
- Creating a stockpile for future emergencies
 - In addition to ensuring that HHS maintains every course of Paxlovid that it has purchased, Pfizer will provide HHS with a stockpile of an additional one million treatment courses to ensure preparedness for future COVID-19 surges.
- Providing a smooth transition to the commercial market
 - HHS will ensure a smooth and predictable transition to the commercial market over the next few months while prioritizing and reserving our HHS-procured treatment courses for people with Medicare and Medicaid, and for those who are uninsured. During this transition to commercial distribution, Paxlovid will remain available for ordering from HHS through Friday, December 15, 2023.



COVID-19 Oral Antivirals

COVID-19 Oral Antiviral	Paxlovid (nirmatrelvir/ritonavir)	Lagevrio (molnupiravir)
Commercialization Date	Anticipated November 2023	Anticipated November 2023
FDA Approval or EUA	FDA Approved, however, only product currently in circulation is EUA product	EUA Only (for now)
BAP (uninsured or underinsured)	Pfizer Patient Assistance Program *co-pay assistance	Merck Patient Assistance Program
Expiration Dates	Shelf-Life Extension for Specific Lots of Paxlovid (hhs.gov)	Shelf-Life Extension for Lagevrio (hhs.gov)



COVID-19 Vaccine Access

Claudia Aguiluz, CDPH



Job Aid: Vaccine and Clinic Eligibility by Funding Source

Program	SVFC Vaccines for Children Program	BAP Bridge Access Program	317 Local Health Departments'	VFA Vaccines for Adults Program	SGF State General Funds ²	Dept.	Vaccines for Adults Program (VFA)	State General Funds (SGF)
unding	VFC-Federal entitlement program for eligible children. Funds are used to pay for vaccines recommended by ACIP and approved into the VFC program.	BAP-Limited federal funds (Section 317) for eligible adult populations to maintain access to COVID-19 vaccines through existing public health infrastructure.	317-Limited federal funds (Section 317) used to pay for adult vaccines recommended by ACIP and support limited vaccine supply for outbreak activities via Public Health Departments.	317-Limited federal funds (Section 317) used to pay for adult vaccines recommended by ACIP and included in the VFA Program.	Limited state funds for the purchase of vaccines to prevent respiratory illness.	gate	 Hepatitis B HPV Meningococcal Conjugate (MenACWY) MMR Pneumococcal Conjugate (PCV20) Td only when Tdap is not indicated Tdap Varicella Zoster 	Tdap (children only)
Age and Eligibility	 Children Birth-18 years: Medi-Cal/CHDP eligible Uninsured (no health insurance) American Indian or Alaskan Native Underinsured: health insurance does not cover vaccines (ONLY if the LHD has a FQHC or RHC designation). 	Adults 19 years and older: • Uninsured (no health insurance) • Underinsured (vaccines are not covered by insurance) (Adults with Medicare part B and D are considered insured and not eligible to receive 317 BAP vaccines.)	 Adults 19 years and older: Uninsured adults (no health insurance) Underinsured adults (vaccines are not covered by insurance) Insured exceptions-Adults part of outbreak control, post-exposure prophylaxis, or disaster relief efforts as approved by CDPH & LHDs. Household contacts or sexual contacts of HBsAg+ pregnant woman 	 Adults 19 years and older: Uninsured adults (no health insurance) Underinsured adults (vaccines are not covered by insurance) 	All ages: • No restrictions	iate iot		
Clinic Type	 Federally Qualified Health Center (FQHC), Rural Health Center (RHC), and State-licensed Community Health Centers Health Department and CDPH Approved Health Department Authorized Sites Juvenile halls/youth correctional 	 Health Department Clinics Federally Qualified Health Center (FQHC), Rural Health Center (RHC) Tribal Clinics Indian Health Services Limited sites designated by Local Health Department as BAP Provider 	 Health Department and CDPH Approved Health Department Authorized Sites (HDAS) Juvenile halls/youth correctional facilities (for 19-25 years of age) 	VFC enrolled Federally Qualified Health Center (FQHC), Rural Health Center (RHC)	 State-licensed Community Health Centers Federally Qualified Health Center (FQHC), Rural Health Center (RHC) Health Department and CDPH Approved Health Department Authorized Sites (HDAS) 		<i>.</i> ¢my¥FC¥ACCINES	California Vaccine Management System for flu vaccine (refer to you LHD for other vaccines)
	 facilities Private providers, School-based clinic, Hospitals, Pharmacies (pilot program) 	roviders, School-based spitals, Pharmacies (pilot		Private providerSchool-based clinic		considered fully insured). 317 vaccine may n org/assets/docs/IMM-1247.pdf) for more del	2	

Bridge Access Program (BAP)



Updated BAP Eligibility Resource!

Fully insured adults whose insurance covers the cost of the vaccine(s) ARE eligible for COVID-19 vaccine—including if the insurance includes a high deductible or co-pay, the plan's deductible has not been met, or the insurance has cost sharing.

This is ONLY applicable to BAP COVID-19 Vaccines.

The 317 (VFA & BAP) Eligibility Screening Record for Adult Patients has also been updated to reflect this change.

Eligibility Based on Insurance Status 300 BAP

Bridge Access Program

A limited supply of COVID-19 vaccine will be made available through the Bridge Access Program for uninsured and underinsured adults (19 years and older) to prevent loss of access when vaccines transition to the commercial market. Insured patients—including patients covered by Medicare and Medi-Cal—are **NOT** eligible for the COVID-19 vaccines provided through this program. This temporary program <u>will</u> sunset at the end of 2024.

Eligible for COVID-19 Vaccine through BAP (317 Funds)

Patient health insurance status:

- Uninsured/No Insurance (includes those who receive primary care through county safety net programs; these are NOT considered health insurance)
- Underinsured as health insurance, but the insurance does not include any vaccines; insurance covers
 only selected vaccines; insurance does not provide first-dollar coverage for vaccines; or copayment
 required)
- Insurance NOT through Medi-Cal or Medicare (only eligible for COVID-19 vaccines if NOT covered by patient's private insurance plan)

X Not Eligible for COVID-19 Vaccine through BAP (317 Funds)

Patient health insurance status:

- Medi-Cal Fee-For-Service/Medi-Cal Managed Care (<u>bit.lv/CAhealthplans</u>)
- Medicare Part B (medical benefit) AND Part D (prescription drug benefit)
- Medicare Part B Alone
- Medicare Part D Alone
- Insurance NOT through Medi-Cal or Medicare



IMM-1473 (10/6/23)



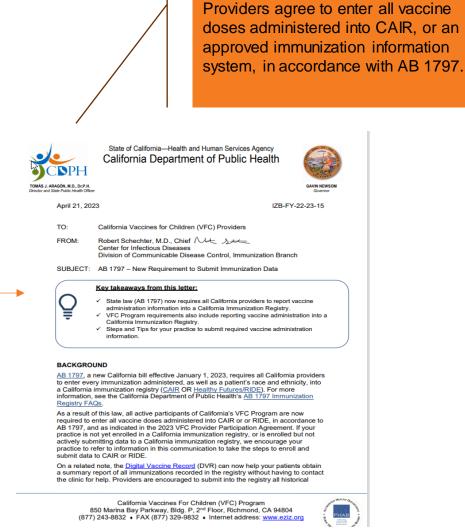
Tracking Pediatric VFC COVID-19 Vaccine Ordering and Vaccine Administration

VFC orders as of 10/18/2023: Of the 3,318 VFC providers, 1130 (34%) have ordered a total of **105,160** doses of pediatric COVID 19 vaccines.

This is 161 more providers who have ordered since 10/11/2023.

474 (14%) have reported doses administered to under 18 recipients of the 2023-2024 COVID products.

VFC is actively reaching out to providers as orders are placed and Pediatric COVID-19 doses are not included in orders.





VFC COVID-19 Vaccine Orders



Enrolled VFC Providers must order all ACIP-recommended vaccines, including COVID-19 vaccines, and make them available their VFC-eligible patients.

Providers may submit COVID-19 orders on a monthly frequency and can place supplemental orders for COVID-19 vaccines even if it is not yet time for their routine order.



Tracking Adult BAP COVID-19 Vaccine Ordering

For Bridge Access Providers (BAP) in myCAvax (n=709), they have ordered a total of 29,490 as of 10/13/2023

181 BAP providers have reported doses of 2023-2024 COVID vaccine thus far.

These 181 BAP providers have reported administration of 6,466 adult doses.

116 of the 181 BAP providers are FQHCs.

BAP	Vaccine Eligibility	2023-2024 COVID Doses Administered to Adults	Percent of Doses
BAP Provider	Private Insurance	3,473	54%
BAP Provider	317 Eligible LHD or HDAS Only	1,476	23%
BAP Provider	Unknown	935	14%
BAP Provider	State General Funding	570	9%
BAP Provider	VFC Eligible Medi-Cal/CHDP	10	0%
BAP Provider	VFC Eligible Underinsured (FQHC/RHC Only)	1	0%
BAP Provider	VFC Eligible Uninsured	1	0%
Total		6,466	100%



Vaccine Management

Josh Pocus, My Turn, and Maria Volk, myCAvax, CDPH



Novavax Update for My Turn





My Turn has added the recently authorized Novavax product and is mapping the current vaccine supply to this product as of Wednesday, October 11, 2023. Please update your clinic vaccine inventory and deactivate the deauthorized Novavax inventory.

Note: If you remove the deauthorized inventory, historical bulk upload will not be available for that clinic.



What's Next in myCAvax? – Release 44 (1 of 2)

New updates for LHDs will launch today Friday, October 20, 2023!

Release Highlights

LHDs will:

LHDs

<u>Program</u>

 See the new 'USG COVID-19 Program' checkbox on the related lists of COVID-19 Program Locations

Provider Salesforce Reports and Dashboards

See new reports and dashboards for the Bridge Access Program (BAP) and the State General Fund (SGF) program

Transfers

- Be able to record transfers for SGF vaccines; all transfers will default to the 'Emergency / unplanned transfer' transfer type
- See the new 'Eligible for Internal Transfer' field on master programs



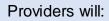




What's Next in myCAvax? – Release 44 (2 of 2)



Release Highlights



Expanded SGF Capabilities

- Be able to record Temperature Excursions for SGF vaccines and select products on the 'New Temperature Excursion' pop-up window based on the program selected
- Be able to record Waste Events for SGF vaccines and select products on the 'New Waste Report' pop-up window based on the program selected
- Receive LHD-initiated SGF Transfers

Provider Community Site

- See the new BAP logo on the program tile on the landing page
- See a dropdown on the SGF program tile with new site functionalities for the SGF program

Provider Community Site (continued)

- See an updated 'State General Fund Home' page with new site functionalities
- See Program Locations on the 'Locations' page based on the program selected
- See the new 'Program Type' picklist on the COVID-19 'Shipment Incidents' and 'Orders' pages
- See the new 'USG COVID-19 Program' checkbox on the COVID-19 Program Location Applications and related lists of COVID-19 Program Locations
- ✓ See relabeled shipping address fields on the Location Account







Important Update to Provider Location Addresses in myCAvax



Background: The 'Vaccine Administration Address' was an active and relevant field in the USG COVID-19 program, in addition to the 'Shipping Address' field. **Upcoming Change:** On **Friday, October 20, 2023**, the 'Vaccine Administration Address' field will be removed from myCAvax. To comply with CDC policy, providers must be prepared to receive vaccine shipments at the same address in which you are administering the vaccine, and the shipping address listed on your Location Account must be used for all Program Locations.

Requested Action: Providers, if you need to update your shipping address to comply with the single shipping address requirement, contact the Provider Call Center at <u>providercallcenter@cdph.ca.gov</u> or (833) 502-1245. Note that the secondary address line may be customized at each Program Location to specify a specific suite, building, etc. Be sure to confirm your shipping hours are correct as well!



Reminder: Properly Reporting Shipment Incidents

As a reminder, if a Shipment Incident results in a Temperature Excursion, providers should always report the Shipment Incident first.

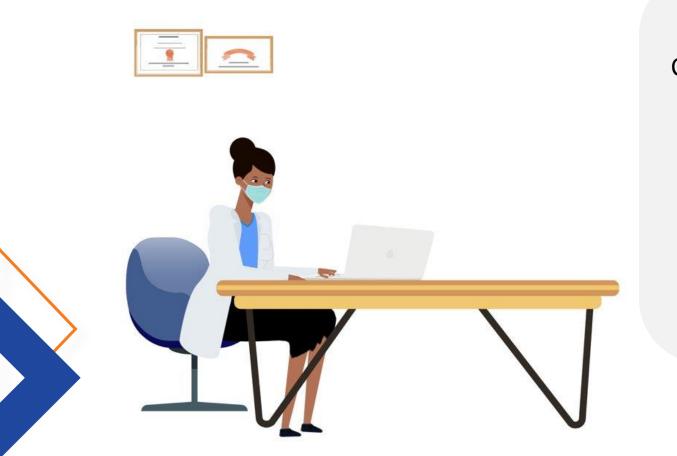
CDPH will determine if the vaccine should be reported as waste and then they will inform the provider. Afterward, the provider's LHD can re-order the vaccine for them.

Colliumic Vaccine Management System	me My	Programs	My Turn Enrollment	Vaccine Order	Vaccine Inventory 🗸	-	Reports	More 🗸		۹	Ļ	9
Shipment Incidents												
Program Selected:												
State General Fund			•									
									_			_
State General	Fund - Sh	ipment Ir	ncidents						N	lew Shipment	Incident	
Need help? Review the s	hipment Incide	nt job aid, or v	riew the full list of job	aids.								
Use the Shipment Incident repo	rt to collect informa	ation that McKess	on will need to resolve you	r incident. Shipping Incidents	must be reported immedia	ately.						
•	rt to collect informa	ation that McKess	on will need to resolve you	r incident. Shipping Incidents	must be reported immedia	ately.						
Search Shipment Incidents	Status	ation that McKess	Product	Shi	per		Received Date Fro	m	Received	Date To		
Search Shipment Incidents		ation that McKess			per		Received Date Fro Jul 14, 2023	m m	Received Oct 12,			
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Search Shipment Incidents	Status All		Product	Shi	iper I	¥	Jul 14, 2023	i	Oct 12, 1	2023		





BAP: Vaccine Allocations Cadence Update



CDPH uploaded additional allocations for Pfizer and Moderna COVID-19 vaccines on Friday, October 13^{th.} We are now expecting to receive additional allocations every two weeks.

CDPH also received an initial allocation from CDC on **Tuesday, October 10, 2023**, for the updated Novavax vaccine.





Ordering and Reporting

Pfizer, Moderna, and Novavax are all available for ordering through myCAvax for Bridge Access Program (BAP) providers and through myVFCvaccines for Vaccines for Children (VFC) providers.

VFC providers may only report through myVFCvaccines.

VFC providers that report in the wrong system (myCAvax) should contact the Provider Call Center at <u>ProviderCallCenter@cdph.ca.gov</u> or call (833) 502-1245 for guidance on removing or updating the incorrect report. BAP providers may only report through myCAvax.

BAP providers that report in the wrong system (myVFCvaccines) should contact the VFC Call Center at myVFCvaccines@cdph.ca.gov or call (877) 243-8832 for guidance on removing or updating the incorrect report.



BAP: Opting Out of BAP Participation





CDPH encourages provider participation in the Bridge Access Program (BAP) as they play a critical role in the vaccination of key populations. We also understand that there are BAP-eligible providers who do not wish to participate in the program for various reasons.

To maximize vaccine allocation and approval to interested providers, if you are BAP-eligible and would not like to participate in the program, contact your LHD. Your LHD will notify the CDPH Enrollment Team of the opt-out request via Chatter.





BAP: Provider Enrollment Update

Great work! 63% of BAP-eligible providers have enrolled in the program so far.

As of Thursday, October 17, 2023, 740 BAP-eligible providers have completed enrollment, out of 1166 total providers eligible for BAP enrollment.



BAP-eligible providers are asked to complete program enrollment in the myCAvax Provider Community by Friday, October 27, 2023.

If an active BAP-eligible provider would like to disenroll from BAP, they will need to reach out to their LHD and disclose their reasoning to begin the disenrollment process.





Upcoming: BAP Office Hour

Are you a provider or an LHD participating in the Bridge Access Program (BAP) in myCAvax? You are invited to join CDPH for a 30-minute office hour on **Thursday, October 26, 2023**, from **11:00 AM – 11:30 AM PT**.

After hearing brief BAP updates from CDPH, you will have an opportunity to engage directly with subject matter experts to get your questions answered around BAP allocations, ordering, and vaccine management.

Register now on **Zoom** to attend.



Slide Icon Key

lcon	Meaning
	This is to label slides that are referencing upcoming or existing functionality and how to use it in the system.
<u> </u>	This is to label slides that include important system reminders.
Q	This is to label slides that include tips and best practices to improve your system experience.



My Turn – Known Issues – Updated 10/12



Missing My Turn Program?

- We are tracking an issue where some locations that were participating in My Turn prior to the rollout of Digital Enrollment on August 30, 2023 are missing the My Turn Program.
- Affected Users will see an error message on the Clinics page saying "The selected location is not currently active. You may view historical clinics, new clinics cannot be created".

Unable to archive some Vaccine Inventory Records

 We are working on a fix for an issue where providers are unable to archive Vaccine Inventory records for some of the products that were recently deauthorized.

• Workaround / Next Steps

- Estimated Fix: November 1, 2023
- Workaround: Please reach out to the PCC

Estimated Fix: November 1, 2023



myCAvax – Known Issues – Updated 10/03



Known Issues

Fluarix Shipment Not Showing the Correct Product

 It has been reported that for some orders of ADU Fluarix the shipment shows PED Fluarix and vice versa. For the time being, refer to the order for the source of truth and ignore the product listed on the shipment.

Unable to Use SGF Multi-Line Ordering Page

- For SGF community users who have noticed that all of their flu products are greyed-out on the multi-line ordering page with no explanation, this is due to not having a Refrigerated Storage Capacity listed on their account.
- There should be an error message directing providers to the required storage, but it is currently not displaying.

• Workaround / Next Steps

Estimated Fix: TBD

- Estimated Fix: October 20, 2023
- Add your required Refrigerated Storage Capacity to your Provider Location. If you are having trouble adding this, contact the Provider Call Center.



Resources and Q&A

Leslie Amani and CDPH SMEs



CA DMHC Resource in English and Spanish

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KNOW YOUR TH CARE RIGHTS

COVID-19 Tests, Vaccines & Treatment

Health Plan Enrollees Have the Right to COVID-19 Tests, Vaccines and Treatment with No Cost-Sharing

Health plans' regulated by the California Department of Managed Health Care (DMHC) must cover COVID-19 tests, vaccines and treatment² with no health plan prior authorization or enrollee cost-sharing. Enrollee cost-sharing includes co-pays, co-insurance, deductibles or other enrollee out-of-pocket costs not including health plan premiums.

Continued Access to COVID-19 Tests, Vaccines and Treatment with No Cost-Sharing

California state laws add six months to the federal COVID-19 public health emergency requirements on health plans to continue covering COVID-19 tests, vaccines and treatment from any licensed provider (inor out-of-network) with no prior authorization or enrollee cost sharing. The public health emergency ends on May 11, 2023, and state laws extend these requirements for six months through November 11, 2023.

After November 11, 2023, enrollees can continue to access COVID-19 tests, vaccines and treatment with no prior authorization or cost sharing when they access these services through their health plan's network. Health plan enrollees can be charged cost-sharing only if these services are provided out of network after November 11 2023

Did You Know? Health plan enrollees have the right to eight free over-the-counter at-home COVID-19 tests a month. Health plans must continue to cover the same number of at-home tests after the public health emergency. Contact your health plan for details.

Need Help? Contact the DMHC Help Center at www.HealthHelp.ca.gov or 1-888-466-2219. You can also find more information and resources at www.covid19.ca.gov.

1 Commercial and Medi-Cal managed care plans regulated by the DMHC

² Treatment means therapeutics approved or granted emergency use authorization by the federal Food and Drug Administration for treatment of COVID-19 when prescribed or furnished by a licensed health care provider acting within their scope of practice and the standard of care (HSC Section 1342.2 (h)(1)).

Visit HealthHelp.ca.gov to submit a complaint 980 9th Street, Suite 500 Sacramento, CA 95814

form online or call 1-888-466-2219

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CONOZCA SUS DERECHOS DE ATENCIÓN MÉDICA

Pruebas, vacunas y tratamiento del COVID-19

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Los afiliados al plan de salud tienen derecho a recibir pruebas, vacunas y tratamiento del COVID-19 sin costos compartidos

Los planes de salud' regulados por el Department of Managed Health Care de California deben cubrir las pruebas, las vacunas y los tratamientos del COVID-19² sin autorización previa del plan de salud sin costos compartidos para el afiliado. Los costos compartidos del afiliado incluyen copagos, coseguros, deducibles u otros costos de bolsillo del afiliado sin incluir las primas del plan de salud.

El acceso continuo a las pruebas, vacunas y tratamientos del COVID-19 sin costos compartidos

Las leves estatales de California agregan seis meses a los reguisitos federales de emergencia de salud pública de COVID-19 en los planes de salud para continuar cubriendo las pruebas, vacunas y tratamiento del COVID-19 de cualquier proveedor con licencia (dentro o fuera de la red) sin autorización previa ni costos compartidos del afiliado. La emergencia de salud pública finaliza el 11 de mayo de 2023, y las leyes estatales extienden estos reguisitos por seis meses hasta el 11 de noviembre de 2023.

Después del 11 de noviembre de 2023, los afiliados pueden continuar accediendo a las pruebas, vacunas y tratamientos del COVID-19 sin autorización previa ni costos compartidos cuando acceden a estos servicios a través de la red de su plan de salud. A los afiliados del plan de salud se les puede cobrar el costo compartido solo si estos servicios se proporcionan fuera de la red después del 11 de noviembre de 2023.

Los afiliados al plan de salud tienen derecho a ocho pruebas del COVID-19 >Sabía que? gratuitas sin receta médica en el hogar al mes. Los planes de salud deben continuar cubriendo el mismo número de pruebas en el hogar después de la emergencia de salud pública. Comuníquese con su plan de salud para obtener más detalles

¿Necesita ayuda? Comuníquese con el Centro de Ayuda del DMHC en www.HealthHelp.ca.gov o llamando al 1-888-466-2219. También puede encontrar más información y recursos en www.covid19.ca.gov.

¹ Los planes de atención administrada comerciales y de Medi-Cal regulados por el DMHC.

² Tratamiento significa terapias aprobadas u autorizadas por la Food and Drug Administration para el tratamiento del COVID-19 cuando son indicadas o proporcionadas por un proveedor de atención médica con licencia que actúa dentro de su ámbito de práctica y el estándar de atención (Código de Salud y Seguridad de California [Health and Safety Code, HSC], Sección 1342.2 [h][1]).

Visite HealthHelp.ca.gov para enviar un formulario 980 9th Street, Suite 500 CADMINE CADMAN Sacramento, CA 95814 de gueja en línea o llame al 1-888-466-2219 🕑 условинс 🛛 сын



Stay Healthy this Virus Season

	Who is eligible?	What immunizations are recommended?	When should I get it?
Influenza	6 months and older	Flu vaccines target 4 strains of flu and are available as a shot or nasal spray. Flu vaccine prevents millions of illnesses and flu-related doctor's visits each year.	September or October are ideal, but catching up later can still help.
	6 months and older	Updated COVID-19 vaccines target the Omicron XBB strain to protect against COVID-19 this fall and winter	Get it now to help protect against severe disease (if at least two months since your last COVID-19 shot).
RSV (Pregnant Persons)	Pregnant persons during weeks 32-36 of pregnancy	RSV vaccine to reduce the risk of severe RSV disease in infants (baby will receive protection that lasts for months after birth)	Recommended from September to January to help protect your baby during RSV season
RSV (Infants and Toddlers)	All infants from birth to 8 months and children 8-19 months at high risk of severe RSV disease	Immunization contains preventive antibodies that help fight RSV infections and protect children from getting very sick.	Before or during RSV season, usually October-March
RSV (Older Adults)	60 years and older	RSV vaccine to protect older adults against RSV disease	Available now - Talk with your doctor to determine if vaccination is right for you.
through their private Check with your insu You can receive influ Adults without healt in the <u>Bridge Access</u>	or local pharmacy. Influe e, Medi-Cal or Medicare i urance on timing of RSV in enza, COVID-19 and/or R th insurance can get no co <u>Program</u> . Visit vaccines.		e visit. rmacies and clinics participating

6 Tips for Staying Healthy this Virus Season

Reduce your risk of catching and spreading respiratory viruses like flu, COVID-19 and RSV.

Stay Up to Date on Vaccines

Vaccines are the best protection against severe illness. Visit MyTurn.ca.gov to schedule your vaccines or contact your health care provider.

- Flu and COVID-19 vaccines are available for everyone 6 months and older.
- RSV immunizations are available for infants and some young children, pregnant people and adults 60 years and older.

Stay Home if You're Sick

Stay home and away from others if you have any symptoms of flu, COVID-19, or RSV.

Test and Treat

Test for COVID-19 and flu if you have symptoms. If you test positive, contact your health care provider and ask about medications. Medications work best when started right after symptoms begin. Learn more about <u>COVID-19 treatments</u>.

Consider Wearing a Mask

Consider <u>wearing a mask</u> in public indoor or crowded spaces especially if you or your family is at <u>higher-risk for severe illness</u>.

Wash Your Hands

Wash your hands often, with soap and warm water, for at least 20 seconds. If soap and water are not available, use a hand sanitizer with at least 60% alcohol.

Cover Your Cough or Sneeze

Cough or sneeze into your elbow, arm, or a disposable tissue. Make sure to wash your hands or sanitize and dispose of your tissue after.



Scan the QR code to see interactive links on this flyer

e s flyer

September 2023 • © 2023, California Department of Public Health



Fall-Winter 2023-24 Immunizations Infographic (CDPH)

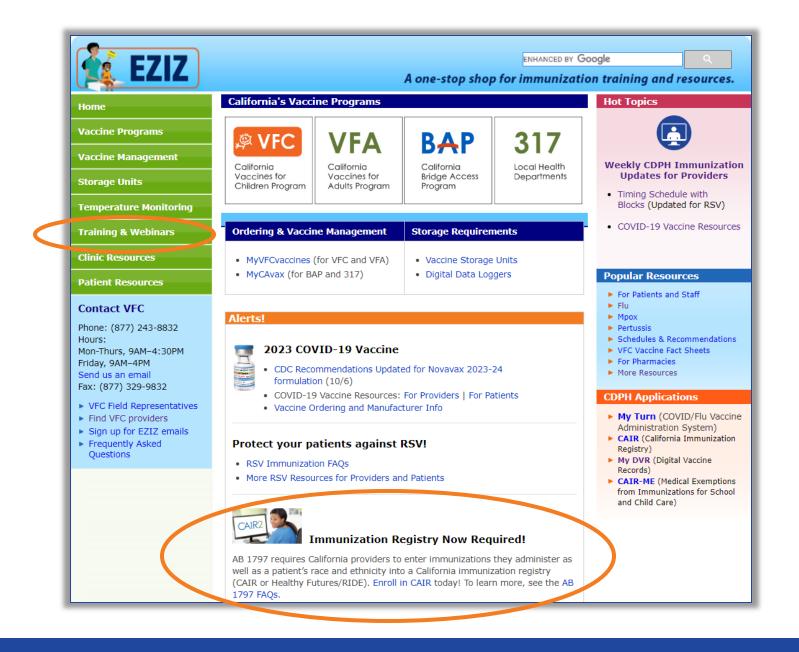
Winter Virus Tip Sheet (CDPH)



• CDPH

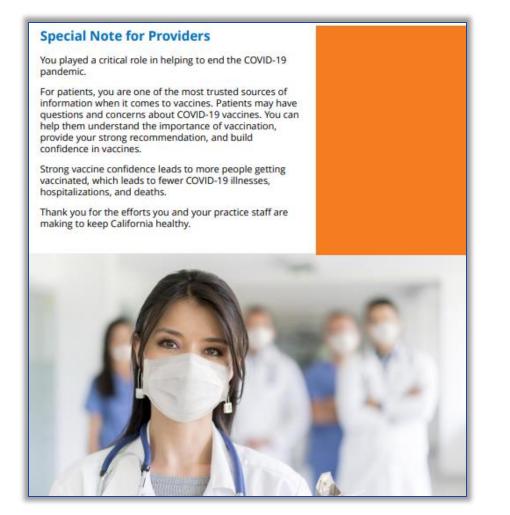
EZIZ.ORG (Easy Immunization)

Please bookmark https://eziz.org/ for immunization updates, resources, and guidance





Provider Operations Manual California Bridge Access Program



California Bridge Access Program **Provider Operations Manual** thank for uninsured & no-cost **COVID-19 vaccines** underinsured adults Click to Navigate Appendices frequent Tasks Startup Guide iff or contacts, set up new rage unit and data losses Patient & Storing Tasks & Visit Vaccine Shipmen Aoderna Reporting shipment Billing & SCOPH BAP California Bridge Access Program Ŋ \<u>``</u>

Display Location on Vaccines.gov

This is a one-time setup that uses the same provider portal used to report inventory to VaccineFinder. Your ID and password remain the same.

Update your information using either <u>Manual Setup</u> (quickest) or <u>File Upload</u> (if managing many locations) to complete these steps as documented in CDC guidance:

- 1. Set location for BAP participation
- 2. Set up vaccine availability at your location
- 3. Make vaccine availability visible on Vaccines.gov

Questions?

Email CARS HelpDesk@cdc.gov or call 833-748-1979.

Display Location on Vaccines.gov

All providers must display their vaccination location to the public on <u>Vaccines.gov</u> so eligible adults can find no-cost COVID-19 vaccines. This is a one-time setup that requires registration with VaccineFinder. Inventory reporting is not required.

VaccineFinder

Vaccine Tracking

Locations use the COVID Locating Health provider

portal to publish their location on Vaccines.gov to help the

sites near them and learn how to make an appointment

For technical assistance,

CARS_HelpDesk@cdc.gov

or 833-748-1979.

public find BAP vaccination

Platform

Organization Vaccine Coordinators set up the first

VaccineFinder account. They invite Vaccine Coordinators to set up accounts and display their locations on Vaccines.gov. Two accounts are allowed per location.

Who has a user account?

HRSA: Only display your location on Vaccines.gov if sites have state-allocated doses.

Next Steps

If a location is currently displayed on <u>Vaccines.gov</u>, no action is needed.

For locations that have registered with VaccineFinder but are not currently displaying their site. login to the <u>COVID Locating Health</u> provider portal and update your information on the Public Display tab using either <u>Manual Setup</u> (quickest) or <u>File Upload</u> (if managing many locations) to (1) set location for BAP participation. (2) set up vaccine availability for each location, and (3) make vaccine availability visible on Vaccines.gov. Follow the instructions provided in <u>Guidance for Reporting to Vaccines.gov</u>.

The process for adding new providers not using <u>Vaccines.gov</u> is still to be determined: providers will be notified when they can display their locations.

Need to change reporting contacts?

Changes require updates to Section A or Section B email information in the Provider Agreement. Contact the Provider Call Center for assistance.

25

10-5-23

Resources

contact

Startup Guide

CDPH Provider Webinars and Trainings



Week of October 23, 2023

	Monday 10/23	Tuesday 10/24	Wednesday 10/25	Thursday 10/26	Friday 10/27
Live Webinars and Training	SGF Flu Vaccine Management 102 12:00 pm – 1:00 pm			Bridge Access Program (BAP) myCAvax Office Hours 11:00 am – 11:30 am CPTC STI Clinical Update Webinar: California Mpox Update for Healthcare Providers 12:00 pm – 1:30 pm	CDPH Immunization Updates for Providers 9:00 am – 10:30 am
View On Demand	 (v. 1/4/22) <u>CDPH Weekly Provide</u> <u>Archived Recordings an</u> 	r Webinars nd Slides • <u>COV</u>	uires myCAvax Login) at Features in myCAvax for Providers uires myCAvax Login) ID-19 Crucial Conversations Archived nars and Slides	<u>Series</u>	e Webinar Series Coalition COVID Conversation e Toolkit Webinar Series
Help	myCAvax Help Desk Email: My Turn Help Desk Email: <u>I</u>	Ip Desk mycavax.hd@cdph.ca.gov myturn.clinic.hd@cdph.ca.gov myturnonboarding@cdph.ca.		245, 8am-5pm, Mon-Fri	Mpox Email: <u>stdcb@cdph.ca.go</u> General Website: <u>Mpox Website</u> Vaccines: <u>Mpox Vaccines Website</u>

JCDPH

Vaccine Support

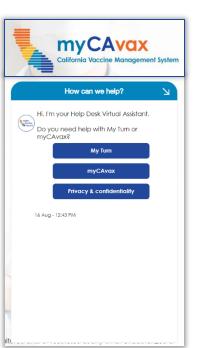
Provider Call Center

Dedicated to medical providers and Local Health Departments in California, specifically addressing questions about State program requirements, enrollment, and vaccine distribution.

- For myCAvax Help Desk inquiries: myCAvax.hd@cdph.ca.gov
- For My Turn Clinic Help Desk inquiries: <u>MyTurn.Clinic.HD@cdph.ca.gov</u>
- For all other inquiries: providercallcenter@cdph.ca.gov
- Phone: (833) 502-1245, Monday through Friday from 8AM–5PM

myCAvax

- Virtual Assistant resolves many questions but will direct you to the Provider Call Center queue for live assistance!
- Knowledge Center houses key job aids and videos that are updated every release. Once logged in, you can access job aids from the myCAvax homepage (or at various places throughout the system) using the links as shown below.





COVID-19 Therapeutics Resources

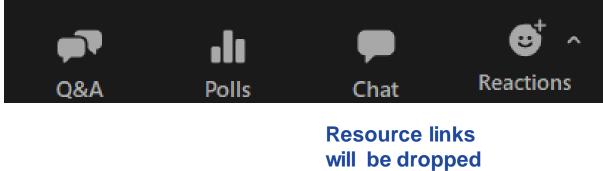


Type of Support		Description	Updated 10.6.23
	Clinical Guidance	For general Therapeutics	uestions, please email: <u>COVIDRxProviders@cdph.ca.gov</u>
			Webpage (provides general information for healthcare providers, allocations, g, drug facts sheets, and additional resources)
	General Information		Job Aid (questions and answers for the public on COVID-19 therapeutics)
		COVID-19 Therapeutics Bes	t Practices Checklist (testing, prescribing, dispensing, and more)
		Frequently Asked Questions	document for clinics, providers, and pharmacists
		Finding Providers and Test-to	-Treat Sites
[TY]	Locating Resources	<u>COVID-19 Therapeutics</u>	Locator (arcgis.com)
		 <u>Test-to-Treat</u> (hhs.gov) 	
	<u>LHJ Therapeutics</u> <u>SharePoint</u>	JEOCuser54@cdph.ca.gov) Therapeutic Weekly Emily 	rebinars, slides, datasets and HPOP reporting information. (For access, email ail Update files (SharePoint) oP Account Verification & Reporting information
Ŕ	Questions		ics questions, please email <u>COVIDRxProviders@cdph.ca.gov</u> es, signing up new HPOP Accounts: please e-mail <u>CDPHTherapeutics@cdph.ca.gov</u>





During today's session, please use the Q&A panel to ask your questions so CDPH subject matter experts can respond directly.



into, "Chat"





Upcoming Webinar Opportunities

CDPH Immunization Updates for Providers Next session: Friday, October 27, 2023 9AM – 10:30AM



