

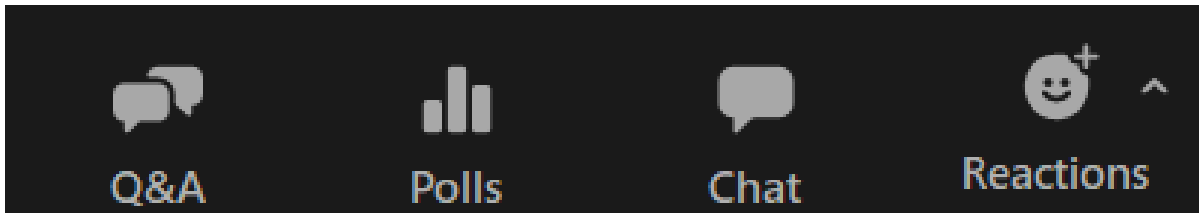
California Department of Public Health Immunization Updates for Providers

Friday, October 27, 2023

9:00AM – 10:30AM

Questions

During today's webinar, 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”



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


Agenda: Friday, October 27, 2023

No.	Item	Speaker(s)	Time (AM)
1	Welcome and Announcements	Leslie Amani (CDPH)	9:00 – 9:05
2	Vaccine Administration Data	Sharon Brummitt (CDPH)	9:05 – 9:10
3	Clinical Update	Caterina Liu, MD (CDPH)	9:10 – 9:20
4	Respiratory Syncytial Virus (RSV)	Claudia Aguiluz (CDPH)	9:20 – 9:25
5	Vaccine Management	Josh Pocus (My Turn) and Claudia Aguiluz (myCAvax)	9:25 – 9:35
6	Testing and Treatments	Jessica deJarnette, MD (CDPH)	9:35 – 9:45
7	COVID-19 Oral Antivirals: Commercialization	Judy Aoyagi, PharmD (CDPH)	9:45 – 9:50
8	Communication Tools: COVID-19 Therapeutics	Monice Wong (CDPH)	9:50 – 9:55
9	Resources and Q&A	Leslie Amani (CDPH)	9:55 – 10:30
Thank you!			

Announcements


Leslie Amani, CDPH

CDPH Grant Agreement Funding Announcement



State of California—Health and Human Services Agency
California Department of Public Health

TOMÁS J. ARAGÓN, M.D., Dr.P.H.
Director and State Public Health Officer



GAVIN NEWSOM
Governor

DATE: October 20, 2023

TO: California Federally Qualified Health Centers (FQHCs)

FROM: Robert Schechter, MD
Branch Chief
Immunization Branch

SUBJECT: Request for Application to assess and improve adult immunization levels in Community Health Centers: Funding for July 2023 - June 2024 for one award up to \$127,000; Applications Due 11/10/23

GRANT AGREEMENT FUNDING ANNOUNCEMENT/RELEASE


Adult immunization levels are low nationwide and in California, and disparities exist with respect to race/ethnicity, income level, and insurance coverage. Recent data suggests there are gaps in adult rates for flu, shingles, tetanus, and pneumococcal vaccines. [\[Routine Vaccinations: Adult Rates Vary by Vaccine Type and Other Factors | U.S. GAO\]](#). The Centers for Disease Control and Prevention (CDC) is urging providers to maintain routine immunization services for adults. Efforts to improve adult vaccinations could include expanding the number of vaccines offered, raising public and provider awareness, partnering with organizations to encourage vaccination and offering free routine vaccines to certain adults. Maintaining adult immunization rates can prevent infectious disease outbreaks and also prevent long-term illness, hospitalization, and even death from vaccine-preventable diseases.

The California Department of Public Health (CDPH) Immunization Branch has been awarded a supplemental grant to assess and improve adult immunization rates in Community Health Centers (CHCs). CDPH is seeking a large Federally Qualified Health Center (FQHC) to assess immunization levels and implement quality improvement activities to strengthen immunization practices in an identified adult patient population. FQHCs will select a vaccination to focus on and will identify a specific adult patient population of focus based on local priorities with accompanying justification. Staff from the CDPH immunization branch will provide support and technical assistance to the selected grantee.

The grant term is 7/01/2023 (or upon approval) to 6/30/2024.

CDPH has authority to grant funds for the Project under Health and Safety Code, Section 120440 (C): to compile and disseminate statistical information of immunization status on groups of patients or clients or populations in California, without identifying information for these patients or clients included in these groups or populations.

Immunization Branch / Division of Communicable Disease Control
850 Marina Bay Parkway, Bldg. P, 2nd Floor, Richmond, CA 94804
(510) 620-3737 • FAX (510) 620-3774 • Internet Address: www.getimmunizedca.org



Health Centers (FQHCs)

Section HSC 131085 (a) (2), (5) and (b) (4), the department may activities relating to the protection, preservation, and and award grants for the performance of the activity. n 120440 (K)(2), which permits collection of immunization data

for the duration of the grant will not exceed \$127,000

ELIGIBILITY CRITERIA

meet all the following criteria to be eligible to apply:

uded in the list at <https://findahealthcenter.hrsa.gov> and with ents based on 2022 Uniform Data System National Health Center [uds/datacenter.aspx](https://uds.datacenter.aspx) wement (QI) lead for the project with expertise and responsibility

cross clinic locations cord (EHR) that is uploading via data exchange to the California R) t a 1 year CDPH grant for financial support of IT/QI staff

e will be at least 85 points out of a total 100 points.


Funded

existing) to assess baseline immunization levels in an identified ts and implement immunization quality improvement activities opulation. The baseline assessment will incorporate data from gistry (CAIR), as provided by CDPH, to include immunizations t one of the following vaccines to focus on: or combined Hepatitis A/Hepatitis B

he focus should be co-administration with COVID-19)

opulation include homeless adults, older adults or adults with Projects should focus on vaccination efforts of a specific

ch / Division of Communicable Disease Control kway, Bldg. P, 2nd Floor, Richmond, CA 94804 • FAX (510) 620-3774 • Internet Address: www.getimmunizedca.org



commended vaccines, dule in the past year. such as immunization

ned".


professionals to review and rank arded will be made by the CDPH health department and the g criteria to score the below: of a vaccine or vaccines

t activities.

its goals.

	Max. points
Pass/Fail	
n; justify selections	15
2	50
if QI activities	10
g its goal	5
	20
	100

isease Control kway, Bldg. P, 2nd Floor, Richmond, CA 94804 Internet Address:



munization Branch by 5:00 PM on ia@cdph.ca.gov, telephone

ence of nonprofit status, and 3)

tivities undertaken. Typically, a eives payment during the is will be the method of

shina.Escalada@cdph.ca.gov by

.M. PT

: P.M. PT


approval

ay file an appeal with CDPH tion, or practice that the tion or selection process. There is nplete. Appeals shall be limited to

ation review process, the format L. valuating and scoring the

ived within five (5) business days s denied. The CDPH Immunization ritten appeal letter. The decision be the final remedy. Appellants en appeal letter. CDPH it believes all appeals have been tion Branch.

ase Control kway, Bldg. P, 2nd Floor, Richmond, CA 94804 Address:




6-22 (the EO) regarding Economic ic Sanctions" refers to sanctions ine, as well as any sanctions ntracts with, and to refrain from nined to be a target of Economic of Economic Sanctions or is lies, that shall be grounds for e written notice of such ritten response. Termination shall

iligence to determine if the ate Economic Sanctions lists. If to the Grant. Resources for he DGS Office of Legal Services"

tate will send a separate Compliance with this Economic d, including with respect to, but e sanctions identified on the U.S. [e-issues/financial-related-sanctions](#)). Failure to

ase Control kway, Bldg. P, 2nd Floor, Richmond, CA 94804 Address:



CDPH IZB – Request for Applications (RFA)

- Who: California FQHCs/FQHC look-alikes (>25,000 patients)
- What: To assess and improve adult immunization levels in Community Health Centers
- Grant Period: July 2023 - June 2024
- Amount: Up to \$127,000 (one award)
- Applications Due: Friday, November 10, 2023
- RFA Link: <https://eziz.org/assets/docs/COVID19/RFAAdultImmunization2023-24.pdf>
- Contact: Robina Escalada (Robina.Escalada@cdph.ca.gov)

Required Training for BAP Providers

Product Training

Any staff who store, handle, or administer COVID-19 vaccines must complete [COVID-19 Vaccine Product Training](#)—only for products your location will order—prior to receiving vaccine shipments. (For Novavax, refer to [EUA Fact Sheet for HCPs](#).)

Eligibility Screening & Documentation

Train staff who conduct eligibility screening using [Eligibility Based on Insurance Status](#) and [Eligibility Screening & Documentation Requirements](#).

Requirements at a Glance




This document will be continuously updated as information and new resources become available.

Who's Eligible: Providers serving uninsured/underinsured adults through public health departments, Federally Qualified Health Centers (FQHCs)/Rural Health Centers, tribal clinics, Indian Health Services sites, and additional providers deemed eligible by LHDs

What You Need to Know: The California Bridge Access Program provides no-cost COVID-19 vaccines to uninsured/underinsured adults (19 years and older) served by enrolled and approved providers. Vaccine supply is limited. Insured patients—including patients covered by Medicare and Medi-Cal—are NOT eligible. Providers must conduct eligibility screening and proper documentation with each administration to ensure vaccines go to eligible adults. Limited supplies of the updated monovalent (XBB subvariant) COVID-19 vaccine will be provided through two components of the state program:

Program Components:

- Public Health Component:** Coordinated by State Immunization Programs, in collaboration with existing public health infrastructure. CDPH will allocate to each LHD doses of COVID-19 vaccines based on federally provided vaccine purchase funding limits. Doses allocated will support vaccination of uninsured and under-insured populations at local health departments, FQHCs/RHCs, Tribal and IHS clinics, and other safety net providers selected by LHDs for enrollment in the CA Bridge Access Program.
- Pharmacy component:** Independently coordinated by CDC with 3 contracted pharmacy chains/organizations: CVS, Walgreens, and E-True North (for independent and other pharmacies), who will receive supplies replenished by the COVID-19 Vaccine manufacturers directly; the specific sites receiving vaccine are not yet determined, and enrollment information is still forthcoming. All information in this document addresses the public health component.

Topic	Requirements & Guidance	Resource Links
	What's new for existing COVID-19 providers? California's BAP Provider Participation Agreement replaces the federal COVID-19 Provider Agreement. While most requirements remain the same, look for orange stars identifying new requirements and job aids to assist you.	
Primary Documents	<ul style="list-style-type: none">BAP Provider Participation AgreementBAP Provider Operations Manual (and Startup Worksheet for new providers)COVID-19 Vaccine Provider FAQs	
Key Roles	<ul style="list-style-type: none">Organization Vaccine Coordinator (completes Section A enrollment for parent company)Vaccine Coordinator (completes Section B enrollment in myCAvax for affiliated locations)	Enrollment Kit

California Department of Public Health, Immunization Branch

1

IMM-1468 (10/19/23)

New COVID-19 Vaccine Information Statement (CDC)

Currently, providers are required by law to provide EUA fact sheets to vaccine recipients or their caregivers for all uses of [Novavax](#) and when [Moderna](#) or [Pfizer](#) vaccines are given to children 6 months through 11 years of age.

For recipients who are 12 or older receiving Pfizer or Moderna vaccine, a provider may use the COVID-19 Vaccine Information Statement (VIS).

The screenshot shows the CDC website's 'Vaccine Information Statements (VISs)' section. The header includes the CDC logo and the tagline 'CDC 24/7: Saving Lives, Protecting People™'. A search bar and a 'Vaccines site' dropdown are in the top right. The main heading is 'Vaccine Information Statements (VISs)'. Below this, a breadcrumb trail reads 'VIS Home > Current VISs'. A left sidebar contains links: 'VIS Home', 'Current VISs' (selected), 'COVID-19 | VIS', 'What's New with VISs', 'About VISs', 'Dates of Current and Past VISs', and 'VIS Barcodes'. The main content area is titled 'COVID-19 VIS' with the subtitle 'COVID-19 Vaccine: What You Need to Know'. It includes a 'Print' link and a 'Current Edition Date: 10/19/2023'. A list of links offers 'Print VIS' (2 pages) and 'RTF file' (3 pages) for electronic use, along with a link for 'More information about COVID-19 vaccination'. A 'Related Link' box on the left contains 'Vaccines & Immunizations' and 'Immunization Schedules'. The section 'Why get vaccinated?' explains that COVID-19 vaccine can prevent COVID-19 disease and reduce severity. It also states that COVID-19 is caused by SARS-CoV-2 and describes symptoms. A list of symptoms is provided: 'Possible symptoms include fever or chills, cough, shortness of breath or difficulty breathing, fatigue (tiredness), muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea.' and 'More serious symptoms can include trouble breathing, persistent pain or pressure in the chest, new confusion, inability to wake or stay awake, or pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone.' A right sidebar titled 'On This Page' lists links: 'Why get vaccinated?', 'COVID-19 vaccine', 'Talk with your health care provider', 'Risks of a vaccine reaction', 'What if there is a serious problem?', 'Countermeasures Injury Compensation Program', and 'How can I learn more?'.

New RSV Vaccine Information Statement (CDC)

The screenshot shows the CDC's Vaccine Information Statements (VISs) website. The header includes the CDC logo and tagline, a search bar, and a dropdown menu for 'Vaccines site'. The main heading is 'Vaccine Information Statements (VISs)'. Below this, a breadcrumb trail reads 'VIS Home > Current VISs'. A left sidebar contains a 'VIS Home' link and a 'Current VISs' section with a highlighted link for 'Respiratory Syncytial Virus Infection (RSV) VIS'. Other sidebar links include 'What's New with VISs', 'About VISs', 'Dates of Current and Past VISs', and 'VIS Barcodes'. A 'Related Link' box at the bottom left points to 'Vaccines & Immunizations' and 'Immunization Schedules'. The main content area is titled 'Respiratory Syncytial Virus (RSV) Vaccine VIS' with the subtitle 'RSV Vaccine: What You Need to Know'. It includes a 'Print' link and a 'Current Edition Date: 10/19/2023'. A central box offers links to 'Print VIS' (2 pages) and 'RTF file' (3 pages, for electronic use), along with a link to 'More information about RSV vaccination'. A section titled 'Why get vaccinated?' explains that RSV vaccine can prevent lower respiratory tract disease caused by RSV, which is a common virus causing mild, cold-like symptoms. It notes that RSV can cause illness in people of all ages but is especially serious for infants and older adults. Two bullet points list high-risk groups: infants up to 12 months (especially those 6 months and younger, and children born prematurely or with chronic lung/heart disease or weakened immune systems) and adults at highest risk (older adults, those with chronic medical conditions like heart or lung disease, weakened immune systems, or those in nursing homes or long-term care facilities). A right sidebar titled 'On This Page' lists links: 'Why get vaccinated?', 'RSV vaccine', 'Talk with your health care provider', 'Risks of a vaccine reaction', 'What if there is a serious problem?', and 'How can I learn more?'.

CDC Centers for Disease Control and Prevention
CDC 24/7: Saving Lives. Protecting People™

Search Vaccines site

Vaccine Information Statements (VISs)

VIS Home > Current VISs

[VIS Home](#)

Current VISs

[Respiratory Syncytial Virus Infection \(RSV\) VIS](#)

What's New with VISs

About VISs

Dates of Current and Past VISs

VIS Barcodes

Related Link

[Vaccines & Immunizations](#)

[Immunization Schedules](#)

Respiratory Syncytial Virus (RSV) Vaccine VIS

RSV Vaccine: What You Need to Know

[Print](#)

Current Edition Date: 10/19/2023

- [Print VIS](#) [2 pages]
- [RTF file](#) [3 pages] (For use in electronic systems)
- [More information about RSV vaccination](#)

Why get vaccinated?

RSV vaccine can prevent lower respiratory tract disease caused by **respiratory syncytial virus (RSV)**. RSV is a common respiratory virus that usually causes mild, cold-like symptoms.

RSV can cause illness in people of all ages but may be especially serious for infants and older adults.

- Infants up to 12 months of age (especially those 6 months and younger) and children who were born prematurely, or who have chronic lung or heart disease or a weakened immune system, are at increased risk of severe RSV disease.
- Adults at highest risk for severe RSV disease include older adults, adults with chronic medical conditions such as heart or lung disease, weakened immune systems, or certain other underlying medical conditions, or who live in nursing homes or long-term care facilities.

On This Page

- [Why get vaccinated?](#)
- [RSV vaccine](#)
- [Talk with your health care provider](#)
- [Risks of a vaccine reaction](#)
- [What if there is a serious problem?](#)
- [How can I learn more?](#)

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 [Pfizer](#) and [Moderna Storage and BUD Labels](#) (Novavax coming soon!)

**Updated 2023-2024 Formula
Pfizer-BioNTech COVID-19 Vaccine**

STORAGE LABEL Store vaccine between -90°C and -60°C (-130°F and -76°F) until the expiration date.

Ages: 12 years and older

☐ Single-Dose Vials
☐ Manufacturer-Filled Syringes

Use the single-dose vial or manufacturer-filled syringe for ONE recipient.
Discard vial or syringe after administering.

Updated 2023-2024 Vaccine
No Diluent Required

**Updated 2023-2024 Formula
Pfizer-BioNTech COVID-19 Vaccine**

BEYOND-USE LABEL Store vaccine between 2°C and 8°C (36°F and 46°F) for up to 10 weeks.

Ages: 12 years and older

Lot number(s): _____

Today's date: ____/____/____

Use by Date*: ____/____/____

☐ Single-dose Vials
☐ Manufacturer-Filled Syringes

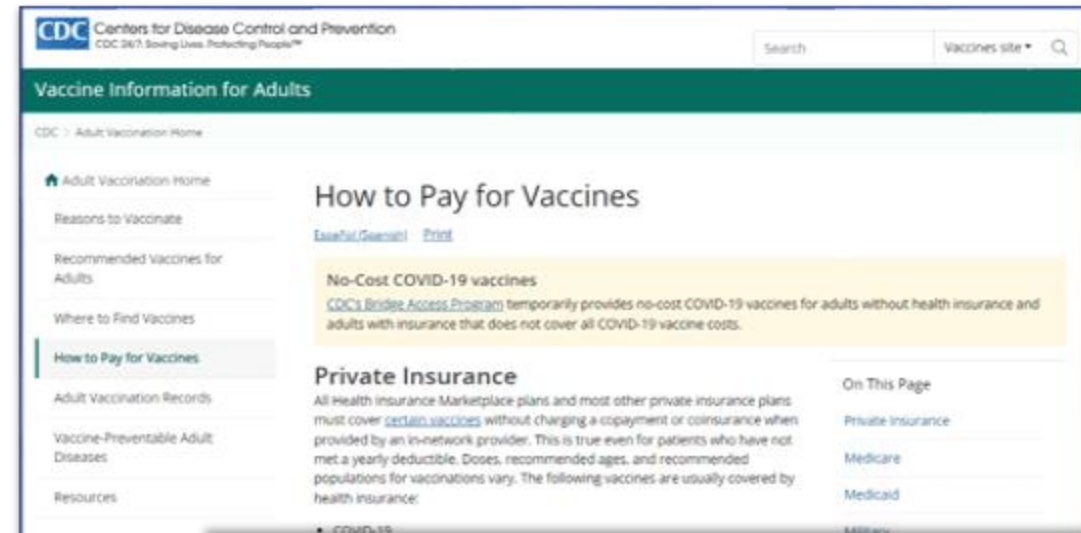
Updated 2023-2024 Vaccine
No Diluent Required

*Vaccine must be used within 10 weeks.
Do NOT use after this date.

How to Pay for Vaccines

New CDC resource covers:

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



CA DMHC Resource in English and Spanish

KNOW YOUR HEALTH 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 plans¹ 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 (in- or 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)).

980 9th Street, Suite 500
Sacramento, CA 95814

Visit HealthHelp.ca.gov to submit a complaint form online or call 1-888-466-2219

CONOZCA SUS DERECHOS DE ATENCIÓN MÉDICA



Pruebas, vacunas y tratamiento del COVID-19

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

Los planes de salud¹ 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 leyes estatales de California agregan seis meses a los requisitos 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 requisitos 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.








¿Sabía que? Los afiliados al plan de salud tienen derecho a ocho pruebas del COVID-19 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)).

980 9th Street, Suite 500
Sacramento, CA 95814

Visite HealthHelp.ca.gov para enviar un formulario de queja en línea o llame al 1-888-466-2219

Vaccine Administration Data

Sharon Brummitt, CDPH

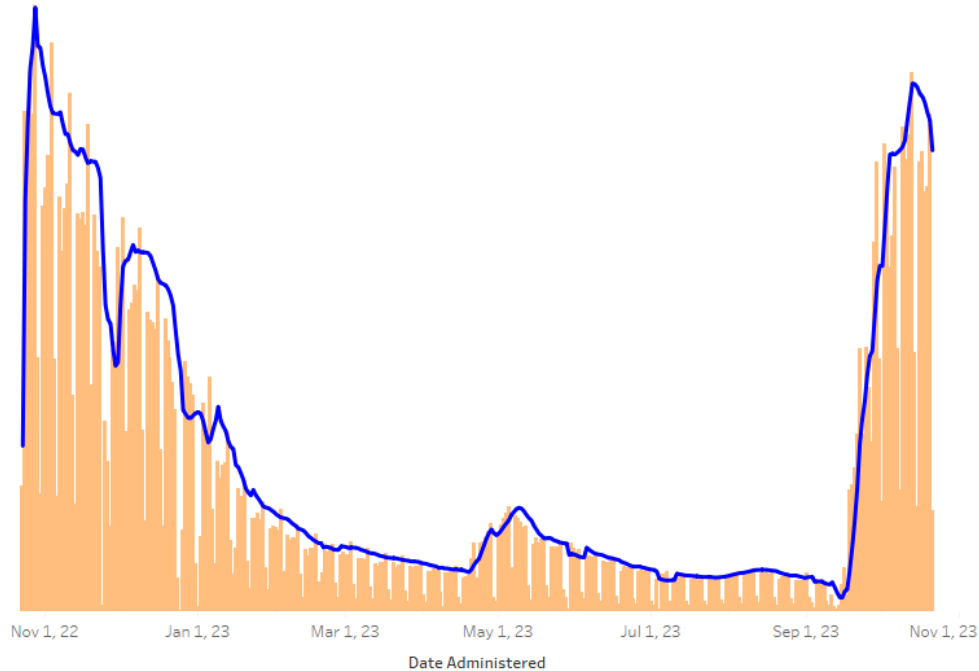
Vaccine Administration Summary

as of October 23, 2023

91,915,781

Total Doses Administered:

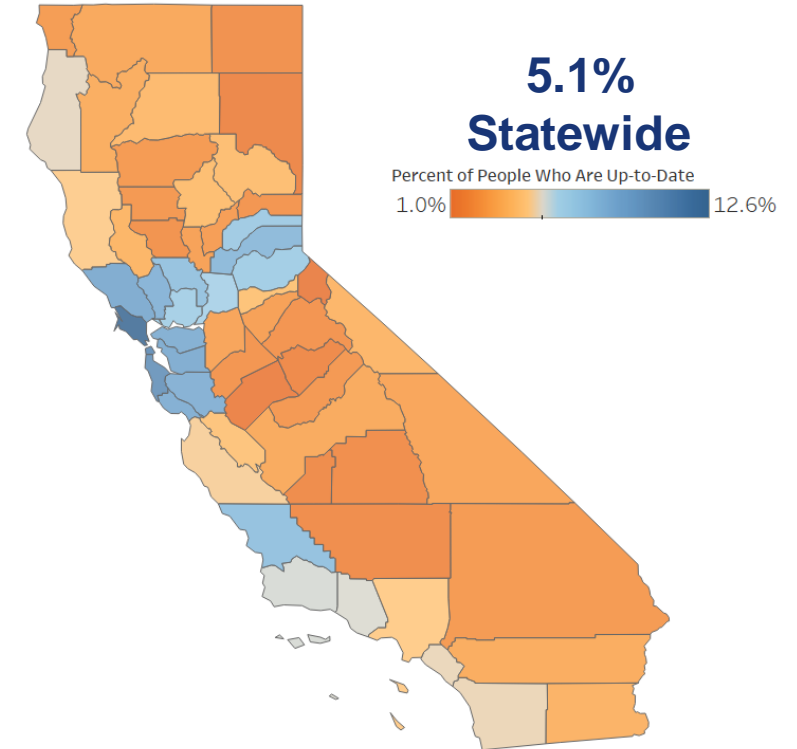
Daily Doses Administered: **Statewide**



2,057,020

Total Up-to-Date* Recipients:

Percent of Population Who Are Up-to-Date



*Has received a dose of the Updated 2023-2024 vaccine or a bivalent dose within the past 2 months

Trends in Vaccine Administration

as of October 23, 2023

Most Recent Eligibility Groups

- Updated 2023-2024 vaccine for 6 months and older

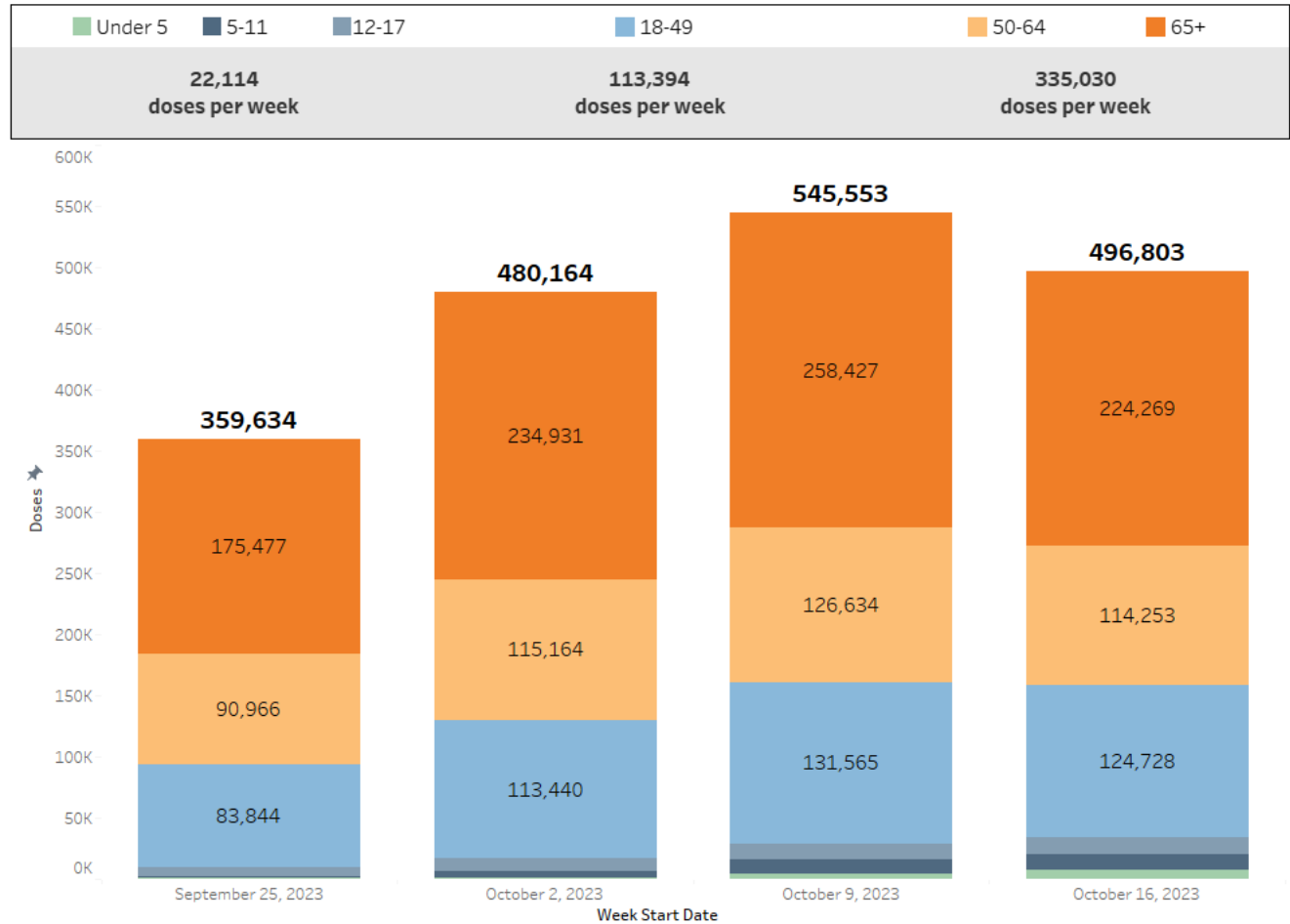
FDA NEWS RELEASE

FDA Takes Action on Updated mRNA COVID-19 Vaccines to Better Protect Against Currently Circulating Variants

[f Share](#) [t Tweet](#) [in LinkedIn](#) [Email](#) [Print](#)

For Immediate Release: September 11, 2023

Doses Administered by Age Group, Past 4 Weeks



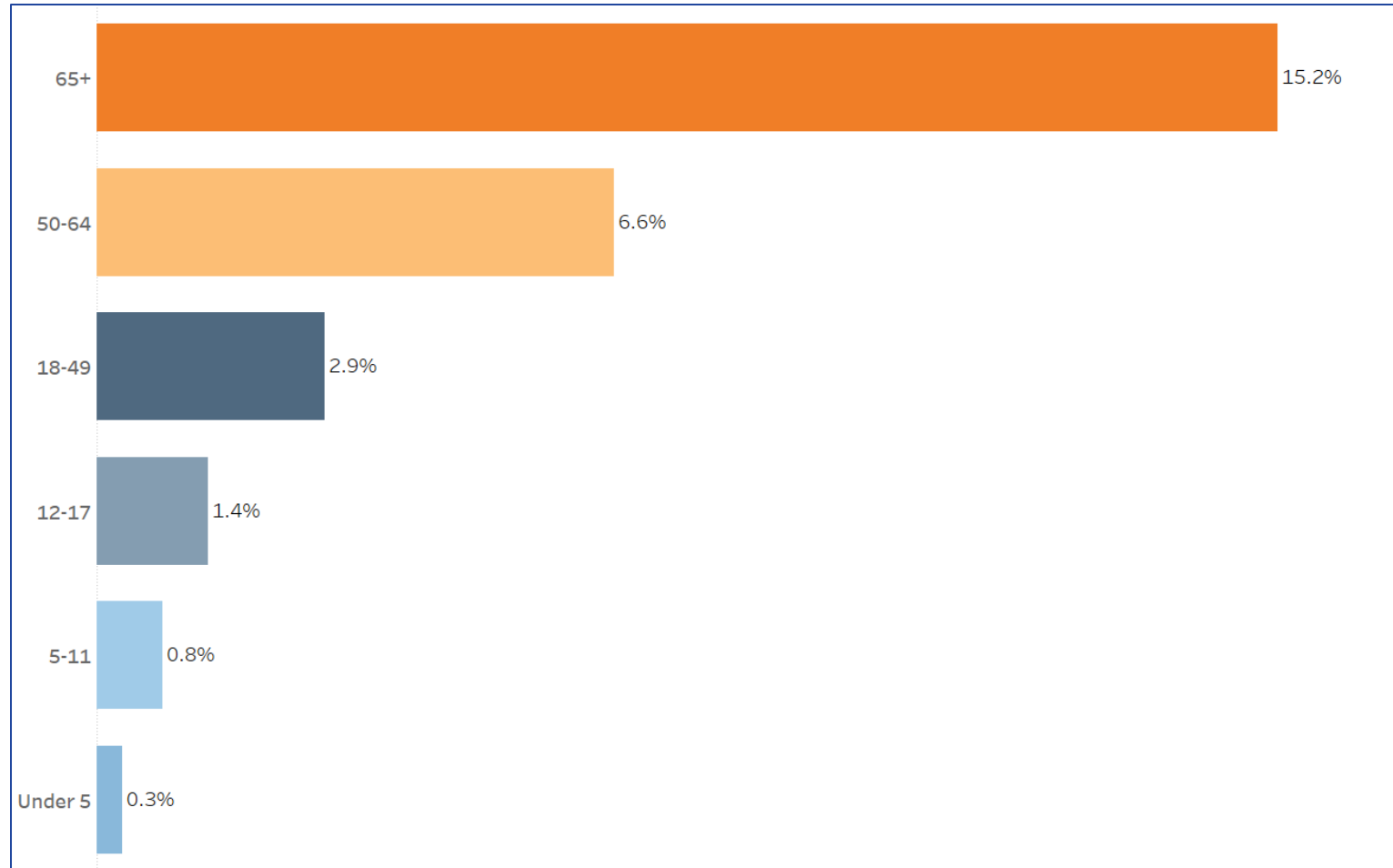
Up-to-Date Status by Age

as of October 23, 2023

By Age

Highest uptake in 50-64 and 65+

Percent Up-to-Date in 65+ (15.2%) is **2.3 times** greater than 50-64 (6.6%), **5.2 times** greater than 18-49 (2.9%), and **10+ times** greater than pediatric age groups



Up-to-Date Status by Race/Ethnicity*

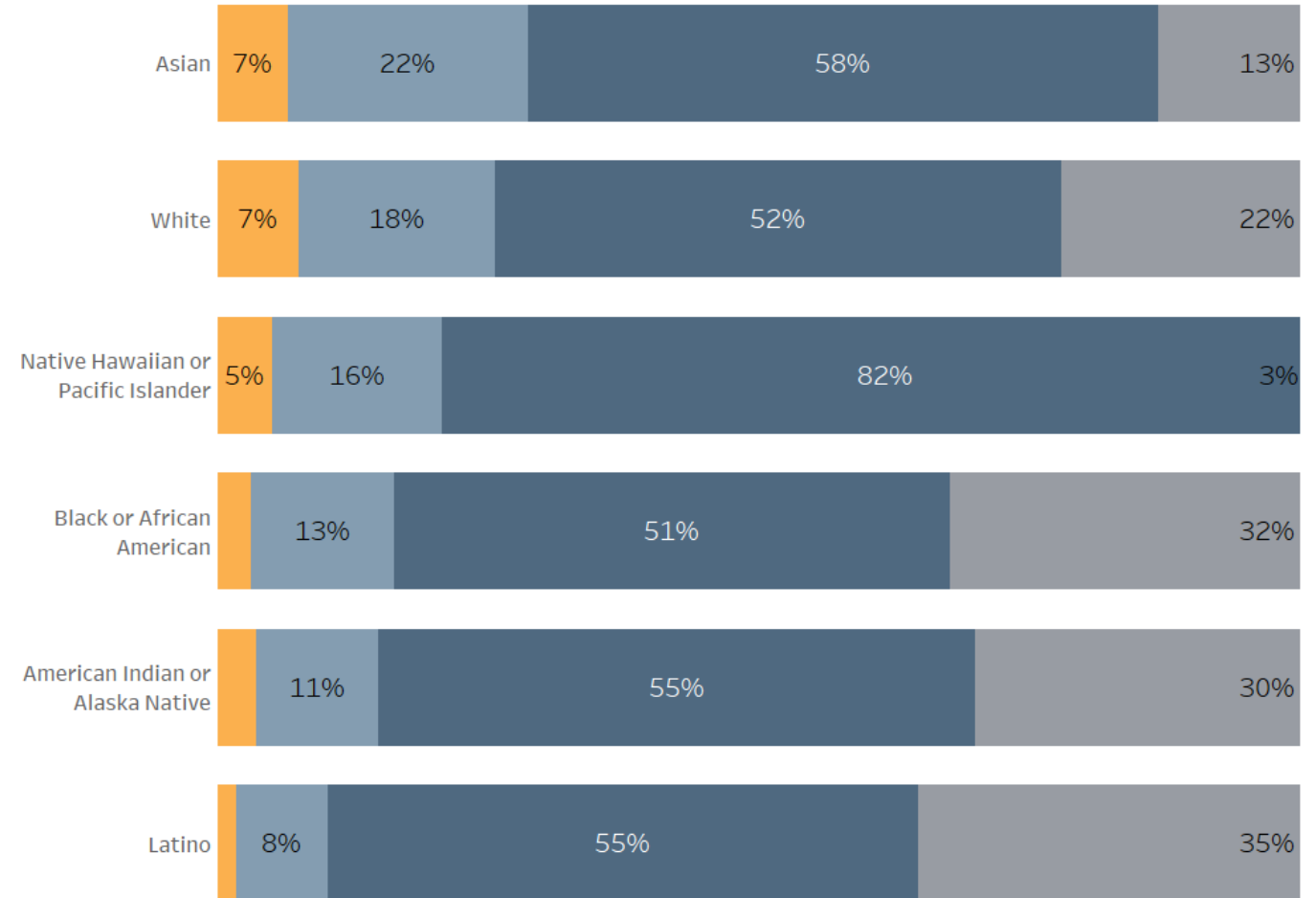
as of October 23, 2023

Race/Ethnicity: % of Population by Vaccine Status:

Up To Date | Received Bivalent but Not Up to Date | Any Shot but Not Up To Date | No Shots

Highest uptake in Asian and White

Over half of those in each race/ethnicity group have received a shot but are not Up-to-Date



*Vaccination rate estimates for some groups, such as NHPI, may be affected by differences in how demographic data is collected by the Census and at the time of vaccination

Updated 2023-2024 Doses by Provider

as of October 23, 2023

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

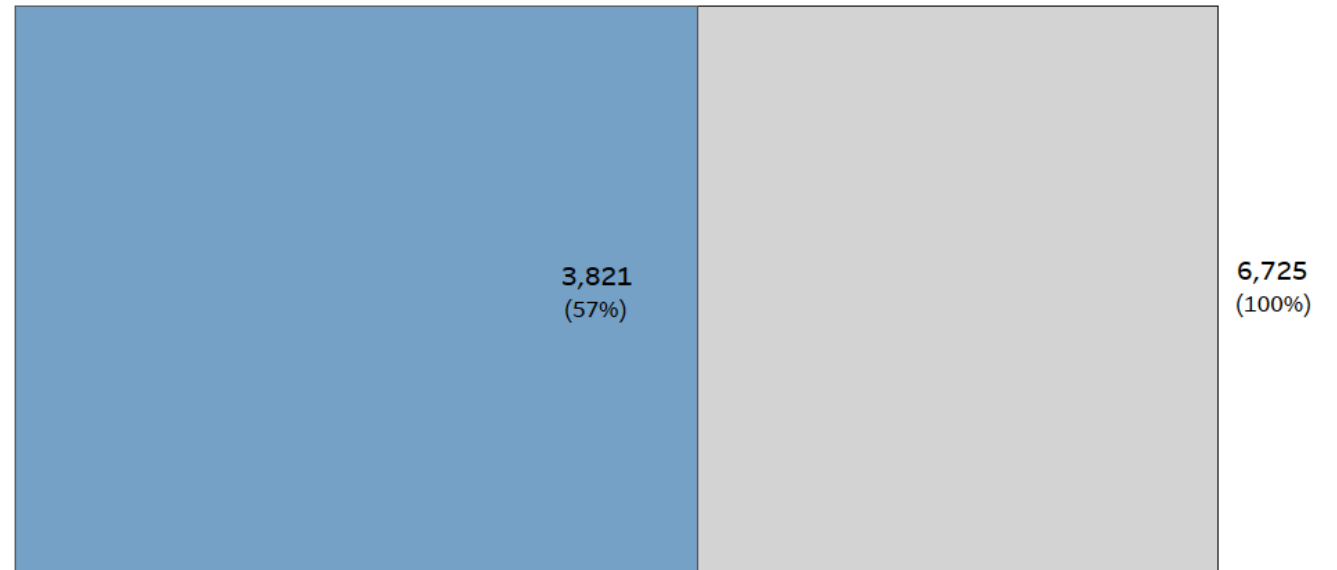
By provider

3,821

Total Updated 2023-2024 Dose Providers
Reported

57% of previous Bivalent
vaccine Providers

+6% pt increase from last week



Data Summary

as of October 23, 2023

Key Metrics

91.9 million doses administered

| **+497K** doses administered

5.1% Statewide who are Up-to-date

| **2.1 million** Up-to-Date recipients

15.2% 65+ Up-to-date

| **981K** 65+ Up-to-Date recipients

System Notes

- Public dashboard Up-to-Date status now **includes** the Updated 2023-2024 guidelines
 - Public dashboard updated monthly – LHJ Dashboard updated daily
- Email cdphvaccinedatateam@cdph.ca.gov for questions and comments

Clinical Guidance

Caterina Liu, MD, CDPH

Nirsevimab (Beyfortus™) Shortage

- Current shortage of new respiratory syncytial virus (RSV) immunization nirsevimab (Beyfortus™) due to higher than anticipated demand
- CDC recommends prioritizing available nirsevimab 100mg doses for infants at the highest risk for severe RSV disease
- Prenatal care providers should encourage pregnant people to receive RSVpreF vaccine (Abrysvo, Pfizer) between 32 0/7 and 36 6/7 weeks of gestation to prevent RSV lower respiratory tract infection in infants
 - Discuss potential nirsevimab supply concerns when counseling pregnant people
 - Encourage pregnant people to receive RSVpreF vaccine (Abrysvo, Pfizer) which is effective and will reduce the number of infants requiring nirsevimab during the RSV season.
 - Either RSVpreF vaccination or nirsevimab immunization for infants is recommended to prevent RSV-associated lower respiratory tract disease in infants, but administration of both products is not needed for most infants.

CDC Health Advisory: Limited Availability of Nirsevimab in the United States—Interim CDC Recommendations to Protect Infants from Respiratory Syncytial Virus (RSV) during the 2023–2024 Respiratory Virus Season

- For infants weighing <5 kg, ACIP recommendations are **unchanged**:
 - Infants born before October 2023, administer a 50mg dose of nirsevimab now
 - Infants born during October 2023 and through RSV season, administer a 50mg dose of nirsevimab in the first week of life.
- For infants weighing ≥5 kg, **prioritize** using 100mg nirsevimab doses in **infants at highest risk of severe RSV disease**:
 - Young infants aged <6 months.
 - American Indian and Alaska Native infants aged <8 months.
 - Infants aged 6 to <8 months with conditions that place them at high risk of severe RSV disease*
- Use of palivizumab (Synagis™) in Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection
 - Follow [AAP recommendations](#) for palivizumab-eligible infants aged <8 months when the appropriate dose of nirsevimab is not available.
 - In palivizumab-eligible children aged 8–19 months, suspend using nirsevimab for the 2023–2024 RSV season. These children should receive palivizumab per [AAP recommendations](#).

*Premature birth at <29 weeks' gestation, chronic lung disease of prematurity, hemodynamically significant congenital heart disease, severe immunocompromise, severe cystic fibrosis (either manifestations of severe lung disease or weight-for-length less than 10th percentile), neuromuscular disease or congenital pulmonary abnormalities that impair the ability to clear secretions.

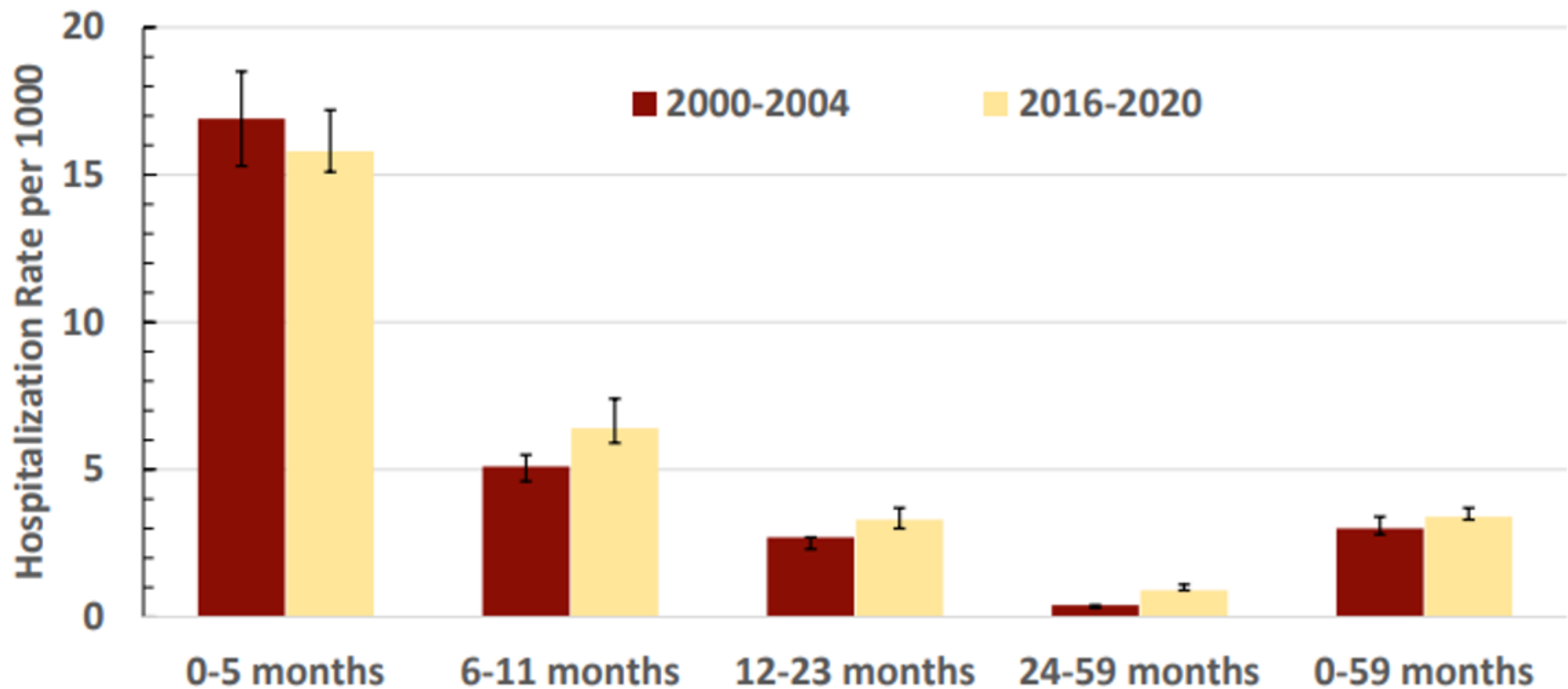
CDC Health Advisory: Limited Availability of Nirsevimab in the United States—Interim CDC Recommendations to Protect Infants from Respiratory Syncytial Virus (RSV) during the 2023–2024 Respiratory Virus Season

- Continue offering nirsevimab to American Indian and Alaska Native children aged 8–19 months who are not palivizumab-eligible and who live in remote regions, where transporting children with severe RSV for escalation of medical care may be challenging, or in communities with known high rates of severe RSV among older infants and toddlers.
- Avoid using two 50mg doses for infants weighing ≥ 5 kilograms (≥ 11 pounds)
 - 50mg doses should be reserved only for infants weighing < 5 kilograms (< 11 pounds), for example those born during the season who will be at increased risk for severe RSV illness because of their young age.
 - Providers should be aware that some insurers may not cover the cost of two 50mg doses for an individual infant.

RSV Risk Factors

- Chronologic age is the **single most important risk factor** for RSV hospitalization
 - More than 58% to 64% of pediatric RSV hospitalizations occur in the first 5 months after birth
 - The majority of RSV hospitalizations occur during the first year of life.
- Certain subgroups of infants with comorbidities, such as prematurity, CLD, or hemodynamically significant CHD, have increased risks for RSV hospitalization.
- Hospitalization rates for RSV disease and all causes of bronchiolitis are higher in American Indian and Alaska Native (AI/AN) infants and children than in the general US child population of the same ages.
- Regardless of the presence or absence of comorbidities, RSV hospitalization rates decline during the second RSV season for most children.

RSV-Associated Hospitalization Rates are Highest in Children 0-5 months and Decrease with Increasing Age, NVSN



2000-2004: Adapted from Hall et al, NEJM 2009; 2016-2020: CDC unpublished data

American Academy of Pediatrics (AAP) RSV Prevention Page

RSV Prevention Products

The following are products to prevent severe RSV infection in children.

Nirsevimab (Beyfortus)

A monoclonal antibody product included in the Vaccines for Children Program and offering long-lasting protection and was recently recommended for all infants in the 2023-2024 RSV season.

Nirsevimab Frequently Asked Questions

Get answers to your questions about nirsevimab.

Ordering & Product Information

Considerations for calculating and financing your orders, product cost, formulation and storage requirements.

Implementation Resources

View these tools to assess readiness and guide implementation of nirsevimab administration in inpatient and outpatient settings.

Administration, Dosing and Schedule

Find the latest recommendations for nirsevimab, dosing guidance and how it is administered.

Nirsevimab Administration Visual Guide

An algorithm to guide practices and facilities who are administering nirsevimab.

Payment and Coding

Learn more about what codes to use to get paid for administering nirsevimab in your practice.

Palivizumab (Synagis)

A short-acting monoclonal antibody product, available since 1998 and recommended for high-risk infants and young children.

Palivizumab Policy

Updated Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection

Palivizumab Technical Report

Palivizumab Prophylaxis in Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection

Additional Resources

- [The American College of Obstetricians and Gynecologists \(ACOG\) Maternal Respiratory Syncytial Virus Vaccination Practice Advisory](#)
- [CDC RSV Immunizations Overview](#)
- [CDC RSV Immunization for Infants and Young Children](#)
- [CDC RSV Vaccine for Pregnant People](#)

ACIP Meeting

CDC's Advisory Committee on Immunization Practices (ACIP) Meeting

Wednesday, October 25th-Thursday, October 26th

[Webcast Link and Agenda Available Here](#)

Topics with votes:

- Meningococcal and Mpox vaccines
- 2024 combined immunization schedules

Topics without votes:

- RSV, Influenza, Chikungunya, Dengue, COVID-19, Pneumococcal vaccines

Respiratory Syncytial Virus (RSV)

Claudia Aguiluz, CDPH

Beyfortus™ Vaccine Supply & Ordering Update-VFC

- Ordering for Nirsevimab is **currently unavailable** in myVFCVaccines. Providers were notified on [10/16/2023](#) & [10/26/2023](#)
- Ordering will resume as soon as CDC allows ordering, allocations are in place, and supply can support ordering.
- Most orders placed from 10/11-10/16 have shipped.



- Given that VFC vaccine supply will be allocated, doses of Nirsevimab (Beyfortus™) must be **administered to VFC eligible patients only. Borrowing is not allowed.**

Description	Quantity Ordered	Quantity Shipped	% Shipped	Number of PINs Ordering
RSV; 100mg; SYR; 5-pack	4,990	4,990	100	141
RSV; 50mg; SYR; 5-pack	3,855	3,405	88	171
Grand Total	8,845	8,395	95	312

Beyfortus™ Vaccine Supply Update

State Allocations:

- CDPH has received a limited number of Beyfortus™ 50mg (0.5 ml) dose formulation, expected to support ordering for the next 2-3 weeks.
- -0- doses for the 100mg (1.0 mL) formulation have been allocated, as supply is not available.
- CDPH is currently determining the provider types that doses would be made available to, potentially focusing on birthing hospitals, Tribal/Indian Health, and LHDs.

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, 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*

Birth Period	Weight <5kg	Weight ≥5kg
If born October-March 1 dose in <1 week of birth	Nirsevimab 50mg	Nirsevimab 100mg
If born April-September 1 dose in October/November		

or as soon as possible during the RSV season

High-Risk Children 8-19 Months Entering 2nd RSV Season

Dose	Weight
200mg dose before RSV season	Nirsevimab** 100mg
or as soon as possible during the RSV season	Nirsevimab** 100mg

(Two 100mg syringes, same day, different sites, regardless of weight)

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 immunocompromise**
- **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)

Vaccine Management

Josh Pocus, My Turn, and Claudia Aguiluz, myCAvax

What's Next in My Turn? – Release 44 (1 of 3)



New updates for Patients will launch on
Thursday, November 2, 2023!

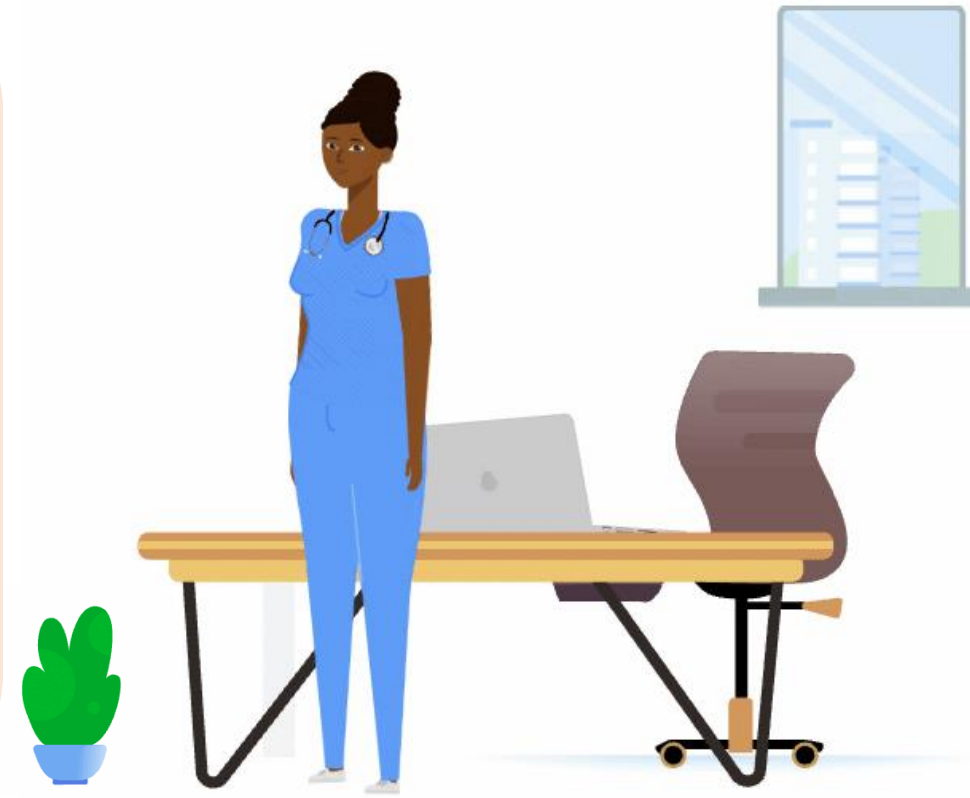
Release Highlights



Patients will now be able to:

- ✓ Only view the vaccine brand for the vaccine tags on the 'Select a Location' page
- ✓ View the updated description text below the 'Vaccine Brand' header and the numbers added next to each step on the 'Select date & time' page
- ✓ View a new 'Other' option in the dropdown of the Primary Carrier question that opens a text field when selected
- ✓ See the refreshed look and feel of the My Turn Public portal
- ✓ See the 'Pfizer - All doses' and 'Moderna – All doses' tag on the 'Walk-in' page if all doses are offered
- ✓ View a new note added in the 'Health Insurance' section about the patient's insurance information that will be verified at the time of their appointment
- ✓ See an updated footer on the Public portal that includes a link to report an issue.

Public Updates



What's Next in My Turn? – Release 44 (2 of 3)



New updates for Clinic Managers, Vaccine Administrators, and new My Turn Users will launch on **Thursday, November 2, 2023!**

Release Highlights



Clinic Managers and Vaccine Administrators will be able to

- ✓ View the updated COVID-19 timing chart hyperlink within the attestation under the 'Patient Background' field while on the Vaccine Administration and IIS flow, and under the 'Vaccine Brand' field while single editing an appointment and on the Walk-in flow
- ✓ View the updated 'Uninsured status confirmed?' checkbox attestation under the 'Health Insurance' section if they select 'No' in response to the question 'Does the patient have health insurance?' in the Walk-in flow

Clinic Managers and Vaccine Administrators will no longer be able to:

- ✓ View the 'Vaccine Supply' section while viewing / editing clinic details
- ✓ View the tooltip on the 'End Date' field

New My Turn users will be able to:

- ✓ Receive an automated confirmation email for their application submission, approval, or rejection with the updated Help Desk email and hours of operation
- ✓ See the revised Help Desk email and hours of operation in an error message while adding a new provider location in the unauthenticated digital enrollment flow

What's New in My Turn? – Release 44 (3 of 3)



New updates for Clinic Managers and myCAvax users will launch on
Thursday, November 2, 2023!

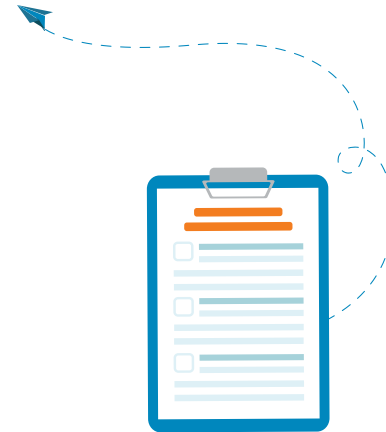
Release Highlights



Clinic Managers and myCAvax users will be able to:

- ✓ Search for an existing user on the 'Provider of Record' field that will filter for contacts with only CEO / CMO / POR titles
- ✓ Input an existing location and edit missing fields while on the authenticated Digital Enrollment flow
- ✓ View the character limit for input in any 'Name' or 'Email' fields, matching the myCAvax Digital Enrollment flow
- ✓ View a new field labeled as "Please specify 'Other' Provider Type" in Step 2 of the Provider Location Information if 'Other' is selected as the provider type option
- ✓ View the updated Help Desk hours and email when entering duplicate IIS numbers on the IIS information page and in both the new provider location and existing provider location flows for locations associated with the My Turn program

My Turn Clinic



My Turn Public Redesign

The My Turn Public portal will be revamped with a refreshed appearance and user experience, designed to ensure it is more accessible, user-friendly, aesthetically pleasing, and efficient for patients during the process of booking appointments.



The image displays two screenshots of the My Turn Public portal. The left screenshot shows the 'Walk-in clinic' section, which includes a search form for zip code 94541 and a 'Search Radius' slider. The right screenshot shows the 'Filter results' section, which includes a map of the San Francisco Bay Area and a list of clinics.

Walk-in clinic
No appointment needed

Find a walk-in clinic today by entering your zip code below to find locations near you. Use the "Filter results" drop-downs to find clinics that offer the vaccine and services you need.

Walk-in reminders

- When possible, bring documentation with your name on it to ensure the name used on your vaccination record is correct.
- Before making an appointment, please contact the clinic to confirm your insurance, Medi-Cal or Medicare plan is accepted.
- People younger than 18 years must have parental or guardian consent unless the patient is an emancipated minor or seeking treatment after potentially being exposed to a contagious disease.
- Give yourself enough time to fill out a few patient forms when you arrive.

Please select a vaccine to learn more:

Select one

94541

Submit

Search Radius

200 miles

Filter results

Pfizer

Search by insurance status:

Search by age:

Search

Clear

St. John's Well Child and Family Ctr - Magnolia

1401 Golf Course Road, Hayward, CA 94541

Dates available: 7/12 - 8/12

Mon - 09:00 AM - 03:00 PM
Tue - 09:00 AM - 03:00 PM
Wed - 09:00 AM - 03:00 PM
Thu - 09:00 AM - 03:00 PM
Fri - 09:00 AM - 03:00 PM

1-800-955-1234

Pfizer (24h) Moderna (24h)

Before scheduling an appointment, please contact the clinic to confirm the patient's insurance is accepted.

Walk-in welcome. For all appointments, please bring valid ID.

St. John's Well Child and Family Ctr - Magnolia

1401 Golf Course Road, Hayward, CA 94541

Dates available: 7/12 - 8/12

Mon - 09:00 AM - 03:00 PM
Tue - 09:00 AM - 03:00 PM
Wed - 09:00 AM - 03:00 PM
Thu - 09:00 AM - 03:00 PM
Fri - 09:00 AM - 03:00 PM

1-800-955-1234

Pfizer (24h) Moderna (24h)

Before scheduling an appointment, please contact the clinic to confirm the patient's insurance is accepted.

Walk-in welcome. For all appointments, please bring valid ID.

Ready to get vaccinated?

Make an appointment

Reschedule or cancel your appointment

Need help or have questions?
Call the CDPH Call Center at 1-833-422-4255
Mon-Fri 8AM-5PM

Report an issue with the My Turn website

Official California State Government Website
Please review the Privacy Policy

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



New updates for LHDs launched on
Friday, October 20, 2023!

Release Highlights



LHDs can now:

Program

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

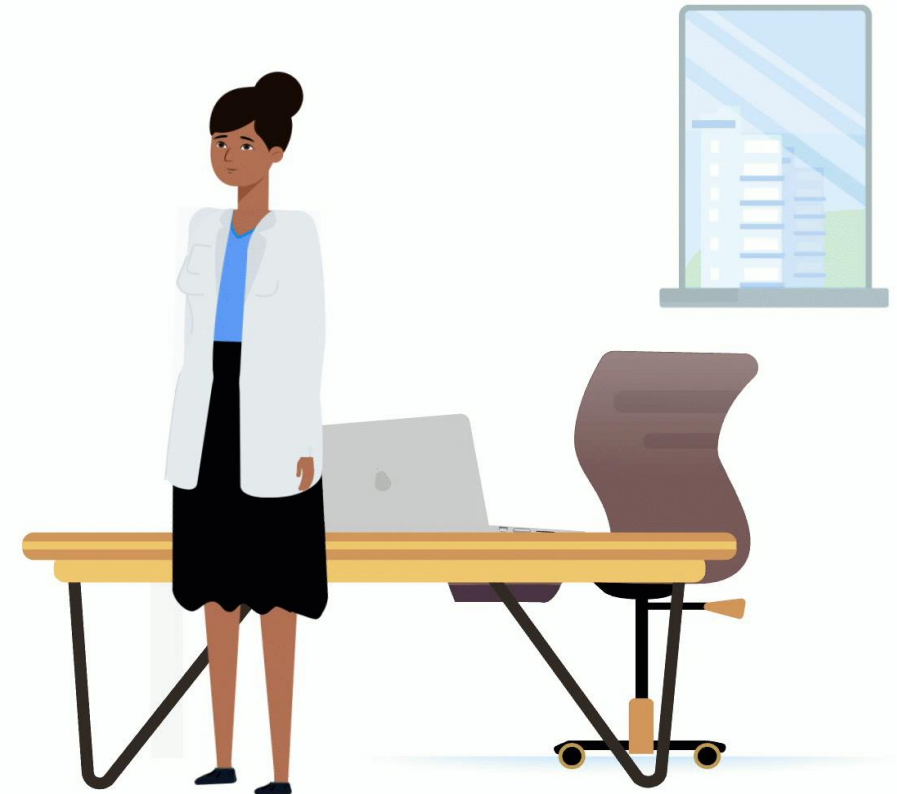
Provider Salesforce Reports and Dashboards

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

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

LHDs



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



New updates for providers launched on
Friday, October 20, 2023!



Release Highlights



Providers can now:

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

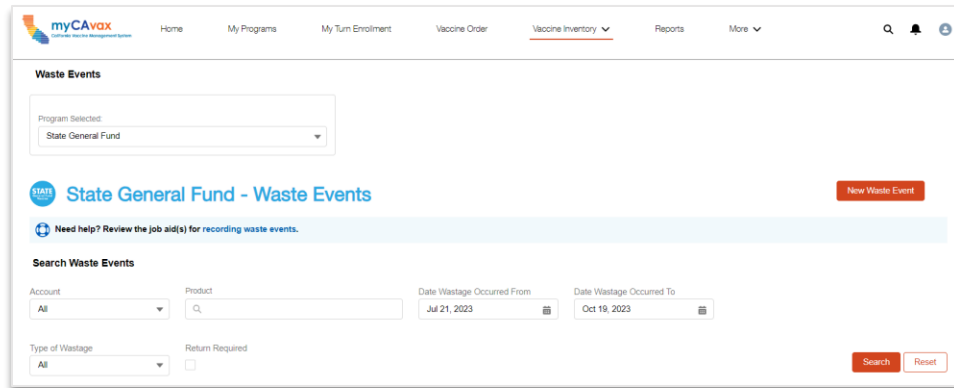
- ✓ See the new BAP logo on the program tile on the landing page
- ✓ See a dropdown on the SGF program tile with new site functionalities for the SGF program

Provider Community Site (continued)

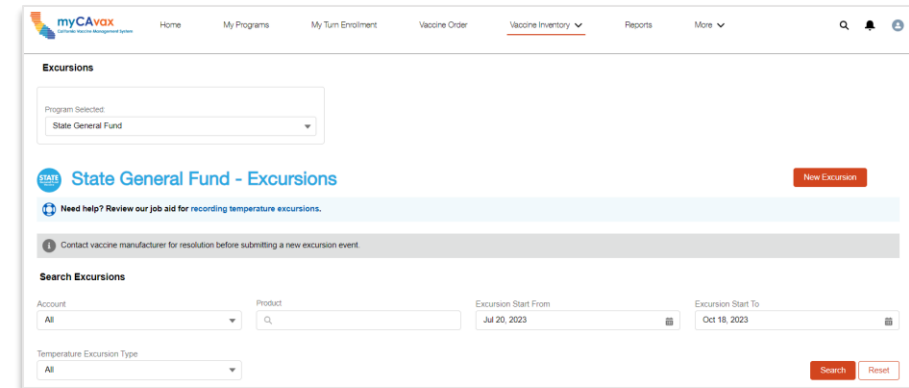
- ✓ See an updated 'State General Fund - Home' page with new site functionalities
- ✓ See Program Locations on the 'Locations' page based on the program selected
- ✓ See the new 'Program Type' picklist on the COVID-19 'Shipment Incidents' and 'Orders' pages
- ✓ See the new 'USG COVID-19 Program' checkbox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

Waste Events, Transfers, and Excursions for SGF Providers

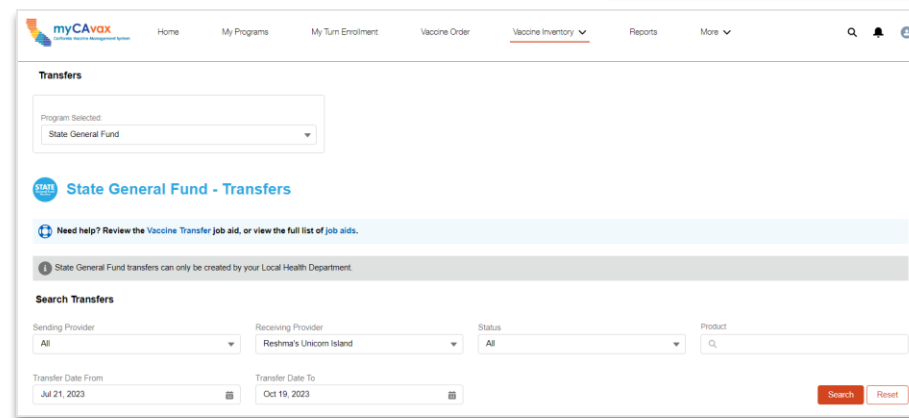
State General Fund (SGF) providers will be able to record Waste Events and Excursions for SGF vaccines. They will be able to review LHD-initiated SGF Transfers.



The screenshot shows the 'myCAVax' interface for 'Waste Events'. The top navigation bar includes 'Home', 'My Programs', 'My Turn Enrollment', 'Vaccine Order', 'Vaccine Inventory' (selected), 'Reports', and 'More'. The main content area is titled 'Waste Events' and features a 'Program Selected' dropdown menu set to 'State General Fund'. Below this is a blue banner with the text 'State General Fund - Waste Events' and a 'New Waste Event' button. A help link states 'Need help? Review the job aid(s) for recording waste events.' The 'Search Waste Events' section includes filters for 'Account' (All), 'Product' (searchable), 'Date Wastage Occurred From' (Jul 21, 2023), 'Date Wastage Occurred To' (Oct 19, 2023), 'Type of Wastage' (All), and 'Return Required' (checkbox). Search and Reset buttons are at the bottom right.



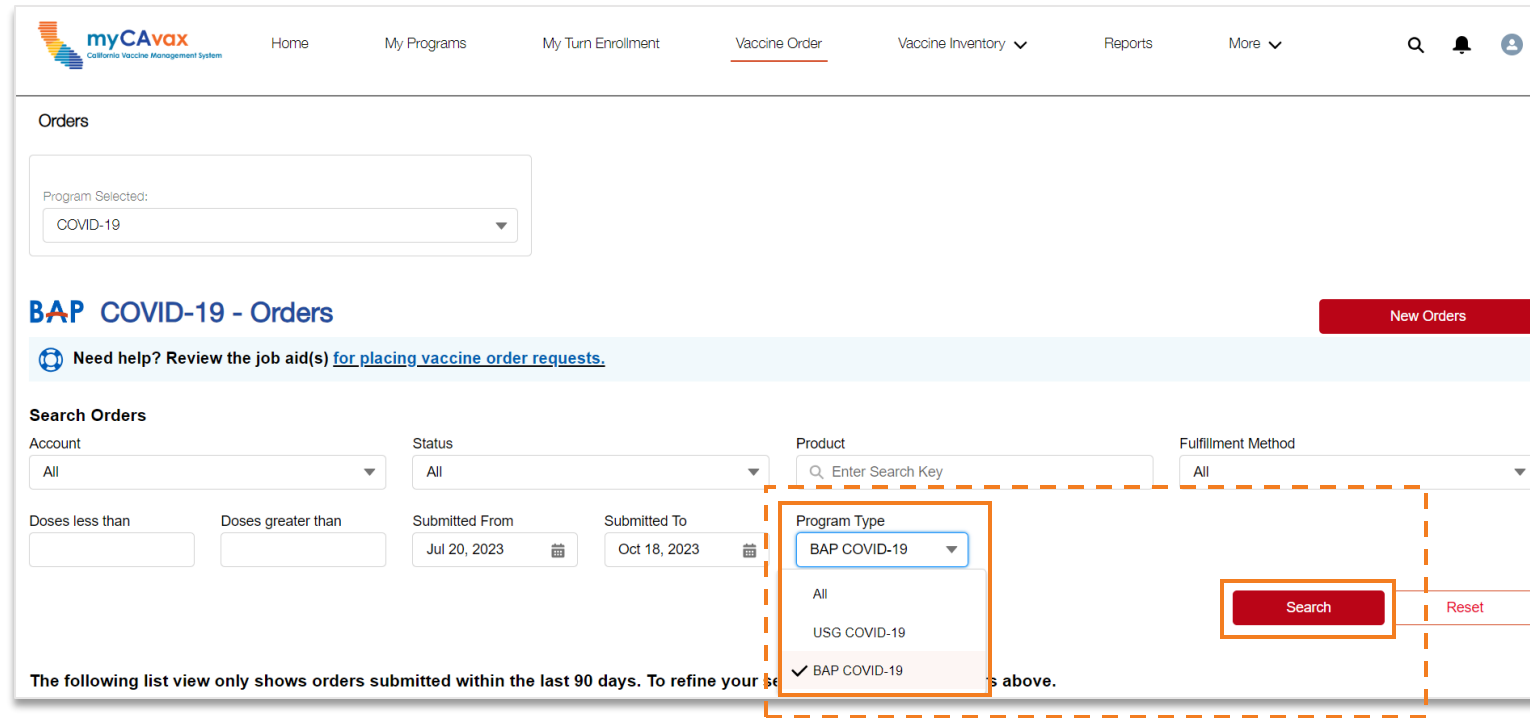
The screenshot shows the 'myCAVax' interface for 'Excursions'. The top navigation bar is identical to the previous screenshot. The main content area is titled 'Excursions' and features a 'Program Selected' dropdown menu set to 'State General Fund'. Below this is a blue banner with the text 'State General Fund - Excursions' and a 'New Excursion' button. A help link states 'Need help? Review our job aid for recording temperature excursions.' A grey banner below states 'Contact vaccine manufacturer for resolution before submitting a new excursion event.' The 'Search Excursions' section includes filters for 'Account' (All), 'Product' (searchable), 'Excursion Start From' (Jul 20, 2023), 'Excursion Start To' (Oct 18, 2023), 'Temperature Excursion Type' (All), and 'Return Required' (checkbox). Search and Reset buttons are at the bottom right.



The screenshot shows the 'myCAVax' interface for 'Transfers'. The top navigation bar is identical to the previous screenshots. The main content area is titled 'Transfers' and features a 'Program Selected' dropdown menu set to 'State General Fund'. Below this is a blue banner with the text 'State General Fund - Transfers' and a 'New Transfer' button. A help link states 'Need help? Review the Vaccine Transfer job aid, or view the full list of job aids.' A grey banner below states 'State General Fund transfers can only be created by your Local Health Department.' The 'Search Transfers' section includes filters for 'Sending Provider' (All), 'Receiving Provider' (Reshma's Unicorn Island), 'Status' (All), 'Product' (searchable), 'Transfer Date From' (Jul 21, 2023), and 'Transfer Date To' (Oct 19, 2023). Search and Reset buttons are at the bottom right.

Vaccine Order Page Search Filter: USG COVID-19 or BAP

Providers will be able to filter for USG COVID-19 or BAP COVID-19 vaccine orders on the 'COVID-19 - Orders' page. Providers must select either 'USG COVID-19' or 'BAP COVID-19' from the 'Program Type' dropdown on the 'Search Orders' section and click the 'Search' button.



The screenshot displays the 'myCAvax' interface for vaccine orders. The top navigation bar includes links for Home, My Programs, My Turn Enrollment, Vaccine Order (highlighted), Vaccine Inventory, Reports, and More. Below the navigation, the 'Orders' section shows a 'Program Selected' dropdown set to 'COVID-19'. A red 'New Orders' button is visible. A blue banner provides a link for help with placing vaccine order requests. The 'Search Orders' section contains several filters: Account (All), Status (All), Product (with a search key input), and Fulfillment Method (All). Below these are input fields for 'Doses less than', 'Doses greater than', 'Submitted From' (Jul 20, 2023), and 'Submitted To' (Oct 18, 2023). The 'Program Type' dropdown is highlighted with a dashed orange box and is open, showing options: 'All', 'USG COVID-19', and 'BAP COVID-19' (which is selected with a checkmark). A red 'Search' button and a 'Reset' button are also highlighted with dashed orange boxes. At the bottom, a note states: 'The following list view only shows orders submitted within the last 90 days. To refine your search, use the filters above.'

myCAvax Release Roadmap

RECENTLY DEPLOYED

October 20 (R43)

Release 44

BAP

- ✓ COVID-19 and BAP Transactions will be separated in the system

SGF Community Site

- ✓ Providers will be able to create Waste Events
- ✓ Providers will be able to create Excursions
- ✓ Providers will be able to view transfers initiated by LHDs
- ✓ SGF Homepage has been updated with new functionalities
- ✓ Providers will be able to view their 'SGF - Program Locations' tab

CURRENT

Anticipated February 2024 (R45)

Release 45

- ✓ Work is underway to prepare to migrate VFA and 317 into myCAvax, anticipated to be released in February 2024
- ✓ Minor fixes will be released as needed until R45 go-live, anticipated February 2024



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 ProviderCallCenter@cdph.ca.gov 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: Vaccine Allocations Cadence Update



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

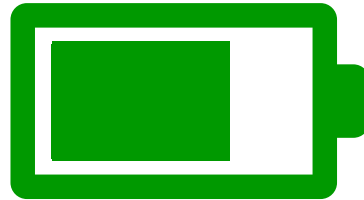
CDPH also received an initial allocation from CDC on **Tuesday, October 10, 2023**, for the updated Novavax vaccine.

Additional allocations for all 3 products will be updated by the end of this week.

BAP: Provider Enrollment Update

Great work! **68%** of BAP-eligible providers have enrolled in the program so far.

As of **Thursday, October 17, 2023**, **796** 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 today, **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.

BAP: Program Eligibility and Completing Enrollment Refresher




If you do not see the enrollment pop-up window, contact the Provider Call Center to confirm your Contact has the appropriate Program Role. Only Organization Vaccine Coordinators and Primary Vaccine Coordinators for BAP will be able to enroll their locations.

Providers serving uninsured / underinsured adults through Public Health Departments, Federally Qualified Health Centers (FQHCs) / Rural Health Centers, Tribal Clinics, and Indian Health Services sites are eligible for BAP.

Questions about BAP enrollment? Contact the Provider Call Center at providercallcenter@cdph.ca.gov or call (833) 502-1245, M–F from 8:00 AM to 5:00 PM PT.



Slide Icon Key

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

My Turn – Known Issues and Workarounds



Known Issues

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: Reach out to the Provider Call Center.

myCAvax – Known Issues and Workarounds



Known Issues

Fluarix Shipment Not Showing the Correct Product

- ✓ It has been reported that for some orders of ADU Fluarix the shipment is showing as PED Fluarix and vice versa. In addition to fixing the logic, we will also clean up previously affected shipments.

'Physician's Assistant' License Type on SGF Enrollment Leading to Endless Spinner

- ✓ LHD users still completing their SGF enrollment, if you add a Provider of Record with a license type of 'Physician's Assistant,' you will be met with an endless spinner when trying to complete your enrollment.



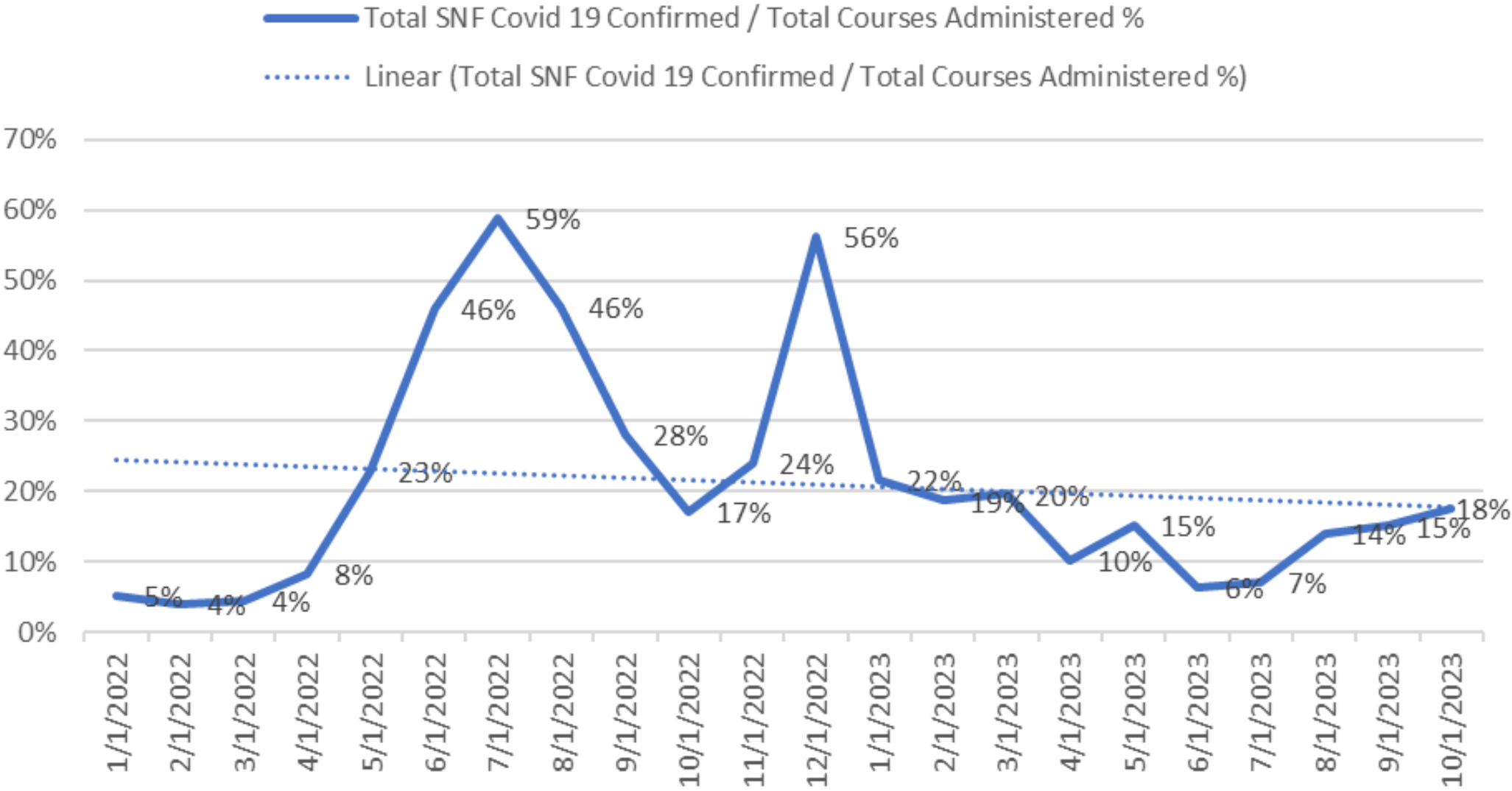
Workaround / Next Steps

- ✓ Estimated Fix: **November 9, 2023**
 - ✓ For the time being, refer to the order for the source of truth and ignore the product listed on the shipment.
-
- ✓ Estimated Fix: **November 9, 2023**
 - ✓ Workaround: Use the 'Other' license type instead of 'Physician's Assistant' and leave a chatter note on the 'Program Location Application' record to let the Enrollment team know that your Provider of Record is a 'Physician's Assistant.'

Testing and Treatment

Jessica deJarnette, MD, CDPH

Statewide SNF COVID-19 Confirmed / Courses Administered %



Study: Antiviral Med Linked to COVID Mutations That Can Spread

Ralph Ellis

September 26, 2023



157



Share



- Researchers looked at 15 million COVID genomes and discovered that hallmark mutations linked to molnupiravir increased in 2022, especially in places where the drug was widely used, such as the U.S. and the U.K.
- Levels of the mutations were also found in populations where the drug was heavily prescribed, such as seniors.
- When reached for comment, Merck questioned the evidence. "The authors assume these mutations were associated with viral spread from molnupiravir-treated patients without documented evidence of that transmission. Instead, the authors rely on circumstantial associations between the region from which the sequence was identified and timeframe of sequence collection in countries where molnupiravir is available to draw their conclusions," the company said.

October 23, 2023

Nirmatrelvir and Molnupiravir and Post-COVID-19 Condition in Older Patients

Kin Wah Fung, MD¹; Fitsum Baye, MS¹; Seo H. Baik, PhD^{1,2}; [et al](#)

- Previous studies showed a decrease in PCC risk among older veterans given oral antivirals
- This study looks at a cohort of Medicare enrollees (3.97 million) from Jan-Sept 2022
- Study found that nirmatrelvir and molnupiravir were associated with a small reduction in incidence of PCC

Table 1. Hazard Ratio Based on Cox Regression Model^a

Index variable	Reference	No. (%)	Hazard ratio (95% CI)	Event rate, % (95% CI)		Absolute risk reduction ^b
				Index group	Reference group	
Nirmatrelvir	None	439 134 (19.5)	0.87 (0.86 to 0.88)	11.8 (11.7 to 11.9)	14.5 (14.4 to 14.6)	2.7
Molnupiravir	None	58 914 (2.6)	0.92 (0.90 to 0.94)	13.7 (13.5 to 14.0)	14.5 (14.4 to 14.6)	0.8

COVID-19 Oral Antivirals: Commercialization

Judy Aoyagi, PharmD, CDPH

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.
 - Starting January 1, 2025: Eligible uninsured and underinsured patients can receive USG procured, NDA-labeled Paxlovid at no cost. Participating PAP dispensing sites will be sent replacement product for any dispensed product within this program.
- **Ensuring no HHS-procured product is lost to expiry**
 - Undispensed excess supply with an expiration date of December 2023 or later should be returned by December 31, 2023, for a credit replacement to USG inventory of NDA-labeled treatment course.
- **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.

Sunsetting the US Government (USG) COVID-19 Therapeutics Distribution Program

- USG prepares to wind down the current distribution of USG-procured COVID-19 therapeutics and transition of the COVID-19 Oral Antiviral (OAV) treatments (nirmatrelvir packaged with ritonavir Paxlovid, and molnupiravir, Lagevrio) to the commercial market.
- Summary table provides an estimated sequence of events based on OAV manufacturers' commercialization plan
- Ordering and Distribution Timelines
- Guidance on Inventory and Disposal Management
- Data Reporting Requirements
- Programs for Uninsured and Underinsured Individuals

*This guide is for planning purposes only. Details may change.

Winter COVID-19 Treatments Transition

Projected Timeline (All subject to change)	Action/Event	Product
10/2/2023	HHS switched Lagevrio threshold/replenishment to a request-based approach using an out-of-cycle (OOC) process	Lagevrio
11/1/2023	Commercial Lagevrio launch by Merck (unique NDC relative to USG-procured supply). Lagevrio available for purchase.	Lagevrio
11/1/2023	Commercial Paxlovid launch by Pfizer (NDA-labeled, unique NDC relative to EUA-labeled USG-procured supply. Paxlovid available for purchase.	Paxlovid
11/10/2023, 3:00PM ET	Last day for awardees to submit orders for Lagevrio USG product (federal entities, excluding DoD and VA, can continue to order USG supply)	Lagevrio
11/27/2023	HHS switch from the Paxlovid threshold/replenishment to a request-based approach using an OOC request process.	Paxlovid
12/15/2023, 3:00PM ET	Last day for awardees to submit orders for Paxlovid USG product (federal entities can continue to order USG supply)	Paxlovid
11/15/2023 - 12/31/2023	Providers with excess USG-distributed, EUA-labeled Paxlovid are encouraged to return product through the Pfizer returns process to facilitate a credit to USG.	Paxlovid

Programs for Uninsured and Underinsured Individuals

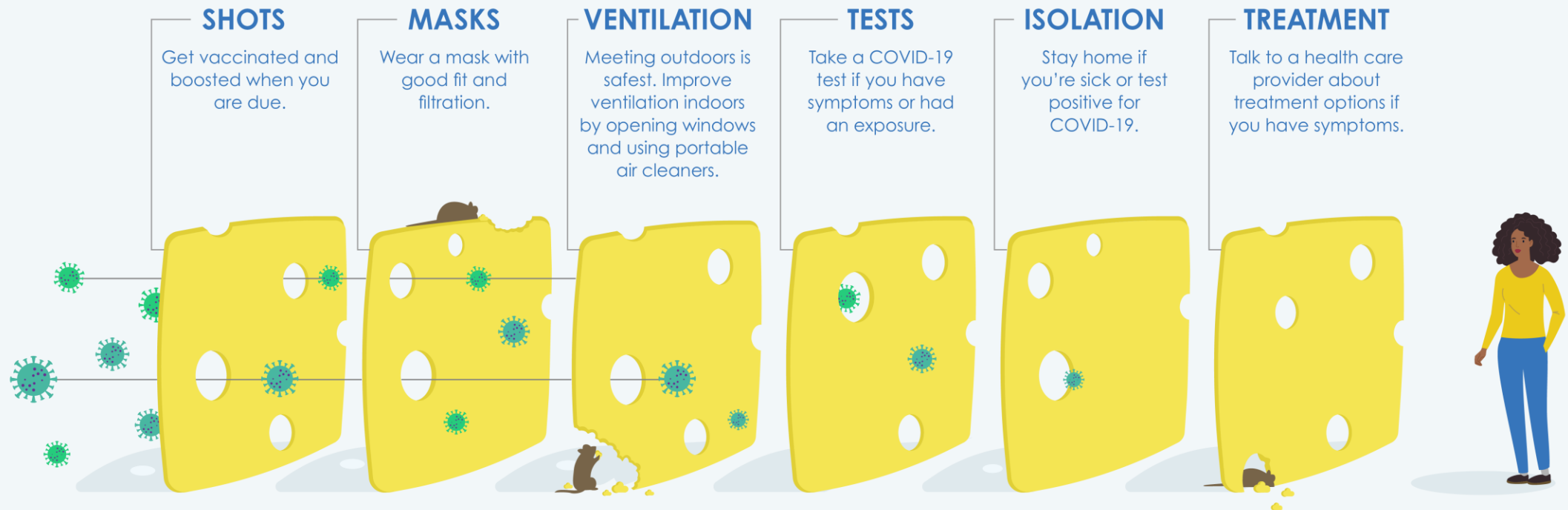
Product	Programs	Description and additional information
Lagevrio	Patient Assistance Program Bulk Replacement Program	Information available November 1, 2023 Website: merckhelps.com Tel: 800-727-5400
Paxlovid	Available November 1, 2023: Co-pay Savings Program by Pfizer	Information available November 1, 2023 Co-pay savings program will be available for eligible commercially insured patients
Paxlovid	Available ~December 1, 2023: Patient Assistance Program using USG supply	Information available ~December 1, 2023 Website: For Patients https://www.paxlovid.com/ Tel: 1-877-219-7225 (1-877-C19-PACK)

Communication Tools: COVID-19 Therapeutics

Monice Wong, CDPH

SMARTER Steps Protective Layers

No single intervention is perfect at preventing the spread of COVID-19.
However, the more “**SMARTER Steps**” you take, the safer you, your family, and your community are against COVID-19.



COVID-19 Virus 

Misinformation Mouse 

<https://bit.ly/CASmarterSteps>

Shift behavior from

I've got COVID symptoms.

I'll just hope for the best.

to

I've got COVID symptoms.

**I'll act fast to test and seek
evaluation for
COVID-19 medication.**

Tools for the Public

Video

Test It. Treat It. You Can Beat It. | Outs...

From a US state public health authority

TEST IT. TREAT IT. YOU CAN BEAT IT.

Taken within the first 5-7 days of symptoms, COVID-19 medications can stop the illness from getting serious and may help you test negative sooner.

LEARN MORE

California Department of Public Health

Preguntas y respuestas sobre los medicamentos para la COVID-19

Tenemos herramientas nuevas y eficaces para cuidarnos en caso de contraer COVID-19.

Los medicamentos para la COVID-19 son seguros y gratuitos, están ampliamente disponibles y son muy eficaces para evitar que la enfermedad empeore. Pueden prevenir que el virus se multiplique en el cuerpo, ayudar a que des negativo antes y reducir el riesgo de desarrollar síntomas de COVID.

COVID-19 Treatments Questions & Answers

We have new, effective tools to take good care of ourselves if we get COVID-19. COVID-19 treatments are safe, free, widely available, and highly effective at preventing COVID-19 illness from becoming serious. They can stop the virus from multiplying in your body, may help you test negative sooner, and may reduce the risk of developing long COVID symptoms.

WHAT are COVID-19 treatments? Medications that can stop COVID-19 illness from getting serious. They are free, widely available, and highly effective. Some can be taken at home by pill and others are given by IV.	WHEN should I take a COVID-19 treatment? Treatments must be taken within 5-7 days of when symptoms begin. So if you start to feel sick, act fast to get a COVID-19 test and then treatment. Get treatment while your illness is mild - don't wait until your illness gets worse.
WHO should take a COVID-19 treatment? All Californians 12 years and older who test positive for COVID-19 and have symptoms should seek evaluation for COVID-19 treatments, which are free regardless of insurance or citizenship status. COVID-19 treatments are recommended for those who have certain experiences and conditions that put them at higher risk for serious COVID-19 illness, such as being 50 years and older, not being up-to-date with COVID-19 vaccinations, obesity, physical inactivity, smoking, asthma, diabetes, mental health conditions like depression, being of a racial/ethnic minority, and more. In fact, most adults and some teens are eligible and should take COVID-19 treatment.	WHY should I take a COVID-19 treatment? COVID-19 medications are effective for stopping COVID-19 illness from getting serious. Scientific evidence shows they can cut the risk of serious symptoms, hospitalization, and death in half or more. Early evidence also suggests they may lower the risk of developing long COVID symptoms. Treatments like the Paxlovid pill can also prevent the virus from multiplying in your body and infecting more of your cells, which can help you test negative sooner.

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WHY TEST FOR COVID-19 AS SOON AS YOU FEEL SICK?

Most COVID-19 medications must be taken within the first 5 days of symptoms to work to treat the illness.

If you feel sick, act fast to test and seek evaluation for

WHAT ARE COVID-19 MEDICATIONS?

- Stop the virus from multiplying in your body and infecting more of your cells.
- Early evidence suggests that they may **lower the risk of long COVID.***
- Prevent serious COVID-19 illness.
- Recommended for most adults and some teens.

Learn more about COVID-19 medications at YouCanBeatIt.org

California Department of Public Health

Tools for Providers

Readiness Checklists, Best Practices Toolkits, and More

COVID-19 Therapeutics Best Practices Checklist		
Guidance Topic	Checklist	Relevant
Testing	<input type="checkbox"/> For symptomatic patients: Share instructions on how to access same- or next-day testing. Note: A positive test is no longer required for oral COVID-19 therapeutic treatment if the clinical suspicion is high based on the patient's exposure history.	How to get tested, COVID-19 Respons
	<input type="checkbox"/> For symptomatic patients who test positive: Emphasize that therapeutics are available, and recommended for most adults. Share instructions on how to access a same-day prescriber to discuss COVID-19 treatment.	
	<input type="checkbox"/> Accept self-attestation of a positive COVID-19 test to facilitate care or prescribe therapeutics.	
Prescribing	A: Provider Education	CDPH COVID-19 Th
	<input type="checkbox"/> Regularly share updates on COVID-19 therapeutics.	webpages
	<input type="checkbox"/> Ensure all relevant staff receive up-to-date information (via internal provider communication channels, using webinars, CME opportunities, and relevant listservs including CDPH's therapeutics updates). Set a regular cadence for sharing updates, such as a monthly provider meeting.	While the COVID-19 Provider Warmline is available, recommend call 1-866-268-4322 to receive free and clinical consultation testing and treatment your cases online.
	<input type="checkbox"/> Ensure all providers are aware of the California Health Advisory (summarized in Appendix 5) addressing several of the most common clinical misperceptions about COVID-19 therapeutics.	CDC Risk of COVID Hospitalization, and Group
	<input type="checkbox"/> Direct providers to helpful guidance, which includes tables reviewing therapeutics treatment options and clinical decision aids.	

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COVID-19 Surge Readiness: Long Term Care Facilities

Outreach to providers caring for your residents:

COVID-19 Surge Readiness

Best Practices for Skilled Nursing Facilities

Saving lives and avoiding hospitalizations

Lives are being saved (and hospitalizations avoided) with timely COVID-19 treatments. Treatments are safe and effective, even with changing variants. Treatments can keep residents, clients and staff from developing severe disease and may help them test negative for COVID-19 sooner. Preparing before a positive COVID-19 case occurs will help residents and staff get treated faster.

This notice reminds providers that ALL long term care residents are considered at higher risk for severe COVID-19 and the decision to not prescribe COVID-19 treatment should be reserved for situations in which the risk of prescribing clearly outweighs the benefits of treatment in preventing hospitalization, death, and the potential for reduced risk of long COVID.

The California Department of Public Health (CDPH) COVID-19 Therapeutics Task Force wants to support you in getting ready for potential COVID-19 surges in your facility. CDPH understands that facilities do not control the actions and decision of individual health care providers. However, you can help facilitate treatments for your residents and staff with preparedness education, awareness, and getting the right plans into place. The CDPH COVID-19 Therapeutics Task Force is available to assist you with developing best practices and education for your situation. You can contact us at COVIDRxProviders@cdph.ca.gov or give us a call (833) 502-1245 from Monday to Friday 8am to 6pm. You can also use the Provider COVID-19 Call Center email: covidcallcenter@cdph.ca.gov.

Surge preparedness tips: baseline strategies

- Encourage wearing masks with good fit and filtration like N95s, KN95s and KF94s
- Isolating and cohorting ill patients
- Testing staff and residents with symptoms
- Preparing for increasing use of COVID-19 treatments:
 1. Reach out to your residents' health care providers
 2. Confirm supply with your pharmacy, if possible
 3. Develop a plan
 4. Educate your staff
 5. Inform resident/resident representatives of treatment availability

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California COVID-19 Therapeutics

Best Practices Toolkit

For Clinics

August 2023 • © 2023, California Department of Public Health

NEW Respiratory Viruses Communication Tools

New Webpage



The screenshot shows the California Department of Public Health website with a search bar and navigation tabs: "I am looking for", "I am a", "Programs", and "A-Z Index". The "Programs" tab is selected, leading to the "RESPIRATORY VIRUSES" section. Below the header is a photo of a woman sneezing into her elbow. The text explains that many respiratory viruses, including influenza, COVID-19, and RSV, circulate year-round. It then provides guidance on how to protect oneself and the community, emphasizing the importance of staying up to date on vaccines (flu, COVID-19, and RSV) and other preventive measures like wearing a mask and washing hands.

"6 Tips for Staying Healthy this Virus Season" Handout



The handout features a blue header with the title "6 Tips for Staying Healthy this Virus Season". Below the title is a photo of a family (a man, a woman, and two children) smiling. The tips are listed in a clean, organized manner:

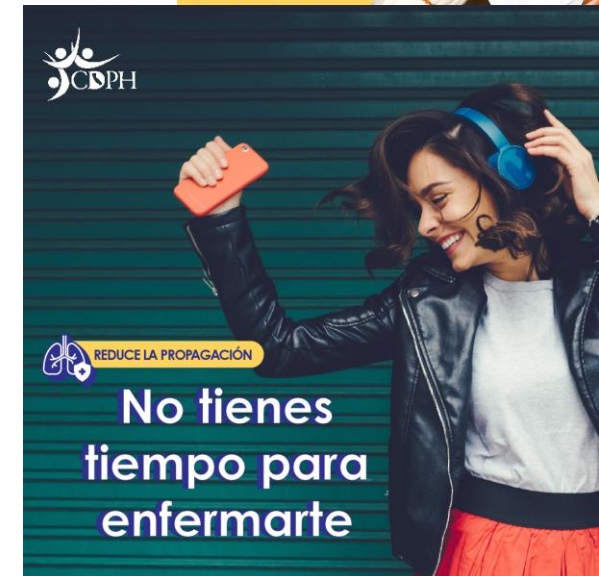
- Reduce your risk of catching and spreading respiratory viruses like flu, COVID-19 and RSV.**
- Stay Up to Date on Vaccines**
Vaccines are the best protection against severe illness. Visit [MyTurn.ca.gov](https://myturn.ca.gov) to schedule your vaccines or contact your health care provider.
 - Flu and 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 [COVID-19 treatments](#).
- Consider Wearing a Mask**
Consider wearing a mask in public indoor or crowded spaces especially if you or your family is at [higher risk for severe illness](#).
- 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.

A QR code is provided at the bottom left, with the text "Scan the QR code to see interactive links on this flyer". The footer includes the date "September 2023" and the copyright notice "© 2023, California Department of Public Health".

Social Media



The social media post features a yellow background with the text "SLOW THE SPREAD" in a blue box. Below the text is a photo of a person wearing a winter hat and glasses, sneezing into a white tissue. The text reads: "Don't let Flu, RSV, or COVID-19 happen to you." There are blue dots arranged in a grid pattern on the right side of the post.



The social media post features a dark background with a photo of a woman wearing a black leather jacket and blue headphones, holding a red smartphone. The text "No tienes tiempo para enfermarte" is written in large, white, bold letters. Above the text is a small logo with the text "REDUCE LA PROPAGACIÓN".

Resources and Q&A

Leslie Amani and CDPH SMEs

EZIZ.ORG

(Easy Immunization)

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

EZIZ
A one-stop shop for immunization training and resources.

ENHANCED BY Google

Home
Vaccine Programs
Vaccine Management
Storage Units
Temperature Monitoring
Training & Webinars
Clinic Resources
Patient Resources

California's Vaccine Programs

- VFC**
California Vaccines for Children Program
- VFA**
California Vaccines for Adults Program
- BAP**
California Bridge Access Program
- 317**
Local Health Departments

Ordering & Vaccine Management

- MyVFCvaccines (for VFC and VFA)
- MyCAVax (for BAP and 317)

Storage Requirements

- Vaccine Storage Units
- Digital Data Loggers

Alerts!

2023 COVID-19 Vaccine

- CDC Recommendations Updated for Novavax 2023-24 formulation (10/6)
- COVID-19 Vaccine Resources: [For Providers](#) | [For Patients](#)
- Vaccine Ordering and Manufacturer Info

Protect your patients against RSV!

- RSV Immunization FAQs
- More RSV Resources for Providers and Patients

Immunization Registry Now Required!

AB 1797 requires California providers to enter immunizations they administer as well as a patient's race and ethnicity into a California immunization registry (CAIR or Healthy Futures/RIDE). [Enroll in CAIR](#) today! To learn more, see the [AB 1797 FAQs](#).

Hot Topics

Weekly CDPH Immunization Updates for Providers

- Timing Schedule with Blocks (Updated for RSV)
- COVID-19 Vaccine Resources

Popular Resources

- For Patients and Staff
- Flu
- Mpox
- Pertussis
- Schedules & Recommendations
- VFC Vaccine Fact Sheets
- For Pharmacies
- More Resources

CDPH Applications

- My Turn** (COVID/Flu Vaccine Administration System)
- CAIR** (California Immunization Registry)
- My DVR** (Digital Vaccine Records)
- CAIR-ME** (Medical Exemptions from Immunizations for School and Child Care)

Provider Operations Manual

California Bridge Access Program


Special Note for Providers

You played a critical role in helping to end the COVID-19 pandemic.

For patients, you are one of the most trusted sources of information when it comes to vaccines. Patients may have questions and concerns about COVID-19 vaccines. You can help them understand the importance of vaccination, provide your strong recommendation, and build confidence in vaccines.

Strong vaccine confidence leads to more people getting vaccinated, which leads to fewer COVID-19 illnesses, hospitalizations, and deaths.

Thank you for the efforts you and your practice staff are making to keep California healthy.





California Bridge Access Program

Provider Operations Manual

no-cost
COVID-19 vaccines

thank
you

for uninsured &
underinsured adults



California
Bridge Access
Program

[Click to Navigate](#)
Table of Contents

[Startup Guide](#)

[Appendices](#)
Important contacts

[Infrequent Tasks](#)
Introduce new vaccines, change staff or contacts, set up new storage unit, and data logger

1 Ordering Vaccines About vaccine orders Vaccine products Submitting vaccine order requests Minimizing shipment delays When to expect vaccines	2 Receiving & Storing Vaccine Shipments About receiving shipments Moderna Novavax Pfizer-BioNTech Reporting shipment incidents	3 Routine Tasks & Reporting Recurring tasks & frequency Reporting requirements Reporting temperature excursions Expiration & beyond-use dates Wastage & missed opportunities Reporting & return of nonviable doses Transporting vaccines Transferring vaccine	4 Managing Vaccine Inventory Inventory management checklist Monitoring temperatures Reporting temperature excursions Expiration & beyond-use dates Wastage & missed opportunities Reporting & return of nonviable doses Transporting vaccines Transferring vaccine	5 Patient Visit Patient visit checklist Eligibility Screening & Documentation How to Screen & Document Eligibility Vaccine preparation & administration Responding to administration errors Billing & Reimbursement
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COVID-19 Vaccine Provider FAQs

- Answers to provider questions
- Updated 10.26.2023
- Currently in its 134th iteration!



Q: Is the new Novavax COVID-19 vaccine available for ordering?

A: Yes. The new Novavax COVID-19 vaccine is now available for ordering. For more information, refer to the CDPH [Vaccine Ordering and Manufacturer Info](#) page.



Q: How are COVID-19 vaccines being paid for?

A: The following resources will provide details on how COVID-19 vaccines are paid for:

- [How to Pay for Vaccines \(CDC\)](#)
- [How Will I Pay for My Family's Vaccinations?](#)

COVID-19 Vaccine FAQs v.134_10.26.23 1

COVID-19 Vaccine FAQs

For providers administering COVID-19 vaccine.
Providers may also visit [EZIZ COVID-19 Resources](#) for information and updates.

Directions: [Click on a category to be directed to related FAQs.](#)

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Job Aid: Vaccine and Clinic Eligibility by Funding Source

Vaccine and Clinic Eligibility Guidelines by Funding Source

For Health Departments and CDPH Approved Health Department Authorized Sites (Effective 10/01/2023 through 9/30/2024)



Program	VFC Vaccines for Children Program	BAP Bridge Access Program	317 Local Health Departments ¹	VFA Vaccines for Adults Program	SGF State General Funds ²
Funding	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.
Age and Eligibility	Children Birth–18 years: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> Uninsured (no health insurance) Underinsured (vaccines are not covered by insurance) <p>(Adults with Medicare part B and D are considered insured and not eligible to receive 317 BAP vaccines.)</p>	Adults 19 years and older: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> Uninsured adults (no health insurance) Underinsured adults (vaccines are not covered by insurance) 	All ages: <ul style="list-style-type: none"> No restrictions
Clinic Type	<ul style="list-style-type: none"> 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 facilities Private providers, School-based clinic, Hospitals, Pharmacies (pilot program) 	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> Health Department and CDPH Approved Health Department Authorized Sites (HDAS) Juvenile halls/youth correctional facilities (for 19-25 years of age) 	<ul style="list-style-type: none"> VFC enrolled Federally Qualified Health Center (FQHC), Rural Health Center (RHC) 	<ul style="list-style-type: none"> State-licensed Community Health Centers Federally Qualified Health Center (FQHC), Rural Health Center (RHC) Health Department and CDPH Approved Health Department Authorized Sites (HDAS) Private provider School-based clinic

California Department of Public Health, Immunization Branch

IMM-1142 (9/19/23) Page 1

California Department of Public Health, Immunization Branch

Dept.	Vaccines for Adults Program (VFA)	State General Funds (SGF)
gate	<ul style="list-style-type: none"> Hepatitis A Hepatitis B HPV Meningococcal Conjugate (MenACWY) MMR Pneumococcal Conjugate (PCV20) Td only when Tdap is not indicated Tdap Varicella Zoster 	<ul style="list-style-type: none"> Influenza Tdap (children only)
ot		
VFC		 California Vaccine Management System for flu vaccine (refer to your LHD for other vaccines)

re plans are considered fully insured). 317 vaccine may not be used in travel clinic settings.

Status (EZIZ.org/assets/docs/IMM-1247.pdf) for more details.

VFA Eligibility Based on Insurance Status (EZIZ.org/assets/docs/IMM-1247.pdf) for more details.

IMM-1142 (9/19/23) Page 2

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 [Manual Setup](#) (quickest) or [File Upload](#) (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.

Startup Guide

Display Location on Vaccines.gov

All providers must display their vaccination location to the public on [Vaccines.gov](#) 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 Platform

Locations use the [COVID Locating Health](#) provider portal to publish their location on [Vaccines.gov](#) to help the public find BAP vaccination sites near them and learn how to make an appointment

Resources

For technical assistance, contact CARS_HelpDesk@cdc.gov or 833-748-1979.

Who has a user account?

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.

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

Next Steps

If a location is currently displayed on [Vaccines.gov](#), no action is needed.

For locations that have registered with VaccineFinder but are not currently displaying their site, login to the [COVID Locating Health](#) provider portal and update your information on the Public Display tab using either [Manual Setup](#) (quickest) or [File Upload](#) (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 [Guidance for Reporting to Vaccines.gov](#).

The process for adding new providers not using [Vaccines.gov](#) 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.

10-5-23 23

Vaccine Support

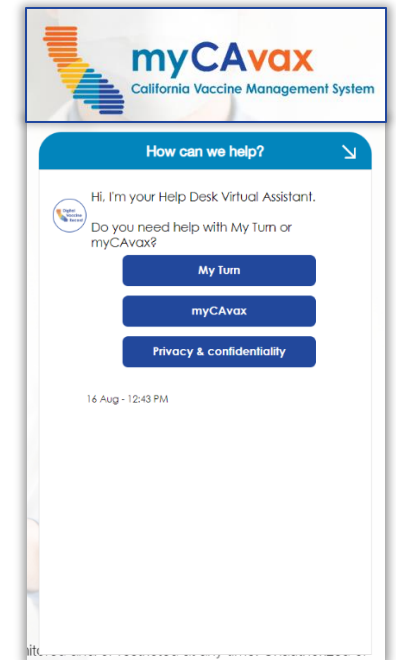
Provider Call Center

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: MyTurn.Clinic.HD@cdph.ca.gov
- 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.  Need help? View our jobs aids in the Knowledge Center, or contact us.



COVID-19 Therapeutics Resources

Type of Support

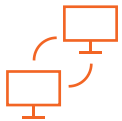
Description

Updated 10.6.23



Clinical Guidance

For general Therapeutics questions, please email: COVIDRxProviders@cdph.ca.gov



General Information

[CDPH COVID-19 Treatments Webpage](#) (provides general information for healthcare providers, allocations, distribution and ordering, drug facts sheets, and additional resources)

[CDPH COVID-19 Treatments Job Aid](#) (questions and answers for the public on COVID-19 therapeutics)

[COVID-19 Therapeutics Best Practices Checklist](#) (testing, prescribing, dispensing, and more)

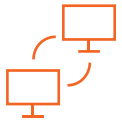
[Frequently Asked Questions document](#) for clinics, providers, and pharmacists



Locating Resources

Finding Providers and Test-to-Treat Sites

- [COVID-19 Therapeutics Locator](#) (arcgis.com)
- [Test-to-Treat](#) (hhs.gov)



[LHJ Therapeutics SharePoint](#)

Primary source for recorded webinars, slides, datasets and HPOP reporting information. (For access, email JEOCuser54@cdph.ca.gov)

- [Therapeutic Weekly Email Update](#) files (SharePoint)
- [CDPH Therapeutics HPoP Account Verification & Reporting](#) information



Questions

For general CDPH Therapeutics questions, please email COVIDRxProviders@cdph.ca.gov

For ordering, program inquiries, signing up new HPOP Accounts: please e-mail CDPHTherapeutics@cdph.ca.gov

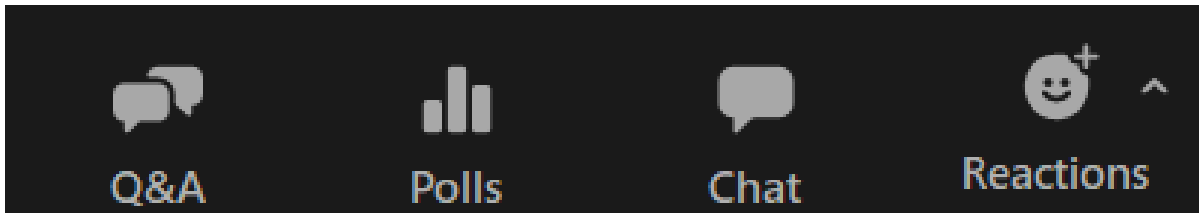
CDPH Provider Webinars and Trainings

Week of October 30, 2023

	Monday 10/30	Tuesday 10/31	Wednesday 11/1	Thursday 11/2	Friday 11/3
Live Webinars and Training				Bi-Weekly State General Fund (SGF) Program Office Hours 11:00 am – 11:30 am	CDPH Immunization Updates for Providers 9:00 am – 10:30 am
View On Demand	<ul style="list-style-type: none"> Intro to My Turn Onboarding (v. 1/4/22) CDPH Weekly Provider Webinars Archived Recordings and Slides 		<ul style="list-style-type: none"> myCAvax Release Notes for LHJs and CDPH Users (Requires myCAvax Login) Latest Features in myCAvax for Providers (Requires myCAvax Login) COVID-19 Crucial Conversations Archived Webinars and Slides 	<ul style="list-style-type: none"> Moderna COVID-19 Vaccine Resources for Providers CDC COVID-19 Vaccine Webinar Series California Immunization Coalition COVID Conversation Series AIM Vaccine Confidence Toolkit Webinar Series 	
Help	Help Desk myCAvax Help Desk Email: mycavax.hd@cdph.ca.gov My Turn Help Desk Email: myturn.clinic.hd@cdph.ca.gov My Turn Onboarding Email: myturnonboarding@cdph.ca.gov		General CDPH Provider Call Center: 1-833-502-1245, 8am-5pm, Mon-Fri Email: providercallcenter@cdph.ca.gov Vaccines: COVID-19 Vaccines Therapeutics: COVID-19 Therapeutics		Mpox Email: stdcb@cdph.ca.gov General Website: Mpox Website Vaccines: Mpox Vaccines Website

Questions

During today's webinar, 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”



Upcoming Webinar Opportunities

CDPH Immunization Updates for Providers

Next session: Friday, November 3, 2023

9AM – 10:30AM

Plan Ahead: There will be no Friday, November 10, 2023,
Provider Webinar in observance of the Veterans' Day Holiday

