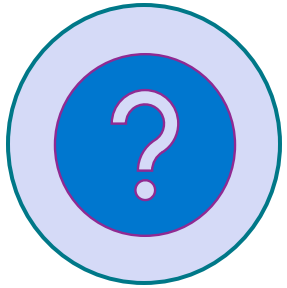
CDPH California Department of Public Health | Immunization Branch

Immunization Updates
for Providers

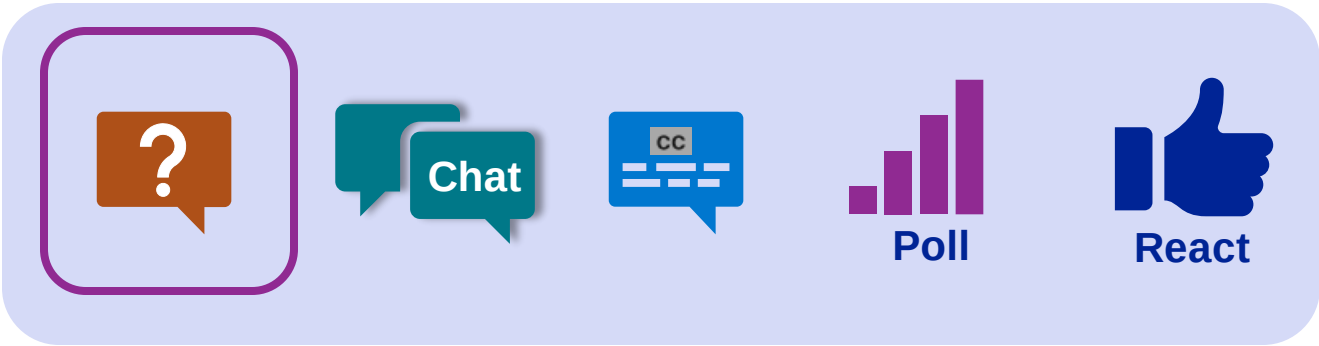
Friday, February 7, 2025

9:00 am – 10:30 am

Q&A



During today's webinar, please click and open the Q&A icon to ask your questions so CDPH panelists and subject matter experts (SMEs) can respond.



Links are in blue and underlined

Housekeeping

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 blanca.corona@cdph.ca.gov.

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

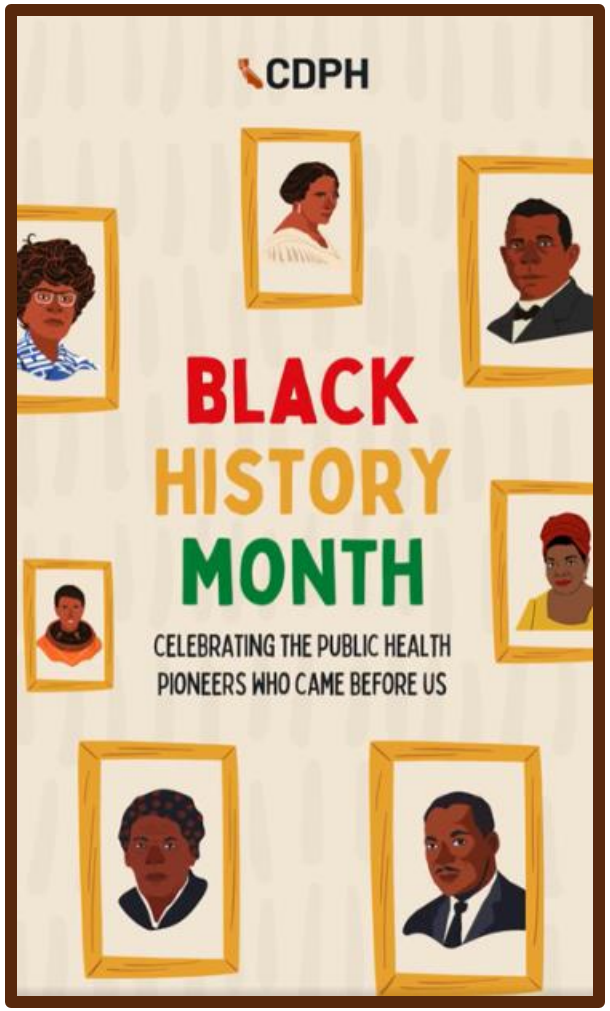
Agenda: Friday, February 7, 2025

No.	Topic	Presenters (CDPH)	Time (AM)
1	Welcome and Announcements	Leslie Amani	9:00 – 9:05
2	COVID-19 Vaccine Administration Data	Hailey Maeda	9:05 – 9:10
3	Clinical Update	Floria Chi, MD	9:10 – 9:20
4	Vaccines for Children	Christina Sapad	9:20 – 9:30
5	Vaccines for Adults	Nisha Gandhi	9:30 – 9:35
6	Vaccine Management (My Turn / myCAvax)	Josh Pocus and Dan Conway	9:35 – 9:45
7	Resources and Q&A	Leslie Amani and CDPH SMEs	9:45 – 10:30

Announcements

Leslie Amani, CDPH

February is Black History Month



This Black History Month, we honor the incredible contributions of Black women and men in the field of public health [Facebook]. From breaking barriers to championing equity, these men and women have dedicated their lives to improving health outcomes and advocating for justice in every community.

Join CDPH as we celebrate the brilliance, resilience and dedication of Black public health professionals who shape a healthier future for us all.

Learn more about our health equity work.

Office Hour for Personalized Technical Assistance

Join My Turn subject matter experts (SMEs) for a 60-minute session to help add your clinics in real time, and get your questions answered by My Turn SMEs.

When: Friday, February 7, 2025

Time: 12:00 pm – 1:00 pm, PT

Register here: [My Turn Office Hour]

Upcoming Webinar: Planning School Located Vaccine Events (SLVEs)

- Please join us Wednesday, February 12, 2025, from 2:00 pm – 3:00 pm for a webinar on planning school located vaccine events for **this** spring.
- While content will focus on adolescent events (6th graders) with Tdap, HPV and MCV4 vaccines, planning principles apply to all vaccines.
- Register at Webinar Registration - Zoom

Webinar: Protecting Maternal and Infant Health

NFID Website with Webinar Information:
[Vaccines During Pregnancy: Protecting Maternal and Infant Health]

When: Thursday, February 13, 2025

Time: 11:00 am, PT

Registration Link: Webinar Registration Link

Join the National Foundation for Infectious Diseases (NFID) and partner organizations, the American College of Obstetricians and Gynecologists (ACOG), and the National Coalition for Infant Health (NCfIH), for a webinar discussion on strategies to help prevent infectious diseases and increase uptake of recommended vaccines during pregnancy. Speakers will discuss vaccines commonly recommended during pregnancy in the United States.

National Foundation for Infectious Diseases®

Subscribe to NFID Updates

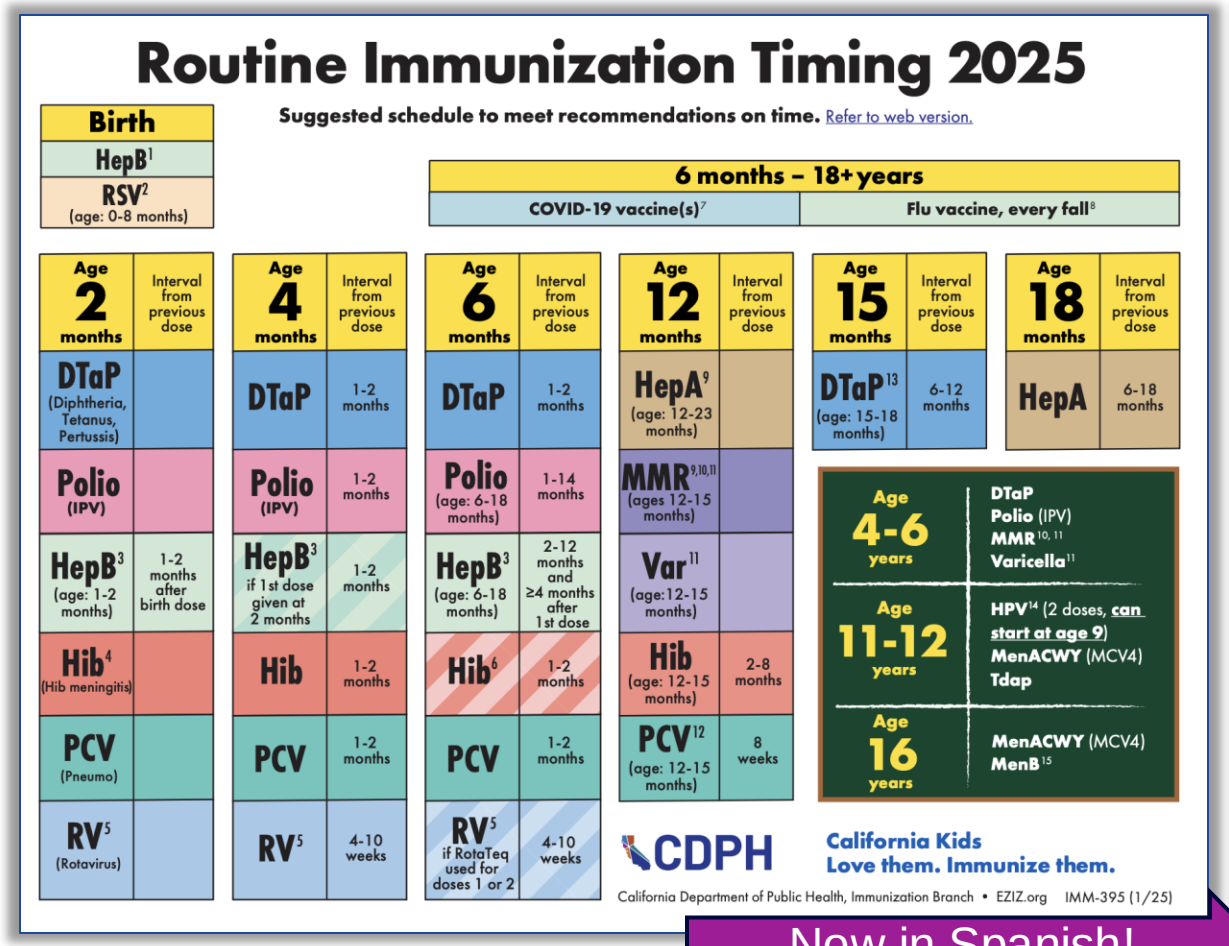
California Immunization Coalition Summit

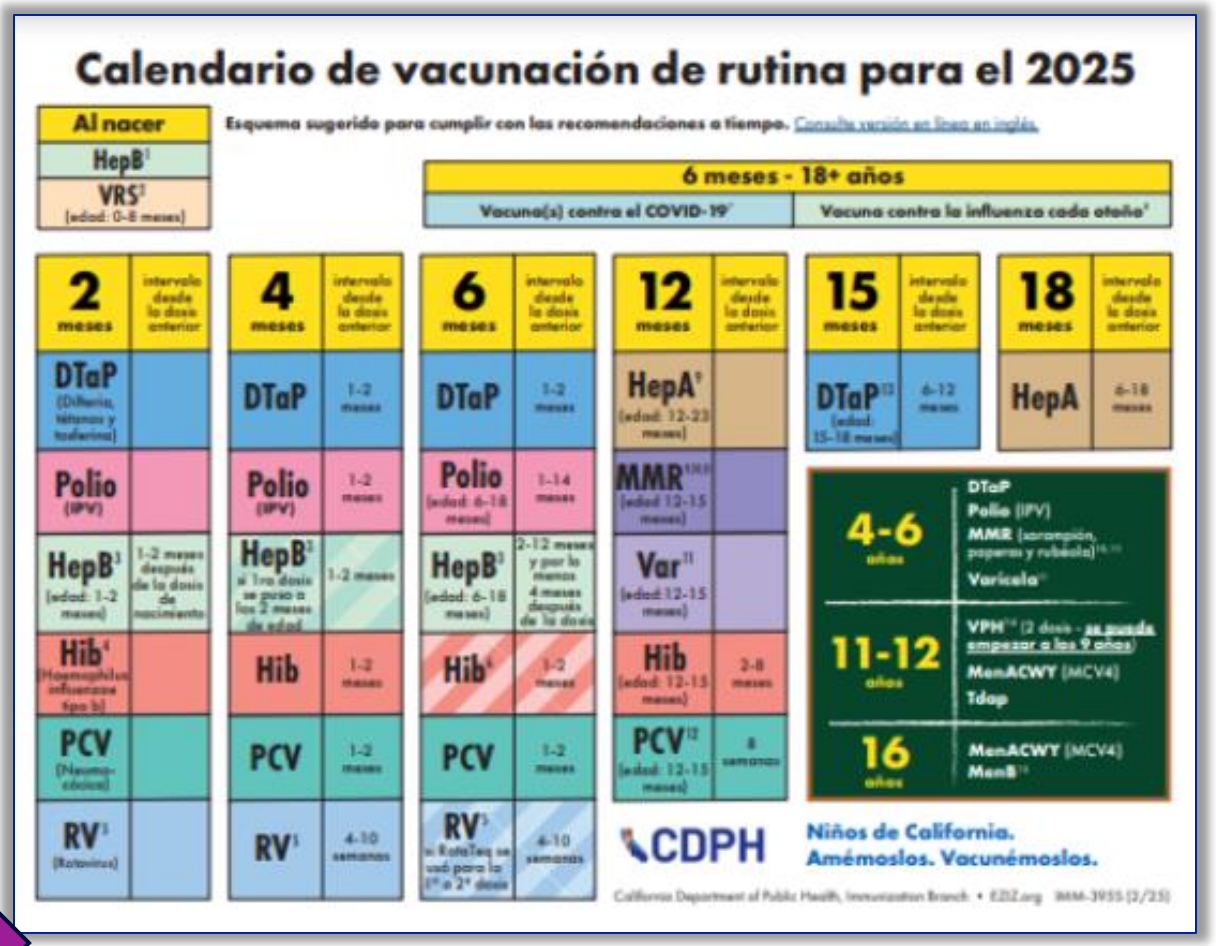
Tuesday, April 29 – Wednesday, April 30, 2025

[CA Immunization Coalition Summit 2025 Information]

California Immunization Coalition

2025 Immunization Block Schedule



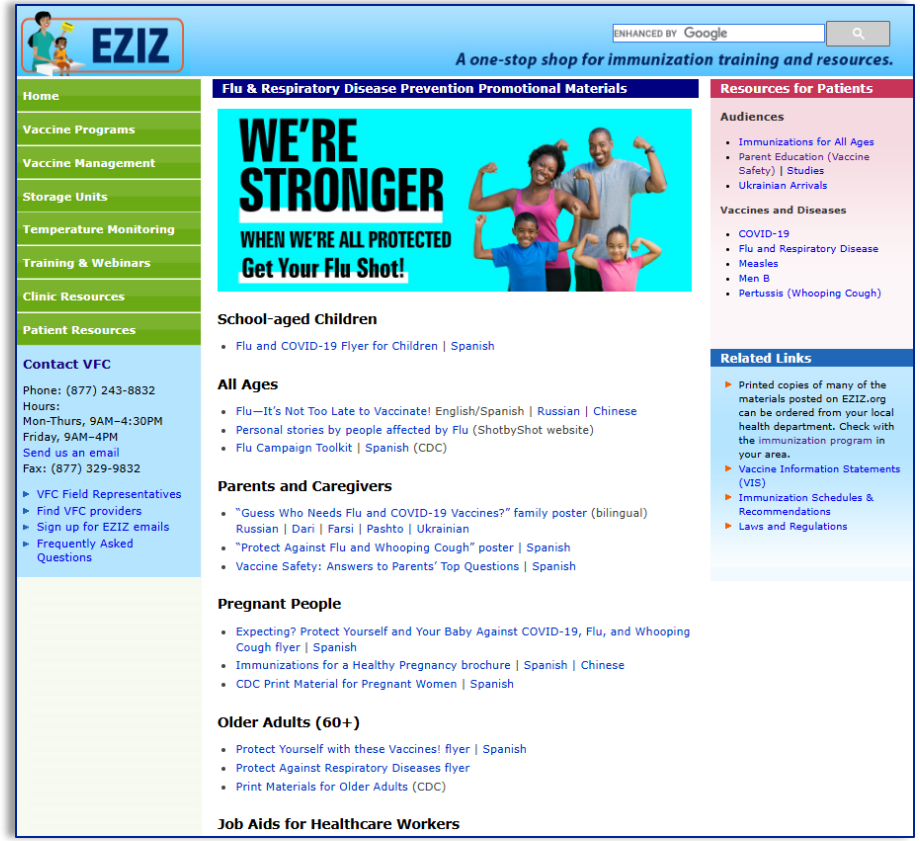


Now in Spanish!

[Routine Immunization Timing Block Schedule]

[Calendario de Vacunacion de Rutina para el 2025]

Influenza and Respiratory Disease Resources



[Flu and Respiratory Disease Prevention Promotional Materials]

[ShotByShot: Isabella's Story]

We have two NEW tools to help promote flu vaccination:

•[Isabella's Story] – this new [ShotbyShot.org] story emphasizes the importance of flu vaccination. Isabella, who wasn't vaccinated, faced severe complications and now lives with permanent disabilities due to the flu. Share her story with patients.

•[Template Letter] – this is a customizable letter to remind patients to schedule their flu vaccine. (English / Spanish)

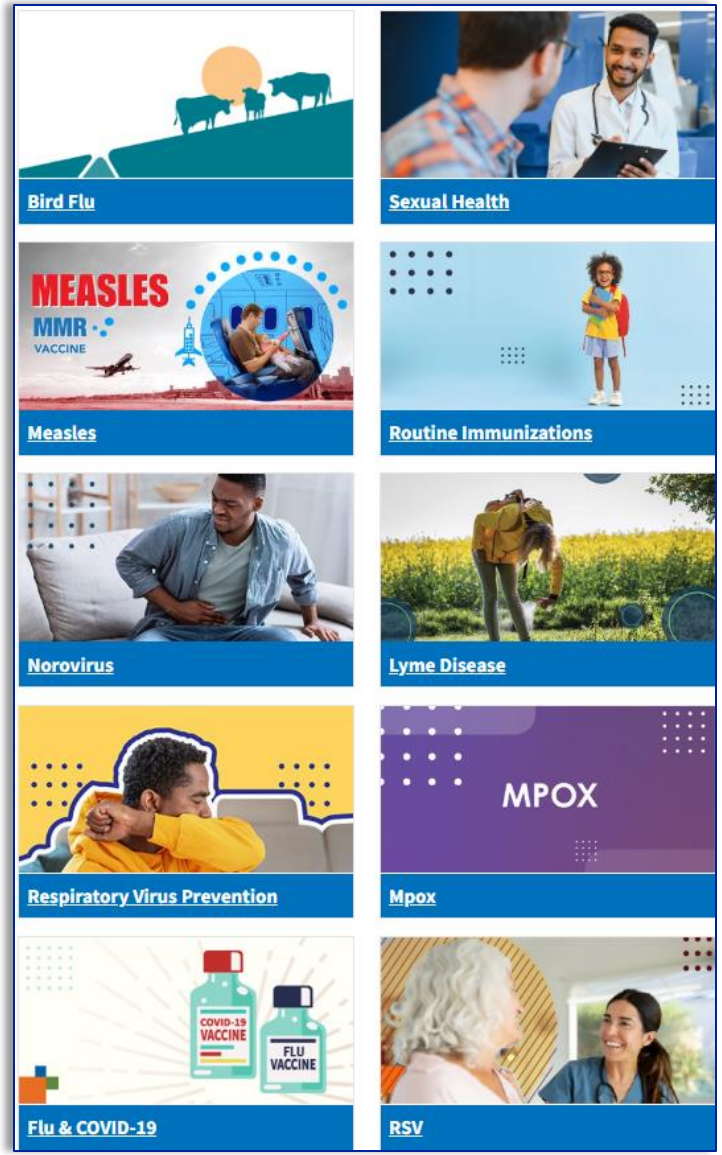
American Heart Month Communications Toolkit

Includes:

1. Heart Health Quick Facts
2. Spanish and English Tools
3. Caring About Your Heart Health
4. Resources for Cardiovascular Health Care Teams
5. Social Media

[CDC: American Heart Month Communications Toolkit]

CDPH Office of Communications Toolkits



Infectious Diseases

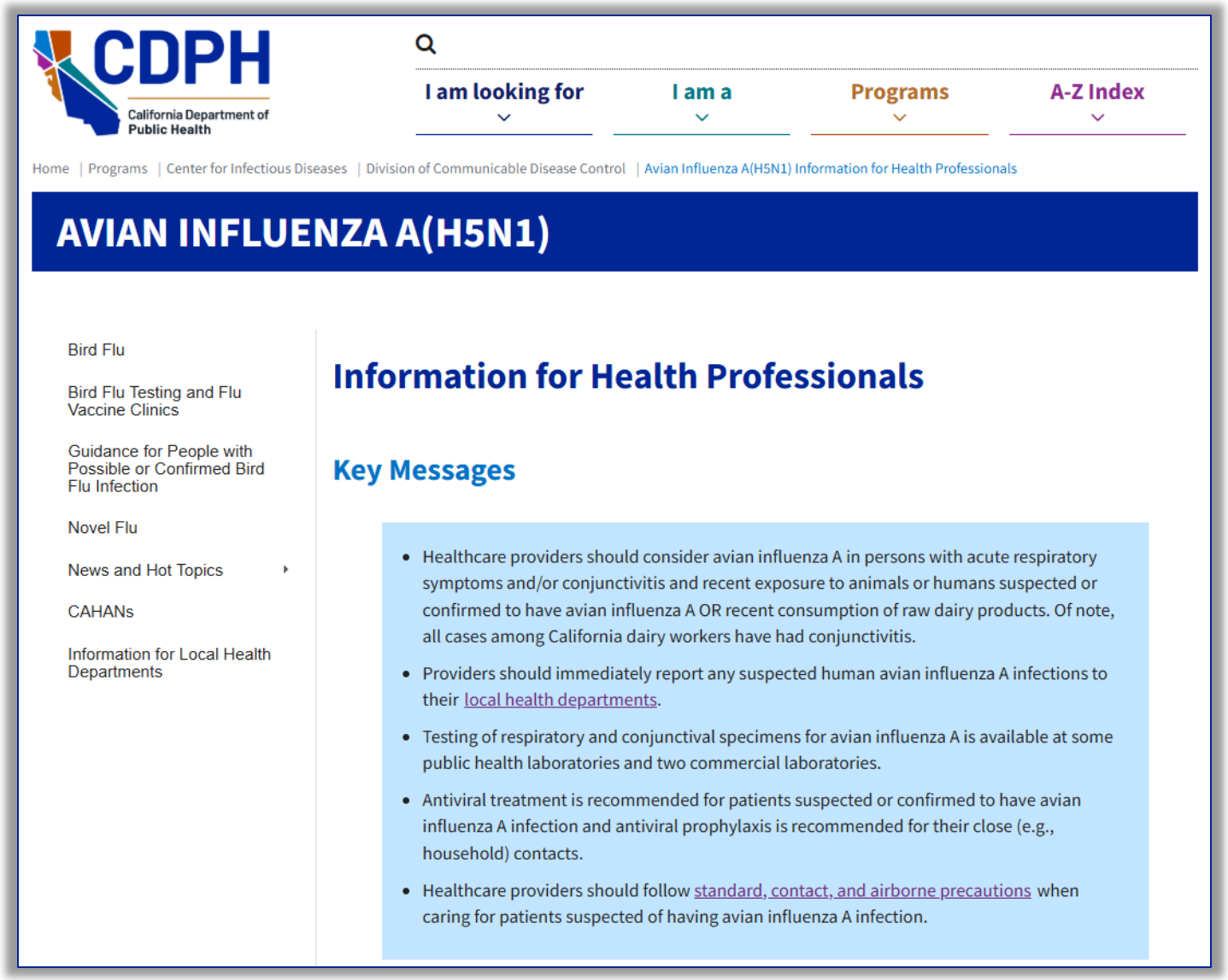
Infectious diseases are illnesses caused by viruses, bacteria, fungi, or parasites that can spread from person to person or from animals to humans. Encourage your communities to prevent infectious diseases from spreading by washing their hands often and staying up to date on recommended vaccines.

Use these toolkits to copy, download and share social media messages, graphics and outreach materials focused on infectious diseases to increase awareness and promote health education about preventing the spread of illnesses

CDPH Communication Toolkits

H5N1 Resources

CDPH Information for Health Care Professionals: **Avian Influenza A (H5N1)**



[CDPH Webpage: Avian Influenza A (H5N1)]

Message: Importance of Prenatal Vaccines

It's peak respiratory virus season! If you're pregnant, you can help protect your baby from the start by making sure you're up to date on the following vaccinations:

- Updated 2024 – 2025 flu and COVID-19
- Tdap (at 27 – 36 weeks pregnant)

Getting vaccinated is a safe way to protect your baby in early life when they are most vulnerable to getting very sick. Talk to your health care provider or visit MyTurn.ca.gov to schedule vaccine appointments.

Learn more about immunizations for a healthy pregnancy and visit the Pregnancy and Immunizations Communications Toolkit for more messages to share.

CDPH Office of Communications Pregnancy Toolkit .

COVID-19 Vaccines and Pregnancy

Las vacunas contra el COVID-19 y el embarazo

La vacunación contra el COVID-19 durante el embarazo es segura, eficaz y gratuita.

Es importante conservar la salud durante el embarazo.

Si está embarazada, manténgase al día con su vacunación contra el COVID-19, lo cual incluye recibir la vacuna bivalente actualizada contra el COVID-19 si aún no lo ha hecho.

Tiene más probabilidades de enfermarse gravemente de COVID-19 que las personas que no están embarazadas.

El COVID-19 puede causar complicaciones tales como:

- Hospitalización
- Admisión a la unidad de cuidados intensivos (UCI)
- Necesidad de respirador u otro equipo especial para respirar
- Muerte
- Nacimiento prematuro (antes de las 37 semanas de embarazo)
- Muerte fetal

La vacunación contra el COVID-19 durante el embarazo ayudará a proteger a su bebé luego del nacimiento.

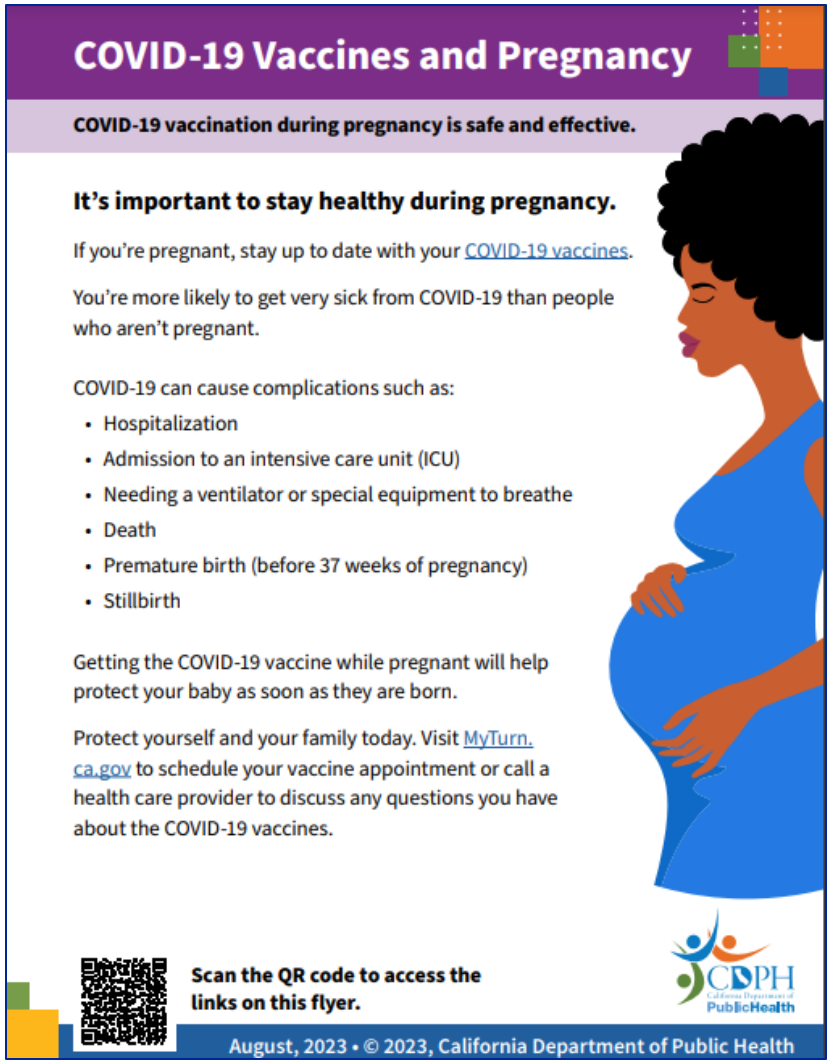
Protéjase y proteja a su familia hoy mismo. Visite MyTurn.ca.gov para programar una cita de vacunación o llame a su proveedor de salud para hacerle las preguntas que necesite sobre las vacunas contra el COVID-19.

Escanee el código QR para acceder a los enlaces de este folleto.

CDPH California Department of Public Health

COVID-19 Vaccines and Pregnancy • Spanish • May, 2023 • © 2023, California Department of Public Health

[Las Vacunas Contra el COVID-19 y el Embarazo]



COVID-19 Vaccines and Pregnancy

COVID-19 vaccination during pregnancy is safe and effective.

It's important to stay healthy during pregnancy.

If you're pregnant, stay up to date with your COVID-19 vaccines.

You're more likely to get very sick from COVID-19 than people who aren't pregnant.

COVID-19 can cause complications such as:

- Hospitalization
- Admission to an intensive care unit (ICU)
- Needing a ventilator or special equipment to breathe
- Death
- Premature birth (before 37 weeks of pregnancy)
- Stillbirth

Getting the COVID-19 vaccine while pregnant will help protect your baby as soon as they are born.

Protect yourself and your family today. Visit MyTurn.ca.gov to schedule your vaccine appointment or call a health care provider to discuss any questions you have about the COVID-19 vaccines.

Scan the QR code to access the links on this flyer.

CDPH California Department of Public Health

August, 2023 • © 2023, California Department of Public Health

[COVID-19 and Pregnancy Fact Sheet]

COVID-19 Vaccine Administration Data

Hailey Maeda, CDPH

COVID-19 Vaccine Administration Summary

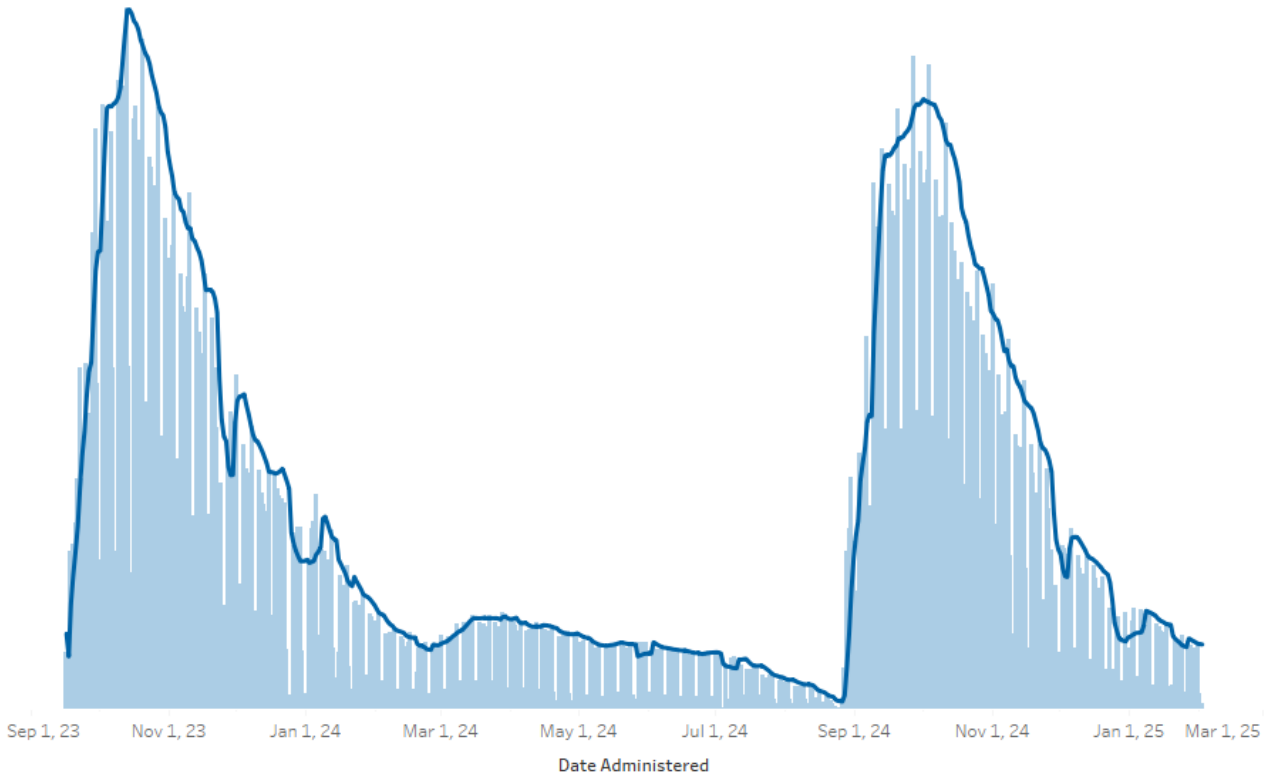
as of February 3, 2025

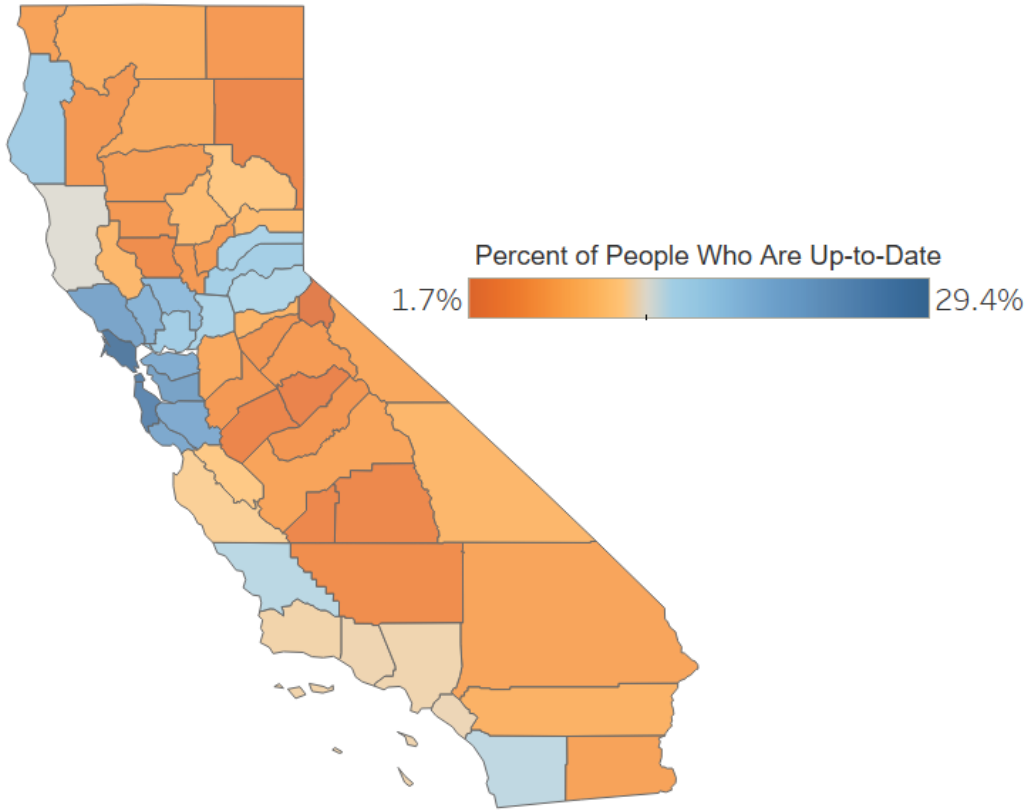
102,048,351
Total Doses Administered

5,130,362
2024-2025 COVID-19 Recipients

13.1%
Statewide Up-to-Date

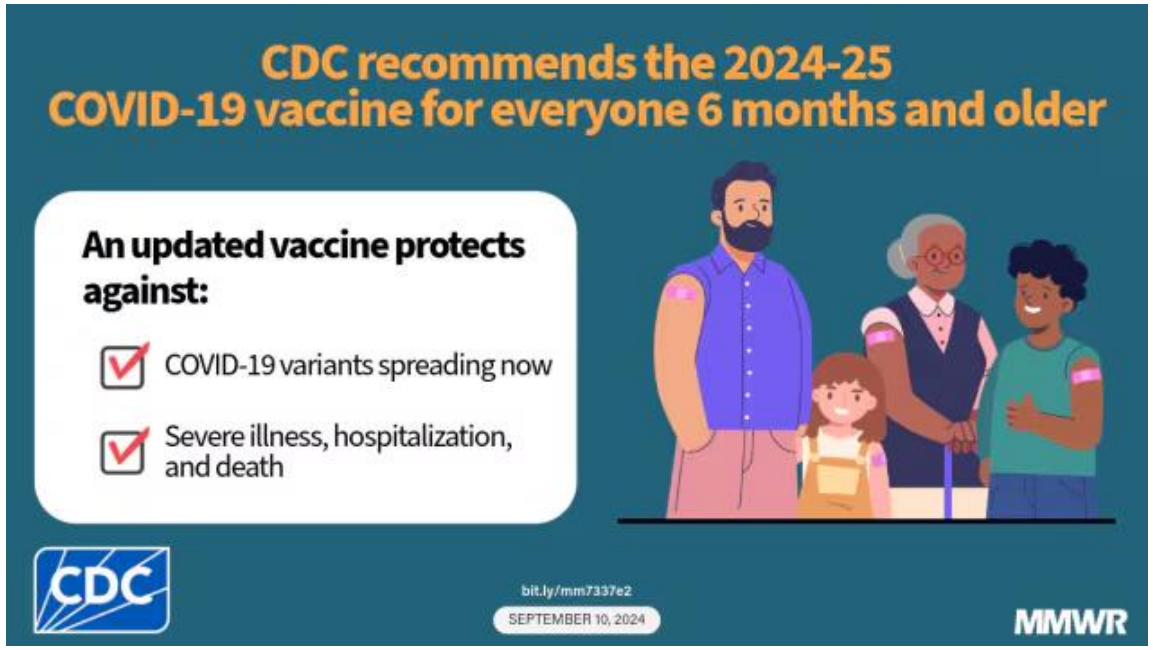
Daily Doses Administered: **Statewide**

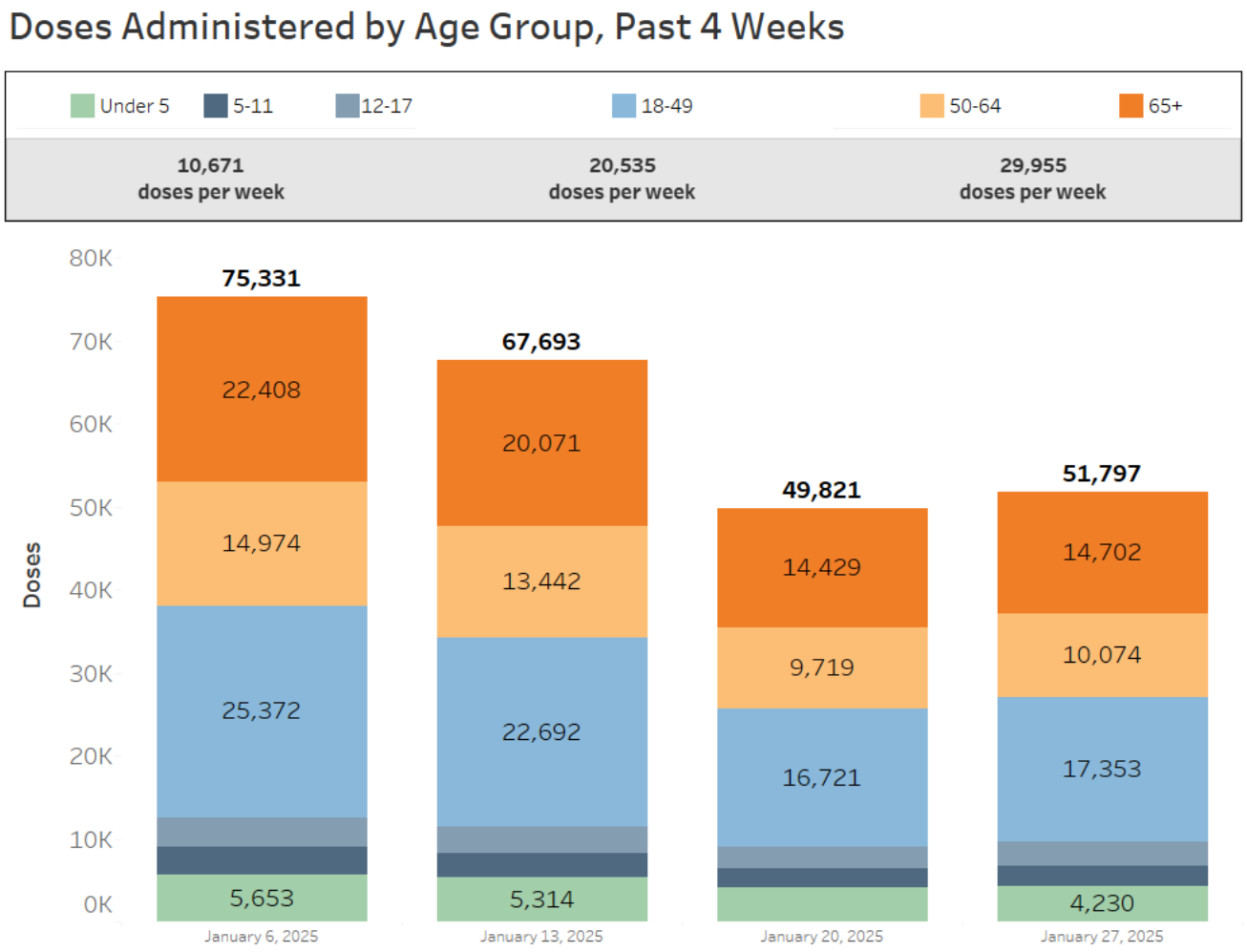




Trends in COVID-19 Vaccine Administration

as of February 3, 2024

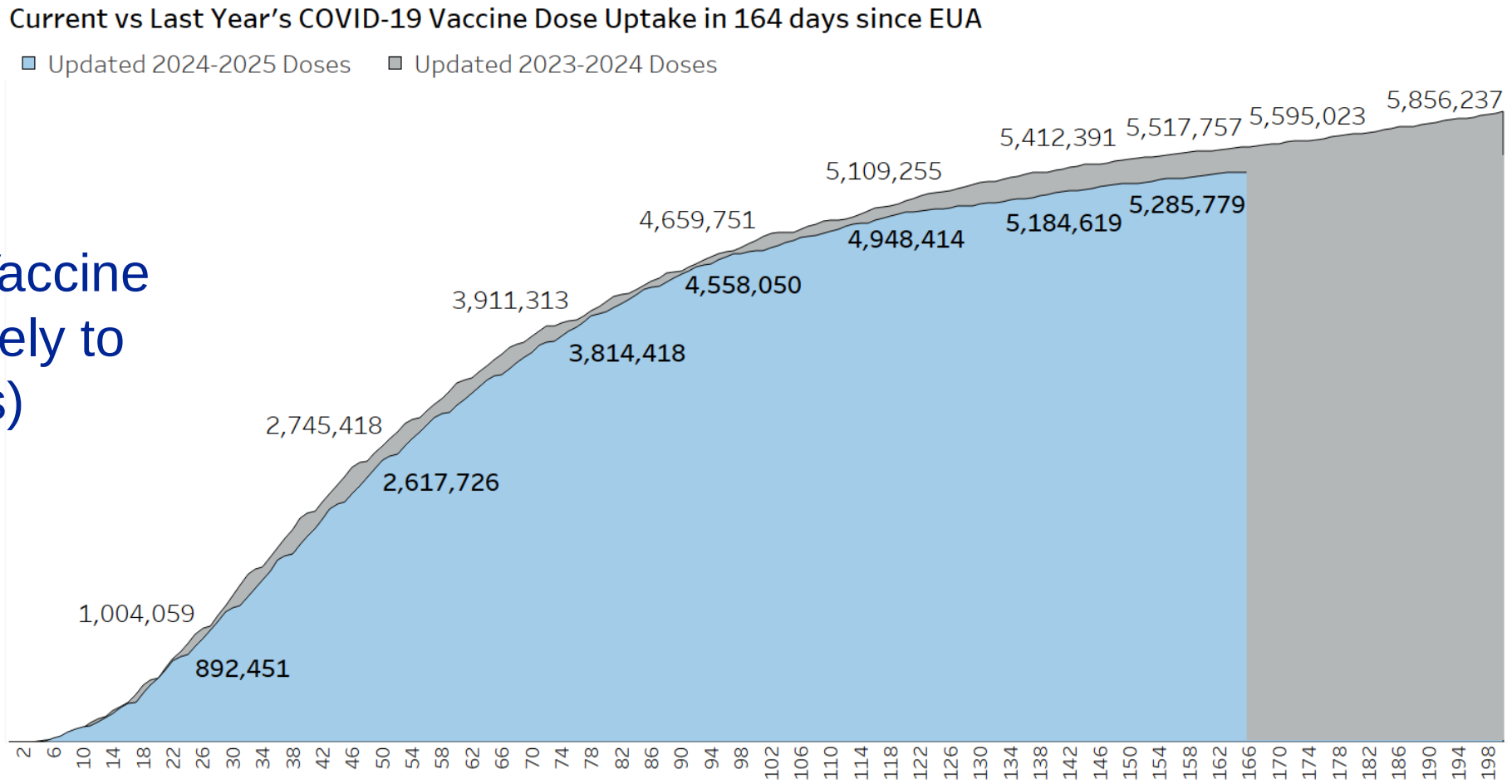




COVID-19 Vaccine Uptake Comparison

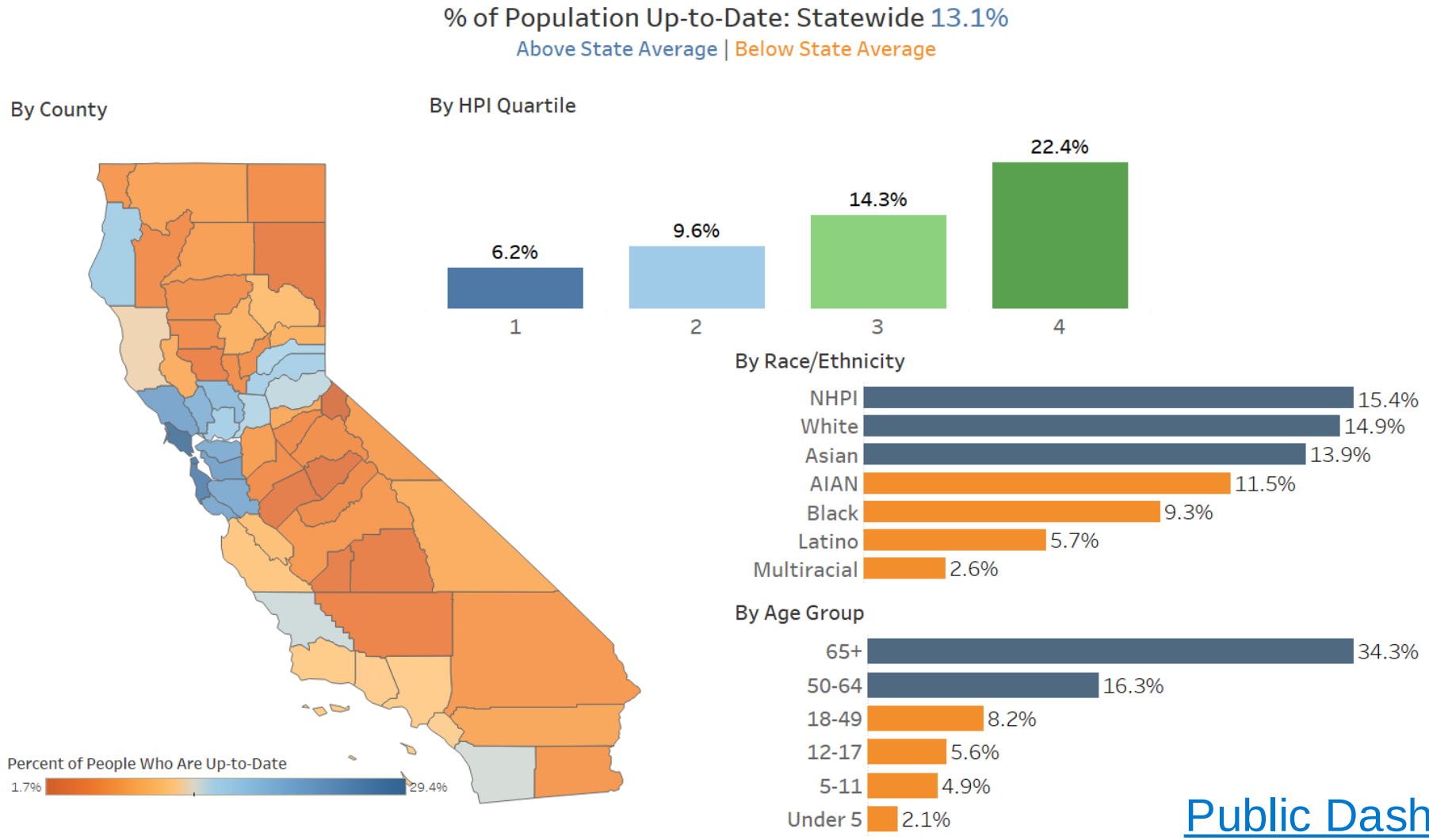
as of February 3, 2025

Currently COVID-19 Vaccine uptake is tracking closely to last year (-232K doses)



COVID-19 Vaccination Overview

as of February 3, 2025



[Public Dashboard Link]

System Notes

- Up-to-Date status is defined as at least one dose of the updated 2024 – 2025 COVID-19 vaccine.
- 2024 – 2025 COVID-19 vaccine data is available on the Public dashboard.
  - Updated monthly
- Email cdphvaccinedatateam@cdph.ca.gov for questions and comments.

Public Dashboard Link

Clinical Updates

Floria Chi, MD

CDPH Respiratory Virus Report

(as of 1/25/25)

- Report Highlights -

The 2024-2025 Respiratory Virus Season covers June 30, 2024 through June 28, 2025.

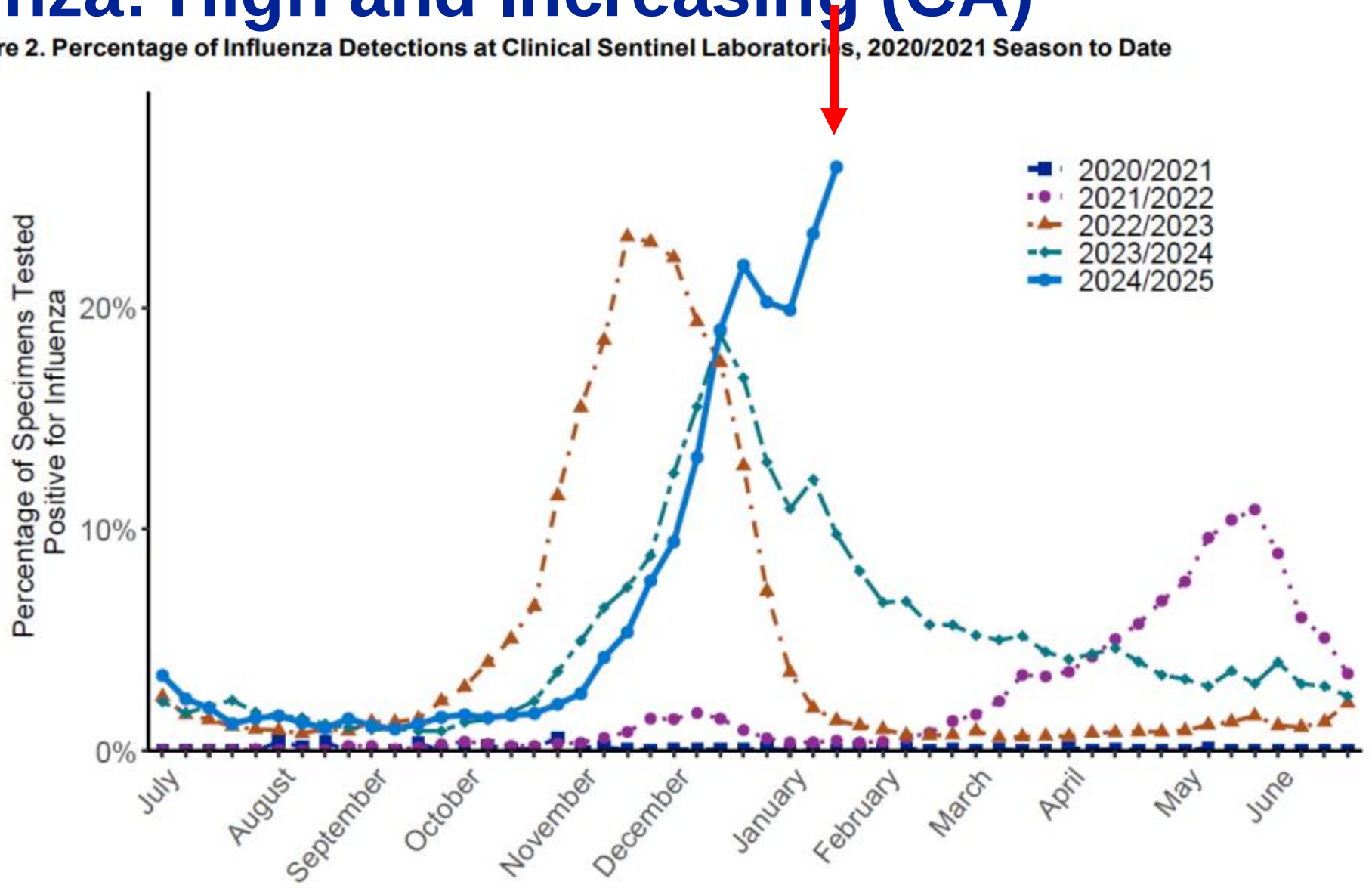
	COVID-19	FLU	RSV
Test Positivity (change)	**2.4% (0.0)**	**26.3% (3.0)**	**5.7% (-0.7)**
New Admissions Rate per 100,000 Persons (change)	**2.2 (-0.1)**	**9.5 (0.9)**	**N/A**
Percent of Total Deaths (change)	**1.5% (1.0)**	**2.4% (1.0)**	**0.0% (-0.3)**
Total Season Pediatric Deaths (new)	**3 (0)**	**10 (3)**	**2 (0)**
Wastewater Concentrations (trend)	**MEDIUM (PLATEAUING)**	**N/A**	**N/A**

Report Data from January 19 – 25, 2025

Key Messages:

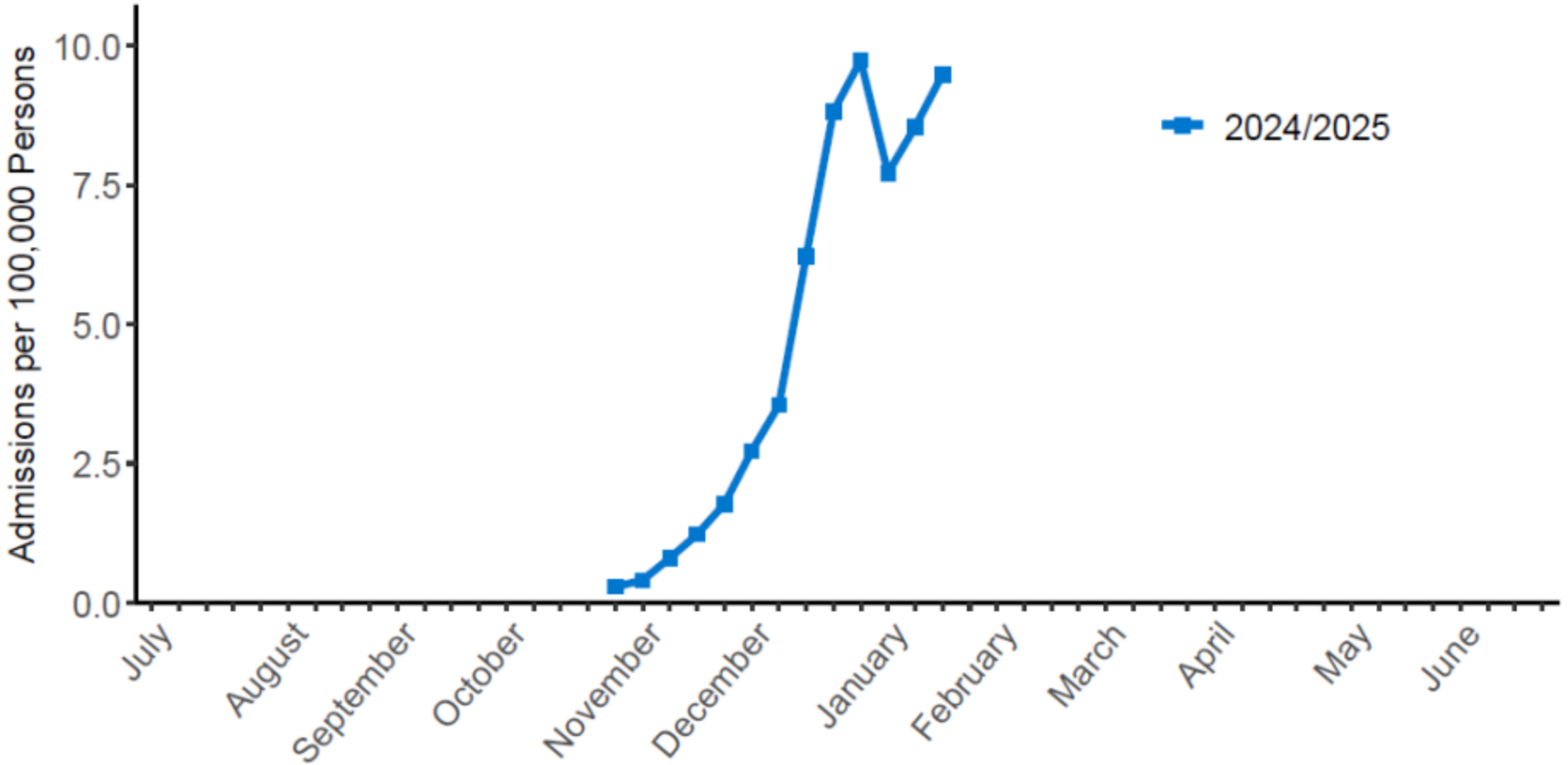
- **Activity**
  - Influenza: high and increasing
  - RSV: low and decreasing
  - COVID-19: low
- **Influenza subtypes from + tests**
  - Majority are type A, with both H1 and H3 strains circulating.
  - Type B <5%
- **Vaccination coverage**
  - Only a small percentage of eligible Californians have received the appropriate respiratory virus vaccines.

Influenza: High and Increasing (CA)



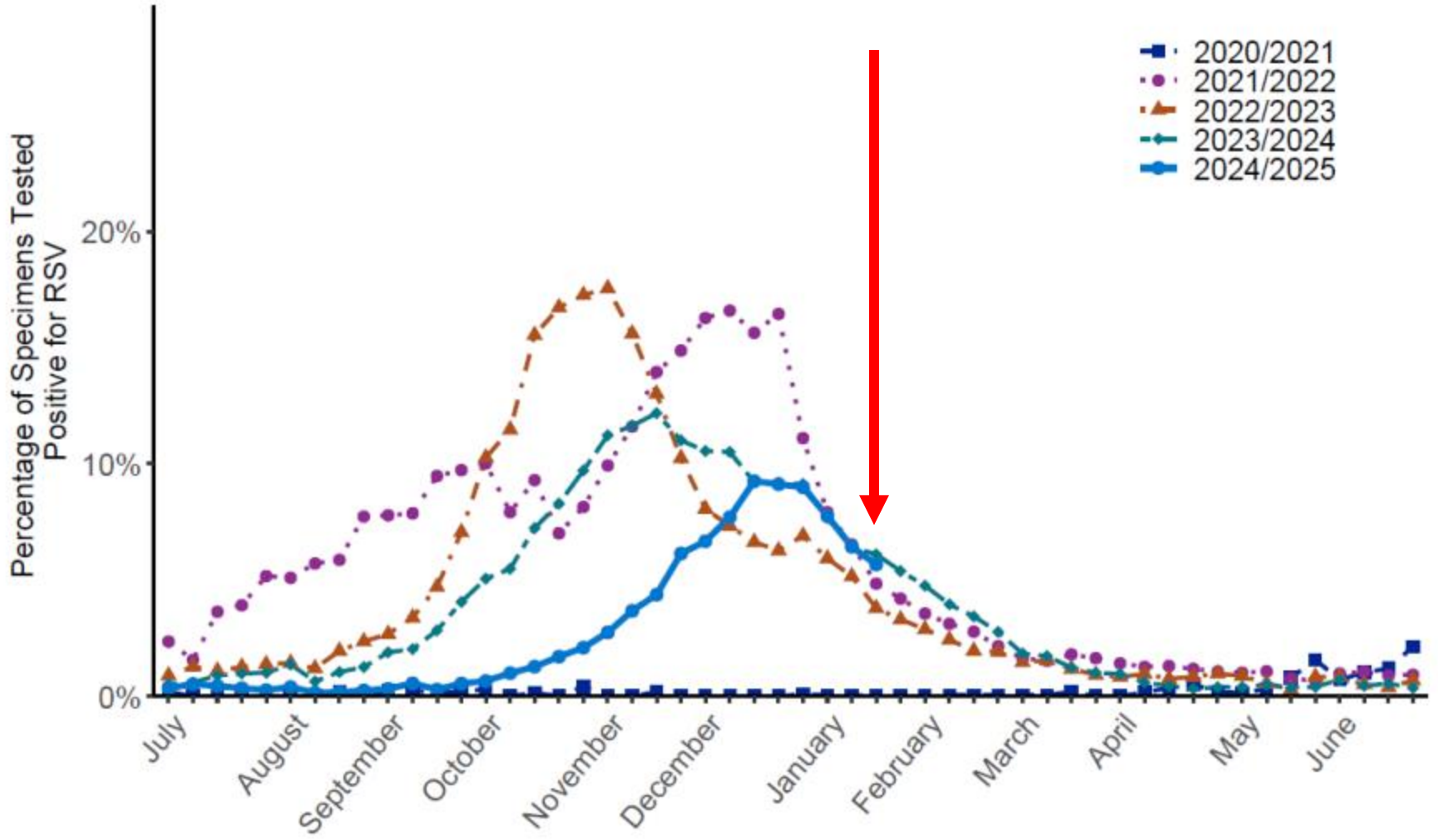
Influenza: Hospitalizations (CA)

Figure 6. Rate of Influenza Admissions from NHSN from November 1, 2024 to Date



RSV: Decreasing (CA)

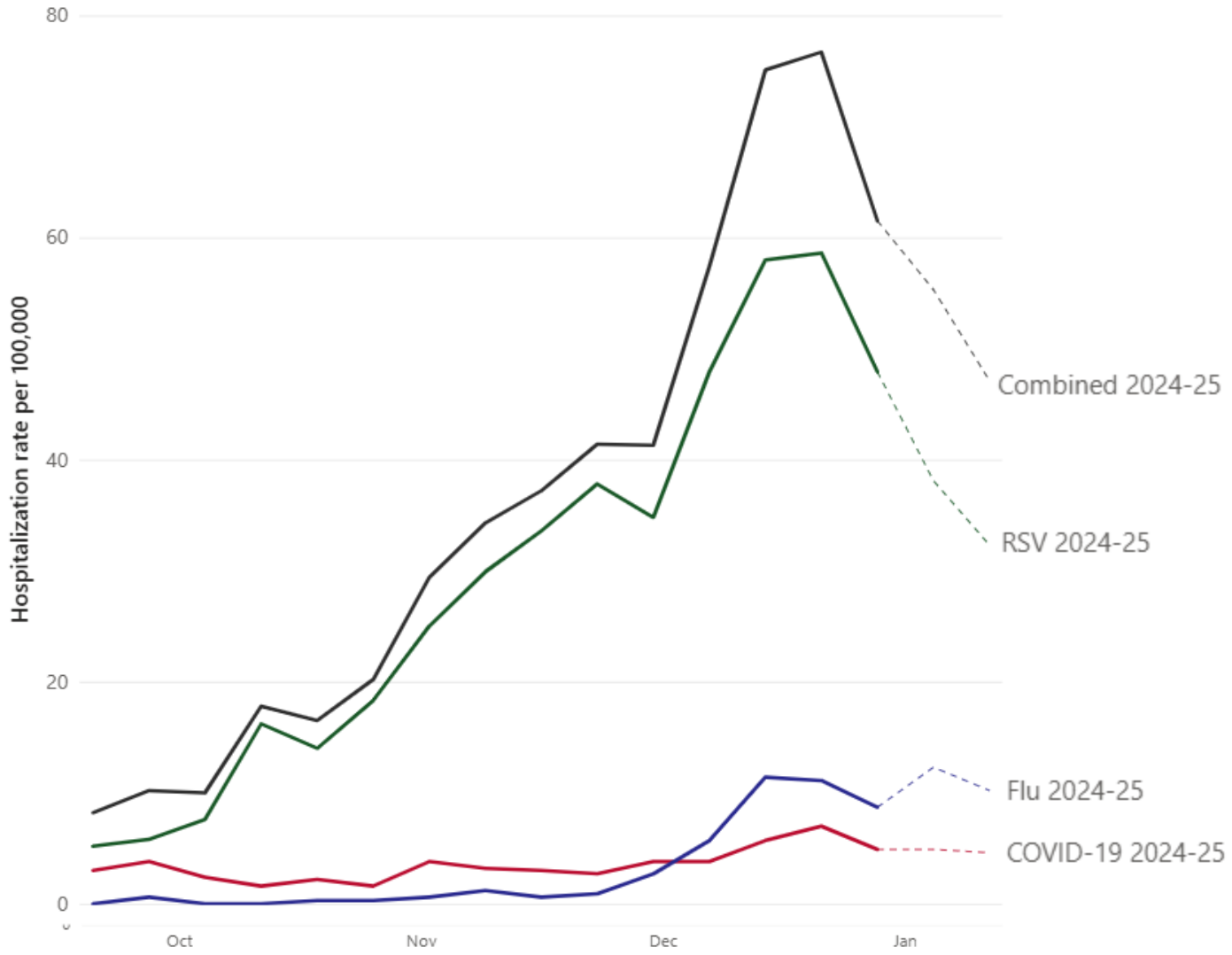
Figure 3. Percentage of RSV Detections at Clinical Sentinel Laboratories, 2020/2021 Season to Date



RSV: Infant Hospitalizations (National, CDC)

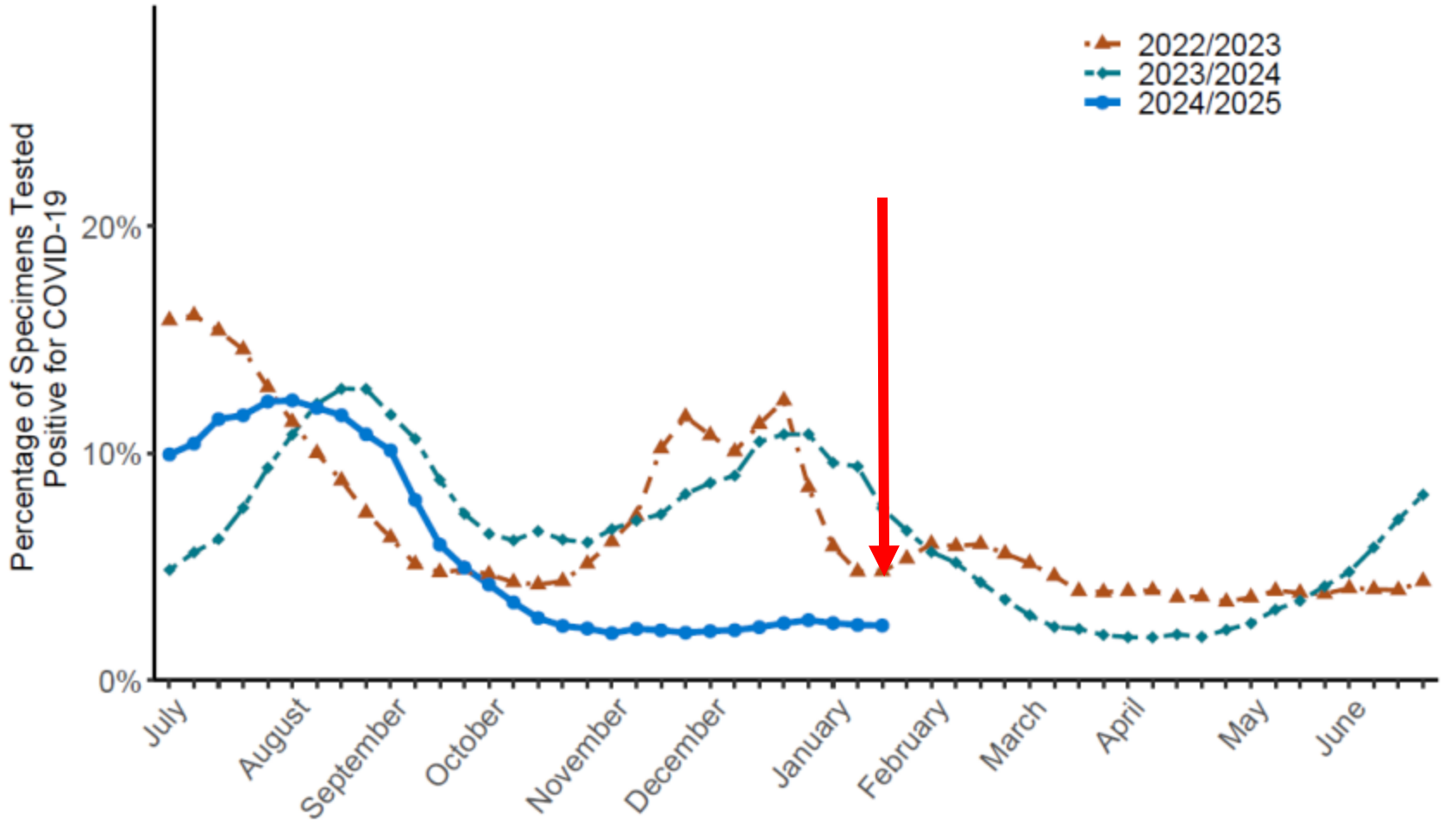
Respiratory Virus-Associated Hospitalization Rates for Infants <1 year (as of 1/31/25)

RSV accounts for nearly 80% of all infant respiratory hospitalizations.

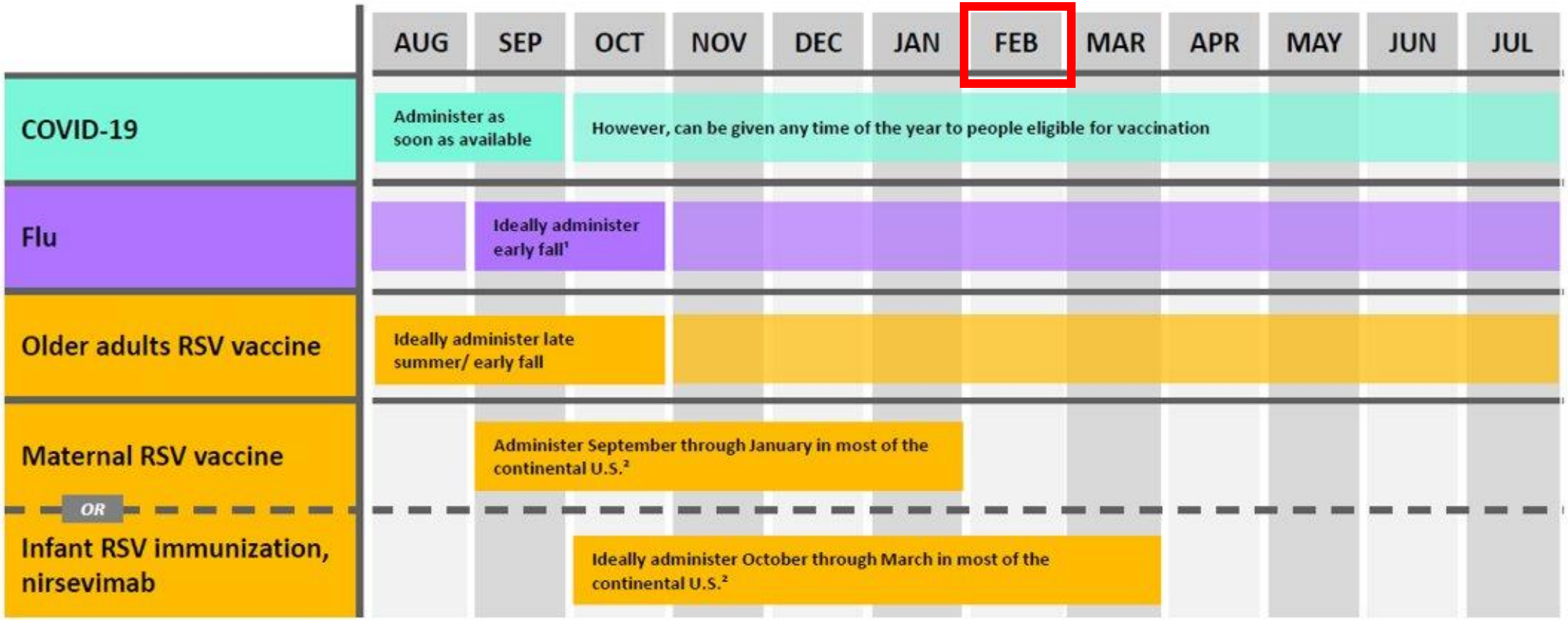


COVID-19: Low (CA)

Figure 1. Percentage of SARS-CoV-2 Detections from Test Results Received through Electronic Laboratory Reporting, 2022/2023 Season to Date



Timing and Administration of COVID-19, Influenza, and RSV Immunizations



[1] Children who need 2 doses should receive their first dose as soon as possible (including during July and August). One dose of flu vaccine can be considered for pregnant people in their third trimester during July and August.

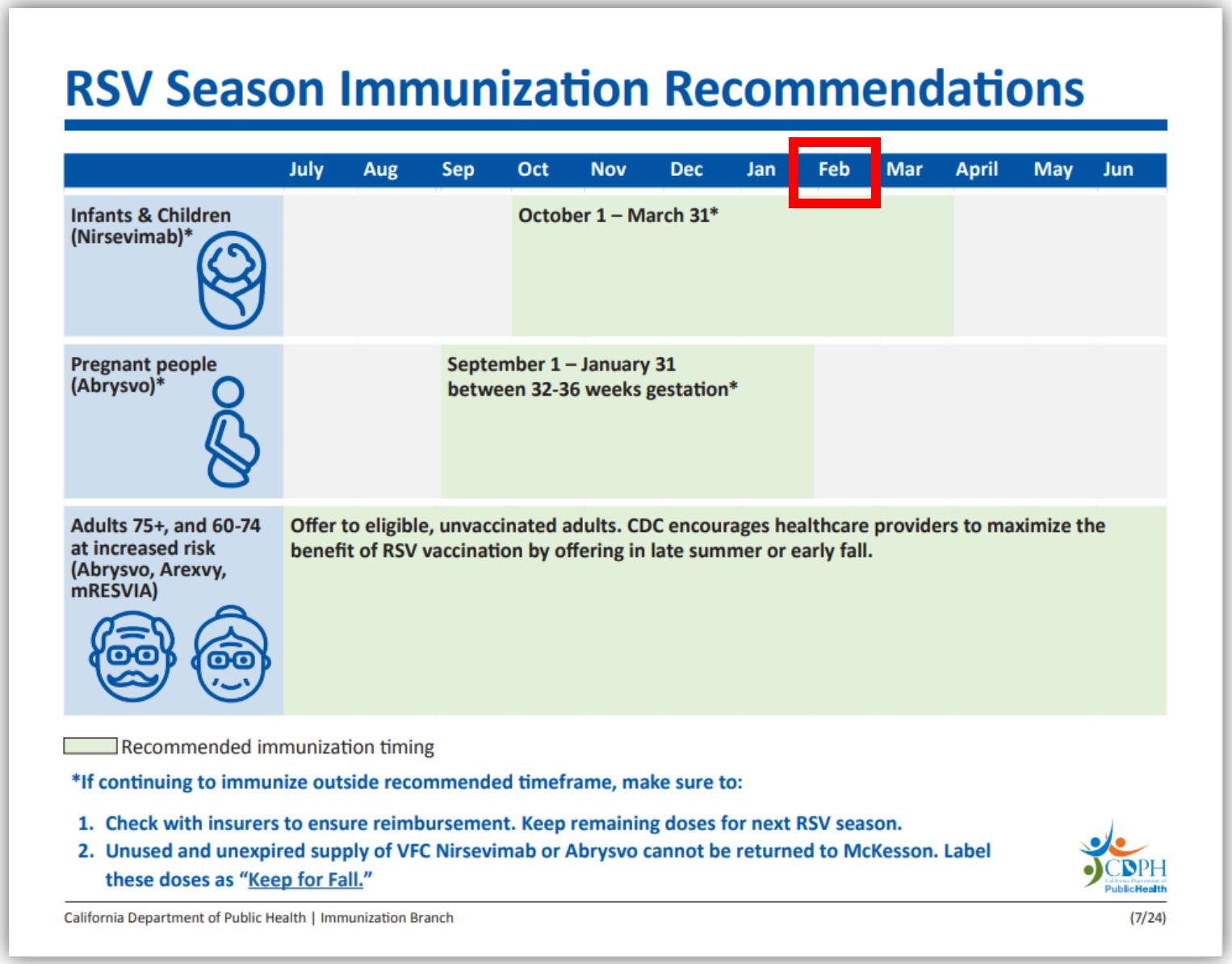
[2] In jurisdictions with RSV seasonality that differs from most of the continental United States, including Alaska, southern Florida, Guam, Hawaii, Puerto Rico, U.S.-affiliated Pacific Islands, and U.S. Virgin Islands, providers should follow state, local, or territorial guidance. However, nirsevimab may be administered outside of routine seasonal administration (ie., October through March) based on local RSV activity and other special circumstances.

CDC Presentation

It’s Not Too Late to Vaccinate!

- Everyone 6 months and older should get **updated COVID-19 and influenza vaccines.**
- Infants and older adults who are eligible should get **RSV immunization**.
- Immunizations may be co-administered at the same visit.

RSVseasonImmunization Recommendations.pdf



RSV Season Immunization Recommendations

	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	April	May	Jun
Infants & Children (Nirsevimab)*				October 1 – March 31*								
Pregnant people (Abrysvo)*			September 1 – January 31 between 32-36 weeks gestation*									
Adults 75+, and 60-74 at increased risk (Abrysvo, Arexvy, mRESVIA)	Offer to eligible, unvaccinated adults. CDC encourages healthcare providers to maximize the benefit of RSV vaccination by offering in late summer or early fall.											

Recommended immunization timing

*If continuing to immunize outside recommended timeframe, make sure to:

1. Check with insurers to ensure reimbursement. Keep remaining doses for next RSV season.
2. Unused and unexpired supply of VFC Nirsevimab or Abrysvo cannot be returned to McKesson. Label these doses as “Keep for Fall.”

California Department of Public Health | Immunization Branch (7/24)

RSV Immunization for Infants and Toddlers

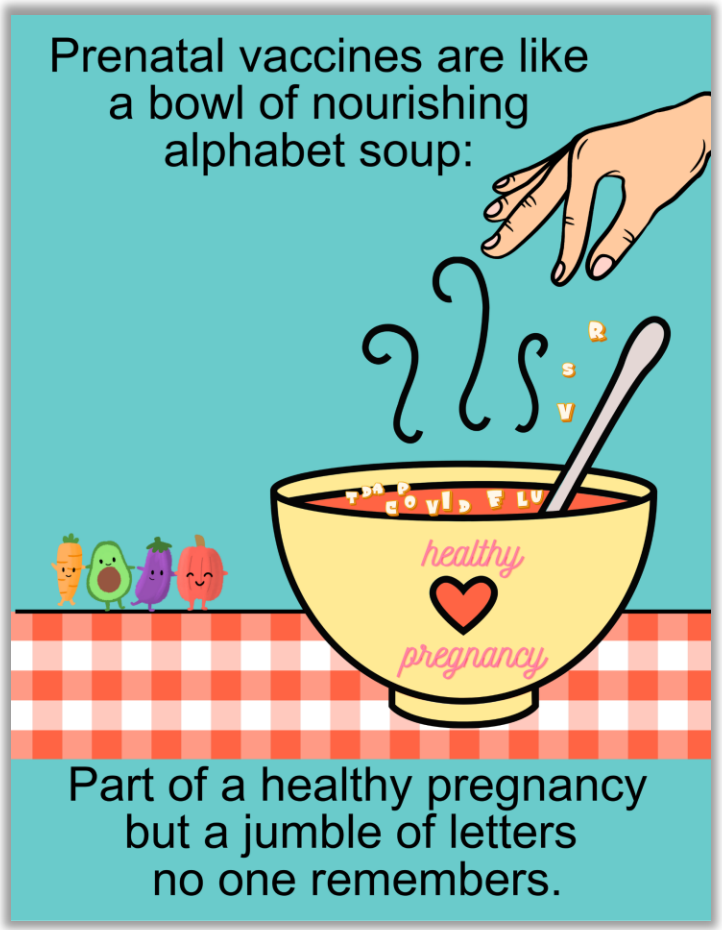
Administer nirsevimab to:

- Infants <8 months if prenatal vaccination was not given*
  - Within the first week of life, *ideally in hospital or at first outpatient pediatric visit*
- High-risk children 8 – 19 months old

*If unable to confirm if prenatal RSV vaccination was given, consider:

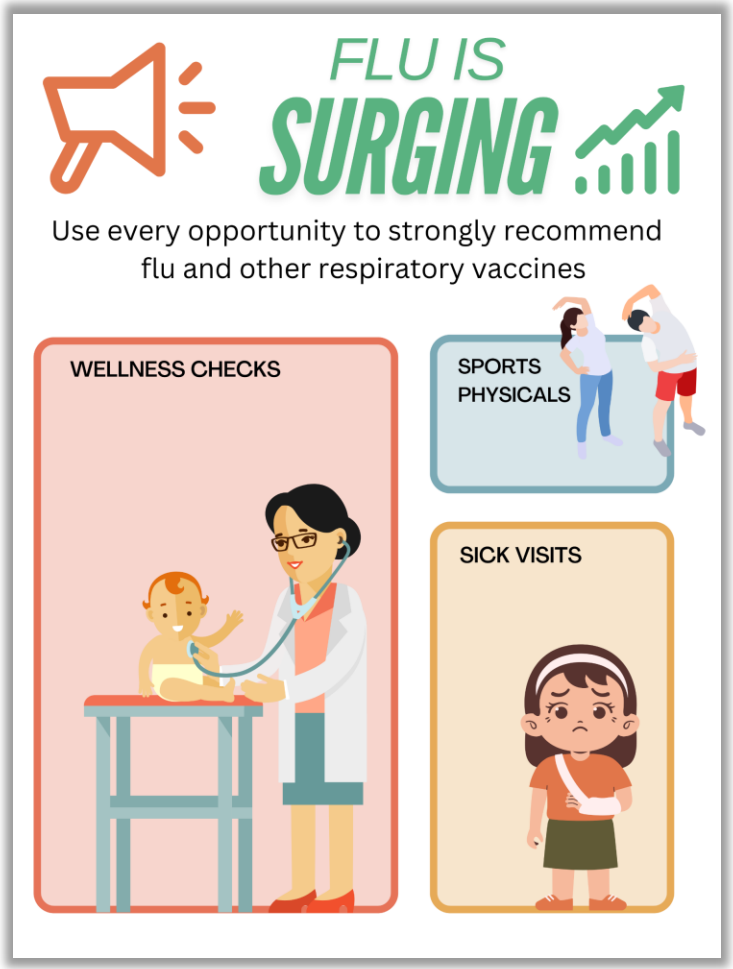
  - Asking birth parent to look up their Digital Vaccine Record: mydvr.cdph.ca.gov
  - Checking the California Immunization Registry (CAIR)

Prenatal Infographic



Additional resources:
IMM-1480 Nirsevimab (Beyfortus) Guide (CDPH)
RSV Immunization Guidance for Infants/Children (CDC)

The Time to Recall Patients for Flu Vaccine is Now



Children 6 months through 8 years who received less than 2 doses of flu vaccine in previous seasons need **2 doses**, 4 weeks apart.

Flu Vaccine Communication Templates

- Provider to Patient Letter Template
- Schools to Parent Letter Template
- Schools Robocall Script Template

Flu is Surging Infographic

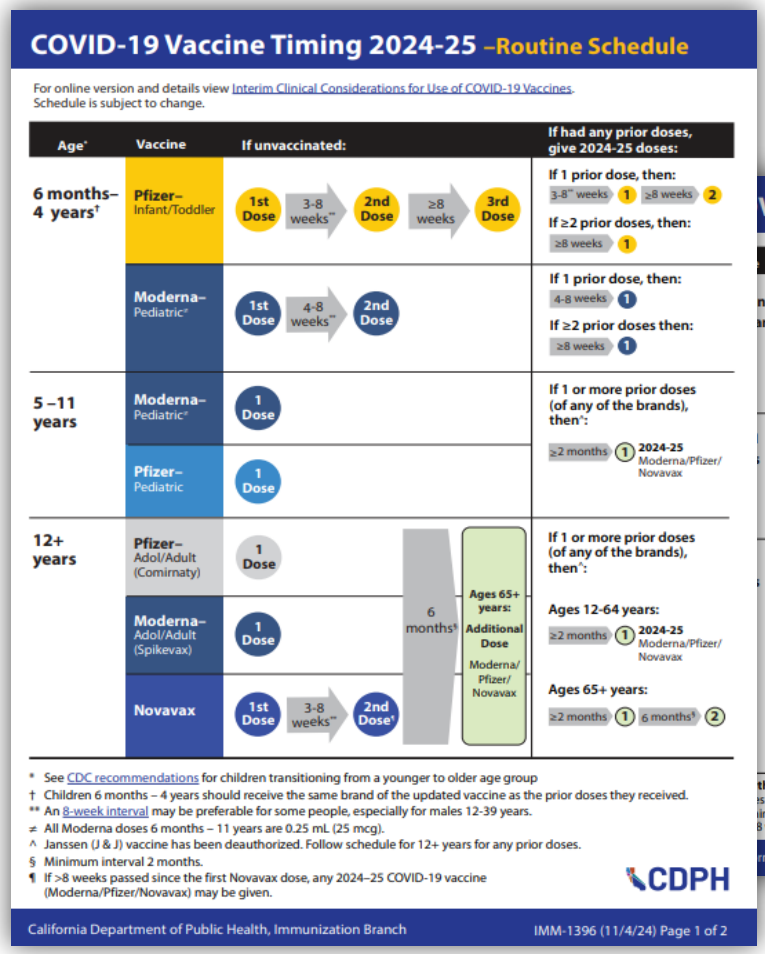
Flu & Respiratory Disease Prevention Promotional Materials

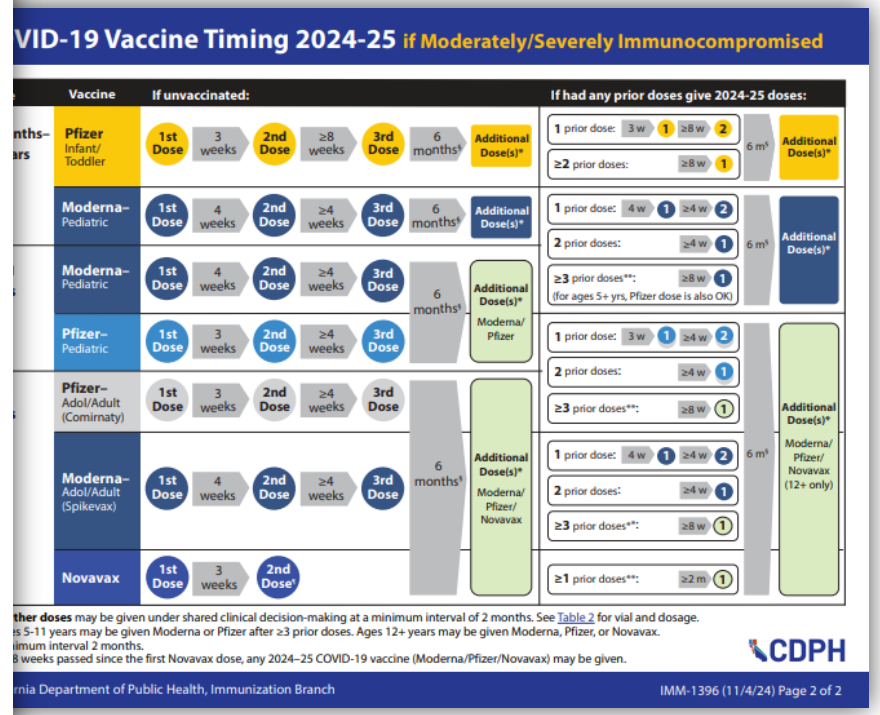
COVID-19 Vaccine: 2nd Dose for 65+ and Immunocompromised

Everyone 6 months and older should receive an updated 2024 – 2025 COVID-19 vaccine if they haven't already.

Those who are ≥65 years or immunocompromised **should also receive a second dose 6 months* after their first.**

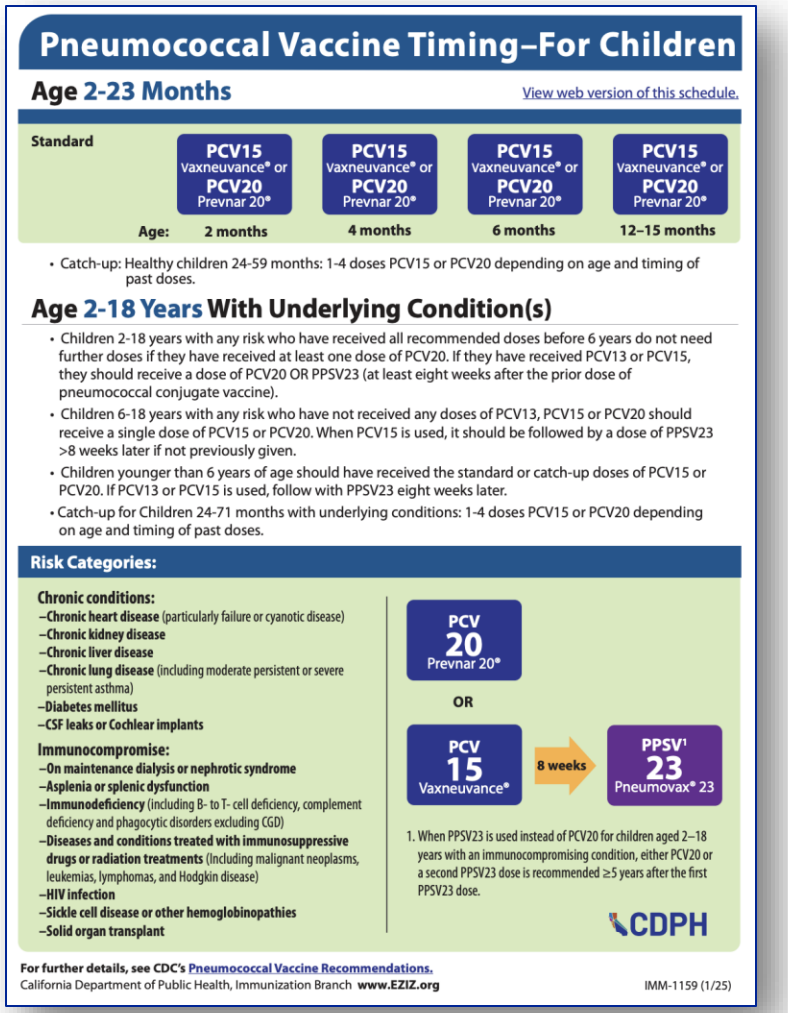
*Minimum interval 2 months.





[IMM-1396 COVID-19 Vaccine Timing Chart]

Updated Pneumococcal Timing Guides



Pneumococcal Vaccine Timing–For Children

Age 2-23 Months

View web version of this schedule.

	Age: 2 months	4 months	6 months	12–15 months
Standard	PCV15 Vaxneuvance® or PCV20 Prevnar 20®	PCV15 Vaxneuvance® or PCV20 Prevnar 20®	PCV15 Vaxneuvance® or PCV20 Prevnar 20®	PCV15 Vaxneuvance® or PCV20 Prevnar 20®

- Catch-up: Healthy children 24-59 months: 1-4 doses PCV15 or PCV20 depending on age and timing of past doses.

Age 2-18 Years With Underlying Condition(s)

- Children 2-18 years with any risk who have received all recommended doses before 6 years do not need further doses if they have received at least one dose of PCV20. If they have received PCV13 or PCV15, they should receive a dose of PCV20 OR PPSV23 (at least eight weeks after the prior dose of pneumococcal conjugate vaccine).
- Children 6-18 years with any risk who have not received any doses of PCV13, PCV15 or PCV20 should receive a single dose of PCV15 or PCV20. When PCV15 is used, it should be followed by a dose of PPSV23 >8 weeks later if not previously given.
- Children younger than 6 years of age should have received the standard or catch-up doses of PCV15 or PCV20. If PCV13 or PCV15 is used, follow with PPSV23 eight weeks later.
- Catch-up for Children 24-71 months with underlying conditions: 1-4 doses PCV15 or PCV20 depending on age and timing of past doses.

Risk Categories:

Chronic conditions:
- **Chronic heart disease** (particularly failure or cyanotic disease)
- **Chronic kidney disease**
- **Chronic liver disease**
- **Chronic lung disease** (including moderate persistent or severe persistent asthma)
- **Diabetes mellitus**
- **CSF leaks or Cochlear implants**

Immunocompromise:
- **On maintenance dialysis or nephrotic syndrome**
- **Asplenia or splenic dysfunction**
- **Immunodeficiency** (including B- to T- cell deficiency, complement deficiency and phagocytic disorders excluding CGD)
- **Diseases and conditions treated with immunosuppressive drugs or radiation treatments** (Including malignant neoplasms, leukemias, lymphomas, and Hodgkin disease)
- **HIV infection**
- **Sickle cell disease or other hemoglobinopathies**
- **Solid organ transplant**

PCV 20 Prevnar 20® OR PCV 15 Vaxneuvance® → 8 weeks → PPSV[1] 23 Pneumovax® 23

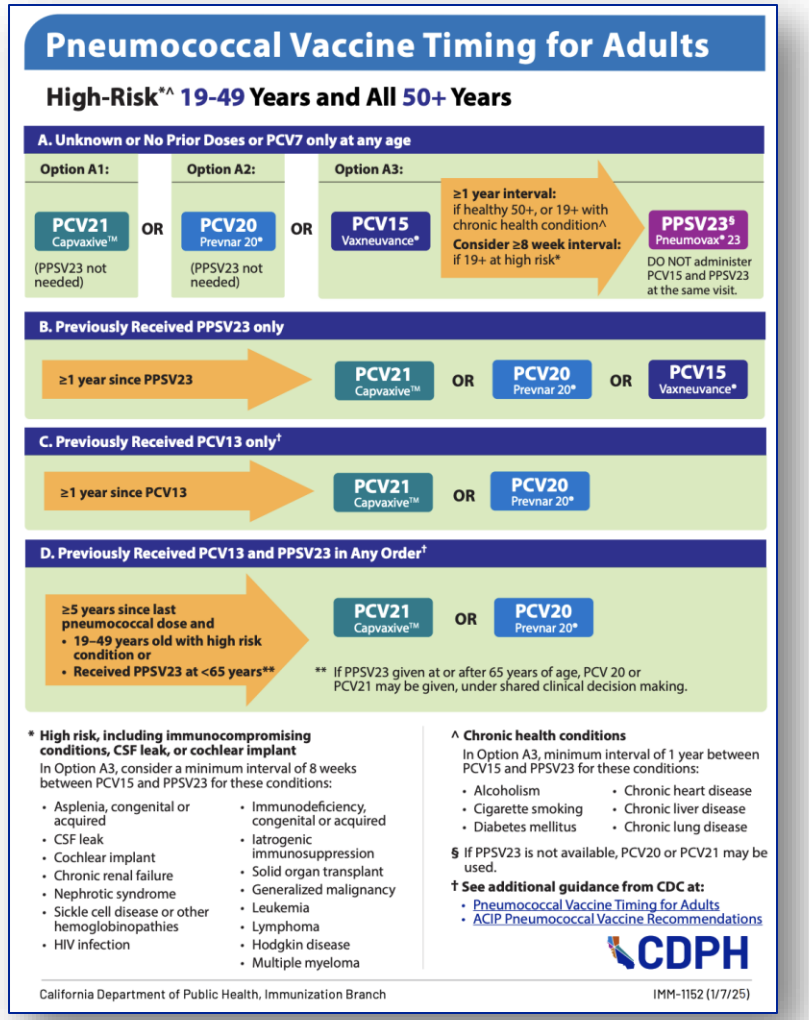
1. When PPSV23 is used instead of PCV20 for children aged 2–18 years with an immunocompromising condition, either PCV20 or a second PPSV23 dose is recommended ≥5 years after the first PPSV23 dose.

CDPH

For further details, see CDC's Pneumococcal Vaccine Recommendations.

California Department of Public Health, Immunization Branch **www.EZIZ.org** IMM-1159 (1/25)

[Child Timing Guide (IMM-1159)]



Pneumococcal Vaccine Timing for Adults

High-Risk*^ 19-49 Years and All 50+ Years

A. Unknown or No Prior Doses or PCV7 only at any age

Option A1:	Option A2:	Option A3:
PCV21 Capvaxive™ (PPSV23 not needed)	OR PCV20 Prevnar 20® (PPSV23 not needed)	OR PCV15 Vaxneuvance® → ≥1 year interval: if healthy 50+, or 19+ with chronic health condition^ **Consider ≥8 week interval:** if 19+ at high risk* → PPSV23§ Pneumovax® 23 DO NOT administer PCV15 and PPSV23 at the same visit.

B. Previously Received PPSV23 only

≥1 year since PPSV23 → PCV21 Capvaxive™ OR PCV20 Prevnar 20® OR PCV15 Vaxneuvance®

C. Previously Received PCV13 only†

≥1 year since PCV13 → PCV21 Capvaxive™ OR PCV20 Prevnar 20®

D. Previously Received PCV13 and PPSV23 in Any Order†

≥5 years since last pneumococcal dose and
- 19–49 years old with high risk condition or
- Received PPSV23 at <65 years**

→ PCV21 Capvaxive™ OR PCV20 Prevnar 20®

** If PPSV23 given at or after 65 years of age, PCV 20 or PCV21 may be given, under shared clinical decision making.

* **High risk, including immunocompromising conditions, CSF leak, or cochlear implant**

In Option A3, consider a minimum interval of 8 weeks between PCV15 and PPSV23 for these conditions:
- Asplenia, congenital or acquired
- CSF leak
- Cochlear implant
- Chronic renal failure
- Nephrotic syndrome
- Sickle cell disease or other hemoglobinopathies
- HIV infection
- Immunodeficiency, congenital or acquired
- Iatrogenic immunosuppression
- Solid organ transplant
- Generalized malignancy
- Leukemia
- Lymphoma
- Hodgkin disease
- Multiple myeloma

^ **Chronic health conditions**

In Option A3, minimum interval of 1 year between PCV15 and PPSV23 for these conditions:
- Alcoholism
- Cigarette smoking
- Diabetes mellitus
- Chronic heart disease
- Chronic liver disease
- Chronic lung disease

§ If PPSV23 is not available, PCV20 or PCV21 may be used.

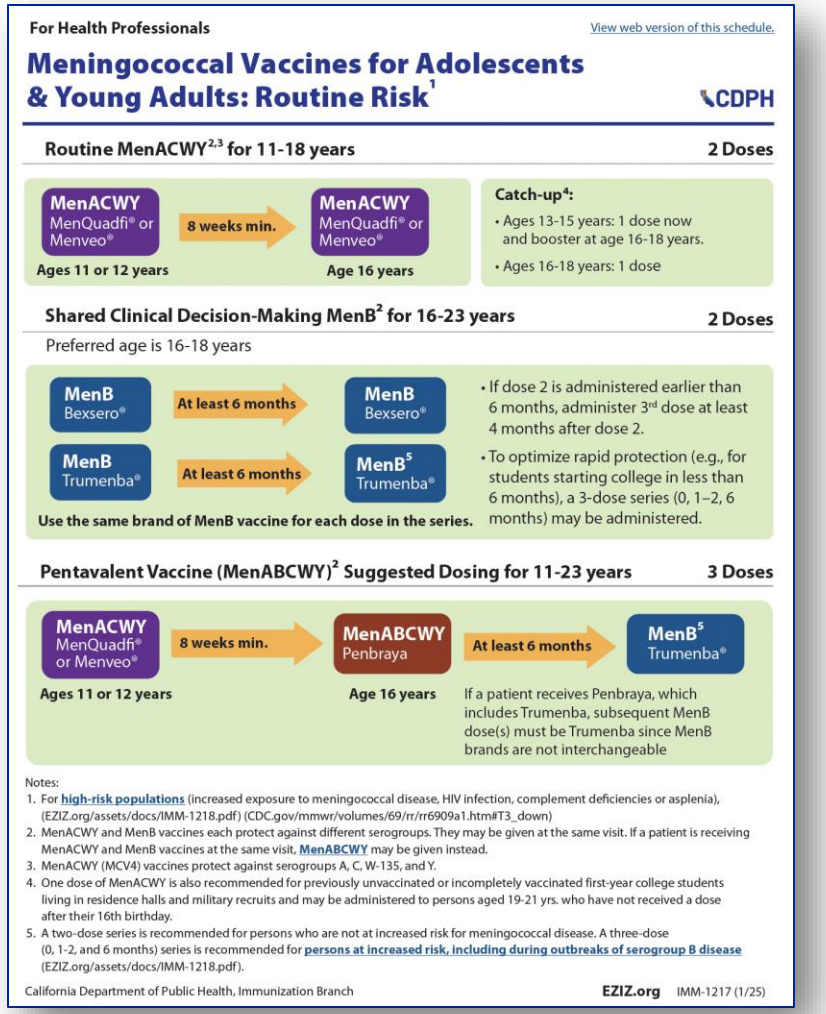
† **See additional guidance from CDC at:**
- Pneumococcal Vaccine Timing for Adults
- ACIP Pneumococcal Vaccine Recommendations

CDPH

California Department of Public Health, Immunization Branch IMM-1152 (1/7/25)

[Adult Timing Guide (IMM-1152)]

Updated Meningococcal Timing Guides



For Health Professionals

View web version of this schedule.

Meningococcal Vaccines for Adolescents & Young Adults: Routine Risk[1]

CDPH

Routine MenACWY[2,3] for 11-18 years — 2 Doses

MenACWY MenQuadfi® or Menveo® — 8 weeks min. → MenACWY MenQuadfi® or Menveo®

Ages 11 or 12 years — Age 16 years

Catch-up[4]:
- Ages 13-15 years: 1 dose now and booster at age 16-18 years.
- Ages 16-18 years: 1 dose

Shared Clinical Decision-Making MenB[2] for 16-23 years — 2 Doses

Preferred age is 16-18 years

MenB Bexsero® — At least 6 months → MenB Bexsero®

MenB Trumenba® — At least 6 months → MenB[5] Trumenba®

Use the same brand of MenB vaccine for each dose in the series.

- If dose 2 is administered earlier than 6 months, administer 3rd dose at least 4 months after dose 2.
- To optimize rapid protection (e.g., for students starting college in less than 6 months), a 3-dose series (0, 1–2, 6 months) may be administered.

Pentavalent Vaccine (MenABCWY)[2] Suggested Dosing for 11-23 years — 3 Doses

MenACWY MenQuadfi® or Menveo® — 8 weeks min. → MenABCWY Penbraya — At least 6 months → MenB[5] Trumenba®

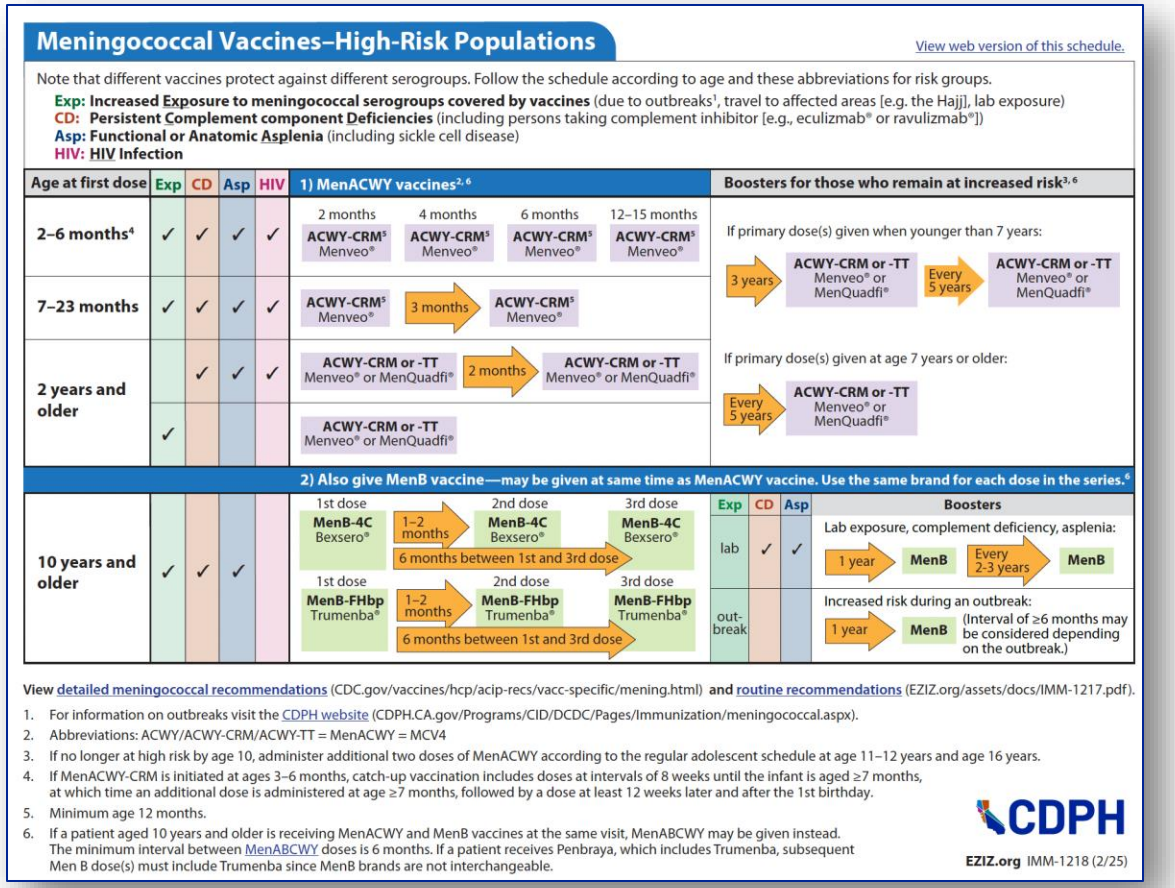
Ages 11 or 12 years — Age 16 years

If a patient receives Penbraya, which includes Trumenba, subsequent MenB dose(s) must be Trumenba since MenB brands are not interchangeable

Notes:
1. For high-risk populations (increased exposure to meningococcal disease, HIV infection, complement deficiencies or asplenia), (EZIZ.org/assets/docs/IMM-1218.pdf) (CDC.gov/mmwr/volumes/69/rr/rr6909a1.htm#T3_down)
2. MenACWY and MenB vaccines each protect against different serogroups. They may be given at the same visit. If a patient is receiving MenACWY and MenB vaccines at the same visit, MenABCWY may be given instead.
3. MenACWY (MCV4) vaccines protect against serogroups A, C, W-135, and Y.
4. One dose of MenACWY is also recommended for previously unvaccinated or incompletely vaccinated first-year college students living in residence halls and military recruits and may be administered to persons aged 19-21 yrs. who have not received a dose after their 16th birthday.
5. A two-dose series is recommended for persons who are not at increased risk for meningococcal disease. A three-dose (0, 1-2, and 6 months) series is recommended for persons at increased risk, including during outbreaks of serogroup B disease (EZIZ.org/assets/docs/IMM-1218.pdf).

California Department of Public Health, Immunization Branch — EZIZ.org IMM-1217 (1/25)

[Routine Schedule (IMM-1217)]



Meningococcal Vaccines–High-Risk Populations

View web version of this schedule.

Note that different vaccines protect against different serogroups. Follow the schedule according to age and these abbreviations for risk groups.

Exp: **Increased Exposure to meningococcal serogroups covered by vaccines** (due to outbreaks[1], travel to affected areas [e.g. the Hajj], lab exposure)
CD: **Persistent Complement component Deficiencies** (including persons taking complement inhibitor [e.g., eculizmab® or ravulizmab®])
Asp: **Functional or Anatomic Asplenia** (including sickle cell disease)
HIV: **HIV Infection**

Age at first dose	Exp	CD	Asp	HIV	1) MenACWY vaccines[2,6]	Boosters for those who remain at increased risk[3,6]
2–6 months[4]	✓	✓	✓	✓	2 months: ACWY-CRM[5] Menveo®; 4 months: ACWY-CRM[5] Menveo®; 6 months: ACWY-CRM[5] Menveo®; 12–15 months: ACWY-CRM[5] Menveo®	If primary dose(s) given when younger than 7 years: 3 years → ACWY-CRM or -TT Menveo® or MenQuadfi® → Every 5 years → ACWY-CRM or -TT Menveo® or MenQuadfi®
7–23 months	✓	✓	✓	✓	ACWY-CRM[5] Menveo® → 3 months → ACWY-CRM[5] Menveo®	
2 years and older		✓	✓	✓	ACWY-CRM or -TT Menveo® or MenQuadfi® → 2 months → ACWY-CRM or -TT Menveo® or MenQuadfi®	If primary dose(s) given at age 7 years or older: Every 5 years → ACWY-CRM or -TT Menveo® or MenQuadfi®
	✓				ACWY-CRM or -TT Menveo® or MenQuadfi®	

2) Also give MenB vaccine—may be given at same time as MenACWY vaccine. Use the same brand for each dose in the series.[6]

						Exp	CD	Asp	Boosters
10 years and older	✓	✓	✓		1st dose MenB-4C Bexsero® → 1–2 months → 2nd dose MenB-4C Bexsero® → 3rd dose MenB-4C Bexsero®; 6 months between 1st and 3rd dose 1st dose MenB-FHbp Trumenba® → 1–2 months → 2nd dose MenB-FHbp Trumenba® → 3rd dose MenB-FHbp Trumenba®; 6 months between 1st and 3rd dose	lab	✓	✓	Lab exposure, complement deficiency, asplenia: 1 year → MenB → Every 2-3 years → MenB
						out-break			Increased risk during an outbreak: 1 year → MenB (Interval of ≥6 months may be considered depending on the outbreak.)

View detailed meningococcal recommendations (CDC.gov/vaccines/hcp/acip-recs/vacc-specific/mening.html) and routine recommendations (EZIZ.org/assets/docs/IMM-1217.pdf).

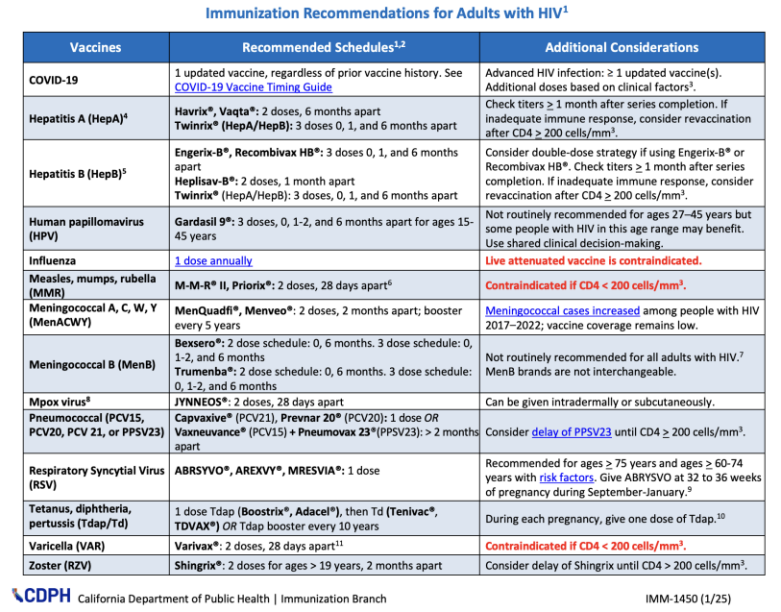
1. For information on outbreaks visit the CDPH website (CDPH.CA.gov/Programs/CID/DCDC/Pages/Immunization/meningococcal.aspx).
2. Abbreviations: ACWY/ACWY-CRM/ACWY-TT = MenACWY = MCV4
3. If no longer at high risk by age 10, administer additional two doses of MenACWY according to the regular adolescent schedule at age 11–12 years and age 16 years.
4. If MenACWY-CRM is initiated at ages 3–6 months, catch-up vaccination includes doses at intervals of 8 weeks until the infant is aged ≥7 months, at which time an additional dose is administered at age ≥7 months, followed by a dose at least 12 weeks later and after the 1st birthday.
5. Minimum age 12 months.
6. If a patient aged 10 years and older is receiving MenACWY and MenB vaccines at the same visit, MenABCWY may be given instead. The minimum interval between MenABCWY doses is 6 months. If a patient receives Penbraya, which includes Trumenba, subsequent Men B dose(s) must include Trumenba since MenB brands are not interchangeable.

CDPH

EZIZ.org IMM-1218 (2/25)

[High-risk Schedule (IMM-1218)]

Updated Job Aids with MenB and Hep B info

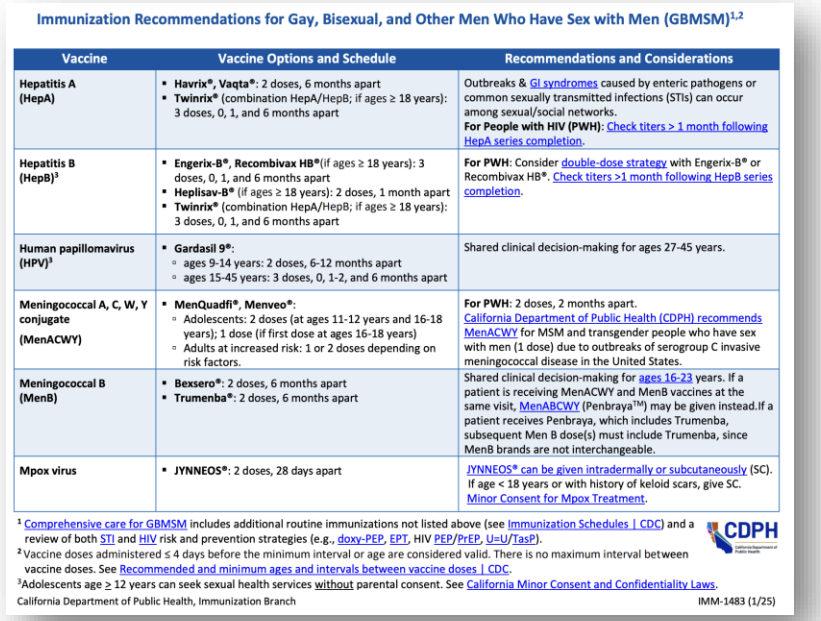


Immunization Recommendations for Adults with HIV[1]

Vaccines	Recommended Schedules[1,2]	Additional Considerations
COVID-19	1 updated vaccine, regardless of prior vaccine history. See COVID-19 Vaccine Timing Guide	Advanced HIV infection: ≥ 1 updated vaccine(s). Additional doses based on clinical factors[3].
Hepatitis A (HepA)[4]	**Havrix®, Vaqta®:** 2 doses, 6 months apart **Twinrix® (HepA/HepB):** 3 doses 0, 1, and 6 months apart	Check titers ≥ 1 month after series completion. If inadequate immune response, consider revaccination after CD4 ≥ 200 cells/mm³.
Hepatitis B (HepB)[5]	**Engerix-B®, Recombivax HB®:** 3 doses 0, 1, and 6 months apart **Heplisav-B®:** 2 doses, 1 month apart **Twinrix®** (HepA/HepB): 3 doses, 0, 1, and 6 months apart	Consider double-dose strategy if using Engerix-B® or Recombivax HB®. Check titers ≥ 1 month after series completion. If inadequate immune response, consider revaccination after CD4 ≥ 200 cells/mm³.
Human papillomavirus (HPV)	**Gardasil 9®:** 3 doses, 0, 1-2, and 6 months apart for ages 15-45 years	Not routinely recommended for ages 27–45 years but some people with HIV in this age range may benefit. Use shared clinical decision-making.
Influenza	1 dose annually	**Live attenuated vaccine is contraindicated.**
Measles, mumps, rubella (MMR)	**M-M-R® II, Priorix®:** 2 doses, 28 days apart[6]	**Contraindicated if CD4 < 200 cells/mm³.**
Meningococcal A, C, W, Y (MenACWY)	**MenQuadfi®, Menveo®:** 2 doses, 2 months apart; booster every 5 years	Meningococcal cases increased among people with HIV 2017–2022; vaccine coverage remains low.
Meningococcal B (MenB)	**Bexsero®:** 2 dose schedule: 0, 6 months. 3 dose schedule: 0, 1-2, and 6 months **Trumenba®:** 2 dose schedule: 0, 6 months. 3 dose schedule: 0, 1-2, and 6 months	Not routinely recommended for all adults with HIV.[7] MenB brands are not interchangeable.
Mpox virus[8]	**JYNNEOS®:** 2 doses, 28 days apart	Can be given intradermally or subcutaneously.
Pneumococcal (PCV15, PCV20, PCV 21, or PPSV23)	**Capvaxive®** (PCV21), **Prevnar 20®** (PCV20): 1 dose *OR* **Vaxneuvance®** (PCV15) **+ Pneumovax 23®**(PPSV23): > 2 months apart	Consider delay of PPSV23 until CD4 ≥ 200 cells/mm³.
Respiratory Syncytial Virus (RSV)	**ABRSYVO®, AREXVY®, MRESVIA®:** 1 dose	Recommended for ages ≥ 75 years and ages ≥ 60-74 years with risk factors. Give ABRYSVO at 32 to 36 weeks of pregnancy during September-January.[9]
Tetanus, diphtheria, pertussis (Tdap/Td)	1 dose Tdap (**Boostrix®, Adacel®**), then Td **(Tenivac®, TDVAX®)** *OR* Tdap booster every 10 years	During each pregnancy, give one dose of Tdap.[10]
Varicella (VAR)	**Varivax®:** 2 doses, 28 days apart[11]	**Contraindicated if CD4 < 200 cells/mm³.**
Zoster (RZV)	**Shingrix®:** 2 doses for ages > 19 years, 2 months apart	Consider delay of Shingrix until CD4 > 200 cells/mm³.

CDPH California Department of Public Health | Immunization Branch IMM-1450 (1/25)

[People Living with HIV (IMM-1450)]



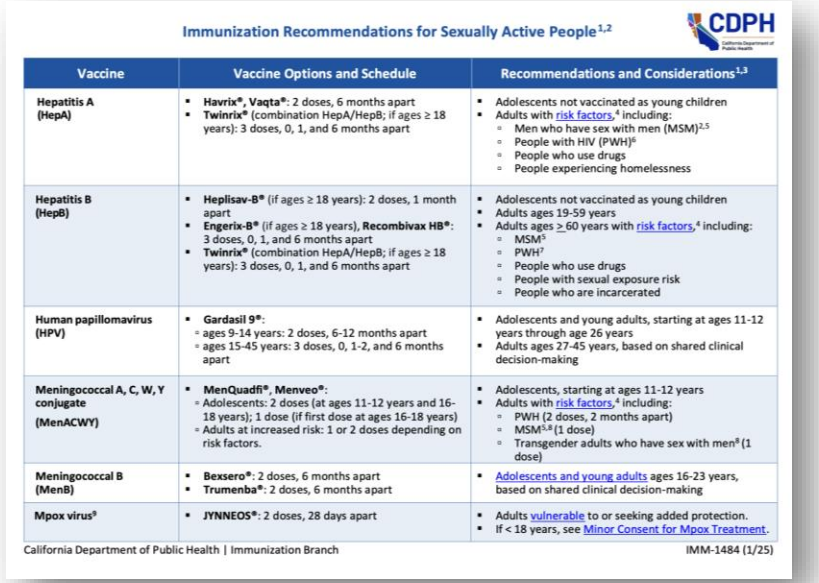
Immunization Recommendations for Gay, Bisexual, and Other Men Who Have Sex with Men (GBMSM)[1,2]

Vaccine	Vaccine Options and Schedule	Recommendations and Considerations
Hepatitis A (HepA)	▪ **Havrix®, Vaqta®:** 2 doses, 6 months apart ▪ **Twinrix®** (combination HepA/HepB; if ages ≥ 18 years): 3 doses, 0, 1, and 6 months apart	Outbreaks & GI syndromes caused by enteric pathogens or common sexually transmitted infections (STIs) can occur among sexual/social networks. **For People with HIV (PWH):** Check titers > 1 month following HepA series completion.
Hepatitis B (HepB)[3]	▪ **Engerix-B®, Recombivax HB®**(if ages ≥ 18 years): 3 doses, 0, 1, and 6 months apart ▪ **Heplisav-B®** (if ages ≥ 18 years): 2 doses, 1 month apart ▪ **Twinrix®** (combination HepA/HepB; if ages ≥ 18 years): 3 doses, 0, 1, and 6 months apart	**For PWH:** Consider double-dose strategy with Engerix-B® or Recombivax HB®. Check titers >1 month following HepB series completion.
Human papillomavirus (HPV)[3]	▪ **Gardasil 9®:** ▫ ages 9-14 years: 2 doses, 6-12 months apart ▫ ages 15-45 years: 3 doses, 0, 1-2, and 6 months apart	Shared clinical decision-making for ages 27-45 years.
Meningococcal A, C, W, Y conjugate (MenACWY)	▪ **MenQuadfi®, Menveo®:** ▫ Adolescents: 2 doses (at ages 11-12 years and 16-18 years); 1 dose (if first dose at ages 16-18 years) ▫ Adults at increased risk: 1 or 2 doses depending on risk factors.	**For PWH:** 2 doses, 2 months apart. California Department of Public Health (CDPH) recommends MenACWY for MSM and transgender people who have sex with men (1 dose) due to outbreaks of serogroup C invasive meningococcal disease in the United States.
Meningococcal B (MenB)	▪ **Bexsero®:** 2 doses, 6 months apart ▪ **Trumenba®:** 2 doses, 6 months apart	Shared clinical decision-making for ages 16-23 years. If a patient is receiving MenACWY and MenB vaccines at the same visit, MenABCWY (Penbraya™) may be given instead.If a patient receives Penbraya, which includes Trumenba, subsequent Men B dose(s) must include Trumenba, since MenB brands are not interchangeable.
Mpox virus	▪ **JYNNEOS®:** 2 doses, 28 days apart	JYNNEOS® can be given intradermally or subcutaneously (SC). If age < 18 years or with history of keloid scars, give SC. Minor Consent for Mpox Treatment.

[1] Comprehensive care for GBMSM includes additional routine immunizations not listed above (see Immunization Schedules | CDC) and a review of both STI and HIV risk and prevention strategies (e.g., doxy-PEP, EPT, HIV PEP/PrEP, U=U/TasP).
[2] Vaccine doses administered ≤ 4 days before the minimum interval or age are considered valid. There is no maximum interval between vaccine doses. See Recommended and minimum ages and intervals between vaccine doses | CDC.
[3] Adolescents age ≥ 12 years can seek sexual health services without parental consent. See California Minor Consent and Confidentiality Laws.

California Department of Public Health, Immunization Branch IMM-1483 (1/25)

[Gay, Bisexual, and MSM (IMM-1483)]



Immunization Recommendations for Sexually Active People[1,2]

Vaccine	Vaccine Options and Schedule	Recommendations and Considerations[1,3]
Hepatitis A (HepA)	▪ **Havrix®, Vaqta®:** 2 doses, 6 months apart ▪ **Twinrix®** (combination HepA/HepB; if ages ≥ 18 years): 3 doses, 0, 1, and 6 months apart	▪ Adolescents not vaccinated as young children ▪ Adults with risk factors,[4] including: ▫ Men who have sex with men (MSM)[2,5] ▫ People with HIV (PWH)[6] ▫ People who use drugs ▫ People experiencing homelessness
Hepatitis B (HepB)	▪ **Heplisav-B®** (if ages ≥ 18 years): 2 doses, 1 month apart ▪ **Engerix-B®** (if ages ≥ 18 years), **Recombivax HB®**: 3 doses, 0, 1, and 6 months apart ▪ **Twinrix®** (combination HepA/HepB; if ages ≥ 18 years): 3 doses, 0, 1, and 6 months apart	▪ Adolescents not vaccinated as young children ▪ Adults ages 19-59 years ▪ Adults ages ≥ 60 years with risk factors,[4] including: ▫ MSM[5] ▫ PWH[7] ▫ People who use drugs ▫ People with sexual exposure risk ▫ People who are incarcerated
Human papillomavirus (HPV)	▪ **Gardasil 9®**: ▫ ages 9-14 years: 2 doses, 6-12 months apart ▫ ages 15-45 years: 3 doses, 0, 1-2, and 6 months apart	▪ Adolescents and young adults, starting at ages 11-12 years through age 26 years ▪ Adults ages 27-45 years, based on shared clinical decision-making
Meningococcal A, C, W, Y conjugate (MenACWY)	▪ **MenQuadfi®, Menveo®**: ▫ Adolescents: 2 doses (at ages 11-12 years and 16-18 years); 1 dose (if first dose at ages 16-18 years) ▫ Adults at increased risk: 1 or 2 doses depending on risk factors.	▪ Adolescents, starting at ages 11-12 years ▪ Adults with risk factors,[4] including: ▫ PWH (2 doses, 2 months apart) ▫ MSM[5,8] (1 dose) ▫ Transgender adults who have sex with men[8] (1 dose)
Meningococcal B (MenB)	▪ **Bexsero®:** 2 doses, 6 months apart ▪ **Trumenba®:** 2 doses, 6 months apart	▪ Adolescents and young adults ages 16-23 years, based on shared clinical decision-making
Mpox virus[9]	▪ **JYNNEOS®:** 2 doses, 28 days apart	▪ Adults vulnerable to or seeking added protection. ▪ If < 18 years, see Minor Consent for Mpox Treatment.

California Department of Public Health | Immunization Branch IMM-1484 (1/25)

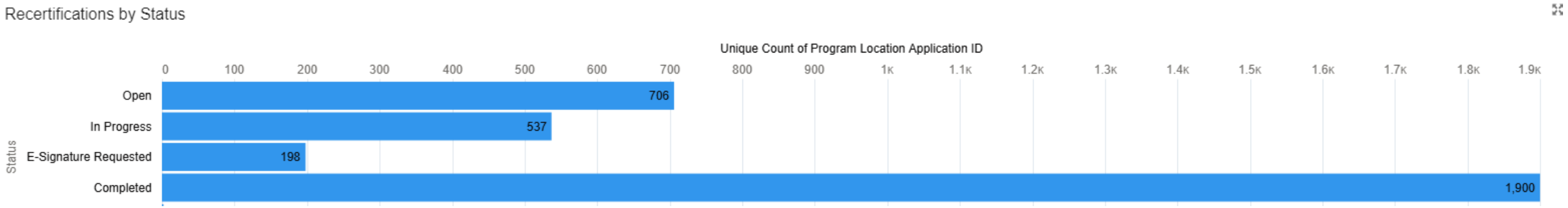
[Sexually Active People (IMM-1484)]

Vaccines for Children

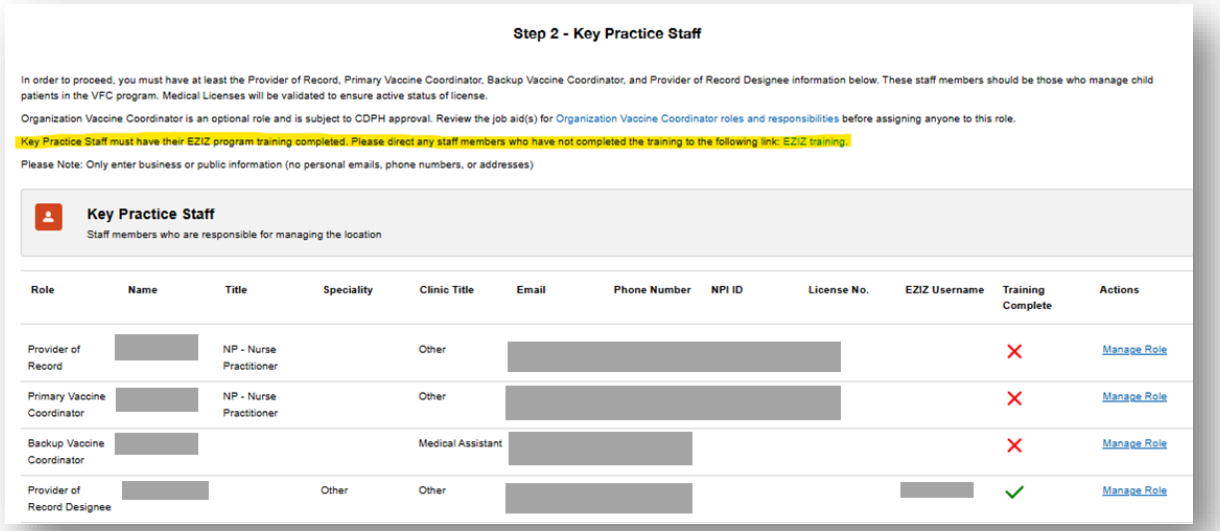
Christina Sapad, CDPH

2025 VFC Recertification

- Recertification is due **Friday, February 14, 2025!**
- 3,342 active VFC providers (as of 2/6/25)
  - 1,900 have completed Recertification
  - 198 have E-signature requested
  - 537 are In Progress



Recertification Tips



Step 2 - Key Practice Staff

In order to proceed, you must have at least the Provider of Record, Primary Vaccine Coordinator, Backup Vaccine Coordinator, and Provider of Record Designee information below. These staff members should be those who manage child patients in the VFC program. Medical Licenses will be validated to ensure active status of license.

Organization Vaccine Coordinator is an optional role and is subject to CDPH approval. Review the job aid(s) for Organization Vaccine Coordinator roles and responsibilities before assigning anyone to this role.

Key Practice Staff must have their EZIZ program training completed. Please direct any staff members who have not completed the training to the following link: EZIZ training.

Please Note: Only enter business or public information (no personal emails, phone numbers, or addresses)

Key Practice Staff

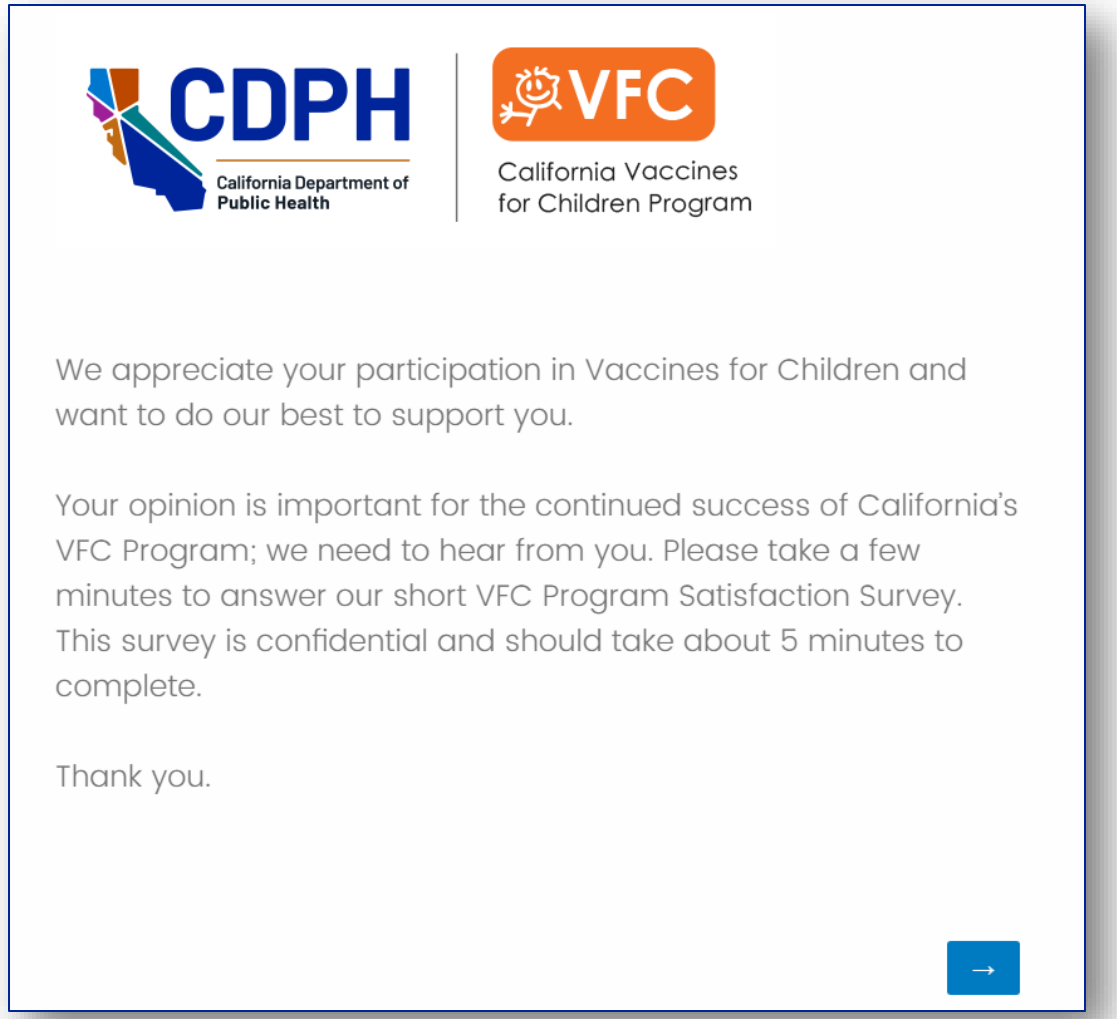
Staff members who are responsible for managing the location

Role	Name	Title	Speciality	Clinic Title	Email	Phone Number	NPI ID	License No.	EZIZ Username	Training Complete	Actions
Provider of Record	[redacted]	NP - Nurse Practitioner		Other	[redacted]					✗	Manage Role
Primary Vaccine Coordinator	[redacted]	NP - Nurse Practitioner		Other	[redacted]					✗	Manage Role
Backup Vaccine Coordinator	[redacted]			Medical Assistant	[redacted]					✗	Manage Role
Provider of Record Designee	[redacted]		Other	Other	[redacted]				[redacted]	✓	Manage Role

- The myCAvax Recertification form is validating EZIZ lesson completion based on information from the EZIZ Training User ID. If your EZIZ training is not being validated:
  - On your EZIZ Learning History Page, click on “Edit Profile” to update your training account information to match your name and email address in your myCAvax account.
  - If you must update your name in your myCAvax account, please contact the Provider Call Center at mycavax.HD@cdph.ca.gov or call (833) 502-1245.
  - After updating your EZIZ training account information, go back to the Recertification form, Key Practice Staff page, and click on “Manage Role.” Click “Submit” on the Manage Role window, which will trigger the training verification process again.
- If your EZIZ Username is not displaying on the “Key Practice Staff” page of the Recertification Form, click on “Manage Role”. From there, you can add your EZIZ username.

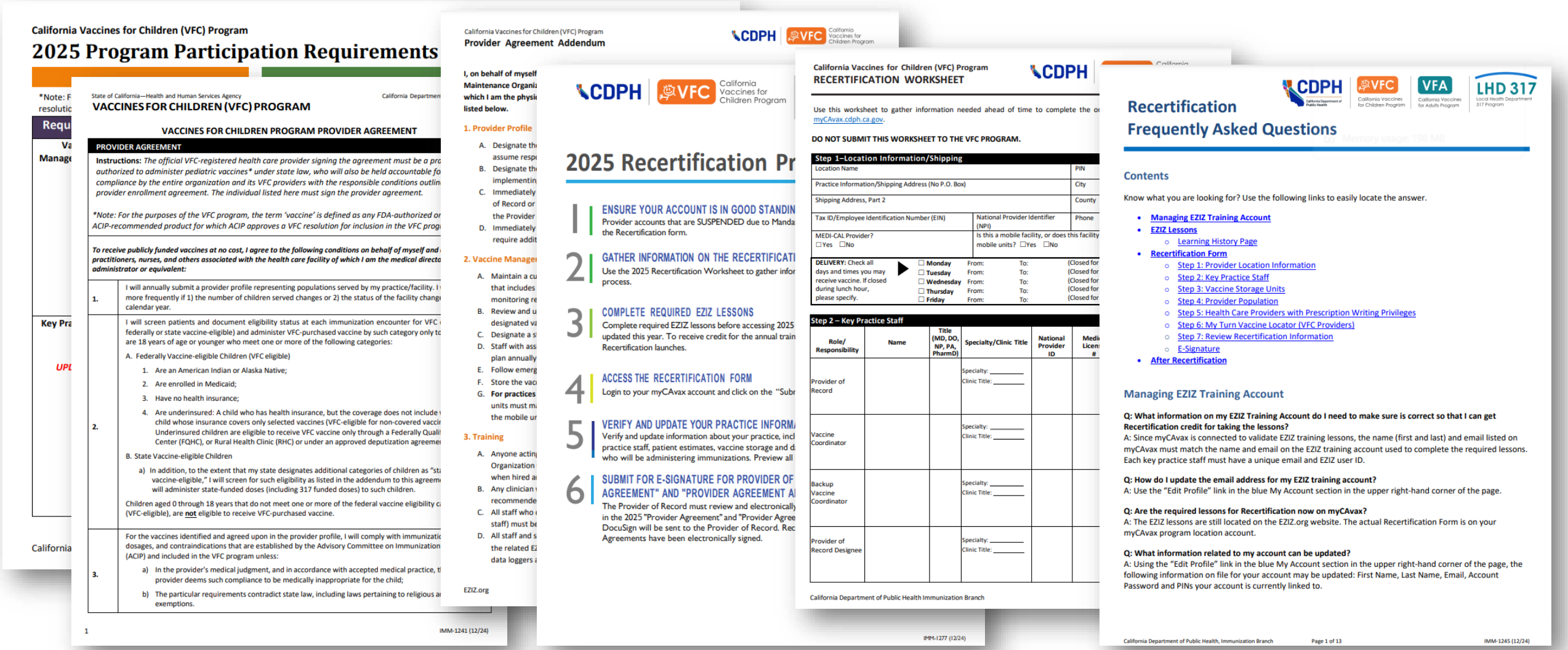
VFC Provider Satisfaction Survey

- A link to complete and submit the Provider Satisfaction Survey will appear after submitting your Recertification for e-signature.
- If you haven't had a chance to complete the survey, you can access it here: VFC Provider Satisfaction Survey.
- Your input is greatly valued and will guide enhancement to our program, educational resources, staff training, and systems.



Recertification Resources

Micro-video and Job Aid via myCAvax Knowledge Center: [Recertifying Vaccines for Children (VFC), Vaccines for Adults (VFA) and LHD 317 Program Locations]



California Vaccines for Children (VFC) Program

2025 Program Participation Requirements

State of California—Health and Human Services Agency

VACCINES FOR CHILDREN (VFC) PROGRAM

VACCINES FOR CHILDREN PROGRAM PROVIDER AGREEMENT

PROVIDER AGREEMENT

California Vaccines for Children (VFC) Program

Provider Agreement Addendum

2025 Recertification Pr

1 ENSURE YOUR ACCOUNT IS IN GOOD STANDIN

2 GATHER INFORMATION ON THE RECERTIFICATI

3 COMPLETE REQUIRED EZIZ LESSONS

4 ACCESS THE RECERTIFICATION FORM

5 VERIFY AND UPDATE YOUR PRACTICE INFORM

6 SUBMIT FOR E-SIGNATURE FOR PROVIDER OF AGREEMENT" AND "PROVIDER AGREEMENT A

California Vaccines for Children (VFC) Program

RECERTIFICATION WORKSHEET

Use this worksheet to gather information needed ahead of time to complete the o

myCAvax.cdph.ca.gov.

DO NOT SUBMIT THIS WORKSHEET TO THE VFC PROGRAM.

Step 1–Location Information/Shipping

Step 2 – Key Practice Staff

California Department of Public Health Immunization Branch

Recertification Frequently Asked Questions

Contents

Know what you are looking for? Use the following links to easily locate the answer.

- Managing EZIZ Training Account
- EZIZ Lessons
  - Learning History Page
- Recertification Form
  - Step 1: Provider Location Information
  - Step 2: Key Practice Staff
  - Step 3: Vaccine Storage Units
  - Step 4: Provider Population
  - Step 5: Health Care Providers with Prescription Writing Privileges
  - Step 6: My Turn Vaccine Locator (VFC Providers)
  - Step 7: Review Recertification Information
  - E-Signature
- After Recertification

Managing EZIZ Training Account

Q: What information on my EZIZ Training Account do I need to make sure is correct so that I can get Recertification credit for taking the lessons?
A: Since myCAvax is connected to validate EZIZ training lessons, the name (first and last) and email listed on myCAvax must match the name and email on the EZIZ training account used to complete the required lessons. Each key practice staff must have a unique email and EZIZ user ID.

Q: How do I update the email address for my EZIZ training account?
A: Use the "Edit Profile" link in the blue My Account section in the upper right-hand corner of the page.

Q: Are the required lessons for Recertification now on myCAvax?
A: The EZIZ lessons are still located on the EZIZ.org website. The actual Recertification Form is on your myCAvax program location account.

Q: What information related to my account can be updated?
A: Using the "Edit Profile" link in the blue My Account section in the upper right-hand corner of the page, the following information on file for your account may be updated: First Name, Last Name, Email, Account Password and PINs your account is currently linked to.

2025 – 2026 VFC Flu Vaccine Pre-Book Now Closed

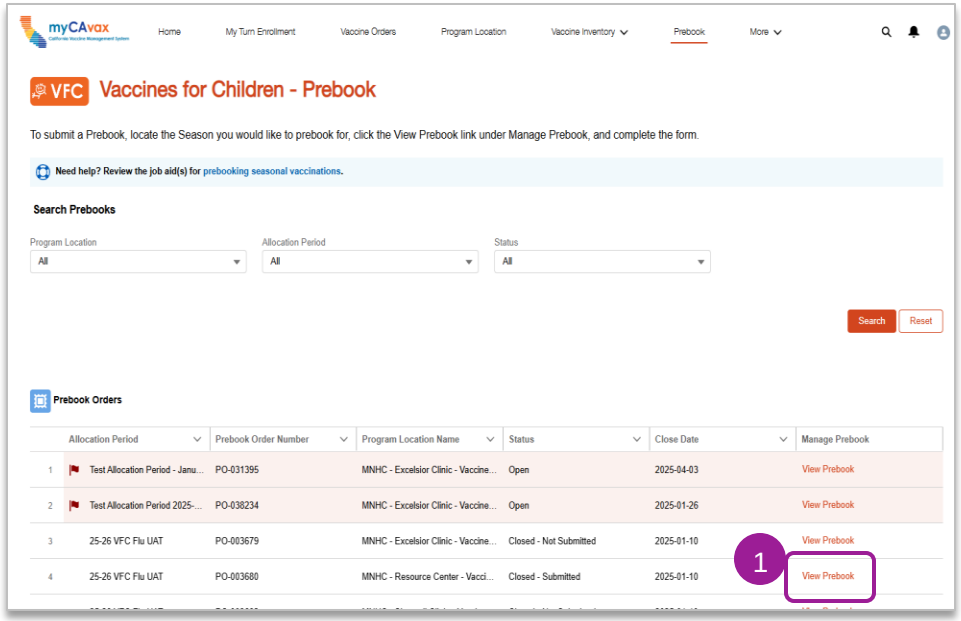
VFC Review of Pre-Book Requests

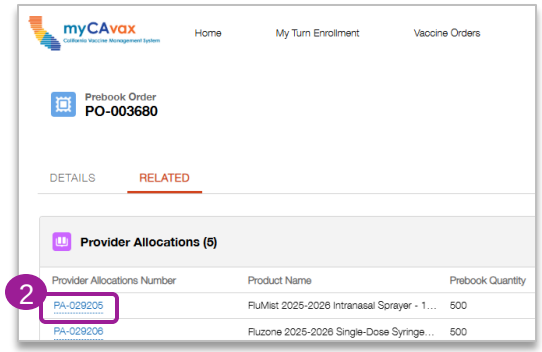
- The due date to submit VFC Flu Pre-Book was February 3. The California VFC Program will now review 2025-2026 Flu Pre-Book requests to determine how many doses of each product to pre-book through CDC.

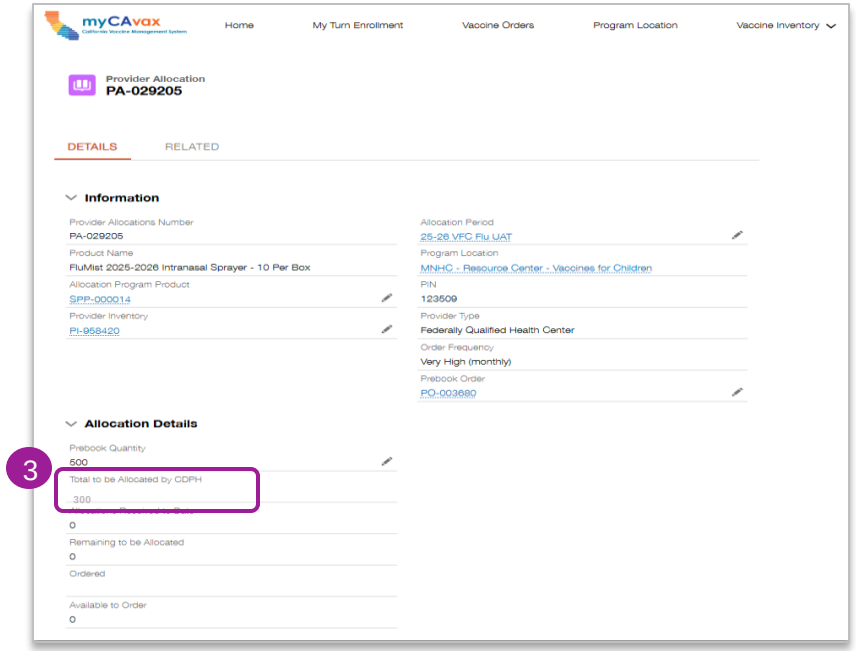
Final Pre-Book Approval Confirmation (early 2025)

- Once the VFC Program's pre-booked doses are approved by the CDC, VFC will notify providers of their approved pre-book amounts.
- Final approved pre-book amounts may or may not be different from what your practice had pre-booked, depending on product availability approved by the CDC.
- No changes can be accommodated once approved and final. Pre-booked doses will constitute your vaccine supply for the entire season. Remember, you are responsible for ordering your confirmed allocation.
- For providers who did not pre-book, VFC will allocate doses and brands for ordering based on available products. Please ensure that your EHR or billing systems are ready to accommodate any flu brand.

How to View Your Submitted 2025 – 2026 VFC Flu Pre-Book







1. From the Prebook landing page, providers can click the **View Prebook** hyperlink corresponding to the appropriate Prebook order to access the **Prebook Order** page**.**

Once VFC approves the Pre-Book Amounts (early 2025):

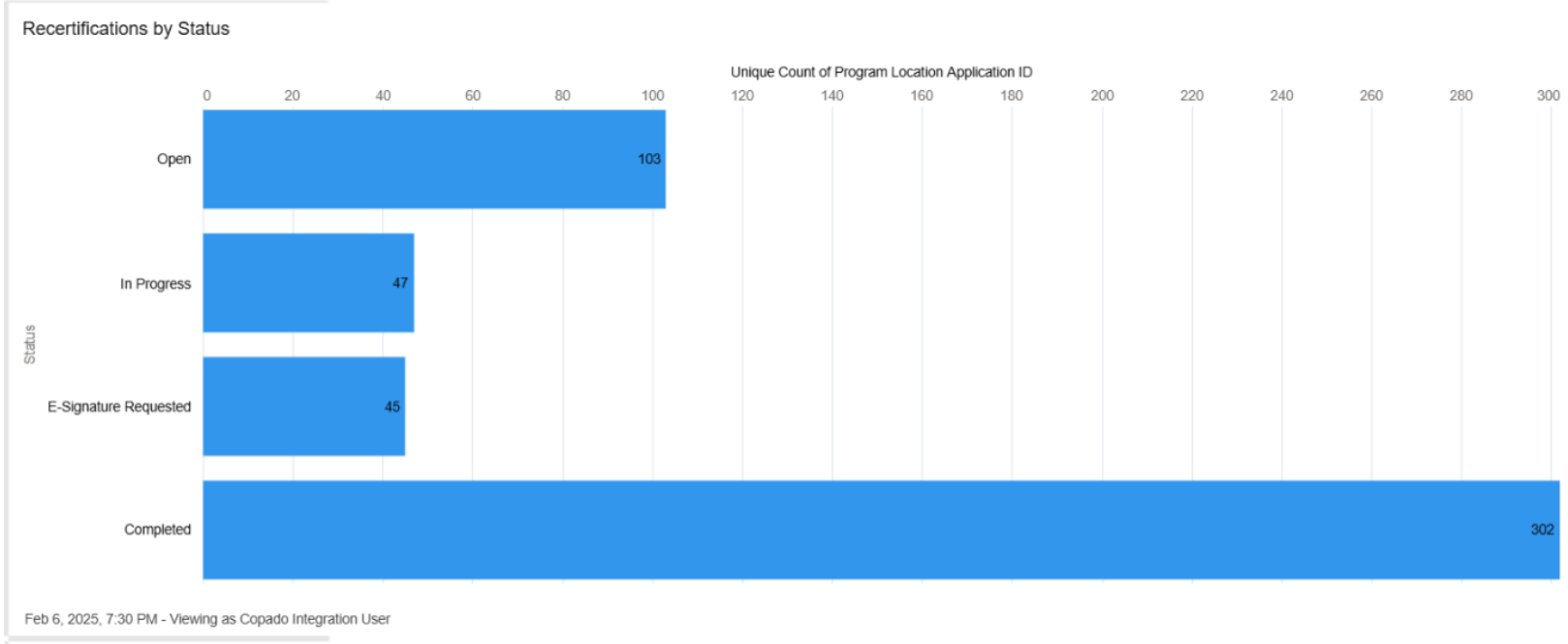
1. On the **Prebook Order** page, **Provider Allocation** details can be found in the **Related** tab. Providers can click the appropriate **Provider Allocation Number** hyperlink to access the **Provider Allocations** page.
2. In the **Details** tab on the **Provider Allocations** page, providers will find the approved pre-book amount in the **Total to be Allocated by CDPH** field. (under the **Allocation Details** page section)

Vaccines for Adults

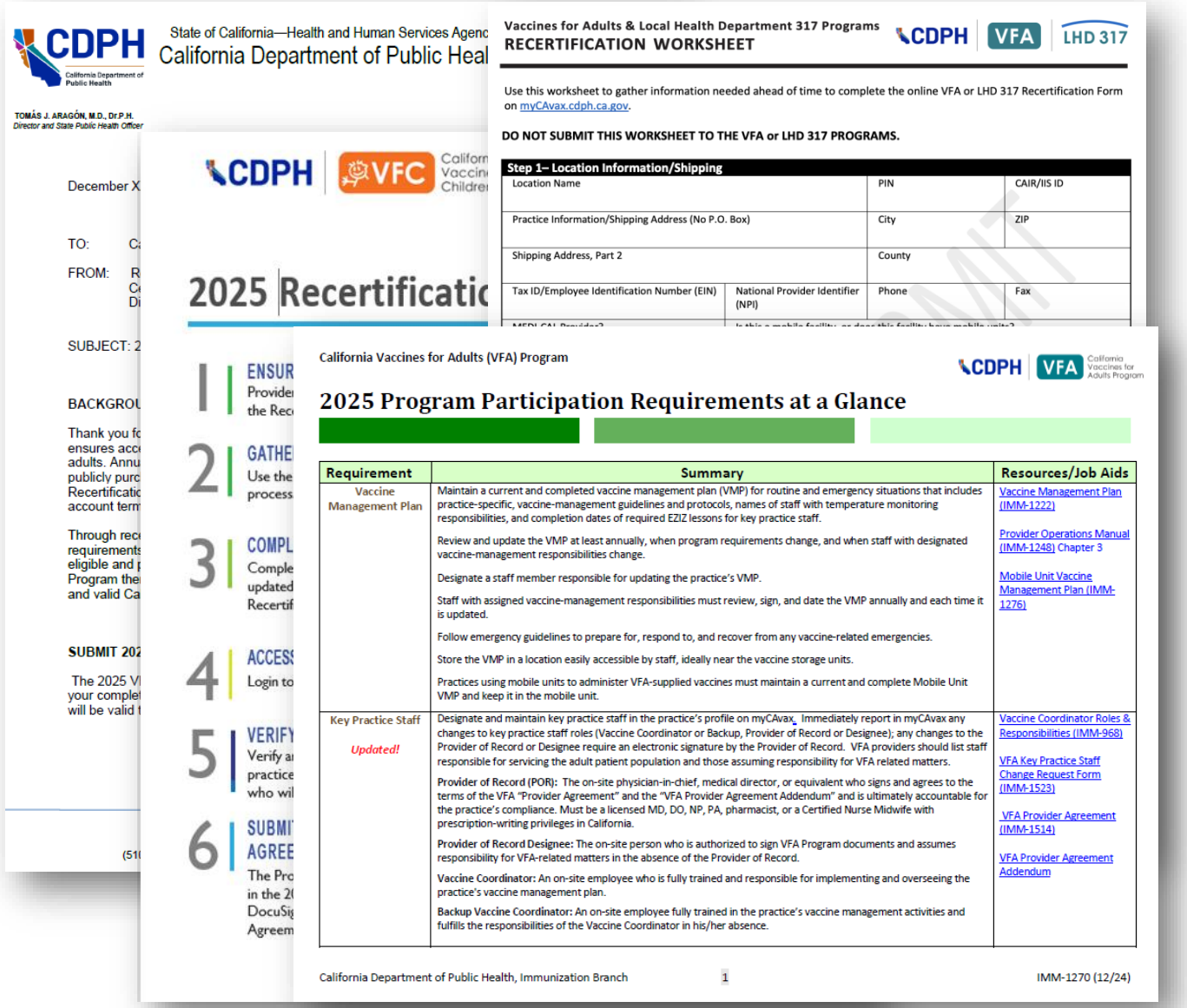
Nisha Gandhi, CDPH

2025 VFA Recertification Status

- Due Date: **Friday, February 14, 2025**
- 497 active VFC providers
  - 302 have completed Recertification
  - 45 have E-signature requested
  - 47 are In Progress



VFA Recertification Documents



- VFA 2025 Provider Agreement
- VFA/LHD 317 2025 Provider Agreement Addendum
- VFA Recertification Program Letter
- 2025 Recertification Process
- VFA/LHD 317 Recertification Worksheet
- 2025 VFA Program Requirements At a Glance
- Recertification FAQs
- Recertification Demo (myCAvax login required)

VFA Ordering Window Extended!

- **VFA Q1 Ordering Period : January 23 – February 14, 2025**
  - **As of February 6, 233 VFA orders submitted**
- Reminder: VFA **does not** offer routine supplemental orders
- Q1 Ordering Policy:
  - Vaccine dose requests for PCV 20 and Shingrix will be capped at 40 doses
  - VFA sites can **order up to 20 doses of either** Abrysvo or Arexvy vaccine. Clinics can **only** select one brand of RSV vaccine to order.
    - Vaccine requests will be approved based on availability and ordering will close once our annual supply has been depleted.
    - If the preferred vaccine brand is unavailable, a CDPH rep will reach out to the provider about proceeding with the alternative brand.
  - Caps for all other routine vaccines will remain the same
- Have questions or need assistance with ordering?

  ProviderCallCenter@cdph.ca.gov

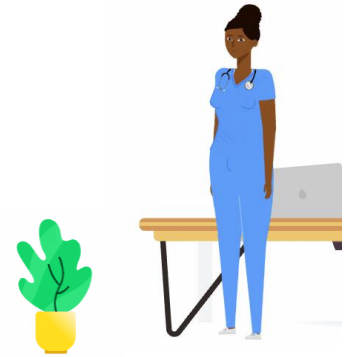
  (833) 502 – 1245

Vaccine Management

Josh Pocus, My Turn, and Dan Conway, myCAvax

What's New in My Turn? – Release 56

New updates for Patients, Clinic Managers, and Vaccine Administrators launched on **Wednesday, January 22, 2025!**



My Turn Public

Release Highlights

- ✓ The 'Pharmaca' pharmacy link will be removed from the 'Vaccine Locator' page
- ✓ A 'Note,' vaccination location tags, a legend, and an enhanced vaccine locator card will be added, along with a pop-up note which direct patients to the 'Let's get started' page on the 'Vaccine Locator' page
- ✓ A new 'What type of insurance does the patient have?' question will be added, along with updated and reordered fields in the 'Health Insurance' section on the 'Patient Information' page while scheduling an appointment on the My Turn portal

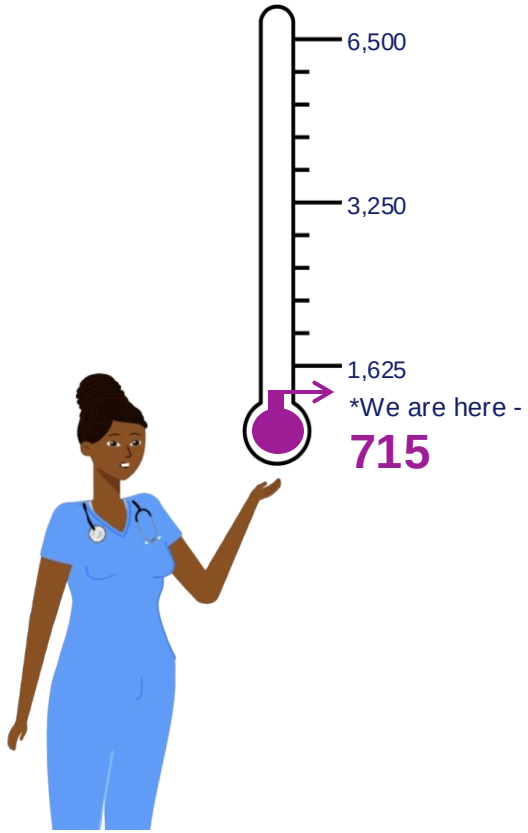
My Turn Clinic

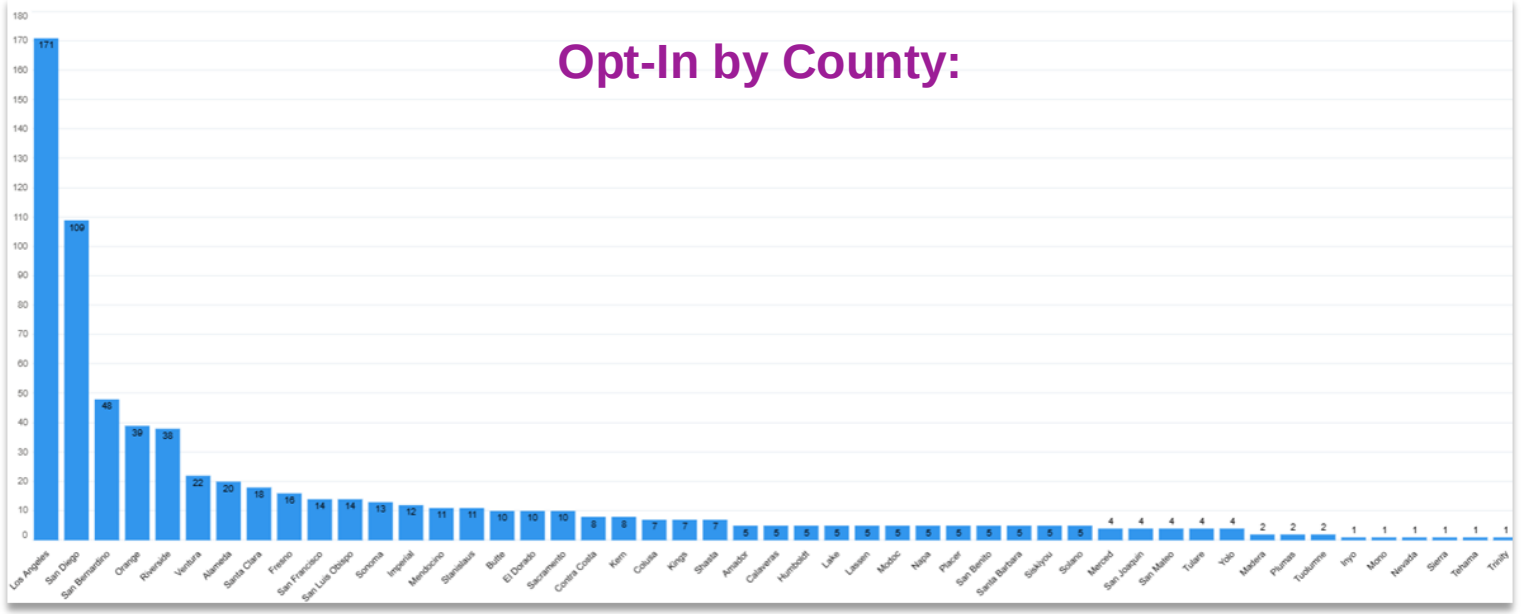
Release Highlights

- ✓ An error message will appear when a duplicate clinic name is detected during the clinic creation flow
- ✓ An error message will appear below the 'Internal Clinic Name' and 'Public Clinic Name' fields if the clinic name exceeds 80 characters on the clinic creation flow
- ✓ An error message will appear below the 'Start Date' field if a Traditional Mpox vaccine, Dose 1 and Dose 2 appointment with a less than 28-day interval is detected during the Inline bulk upload flow
- ✓ Updated Mpox and Pneumonia (pneumococcal) adults vaccine values will appear
- ✓ A new 'Type of Insurance' column will be added, and health insurance-related fields will be updated and reordered on the Inline / CSV bulk upload flow
- ✓ The warning banner stating that the vaccine contains Thimerosal and is not recommended for pregnant individuals appears for all Afluria, Flucelvax, and Fluzone multi-dose vaccines on the 'Vaccine Inventory' page
- ✓ A new 'What type of insurance does the patient have?' question will be added, and fields will be reordered and updated in the 'Health Insurance' section on the 'Patient Information' page while scheduling an appointment on the Walk-in and VA flows
- ✓ Clicking the 'X' icon on the 'Help Desk Virtual Assistant' screen will end the chat and notify the live chat agent that the provider / end user has left
- ✓ The Help Desk FAQ Virtual Assistant flow gets restructured

Vaccine Locator – Opt-In today!

Program Locations that have Opted-In:





Please take some time to opt-in, **preferably right now**! We want patients to be able to find you.

We want to congratulate **Los Angeles County** for their participation and being the top county with **171 Locations** opted-in!

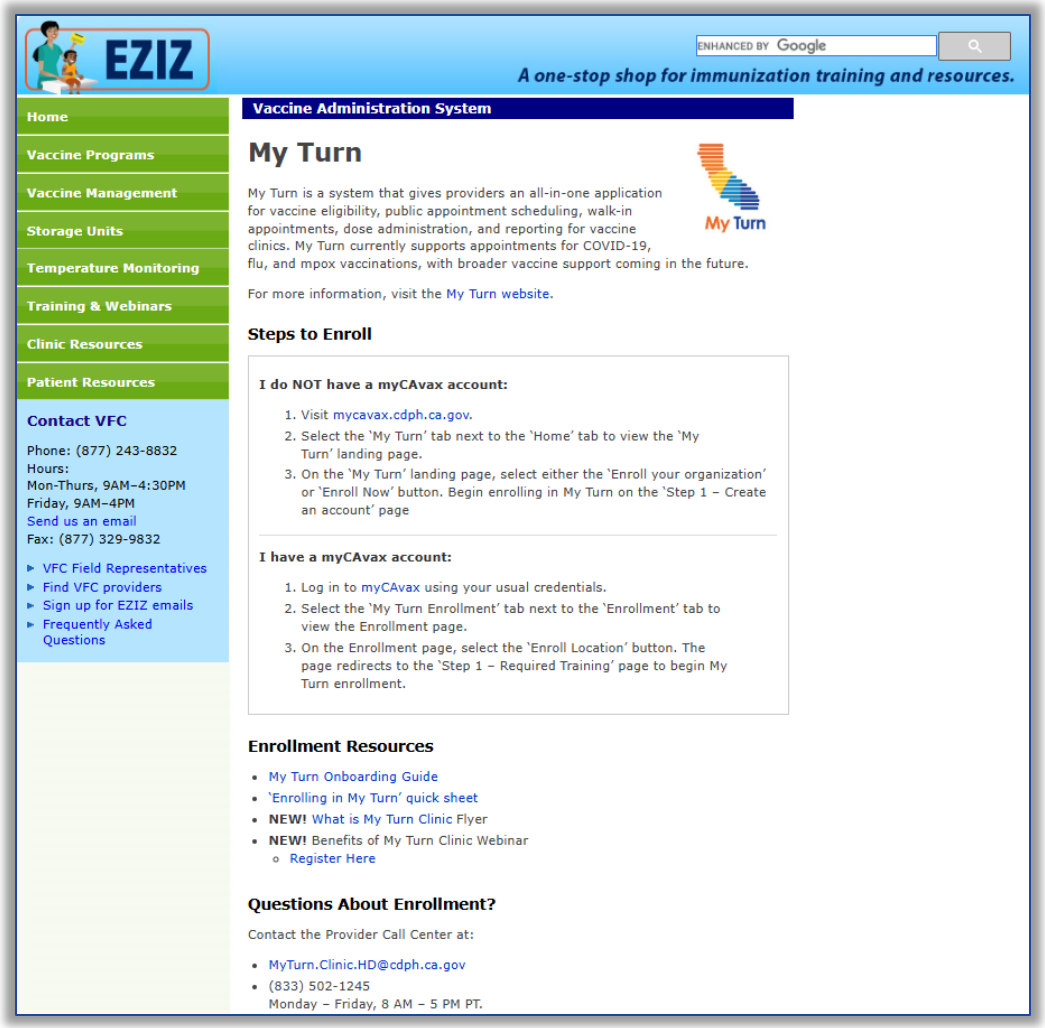
Data as of 2/6/25

Thank you for opting into the Vaccine Locator. By doing so, you are ensuring that patients can easily find your locations. Your participation is invaluable in **helping patients access the care they need**.

101 FAMILY MEDICAL GROUP
3C Community Clinic
986 Pharmacy 8001 Inc
AFSHIN SHAWN ADHAMI
A. Shawn Adhami MD - Morelia M.C.
Family Care Associates
ABC CHILDREN'S CLINIC INC
ABC Pediatrics Inc
ABCUSD Immunization Clinic
Crenshaw Family Medical Group
Acacia Family MG - Prunedale
Acacia Family MG - Salinas
Access Support Network
ACTIVE HEALTHCARE MEDICAL GROUP
Adelanto Medical Clinic
ABC PEDIATRICS MEDICAL GROUP INC
Advanced Family Care Medical Group
AHMO-Parlier Newmark
AHMO-Orange Cove
AHMO-Reedley Children's
AHCC-Cal City
AHCC TEHACHAPI
AHCC Mojave
AHMO-Wasco
Adventist Health Community Care
AHMO-Hanford-Residency
St Helena Konocti Wellness Center
ADVENTIST HEALTH MIDDLETOWN
UKIAH VALLEY RURAL HEALTH CENTER AD
Adventist Health Physicians Network
Redwood Medical Clinic
AHUV FORT BRAGG RHC
AHUV- RHC Pediatrics
CORNING RURAL HEALTH CLINIC
Roseville Immunization Clinic
Sacramento Immunization Clinic
Sutter Health PAMF Fremont Clinic
Sutter Medical Foundation - Davis
SMF-Elk Grove Medical Campus
SEBMF - Castro Valley
SVMF - FP Yuba City
Sutter Medical Center Sacramento
Alta Bates Summit Medical Center
Sutter Santa Rosa Regional Hospital
Sutter Coast Hospital
Sutter Lakeside Hospital and Clinic
SPMF CAL IM PEDS
SPMF Castro
PAMF San Carlos Clinic
Sutter Health VNG 4th Floor
SMF Peds Vallejo
SMF Peds Vacaville
Sutter Ocean Ave SF
Sutter PMSZ PAMF Pediatrics Dept.
SPMF Rhode Island
SMF Downtown Sacramento Pediatrics
PAMF - Scotts Valley
PAMF-Westside
SMF Amador Jackson Pediatrics
SMF Davis Peds
Olympic
Ace Pediatrics
Symba Center
SYMONETT FAMILY MEDICAL CENTER
Sea View Pediatrics- Laguna Hills
Pediatric and Adult Medicine
SOCPA- Lake Forest
Pomona Pediatrics
Premier Pediatrics
SOCPA- San Clemente
SOCPA- Rancho Santa Margarita
Children's Medical Clinic

In Case You Missed It! – My Turn Webinar Recap

- The My Turn team hosted a “My Turn Benefits” session on Tuesday, January 14, 2025
- **~100** participants joined the session – **THANK YOU!**
- Resources available
  - My Turn Vaccine Administration System on EZIZ
    - “My Turn Benefits” session recording and slides
    - My Turn Onboarding Guide
    - Enrolling in My Turn Quick Sheet
    - Support Information



myCAvax Release Roadmap

Past Release
January 8, 2025 (R53)

Release 53

VFC
- ✓ VFC Flu Prebook

VFC/VFA/317
- ✓ Orders will be sorted by Submitted Date on CDPH Order Review
- ✓ Storage Unit Changes will no longer create holds
- ✓ Self-service provider agreements updated

All Programs
- ✓ View Shipments at program location level
- ✓ Holds will be automatically closed with a unit is marked 'No Longer in Use'
- ✓ Filter out provider inventories that are not being used

Current Release
February 5, 2024 (R54)

Release 54

VFC
- ✓ Allocations for VFC Flu and the ability to create first orders based on provider prebook orders
- ✓ Enrollment Provider Agreement updated

VFC/VFA/317
- ✓ Providers will be notified when their order is pending
- ✓ Messaging will be added when products are not available for ordering
- ✓ CDPH will have a shortened create order form and providers will be notified when orders are created by CDPH
- ✓ Site Visit enhancements

All Programs
- ✓ Only one open excursion will be allowed at a time and excursions will be able to be cancelled
- ✓ Provider Inventories will be enhanced to include a new page layout and balance on the inventory summaries

Next Release
March 5, 2024 (R55)

Release 55

VFC
- ✓ Display CAIR dose administration information on ordering page (provider) and order review page (CSR)
- ✓ Give providers access to both myCAvax Dashboard and Flu & COVID Orders Dashboard

VFC/VFA/317
- ✓ Provider agreement for Designee staff management requests will send one agreement to Designee & POR to sign

All Programs
- ✓ Print account and program location information from program location page
- ✓ Enhance trash can functionality on provider ordering form
- ✓ Include order cost on shipment records
- ✓ Enforce restriction so that only expired doses can be returned

What's Next in myCAvax? – Release 54

New updates for providers will launch on Wednesday, **February 5, 2025!**

Providers

Release Highlights

Provider Allocation Page

- ✓ A new 'Provider Allocation' page is created to view provider allocation details.

myCAvax Login Page Instructions

- ✓ Updated text with clear instructions for resetting the password on the myCAvax Login page.

Mapped POR in DocuSign

- ✓ The Provider of Record (POR) is visible in updated DocuSign documents in the VFC enrollment flow.

Site Visit Fields Updated

- ✓ 'Supervisor' and 'Shadow' fields are updated on the Site Visit page.

Rejection Email Update

- ✓ The 'Rejected' status reason is visible in the email when a Staff Management Request is rejected.

Staff Management Job Aid

- ✓ The 'Managing Staff in Program Location' job aid link is updated on the Manage Staff page.

Inventory Summary Update

- ✓ Updated columns in the 'Inventory Summary' section, now moved to the 'Details' tab on the Provider Inventory page.

Storage Unit Fields

- ✓ New fields 'Type' and 'Unit Grade' are added in the 'Details' tab on the Storage Unit page.

What's Next in myCAvax? – Release 54 (Cont.)

New updates for providers will launch on Wednesday, **February 5, 2025!**

Providers

Release Highlights

Order Email Updates

- ✓ A new email is sent when a vaccine order request is created internally.
- ✓ An order status email is sent when the status changes to 'Corrections Needed,' 'Approval,' 'Expired,' or 'Rejected.'
- ✓ A pending status email provides an update on the order status and reason.

Error Messages for Ordering

- ✓ Three new error messages are visible when products are unavailable for ordering.

Order Request Columns

- ✓ Two new columns, 'Order Size Reason' and 'Please Specify "Other",' are visible during 'Draft' and 'Correction Needed' order requests.

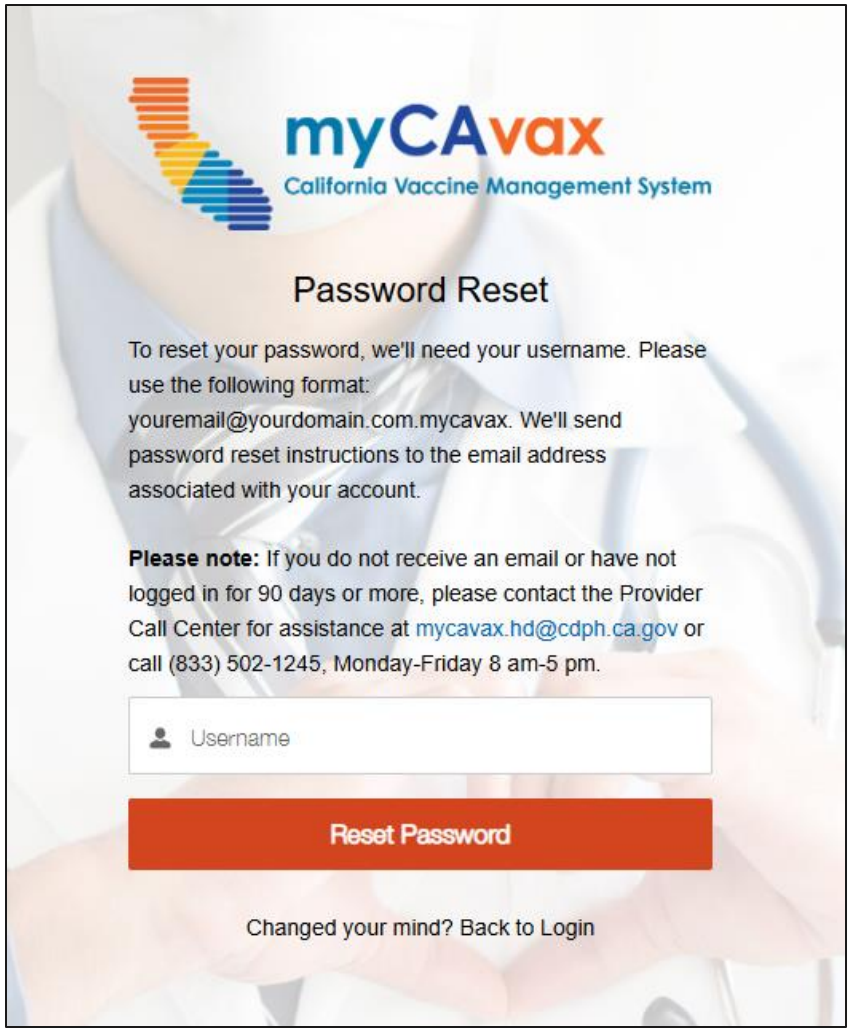
Excursions Page Updates

- ✓ Excursion draft can be saved with minimal information.
- ✓ A warning banner appears if an excursion draft already exists for a program location.
- ✓ If multiple draft excursions exist for a location, the oldest ones are marked as 'Cancelled' and removed from Excursions page.

Recertification & Enrollment

- ✓ Updated the 'Add Ultra Freezer' button name.
- ✓ Fields are updated for adding Key Practice Staff via the 'Add Contact' hyperlink and managing roles via the 'Manage Role' hyperlink during recertification.

R54 Enhancement: Updated Password Reset Guidance



- The text on the password reset page has been updated to provide more clear instructions on the password reset process.

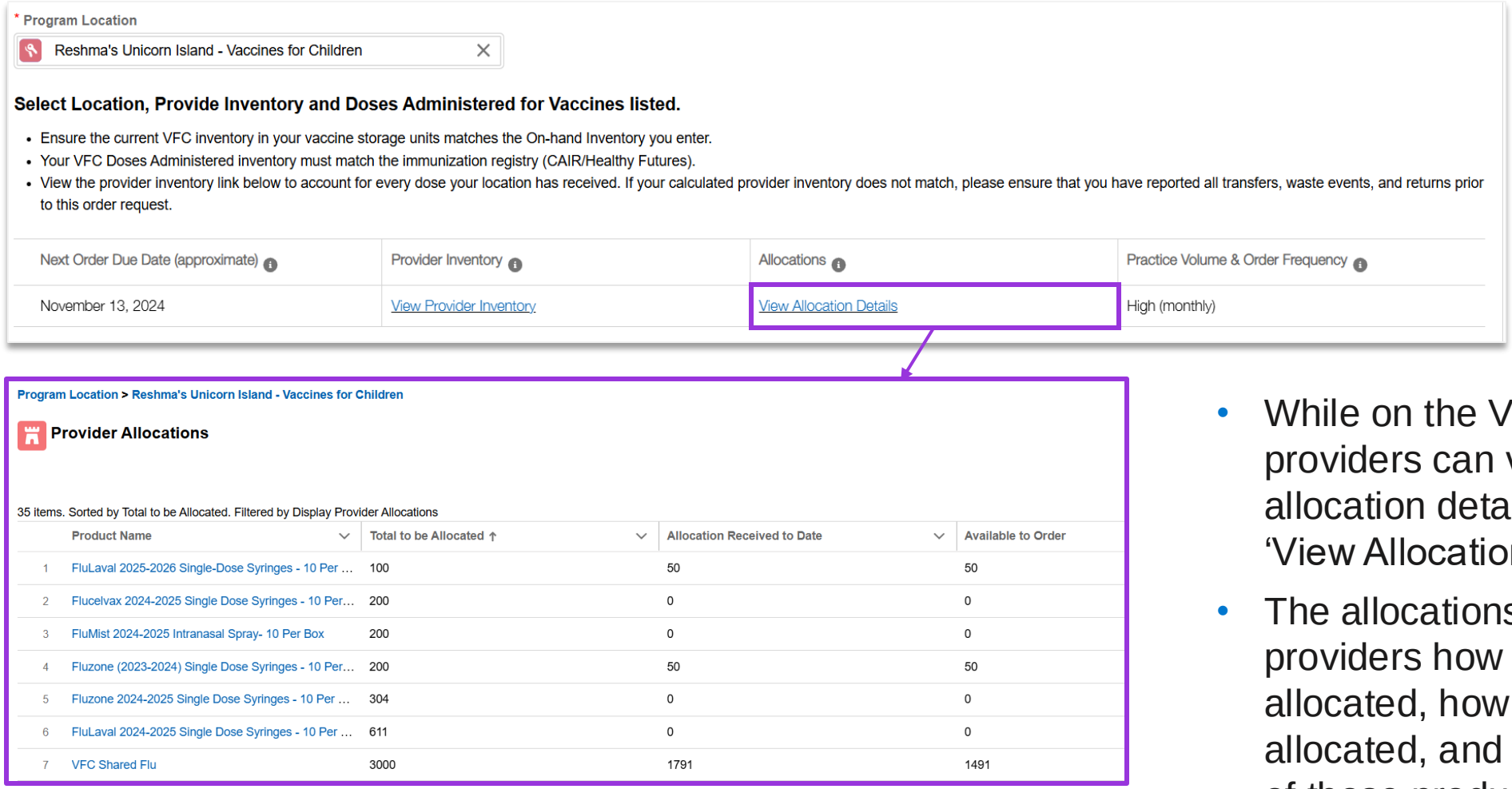
Updated Text:

To reset your password, we'll need your username. Please use the following format as an example: youremail@yourdomain.com.mycavax.

We'll send password reset instructions to the email address associated with your account.

Please note: If you do not receive an email or have not logged in for 90 days or more, please contact the Provider Call Center for assistance at **myCAvax.hd@cdph.ca.gov** or call (833) 502-1245, Monday – Friday 8:00 am – 5:00 pm.

R54 Enhancement: Display Provider Allocations while on the VFC Order Form



* Program Location

Reshma's Unicorn Island - Vaccines for Children

Select Location, Provide Inventory and Doses Administered for Vaccines listed.

- Ensure the current VFC inventory in your vaccine storage units matches the On-hand Inventory you enter.
- Your VFC Doses Administered inventory must match the immunization registry (CAIR/Healthy Futures).
- View the provider inventory link below to account for every dose your location has received. If your calculated provider inventory does not match, please ensure that you have reported all transfers, waste events, and returns prior to this order request.

Next Order Due Date (approximate)	Provider Inventory	Allocations	Practice Volume & Order Frequency
November 13, 2024	View Provider Inventory	View Allocation Details	High (monthly)

Program Location > Reshma's Unicorn Island - Vaccines for Children

Provider Allocations

35 items. Sorted by Total to be Allocated. Filtered by Display Provider Allocations

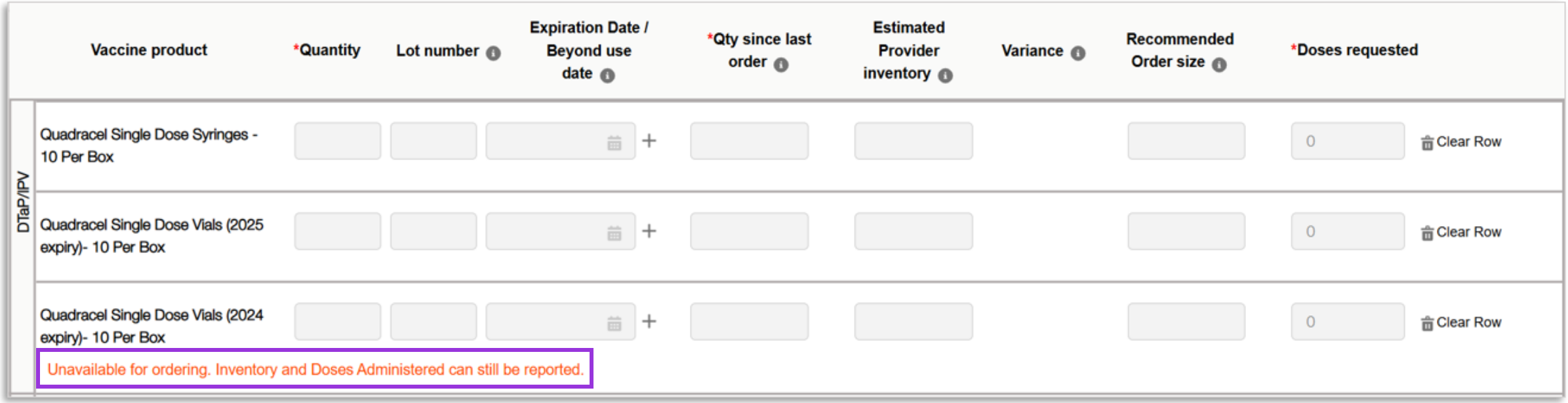
	Product Name	Total to be Allocated ↑	Allocation Received to Date	Available to Order
1	FluLaval 2025-2026 Single-Dose Syringes - 10 Per …	100	50	50
2	Flucelvax 2024-2025 Single Dose Syringes - 10 Per…	200	0	0
3	FluMist 2024-2025 Intranasal Spray- 10 Per Box	200	0	0
4	Fluzone (2023-2024) Single Dose Syringes - 10 Per…	200	50	50
5	Fluzone 2024-2025 Single Dose Syringes - 10 Per …	304	0	0
6	FluLaval 2024-2025 Single Dose Syringes - 10 Per …	611	0	0
7	VFC Shared Flu	3000	1791	1491

- While on the VFC order form, providers can view their open allocation details by clicking the ‘View Allocation Details’ hyperlink.
- The allocations table will show providers how much they will be allocated, how much they've been allocated, and what they can order of those products.

R54 Enhancement: New Messaging for Unavailable Vaccine Products

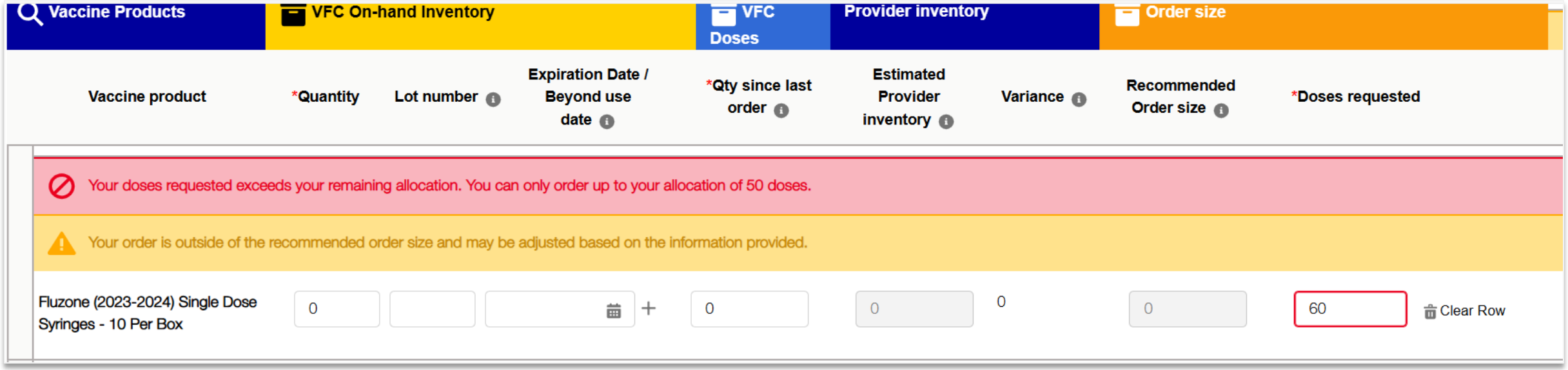
While placing a vaccine order, providers will be notified of products that are unavailable to order.

- When a product is unavailable for ordering, an orange message will appear reading, "Unavailable for ordering. Inventory and Doses Administered can still be reported."



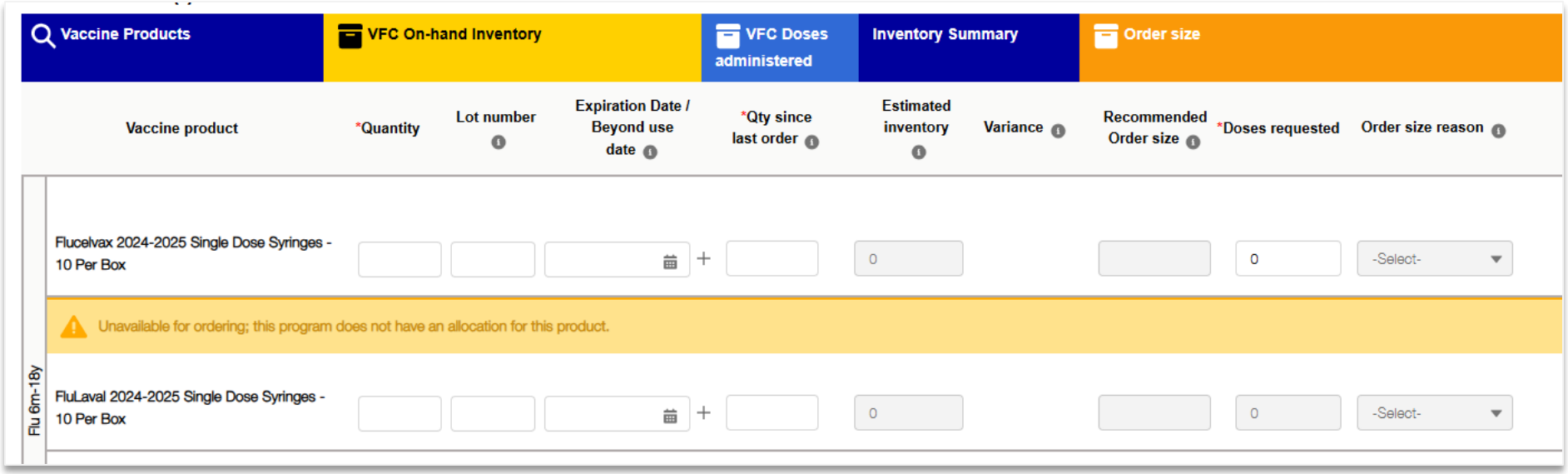
R54 Enhancement: Ordering Within Allocation

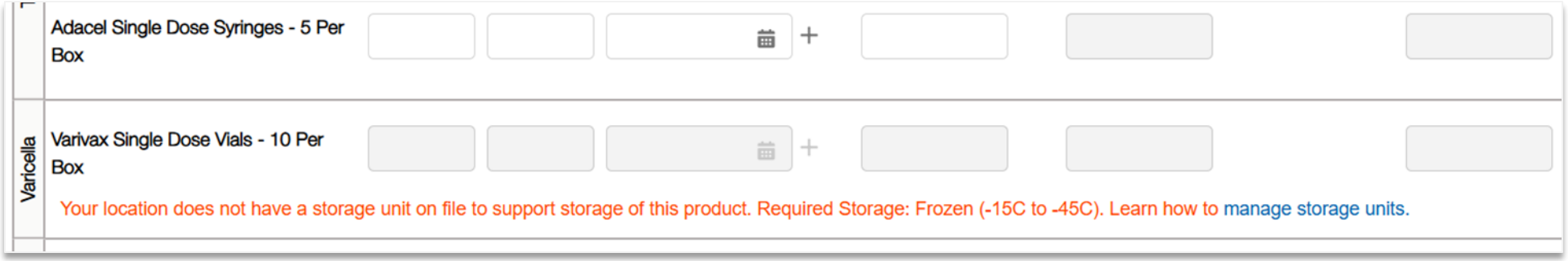
- For products that have allocations, providers will not be able to request more doses than what CDPH has currently made available to them.



R54 Enhancement: Enhancements to Orders in Draft and Corrections Needed Status

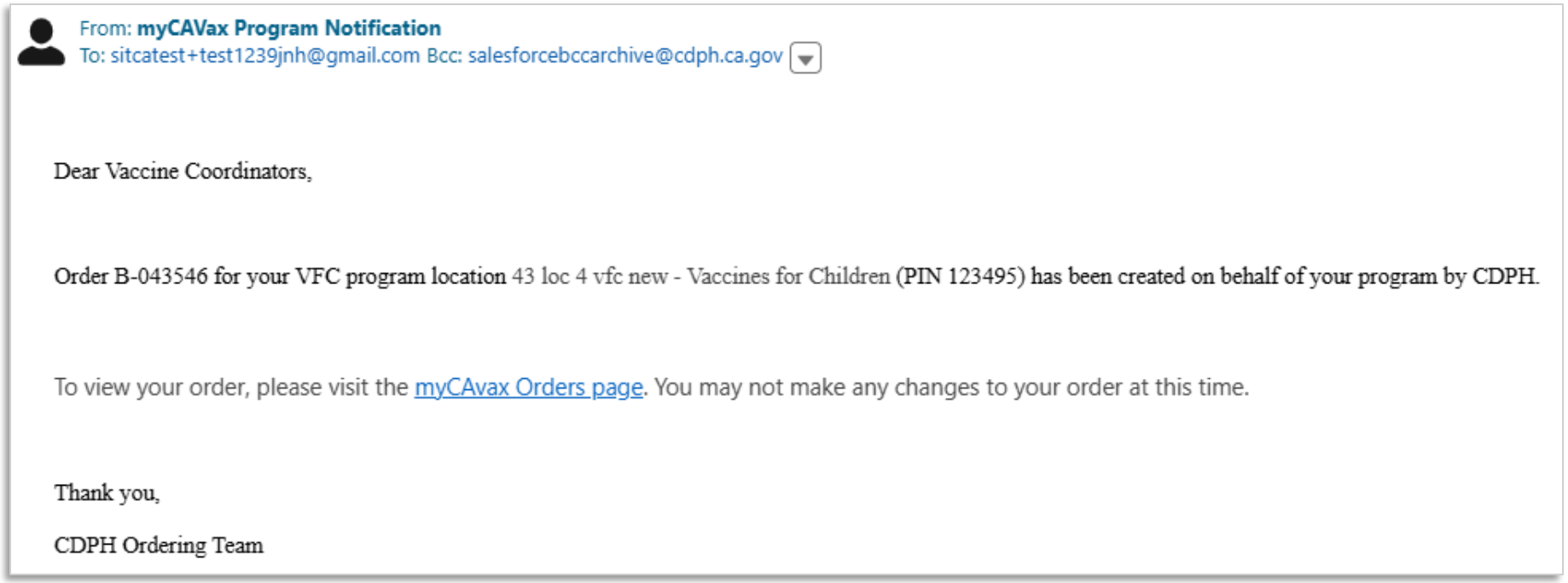
- Orders in ‘Draft’ and ‘Corrections Needed’ status will have the same validations and messaging apply as when creating an order for the first time.





R54 Enhancement: Send Email when Order has been Created on Behalf of Provider

- When an order has been created on behalf of a provider, the provider will be notified via email.



From: **myCAVax Program Notification**
To: sitcatest+test1239jnh@gmail.com Bcc: salesforcebccarchive@cdph.ca.gov

Dear Vaccine Coordinators,

Order B-043546 for your VFC program location 43 loc 4 vfc new - Vaccines for Children (PIN 123495) has been created on behalf of your program by CDPH.

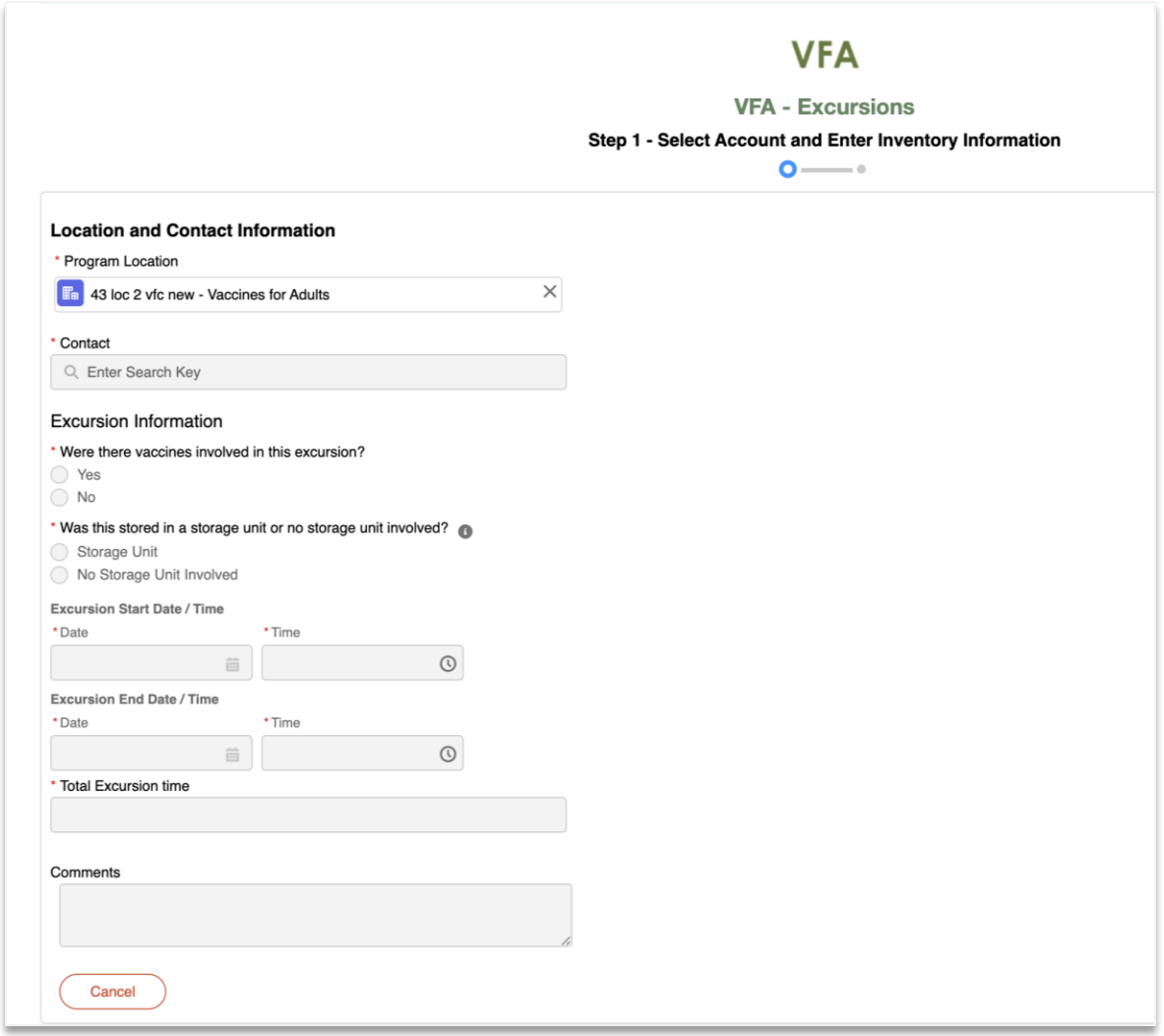
To view your order, please visit the myCAvax Orders page. You may not make any changes to your order at this time.

Thank you,

CDPH Ordering Team

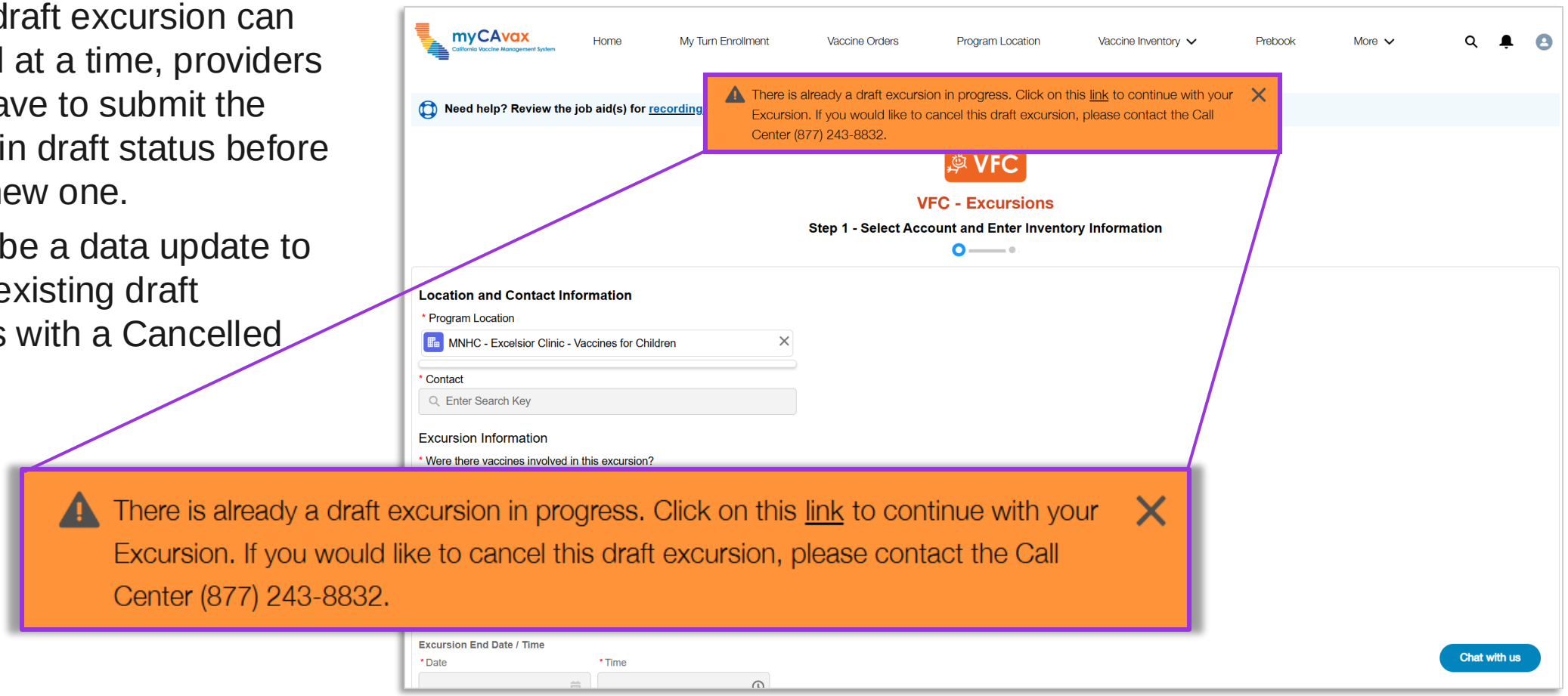
R54 Enhancement: Saving Draft Excursions

- Providers can now save excursions with minimum information:
  - Program Location Name
  - Contact
  - Was there vaccines involved in this excursion
  - Storage Unit
  - Excursion Start and End Time
  - Excursion Type

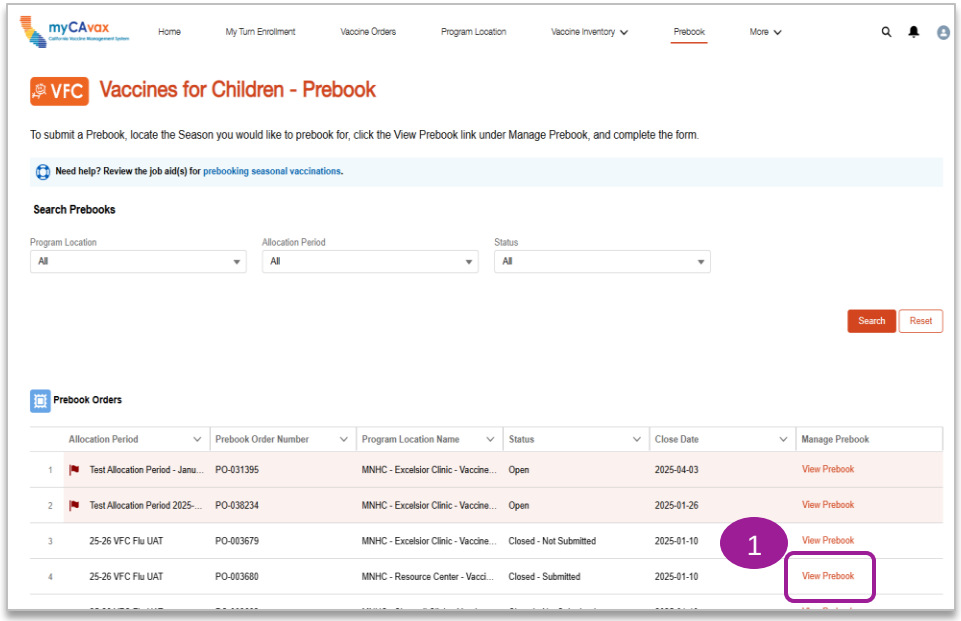


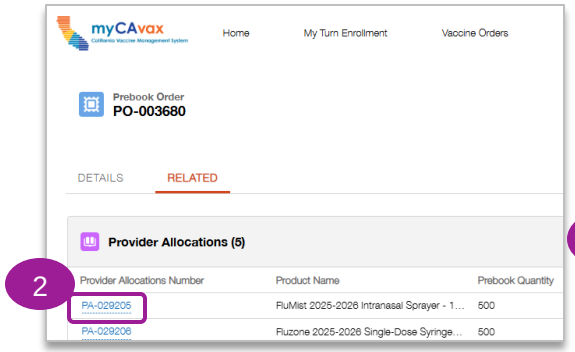
R54 Enhancement: Only One Open Excursion Allowed at a Time

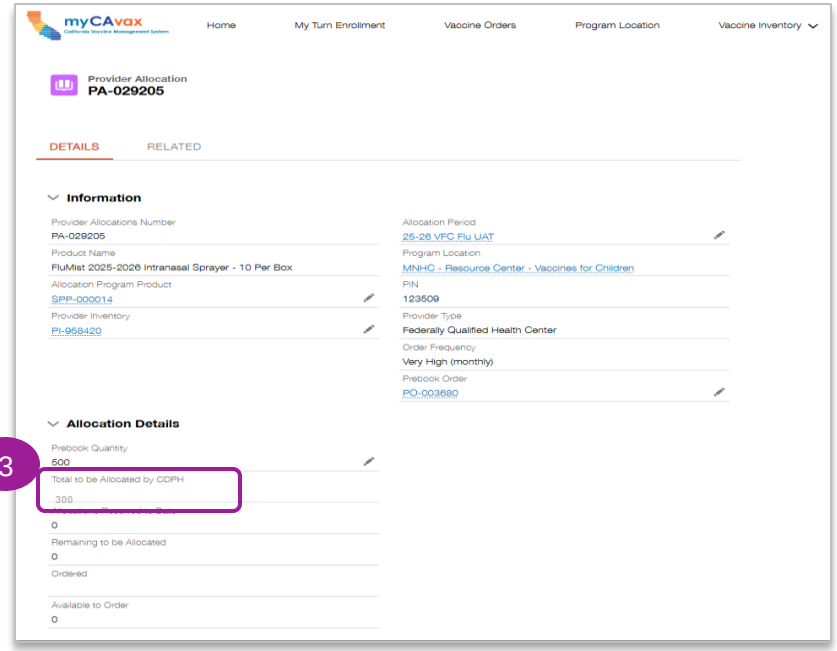
- Only one draft excursion can be opened at a time, providers will now have to submit the excursion in draft status before adding a new one.
- There will be a data update to mark any existing draft excursions with a Cancelled status.



Next Steps for 2025 – 2026 VFC Flu Pre-Book





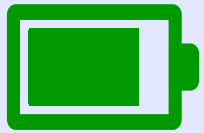


1. From the Prebook landing page, providers can click the **View Prebook** hyperlink corresponding to the appropriate Prebook order to access the **Prebook Order** page**.**
2. On the **Prebook Order** page, **Provider Allocation** details can be found in the **Related** tab. Providers can click the appropriate **Provider Allocation Number** hyperlink to access the **Provider Allocations** page.
3. In the **Details** tab on the **Provider Allocations** page, providers will find the approved pre-book amount in the **Total to be Allocated by CDPH** field (under the **Allocation Details** page section).

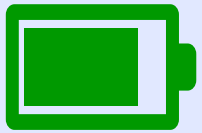
2025 Recertification Numbers

The following numbers reflect the 2025 Recertification completion progress by eligible Providers as of **February 6, 2025.**

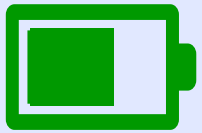
VFA Program
799 completed recertifications
220 outstanding* recertifications



LHD 317 Program
196 completed recertifications
88 outstanding* recertifications



VFC Program
1,828 completed recertifications
1,514 outstanding* recertifications



*Outstanding Recertifications = In Progress, E-signature requested, In review, Follow Up

Reminder: Complete the VFC Program Satisfaction Survey

- Feedback is important to help us understand what's working well, how to support participating providers and gain insight into challenges you are encountering while working with the VFC Program.
- Please take the time to submit feedback by completing the Satisfaction Survey!

THANK YOU!

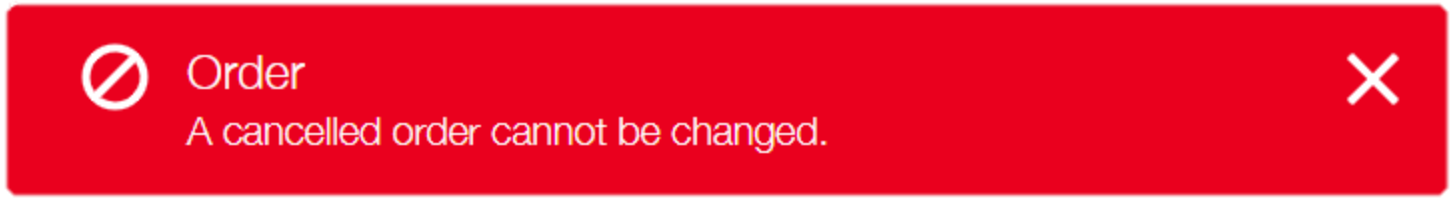
myCAvax – Known Issues and Workarounds

Known Issues

- For providers placing orders through the community-side, please **refrain from using the trash can** at the very end of the row unless you wish to no longer order that vaccine at all during this ordering cycle and have no on-hand inventory to report
  - Instead, if you are looking to clear and re-enter your quantities, lot numbers, and/or expiration dates for your on-hand inventory, please do so by manually clearing the inputted data from the fields and, if necessary, using the smaller trash cans respective to each additionally added line of inventory

Workaround / Next Steps

- If you accidentally used the trash can on a vaccine that you wish to order and/or report on-hand inventory for this ordering cycle and are now seeing the red error "a cancelled order cannot be changed.“ when trying to submit/save your order, please contact the PCC who can help get this order processed



Resources and Q&A

Leslie Amani and CDPH Subject Matter Experts

Resources on EZIZ

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

[Link to EZIZ Homepage]

CDPH Office of Communications Toolkits

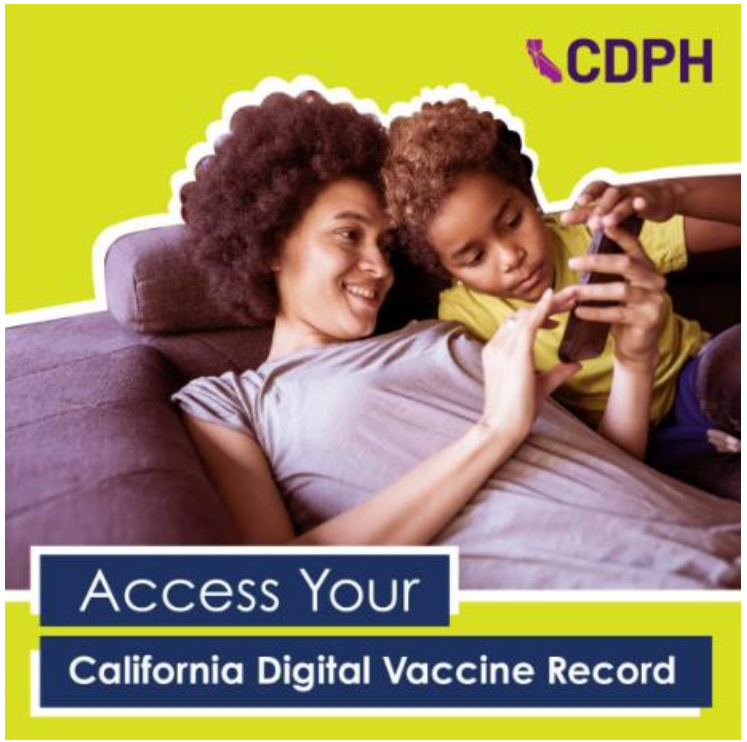
[CDPH Communication Toolkits]

California Digital Vaccine Record (DVR)

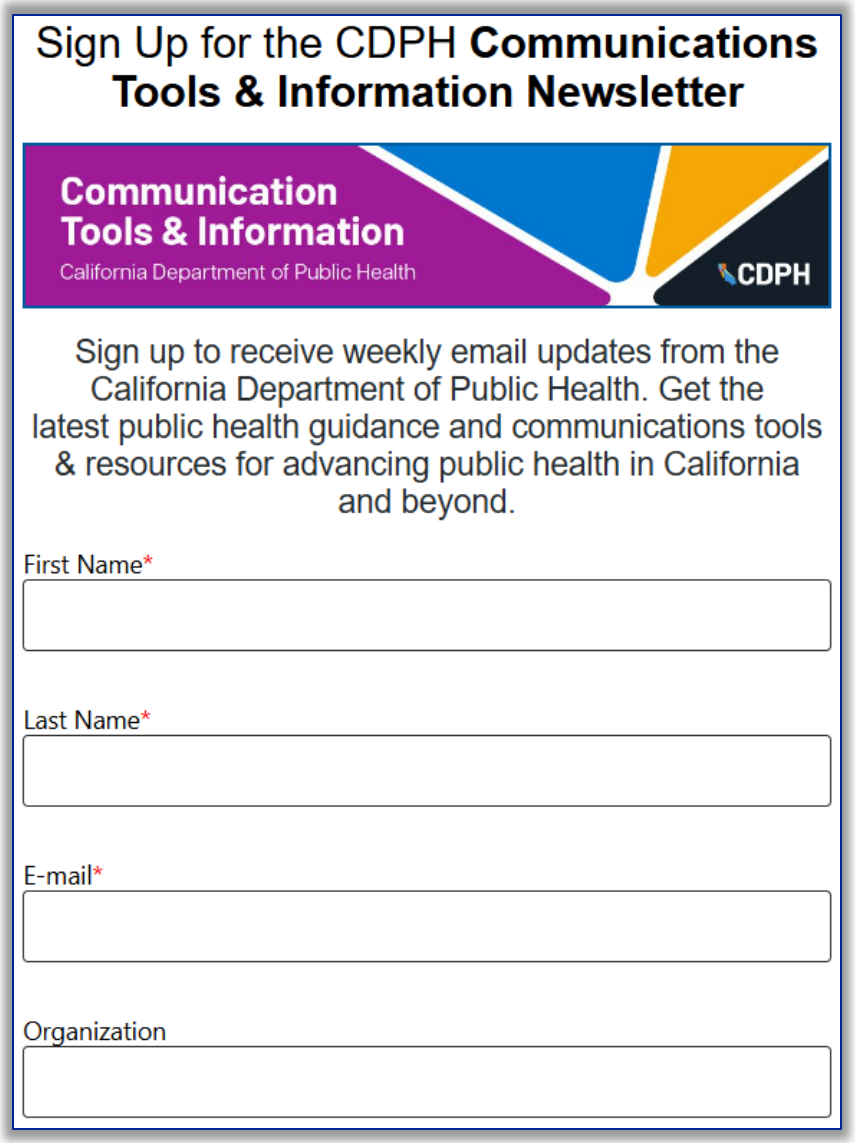
If you're wondering whether you're up to date on all your vaccines or need immunization records for school/childcare entry or work, you can visit the California Digital Vaccine Record to access your full vaccination records.

If you need to catch up on your vaccines, talk with your health care provider or visit MyTurn.ca.gov to make your vaccine appointments.

Visit the Routine Immunizations Communications Toolkit for more messages to share.



CDPH Office of Communications


Sign Up for the CDPH **Communications Tools & Information Newsletter**

Communication Tools & Information

California Department of Public Health

CDPH

Sign up to receive weekly email updates from the California Department of Public Health. Get the latest public health guidance and communications tools & resources for advancing public health in California and beyond.

First Name*

Last Name*

E-mail*

Organization

Sign up to receive the

CDPH Office of Communications Tools & Information Newsletter

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 8:00 am – 5:00 pm

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 job aids in the Knowledge Center, or contact us.

COVID-19 Therapeutics Resources

Type of Support	Description	Updated 12.11.24
General Information	CDPH COVID-19 Treatments Webpage (provides COVID-19 treatment information for healthcare providers and the general public)	
Locating Resources	Finding Providers and Test-to-Treat Sites • COVID-19 Therapeutics Locator (Find COVID-19 medications at pharmacies, clinics, and other locations near you.) • Information Page for Test-to-Treat Program	
Archive Therapeutic Webinars	For access to previously recorded webinars and slides, please contact: leslie.amani@cdph.ca.gov Access previously recorded CDPH Immunization Branch Webinars for Providers, on the: CDPH Immunization Branch Webinar Site	
Questions	For questions about ordering therapeutics, please email: cdphtherapeutics@cdph.ca.gov	

CDPH Provider Webinars and Trainings

Week of February 3, 2025

	Monday 2/3	Tuesday 2/4	Wednesday 2/5	Thursday 2/6	Friday 2/7
Live Webinars and Training					[CDPH Immunization Updates for Providers](#) *9:00 am – 10:30 am* [My Turn Office Hours](#) *12:00 pm – 1:00 pm*

View On Demand

- [CDPH Immunization Branch Archived Provider Webinars and Slides](#)
- [AIM Vaccine Confidence Toolkit Webinar Series](#)
- [Introduction to My Turn Onboarding](#) *(v. 1/4/22)*
- [Latest Features in My Turn](#) (*Requires myCAvax Login)*
- [myCAvax Release Notes for LHD and CDPH Users](#) (*Requires myCAvax Login)*

Help

Help Desk

CDPH Provider Call Center: 1-833-502-1245, M-F 8am-5pm *Email:* providercallcenter@cdph.ca.gov

My Turn: *Help Desk Email:* myturn.clinic.hd@cdph.ca.gov
Onboarding Email: myturnonboarding@cdph.ca.gov

myCAvax: *Help Desk Email:* mycavax.hd@cdph.ca.gov

Mpox: *Email:* stdcb@cdph.ca.gov

Immunization Resources

[California's General Immunization Resources (eziz.org)](#)

[RSV Immunization Resources](#)

[Flu Vaccination Resources](#)

[COVID-19 Vaccination Resources](#)

[COVID-19 Treatments](#)

[Mpox Vaccination Resources](#)

CDPH Provider Webinars and Trainings

Week of February 10, 2025

	Monday 2/10	Tuesday 2/11	Wednesday 2/12	Thursday 2/13	Friday 2/14
Live Webinars and Training		My Turn Clinic Office Hour *12:00 pm – 12:30 pm*	Planning School-Located Adolescent Vaccination Events (SLVEs) for Spring 2025 *2:00 pm – 3:00 pm*	NFID Webinar: Vaccines During Pregnancy: Protecting Maternal and Infant Health *11:00 am – 12:00 pm*	

View On Demand

- CDPH Immunization Branch Archived Provider Webinars and Slides
- AIM Vaccine Confidence Toolkit Webinar Series
- Introduction to My Turn Onboarding *(v. 1/4/22)*
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myCAvax: *Help Desk Email:* mycavax.hd@cdph.ca.gov

Mpox: *Email:* stdcb@cdph.ca.gov

Immunization Resources

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RSV Immunization Resources

Flu Vaccination Resources

COVID-19 Vaccination Resources

COVID-19 Treatments

Mpox Vaccination Resources

Q&A

During today's webinar, please click and open the Q&A icon to ask your questions so CDPH panelists and subject matter experts (SMEs) can respond.

Thank you for attending!

CDPH California Department of Public Health | Immunization Branch

Next CDPH Immunization Updates for Providers

Friday, February 21, 2025

CDPH Immunization Updates for Providers Registration Link