Welcome to
California COVID-19 Vaccination Program Friday Provider Office Hours

Friday, April 8, 2022
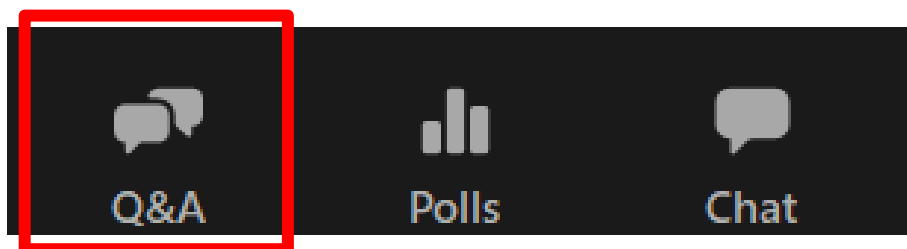
Provider Office Hours Q&A

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

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. Access today's slides and archived presentations at: https://eziz.org/covid/education/

If you have technical difficulties, please contact Rachel.Jacobs@cdph.ca.gov

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Agenda: Friday, April 8, 2022

No.	Item	Speaker	Time (AM)
1	Welcome & Announcements	Leslie Amani (Moderator)	9:00 – 9:05
2	DHCS Uninsured Program FAQs	Brooke Hennessey (DHCS)	9:05 – 9:10
3	Vaccine Administration	Elizabeth Reosti (CDPH)	9:10 – 9:15
4	Clinical Update	Caterina Liu, M.D. (CDPH)	9:15 – 9:20
5	Site Visits: Compliance Education and Resources	Kelsey Florio (CDPH)	9:20 – 9:30
	Q&A		9:30 – 9:35
6	Storage & Handling	Kate McHugh (CDPH)	9:35 – 9:40
7	Vaccine Management	Eric Norton and Claudia Aguiluz (CDPH)	9:40 – 9:50
8	Resources & Wrap Up	Leslie Amani (Moderator)	9:50 – 10:00
	Q&A		

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Announcements

Leslie Amani, CDPH

Crucial COVID-19 Conversations Upcoming Webinars

Please join Dr. Atul Nakhasi, co-founder of #ThisIsOurShot, for a webinar training on talking to **colleagues** about COVID-19 vaccines.

When: Friday, April 15 at 12:00PM-1:00PM

Register here!

The following week, please join Dr. Eric Ball, pediatrician, for a webinar training on talking to **parents** about COVID-19 vaccines for children.

When: Friday, April 22 at 12:00PM-1:00PM

Register here!

'If not us, then who?'
These doctors and nurses battle covid all day. Then they go online and fight misinformation.

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KidsVaxGrant Webinar

PHC | KidsVaxGrant

KidsVaxGrant Webinar #3

When: Thursday, April 14, 2022
Time: 5PM – 6PM

Register here

Please attend to learn more about the KidsVaxGrant launched April 1, 2022, for VFC Providers!

Kids' Sprint Week: Toolkit

Materials created to provide clear, factual and actionable information for Californians to help them stay safer from COVID-19, including resources that help Californians understand the importance of wearing a mask when it can protect themselves and their community.

Youth Vaccine 5+ **(Faith-Based Activations/Kids' Sprint Week)**: Download social media graphics, video and audio spots, and other resources about vaccinations for youth 5 and older.

#BehindTheMask – School Masking Resources: Masks are no longer required in schools or child care facilities, but they are still strongly recommended. Find resources to encourage masking to help keep our children safer from COVID-19.

Pfizer COVID-19 Vaccine Medical Updates & Training Sessions

April 2022 dates have been added!

Date & Time (linked)	Password
Tuesday, April 12 - 12PM	gaKVvMUP733
Wednesday, April 13 - 9AM	mkP722m68GC
Thursday, April 14 - 9 AM	EGm7DmgpT52
Tuesday, April 19 - 12 PM	3rYVYBmNX75
Wednesday, April 20 - 9AM	PfwM3ZZmf22
More sessions listed!	
NOTE: All times listed here are P.S.T.	

For providers and immunization staff personnel. **Please attend one of these sessions!**

Updated Session Format!

- Medical updates, including recent updates to the CDC Interim Clinical Considerations
- Overview of healthcare provider resources
- Storage, handling, and administration for:
    - Ages 5 through 11 Years
    - Ages 12 Years and Older

CDPH: Training & Resources

CDPH Immunization Branch

Training and Resources

Includes:

- Program Training Requirements

- COVID-19 Vaccine Product Training

- Technical Training for New Vaccinators

   o Includes video and job aids for IZ Techniques and Patient Care for children under 5

Job Aid: Receiving & Storing Pfizer Vaccines

Multi-page Pfizer vaccine guidance to be updated for Pfizer pediatric (6 months-4 years, maroon cap) once authorized

Includes:

- S&H summaries for available Pfizer formulations plus, links to fact sheets for HCPs

- Organizing storage units to reduce errors

- Vaccine expiration dates

- Recommended storage conditions

- Controlant monitor overview

- Step-by-step receiving instructions for all formulations

- Shipper return policies

Receiving & Storing Pfizer Vaccines
California COVID-19 Vaccination Program

Upon delivery, sites assume responsibility for storing vaccines in temperature-controlled environments. This job aid compiles guidance from CDC, Pfizer-BioNTech, and Controlant and is updated for California providers.

General Points

- Vaccines ship in ultra-cold thermal shipper with dry ice; ensure staff are trained on dry ice safety
- Vaccine products have a different formulation with different packaging, product configurations, dosages, National Drug Codes (NDC), and storage requirements
- See CDC COVID-19 Vaccine Product Guide (details about vaccine, kits, dimensions, PPE & needles; to be updated for pediatric products) or product comparison guide (CDPH chart includes NDCs)
- Other clinical resources can be found on CDC's website
- Ancillary kit ships within 24-48 hours of vaccine and includes PPE

Pfizer Tris-Sucrose (12Y+ Gray Cap) Formulation | Fact Sheet

- Comirnaty® is FDA-approved for ages 16+; authorized under EUA for ages 5 through 15
- NDC 59267-1025-4 available in smaller 300-dose configurations (5 cartons)
- Vial will not be labeled Comirnaty initially; look for Pfizer Tris-Sucrose Formulation
- Vaccine ships in a smaller, lighter, single-use shipper; this video shows how to receive the shipper and return the data logger; do not return shipper
- Sites should ideally carry only one Pfizer 12Y+ formulation at a time; use up Pfizer purple cap before ordering gray cap
- Does not require diluent; to avoid dilution errors, CDC doesn't recommend administering purple and gray cap products in a single clinic at the same time
- May be stored in ULT units (-90 to -60°C) until expiration, or routine refrigerators at 2-8°C (36-46°F) for up to 10 weeks; **do not store in routine freezers**
- **Do not use thermal shipper for on-site vaccine storage;** sites that previously used Pfizer thermal shipping containers for temporary storage must prepare for use of an ULT freezer or refrigerator
- Apply storage and handling labels to cartons to prevent administration and handling errors
- Apply beyond-use tracking labels to cartons when storing vaccine in the refrigerator

Pfizer (5-11Y Orange Cap) Formulation | Fact Sheet

- May be stored in ULT units (-90 to -60°C) until expiration, or routine refrigerators at 2-8°C (36-46°F) for up to 10 weeks; **do not store in routine freezers**
- **Do not use thermal shipper for on-site vaccine storage**
- NDC 59267-1055-4 available in 100-dose carton
- Vaccine ships in a smaller, lighter, single-use shipper; this video shows how to receive shipper
- Storage and Handling Summary details receiving and storing the product

California COVID-19 Vaccination Program   IMM-1339 (2/23/22)

COVID-19 Vaccine Provider FAQs

- **Answers to provider questions**

- **Updated weekly: Last updated 04/07/2022**

- **Currently in its 66th iteration!**

New Q: Are the National Drug Codes (NDC) and Current Procedural Technology (CPT) codes different for the second mRNA booster than for the first mRNA booster dose?

A: No. The NDC and CPT codes are the same for the first and second mRNA booster doses.

New Q: When does the DHCS COVID-19 Uninsured Group Program end?

A: The DHCS COVID-19 Uninsured Group Program ends on the last day of the month in which the public health emergency ends (April 16, 2022). Currently, this date is set at April 30, 2022. However, DHCS anticipates that this funding will be extended.

New Q: How long does it take for COVID-19 vaccine Providers to be approved into the DHCS COVID-19 Uninsured Group after applying?

Q: DHCS COVID-19 Uninsured Group eligibility is determined in real-time once all data is entered into the system.

California COVID-19 Vaccination Program Provider FAQs

For Prospective, Newly Enrolled, and Current California COVID-19 Vaccine Providers. Providers may also visit California COVID-19 Vaccination Program for information and updates.

Directions: Click on a category to be directed to related FAQs.

Contents

Provider FAQs on EZIZ, Updated Weekly

VA58 Trust & Safety Team Updates

The VA58 Trust & Safety Team reports on trending narratives about COVID-19, delivers biweekly briefings, and develops comprehensive resources to increase awareness around mis-, dis-, and mal-information, as well as the State's capacity to counter it.

BIWEEKLY BRIEFINGS

Biweekly briefings provide partners with the top COVID-19 vaccine mis/dis topics and trends, and invitees receive a copy of the report post-briefing.
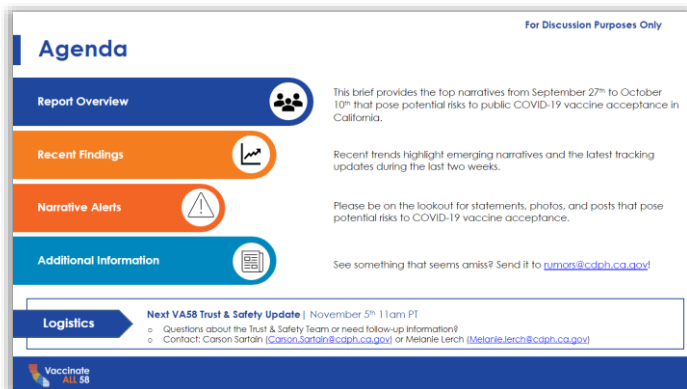
To be added to the invite, email **rumors@cdph.ca.gov.**

RUMORS INBOX

The Rumors Inbox serves as a tip line for our partners to submit the COVID-19 rumors they're hearing online and within their communities to our team. We incorporate the submissions into our team's reporting.

Report COVID-19 Vaccine Rumors to:

rumors@cdph.ca.gov

RECENT TOPICS & RESOURCES

Mis/Dis/Mal-information: COVID-19 vaccines cause adverse cardiac events, including death

Trusted Resources: Safety of COVID-19 Vaccines | CDC, COVID-19 Vaccine Safety Surveillance | FDA

Mis/Dis/Mal-information: New COVID-19 cases are due to ineffective vaccine and other preventative measures

Trusted Resources: CDC COVID Data Tracker: Rates of COVID-19 Cases and Deaths by Vaccination Status, Vaccine Breakthrough Infections: The Possibility of Getting COVID-19 after Getting Vaccinated (cdc.gov)

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Stay informed!
Provider Resources on
eziz.org/covid

Frequent Content Updates:

- Alerts

- Program Enrollment

- My Turn Onboarding

- Reporting Requirements

- Patient Resources

- Archived Communications

- Education & Support Materials

- More to explore!

COVID-19 Vaccination Program Webinars and Training for Providers

Week of April 11, 2022   Note: Calendar subject to change

	Monday 4/11	Tuesday 4/12	Wednesday 4/13	Thursday 4/14	Friday 4/15
myCAvax		What's New in myCAvax *12:30 pm – 1:00 pm*			Provider Office Hours *9:00 am – 10:00 am*
My Turn					
Combined Office Hours and Events	My Turn and myCAvax Office Hours *12:00 pm – 1:00 pm*	Pfizer BioNTech COVID-19 Vaccine Training & Education* *12:00 pm – 1:00 pm* *PW: gaKVvMUP733*	Pfizer BioNTech COVID-19 Vaccine Training & Education* *9:00 am – 10:00 am* *PW: mkP722m68GC*	Pfizer BioNTech COVID-19 Vaccine Training & Education* *9:00 am – 10:00 am* *PW: EGm7DmgpT52*	Crucial COVID-19 Conversations Webinar: Talking with Colleagues About COVID-19 Vaccines *3:00 pm – 4:00 pm*

* Pfizer BioNTech COVID-19 Vaccine Training & Education topics vary by day and include the latest information about vaccine storage, handling, preparation, and administration; recent medical updates, healthcare provider resources, and a Q&A session

View On Demand	• Intro to My Turn Onboarding *(v. 1/4/22)* • Latest Features in My Turn *(*Requires My Turn Login)*	• Latest Features in myCAvax for Providers *(*Requires myCAvax Login)* • myCAvax Release Notes for LHJs and CDPH Users *(*Requires myCAvax Login)*	• Provider 101 Account Enrollment: Section A: Organization Application *(v. 10/21/21)* • Provider 101 Account Enrollment: Section B: Location Application *(v. 10/21/21)* • Provider Office Hours and MCE Office Hours Archived Sessions

Help

Website: www.eziz.org/covid, FAQs
General email: covidcallcenter@cdph.ca.gov
CDPH Provider Call Center: 1-833-502-1245, 8am-6pm

My Turn email: myturnonboarding@cdph.ca.gov
myCAvax Help Desk Email: myCAvax.HD@accenture.com
Phone: (833) 502-1245

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Uninsured Program Update & FAQs

Brooke Hennessey, DHCS

Billing and Reimbursement Provider FAQs

Q: *Do the uninsured apply themselves? Do providers apply?*

DHCS: For the COVID-19 Uninsured Group, the uninsured or underinsured (folks that have insurance that do not cover COVID-19 testing, testing-related, treatment services) will need to apply. Usually*, Providers take the application in the clinic or hospital with the applicant present. Any interested provider will need to enroll as a Medi-Cal qualified provider in any of the Presumptive Eligibility programs to enroll individuals into the COVID-19 UIG. Providers follow an application process located here: Medi-Cal: Provider Enrollment to enroll as a Medi-Cal qualified provider.

*Note: Providers assist individuals in applying for Presumptive Eligibility. Depending on the program, individuals usually need to present physically in a clinic, hospital, or provider offices. However, during the COVID-19 PHE, DHCS is providing the flexibility for telephonic signature on the application.

Q: How does an independent pharmacy become part of the uninsured program to receive reimbursement?

DHCS: The pharmacy will need to have an arrangement with a Medi-Cal qualified provider under the Medi-Cal Presumptive Eligibility programs to receive reimbursement for services rendered under the COVID-19 UIG.

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Billing and Reimbursement Provider FAQs

Q: Does DHCS have an update on when they will provide guidance for FQHCs to submit COVID vaccine claims at the $67 approved rate?

DHCS: DHCS is currently working on this.

Q: Will DHCS cover the vaccine administration fee for "uninsured" patients who are on restricted scope Medi-Cal or who are enrolled via the COVID Uninsured Group Program?

DHCS: Yes. DHCS will cover vaccine administration fees for this group.

Q: Is there a state funding for covid testing now that federal funding for free covid testing is over?

DHCS: The COVID-19 UIG program is funded by federal Medicaid dollars, which is different than HRSA. Please note the COVID-19 UIG program ends the last day of the calendar month in which the COVID-19 Public Health Emergency (PHE) ends.

Q: Will patients have to apply to DHCS program before receiving treatment or can they apply after as well?

DHCS: It is recommended that individuals apply prior to so they have confirmed eligibility.

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Billing and Reimbursement Provider FAQs

Q: Can you please provide more information on the billing after the HRSA deadline of April 5? Are we billing Medi-Cal?

DHCS: The COVID-19 UIG program is different than the HRSA program, however it is similar in scope and covers uninsured individuals and underinsured individuals. It is another pathway for reimbursement for COVID-19 testing, testing-related, and COVID-19 treatment services. Providers billing COVID-19 UIG must be a Medi-Cal qualified provider under Medi-Cal presumptive eligibility programs in order to bill Medi-Cal for the COVID-19 UIG.

Q: What's the medical web address for non-insurance person for covid-19 vaccine?

DHCS: Medi-Cal qualified providers can log into the COVID-19 UIG application portal here: **Medi-Cal NewsFlash: COVID-19 Uninsured Group Application Portal Qualified Provider Information** (please follow onscreen instructions).

Q: Can you include the link to the DHCS website regarding the uninsured patient FAQ?

DHCS: COVID-19 Uninsured Group Program (ca.gov)

Billing and Reimbursement Provider FAQs

Q: How will pharmacies know who is a Medi-Cal qualified provider in their community?

DHCS: Depending on the program, DHCS has lists of qualified providers under the "Presumptive Eligibility" tab on this page: **DHCS Programs Page: Presumptive Eligibility**

Q: Is the DHCS program mainly reserved for Medi-Cal providers such as FQHCs?

DHCS: No, depending on the program, the provider types will vary. Please see the provider manuals/descriptions for each program here: **Medi-Cal: Presumptive Eligibility (PE) Programs**

Q: Is funding for COVID vaccination for the uninsured different than the underinsured?

DHCS: The COVID-19 UIG covers COVID-19 vaccinations for both uninsured and underinsured.

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Vaccine Administration Data

Elizabeth Reosti, CDPH

Vaccine Administration Summary

as of April 5, 2022

Primary Series Completion (Total CA Population)
Primary Series Completion (Ages 5-11)
Primary Series Completion (Ages 18+)
Booster Eligible Completion
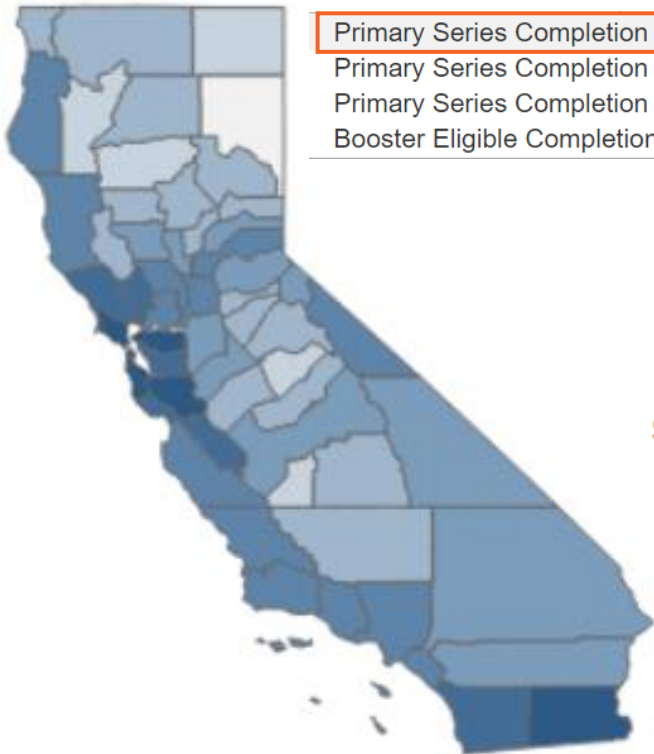
73,068,231

Total Doses Administered:

■ Received Booster
■ Booster eligible but not received
■ Primary series complete, Booster ineligible

■ Primary series incomplete
□ Not yet vaccinated
| Statewide comparison, selected metric

	1+ dose: 83.8%				
Statewide overall	39.1%	28.8%	6.8%	9.2%	16.2%

Booster/Additional
Dose Recipients:
14,728,126

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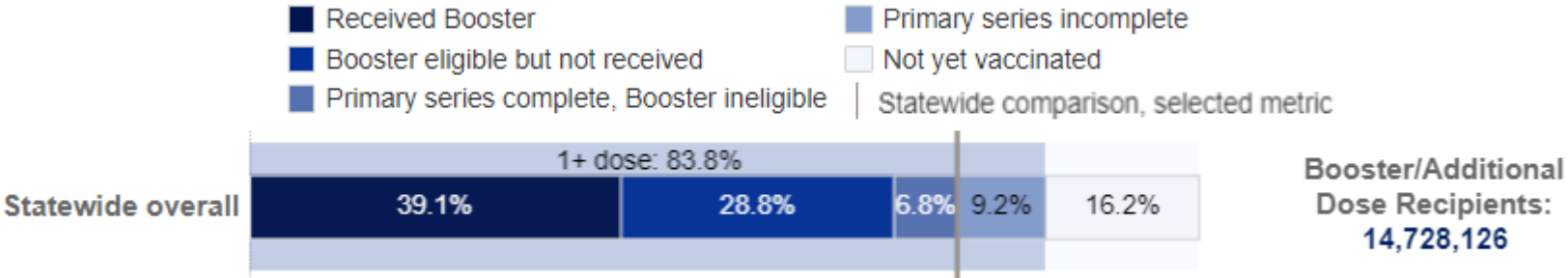
Trends in Vaccine Administration

as of April 4, 2022

Daily New Doses Administered

Month of Date Administered
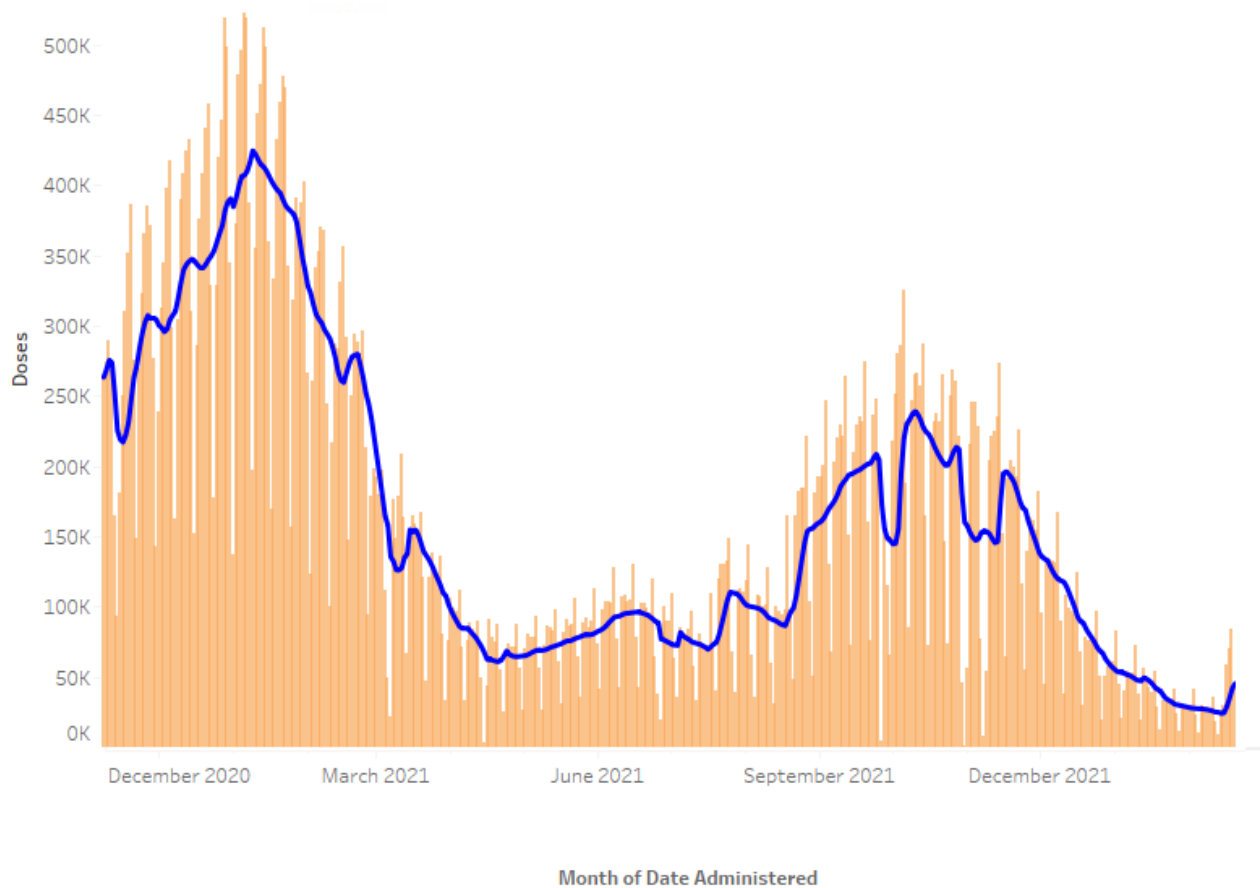
Weekly New Doses Administered (thousands)

	February 20, 2022	February 27, 2022	March 6, 2022	March 13, 2022	March 20, 2022	March 27, 2022
Doses	335 k	290 k	214 k	195 k	178 k	320 k
Percent change from previous week:		-14%	-26%	-9%	-9%	80%

Week Start Date
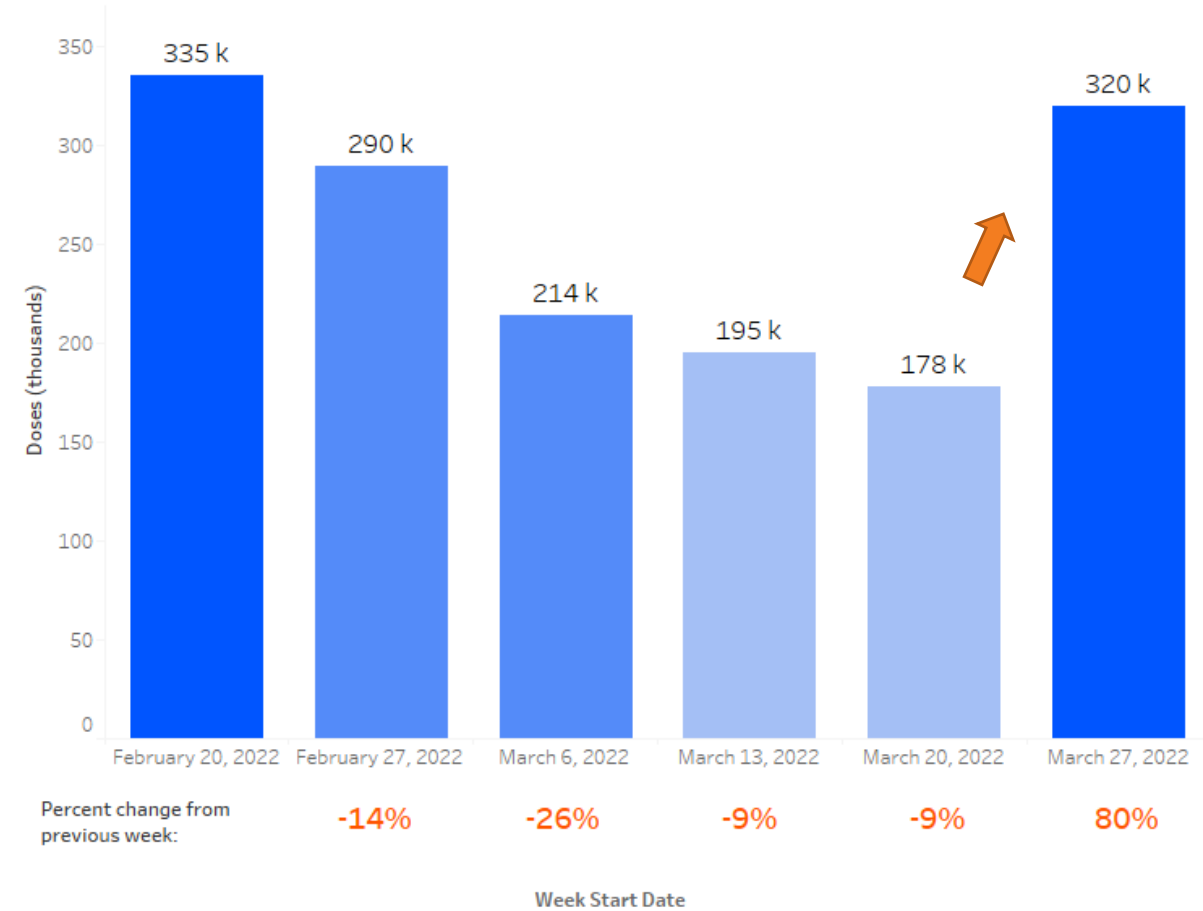
Trends in Vaccine Administration

as of April 4, 2022

- Increase in demand/uptake among 50-64 and 65+ age groups

- 4th doses (2nd booster)

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

A-Z Index
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CDC Newsroom Releases —

2022 News Releases
2021 News Releases
2020 News Releases
2019 News Releases

CDC Recommends Additional Boosters for Certain Individuals

Media Statement

For Immediate Release: March 29, 2022
Contact: Media Relations
(404) 639-3286

Weekly New Doses by Age Group

Age Group
🟧 65+ 🟧 50-64 🟦 18-49 🟦 12-17 🟦 5-11

	February 27, 2022	March 6, 2022	March 13, 2022	March 20, 2022	March 27, 2022
Total	270,277	213,683	195,433	177,770	319,662
65+	23,639	19,979	21,838	22,782	136,411
50-64	41,796	32,173	31,221	28,577	75,248
18-49	139,190	105,449	93,422	83,146	73,349
12-17	26,780	23,673	22,174	19,515	16,223
5-11	38,872	32,409	26,778	23,750	18,431
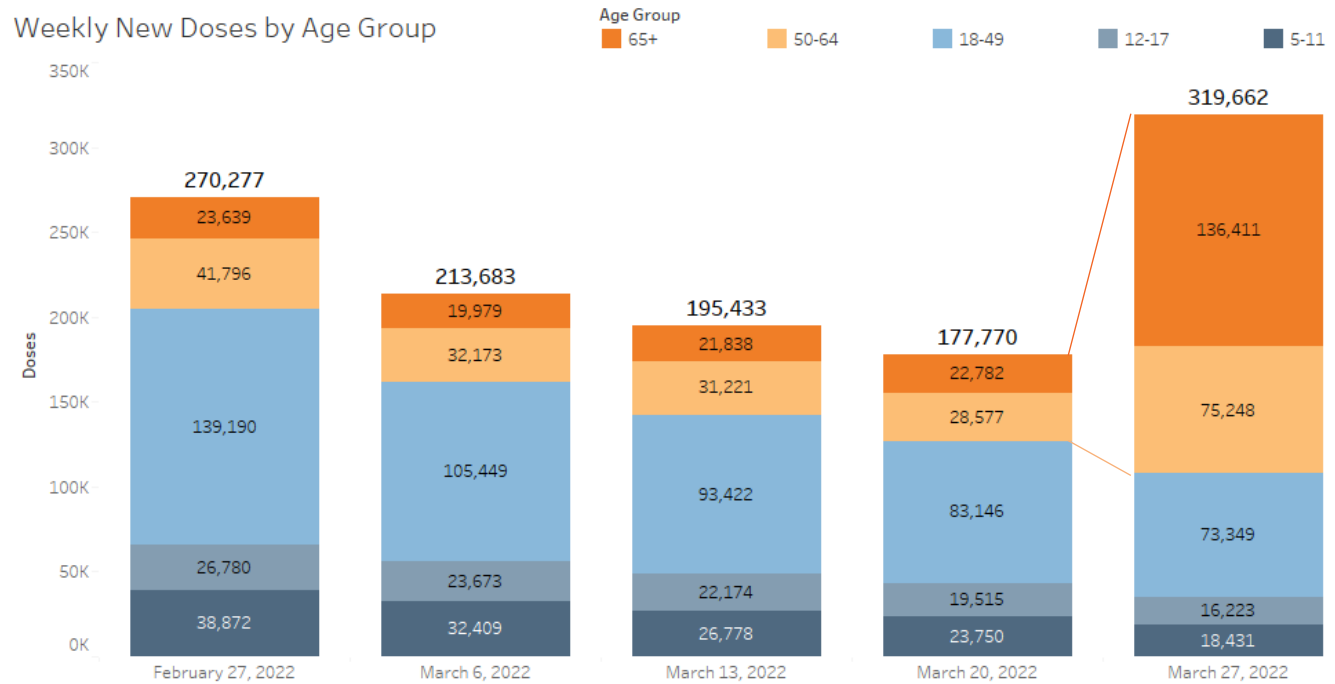
Percent Change from Previous Week	- 21%	- 9%	- 9%	+ 80%
5-11	- 17%	- 17%	- 11%	- 22%
12-17	- 12%	- 6%	- 12%	- 17%
18-49	- 24%	- 11%	- 11%	- 12%
50-64	- 23%	- 3%	- 8%	+ 163%
65+	- 15%	+ 9%	+ 4%	+ 499%

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5-to-11-year-old Vaccination Trends
as of April 4, 2022

- Persistently declining demand/uptake among all equity quartiles

Weekly New 5-11 year-old Fully Vaccinated Recipients by VEM

VEM Quartile
- Q4
- Q3
- Q2
- Q1

	February 6, 2022	February 13, 2022	February 20, 2022	February 27, 2022	March 6, 2022	March 13, 2022	March 20, 2022	March 27, 2022
Total	50,221	39,070	30,823	24,639	19,018	14,905	13,512	10,442
Q4	10,565	7,363	5,411	4,389	3,449	2,677	2,391	
Q3	9,959	7,856	5,824	4,727	3,535	2,841	2,567	
Q2	13,483	10,541	8,678	6,736	5,296	4,033	3,705	2,814
Q1	16,214	13,310	10,910	8,787	6,738	5,354	4,849	3,702

Percent Change from Previous Week	-22%	-21%	-20%	-23%	-22%	-9%	-23%
Q1	-18%	-18%	-19%	-23%	-21%	-9%	-24%
Q2	-22%	-18%	-22%	-21%	-24%	-8%	-24%
Q3	-21%	-26%	-19%	-25%	-20%	-10%	-25%
Q4	-30%	-27%	-19%	-21%	-22%	-11%	-16%

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Data Summary

as of April 4, 2022

72.8 Million doses administered

+80% change in all new doses from previous week (4th doses among 50+)

-23% change in new 5-11-year-old recipients from previous week

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Clinical Update

Caterina Liu, M.D., CDPH

mRNA COVID-19 Second Booster Vaccine

- FDA amended the Emergency Use Authorization to allow for a second booster dose for mRNA COVID-19 vaccines.
  - For all adults ≥ 50 years, a 2nd booster of either Pfizer or Moderna vaccine
  - For immunocompromised persons:
    - A 2nd Pfizer booster may be administered to ages ≥12 years
    - A 2nd Moderna booster may be administered to ages ≥ 18 years
  - The minimal interval between the 1st and 2nd booster is 4 months.
- CDC updated the Interim Clinical Considerations for Use of COVID-19 Vaccines | CDC
- Western States Scientific Safety Review Workgroup (WSSSRW) released statement supporting the expanded eligibility

Updated Job Aid: COVID-19 Vaccine Timing by Age Routine Schedule

Job Aid: COVID-19 Vaccine Timing by Age
Job Aid: Spanish – Calendario de la Vacuna COVID-19 por Edad
Job Aid: Interim Clinical Considerations for Use of COVID-19

Vaccines | CDC

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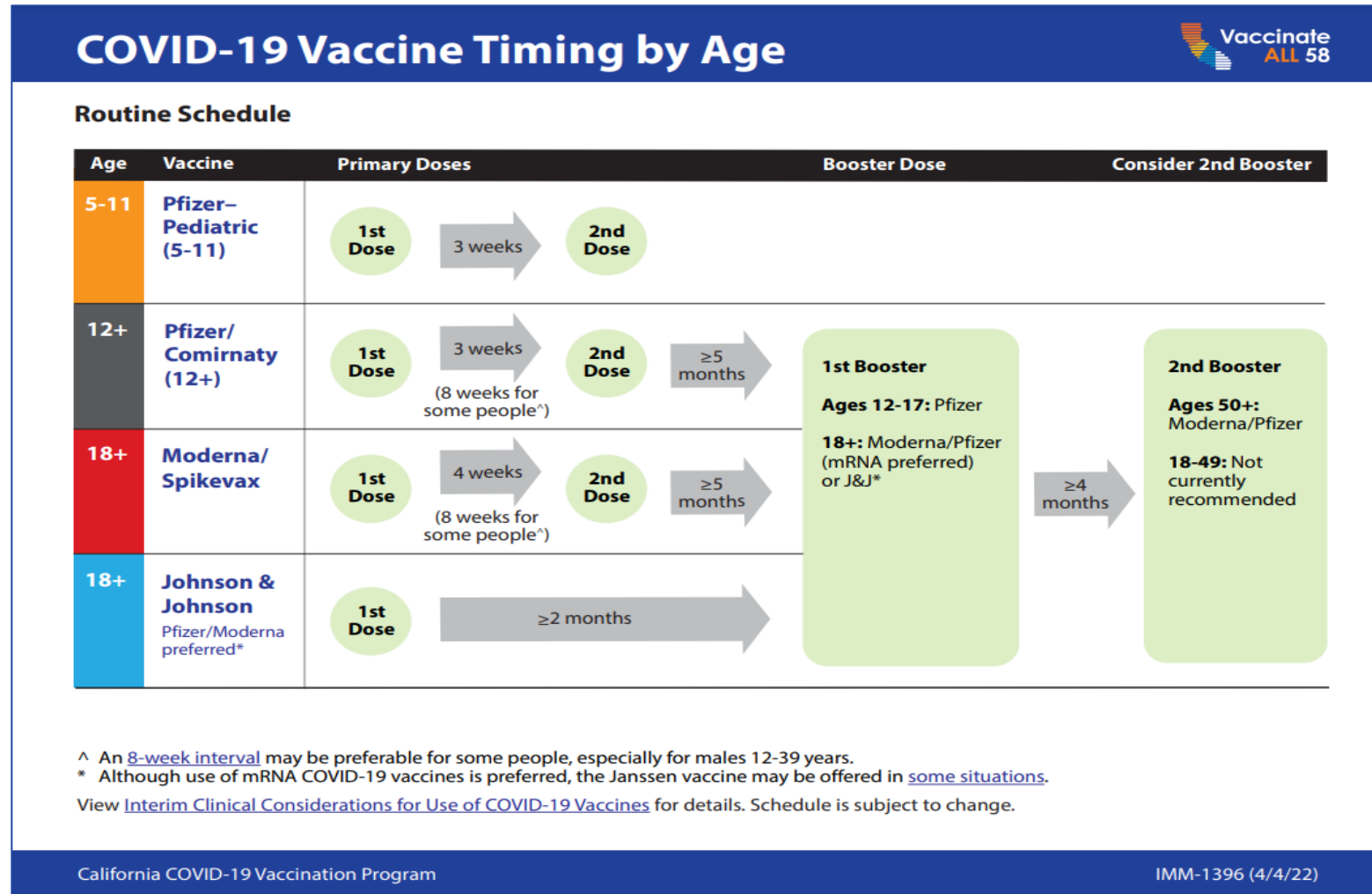
U.S. Booster Vaccine Effectiveness (VE) vs COVID-19-- Associated Severe Outcomes in Adults

TABLE 2. Vaccine effectiveness* of 1 primary Janssen vaccine dose, homologous and heterologous boosters following primary Janssen vaccination, and 3 mRNA COVID-19 vaccine doses[†] against laboratory-confirmed COVID-19–associated emergency department and urgent care encounters and hospitalizations among adults aged ≥18 years[§] — VISION Network, 10 states, December 2021–March 2022[¶]

Medical event, vaccination status (days since most recent dose)	Total	Positive SARS-CoV-2 result, no. (%)	VE %* (95% CI)
ED/UC events (N = 80,287)			
Unvaccinated (Ref)	52,025	23,560 (45.3)	Ref
1 Janssen dose ≥14 days earlier (median = 262 days [range = 196–293])	4,514	1,652 (36.6)	24 (18–29)
2 Janssen doses (7–120 days)	467	135 (28.9)	54 (43–63)
1 Janssen/1 mRNA dose (7–120 days)	1,271	166 (13.1)	79 (74–82)
3 mRNA doses (7–120 days)	22,010	2,614 (11.9)	83 (82–84)
Hospitalizations (N = 25,244)			
Unvaccinated (Ref)	15,424	7,271 (47.1)	Ref
1 Janssen dose ≥14 days earlier (median = 264 days [range = 199–294])	1,451	518 (35.7)	31 (21–40)
2 Janssen doses (7–120 days)	164	47 (28.7)	67 (52–77)
1 Janssen/1 mRNA dose (7–120 days)	373	59 (15.8)	78 (70–84)
3 mRNA doses (7–120 days)	7,832	775 (9.9)	90 (88–91)

- VISION Network – Healthcare network across 10 states. ED, UC, hospitalization data from December 2021-March 2022.

- VE for all boosters (J&J or mRNA) against ED/UC encounters and hospitalization were higher than VE after 1 J&J dose during the Omicron period.

- Persons with J&J primary series vaccination should receive preferentially receive a heterologous mRNA booster vaccine.

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MMWR (3/29/2022): Effectiveness of Homologous and Heterologous COVID-19 Booster Doses Following 1Ad.26.COV2.S (J&J) Vaccine Dose Against ED, UC, and Hospitalizations Among Adults

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Updated CDC Guidelines for COVID-19 Vaccines: J&J Primary Series and not immunocompromised

People not moderately or severely immunocompromised and ages 18–49 years who received Janssen COVID-19 Vaccine as both their primary series dose and booster dose may receive an mRNA COVID-19 booster dose at least 4 months after the Janssen booster dose. People ages 50 years and older may choose to receive a second booster dose if it has been at least 4 months after the first booster dose.

Age	Dose #1	Dose #2	Dose #3
18-49 years	J&J	mRNA	Not currently recommended
18-49 years	J&J	J&J	mRNA
50+ years	J&J	mRNA or J&J	mRNA

Updated Job Aid: COVID-19 Vaccine Timing by Age Moderately or Severely Immunocompromised
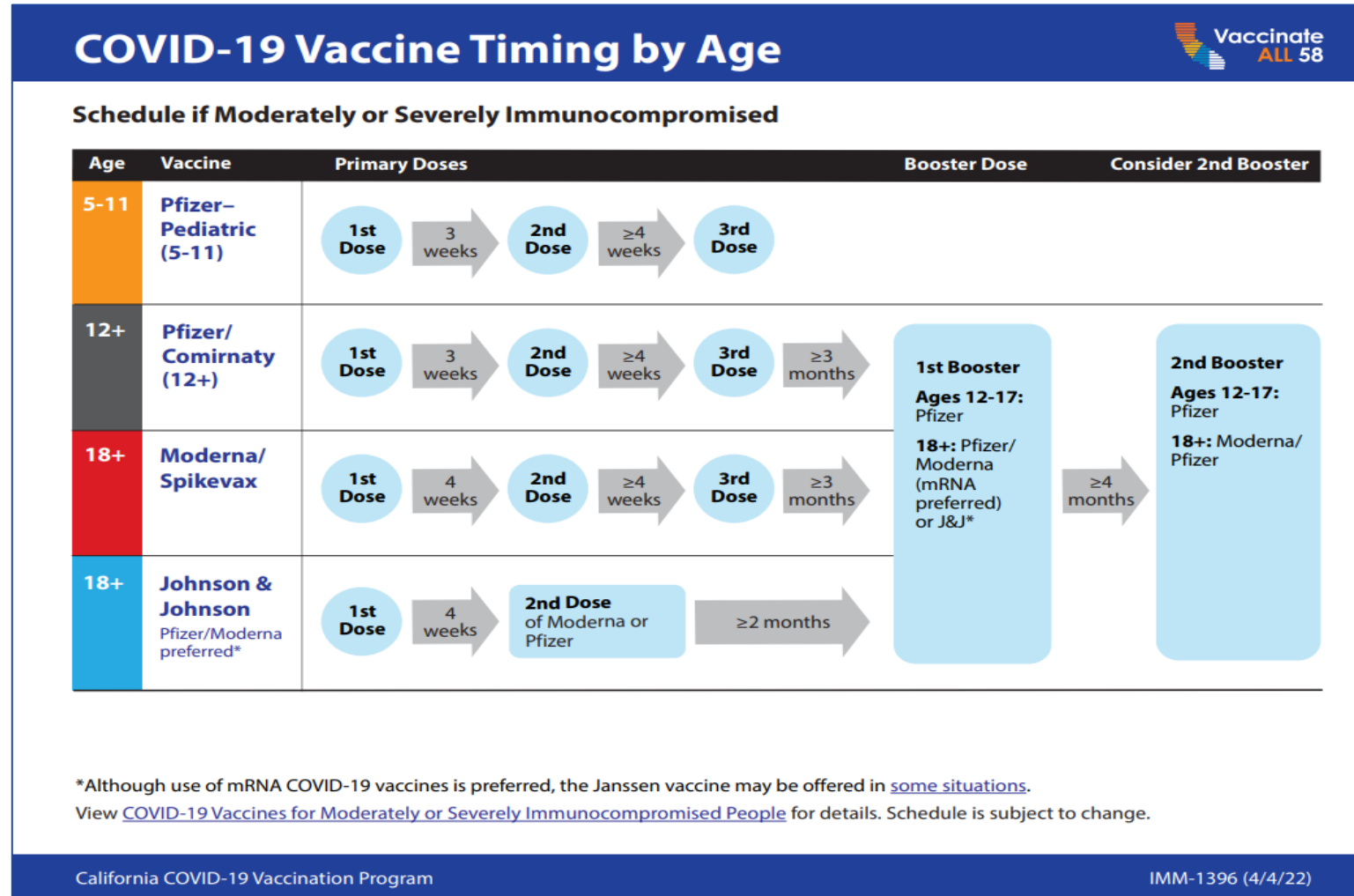
- Job Aid: COVID-19 Vaccine Timing by Age
- Job Aid: Spanish – Calendario de la Vacuna COVID-19 por Edad
- Interim Clinical Considerations for Use of COVID-19 Vaccines | CDC

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Appendix D: Schedule Guidance for People who are Moderately or Severely Immunocompromised

- For people with mRNA primary series who received either mRNA booster dose before their 3rd primary dose, they should receive a 4th dose at least 3 months after the 3rd dose. The 4th dose can be either a Pfizer or Moderna 100ug vaccine.

Example: Immunocompromised person inadvertently received Moderna 50ug (booster dose) as dose #3
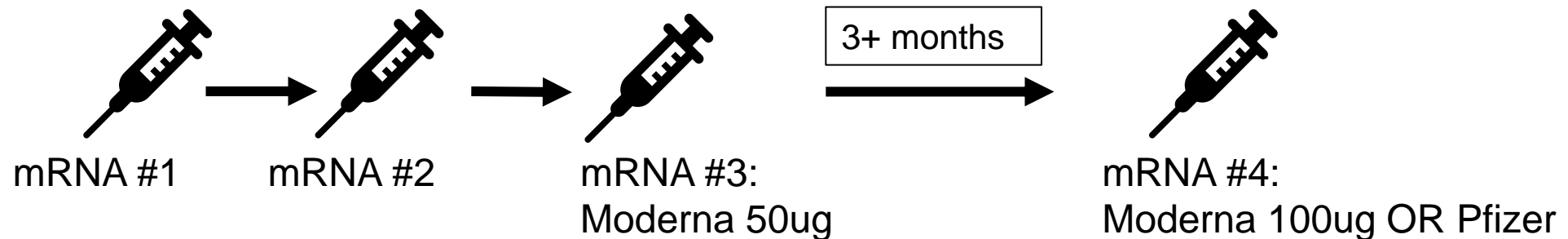
mRNA #1 → mRNA #2 → mRNA #3: Moderna 50ug — 3+ months → mRNA #4: Moderna 100ug OR Pfizer

Appendix D: Schedule Guidance for People who are Moderately or Severely Immunocompromised

- For people with J&J primary series who received either mRNA booster dose before their 2nd (additional) mRNA dose, they should receive a 3rd dose at least 2 months after the 2nd dose. The 3rd dose can be either a Pfizer or Moderna 100ug vaccine

Example: Immunocompromised person inadvertently received Moderna 50ug (booster dose) as dose #2

2+ months

#1
J&J

#2
Moderna 50ug

#3
Moderna 100ug OR Pfizer
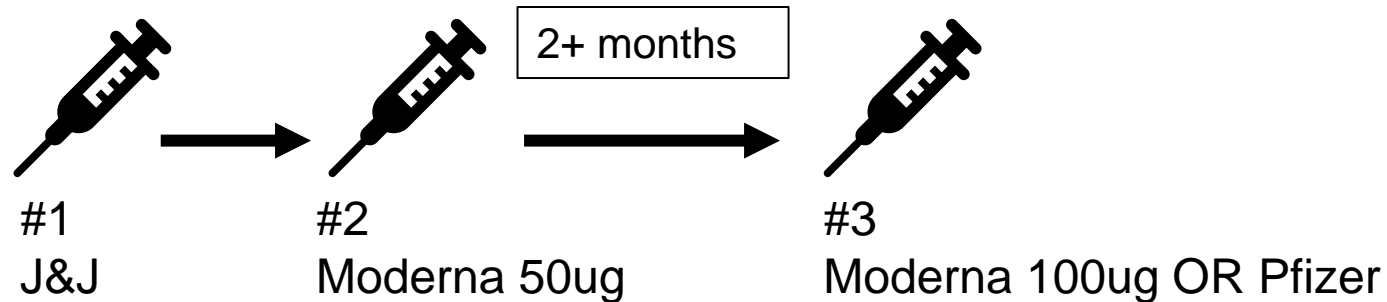
Site Visit Compliance Education & Resources

Kelsey Florio, RN, CDPH

1

Document/report spoiled, expired and wasted vaccine

- Remove spoiled, expired or wasted vaccines immediately and dispose
- Update VaccineFinder inventory

- **State Received Vaccine**

  - Report doses in MyCaVax

		Waste Event ⌄	Product	⌄	Number of... ⌄	Type of
1	☐	WS-113581	Moderna (18 years - 100+ years) -100/box - COVID-19 Vaccine		8	Wasted

Waste Events (1)
1 item • Sorted by Created Date • Updated a few seconds ago

View All

- **Federally Received Vaccine**

  - Report doses in VTrckS ExIS

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Document/report spoiled, expired and wasted vaccine

1

- State Received Vaccine
  - Reporting Requirements at a Glance | IMM 1329
  - Reporting Doses Spoiled, Expired or Wasted | IMM 1347
- Federally Received Vaccine
  - Identifying, Disposing, and Reporting COVID-19 Vaccine Wastage | CDC

Disposing of COVID-19 Vaccine Waste

The COVID-19 Vaccination Provider Agreement states that providers should dispose of COVID-19 vaccine waste in accordance with local regulations and processes currently being used to dispose of regulated medical waste.

Reporting COVID-19 Vaccine Wastage

The COVID-19 Vaccination Program Agreement requires providers to report wastage information in the Vaccine Tracking System (VTrckS). To document wasted COVID-19 vaccines:

- Use the VTrckS-ExIS (External Information System) Interface for Wastage* to report vaccine that cannot be administered because it is spoiled/wasted or expired.
- If the CDC-recommended number of doses cannot be extracted from a vial, it must be recorded as waste. Use the same VTrckS ExIS Interface for Wastage* and select "other" as the option for wastage code. (See Wastage Identification Table for recommended doses per vial.)
- Jurisdictions should follow their routine processes for submitting wastage information to VTrckS by either by uploading a wastage file using the ExIS interface in VTrckS or by direct entry into VTrckS.
- Federal agencies and pharmacies can use Vaccine Provider Ordering Portal (VPoP) to generate wastage files to upload into VTrckS.

Reporting Requirements at a Glance

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COVID-19 Vaccine

This guide outlines requirements in CDC's COVID-19 Vaccination Program Provider Agreement and Vaccine Storage & Handling Toolkit. Refer to the EUA fact sheets or product inserts for vaccine-specific storage and handling and administration guidance. (See Vaccine Administration | Vaccine Management at a Glance.)

Topic	Requirements & Guidance	Resource
Reporting Doses Administered	Within 24 hours of administering a dose of COVID-19 vaccine and adjuvant (if applicable), Organization must record in the vaccine recipient's record and report required information to the relevant state, local, or territorial public health authority. Details of required information (collectively, Vaccine Administration Data) for reporting can be found on CDC's website. (CDC Provider Agreement #2) Organization must submit Vaccine Administration Data through either (1) the immunization information system (IIS) of the state and local or territorial jurisdiction or (2) another system designated by CDC according to CDC documentation and data requirements. (P.A. #2) Providers must report vaccination data (including race and ethnicity) within 24 hours of administration and report doses administered daily to your local immunization registry. Providers may use My Turn, or an EHR/EMR connected to CAIR2, RIDE, or SDIR. (Providers already manually entering data into CAIR may continue to do so.) Report recipient's **mobile number and email** (see Health Officer Order).	Reporting Doses Administered Report Race & Ethnicity
Reporting Administration Errors	Organization must administer COVID-19 vaccine in accordance with all requirements and recommendations of CDC and CDC's Advisory Committee on Immunization Practices (ACIP). (CDC Provider Agreement #1) Providers are required to report all COVID-19 vaccine administration errors to VAERS —even those not associated with an adverse event. To file an electronic report, please see the VAERS website. • Reporting to VERP is not required but encouraged.	• Responding to Administration Errors • Interim Clinical Considerations (Appendix A)

California COVID-19 Vaccination Program   IMM-1329 (3/11/22)

Reporting Doses Spoiled, Expired, or Wasted

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California COVID-19 Vaccination Program

Waste is expected and may be unavoidable in any vaccination program. Wastage reporting helps CDC better understand how much inventory is in the field and where the greatest needs for inventory exist to minimize the potential waste of vaccine. Follow CDC's Toolkit and CDC summary guidance to maximize vaccination while minimizing waste.

Key Points

- Remove spoiled, expired, or wasted vaccines from the storage unit immediately
- Do not return nonviable vaccines to the manufacturer or McKesson
- Report nonviable doses in myCAvax before disposal
- Follow these instructions to report nonviable doses and dispose of vaccines

Program Requirements

- Enrolled providers must document and track vaccine wastage as part of routine vaccine inventory management activities and report the number of doses of COVID-19 vaccine and adjuvants that were unused, spoiled, expired, or wasted as required by the relevant jurisdiction.

Reporting Requirements

Login to myCAvax and click **Vaccine Inventory – Waste** to report spoiled, expired, or wasted vaccines before disposing of vaccines. Include product, lot number, and expiration date.

Spoiled Vaccines

Consistent and accurate temperature monitoring should minimize spoiled vaccines. Vaccines are considered spoiled if manufacturers determine vaccines were exposed to out-of-range temperatures and may not be used. If the vaccine is determined to be non-viable, vaccine must be reported as "spoiled" and properly disposed of. Vaccines could spoil as a result of the following conditions:

- data logger indicates that storage unit temperatures are out of the recommended range
- storage unit temperatures are not monitored
- failure to store vaccines properly upon receipt
- vaccines spoiled during transfer
- natural disaster, power outage, or mechanical failure

California COVID-19 Vaccination Program   IMM-1347 (2/11/22)

2

Provide V-Safe information sheets to each vaccine recipient

○ V-Safe Print Resources | CDC

3

Document/report temperature excursions

Requirement: Providers are required to document and report excursions according to the jurisdiction's guidance

- State Received Vaccine
  - Report Temperature Excursion Worksheet | IMM 1337
- Federally Received Vaccine
  - How to Handle Temperature Excursions

3

Document/report temperature excursions

Conduct staff training

All staff who receive, handle, manage, prepare, or administer vaccine must be fully trained on COVID-19 Vaccination Program requirements and the specific storage, handling, preparation, and administration requirements for each COVID-19 vaccine product as applicable to the individual's role.

Providers should track, maintain documentation, and monitor the status of the training received by vaccination staff to ensure the training requirement is met.

4

Conduct staff training

- Training and Education | CDC
- Vaccine Administration Competencies Assessment Form
- Covid-19 Vaccine Management Plan | See training log on p. 12, section 7

5

Possess conditioned water bottle transport system or phase change materials

CDC recommends providers keep on hand or have access to supplies needed for emergency transport (or routine transport if you have a redistribution agreement) This includes Portable vaccine storage units, qualified containers/packouts and conditioned water bottle transport systems or phase change materials (for refrigerated transport)

5

Possess conditioned water bottle transport system or phase change materials

- Emergency Transport of Refrigerated Vaccine | IMM 983

Provider Office Hours Q&A

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

Storage & Handling

Kate McHugh, CDPH

Preparing for the Numerous Pediatric Vaccines

- CDPH is expecting that the Pfizer pediatric (6 months-4 years, maroon cap) will likely be authorized around the same time as the two Moderna pediatric vaccines.

- Translation: Vaccinators may have three new versions of COVID-19 vaccine come into circulation around the same time.

- **Important**: Providers, please prepare for proper, organized storage of these vaccines and ensure staff are educated.

- Currently, CDPH does not have the details yet for the Moderna pediatric storage/handling.

Preparing for Pfizer Pediatric (6 months-4 years, Maroon Cap)

- Plan to organize ultracold freezer and refrigerator to accommodate three Pfizer vaccines

- Ensure staff are educated on the three vaccines and know how to identify which vaccine is for which age group
  - Staff can use both the vial labels and cap colors to differentiate the vaccines

- Ensure staff know the different storage/handling and preparation requirements for the three vaccines
  - Reminder: Pfizer Tris-sucrose (12+ years, **gray cap**) vaccine **does not** require diluent.
  - Pfizer pediatric (6 months-4 years, **maroon cap**) and Pfizer pediatric (5-11 years, **orange cap**) vaccines **do** require diluent.

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Pfizer Pediatric (6 months-4 years, Maroon Cap) Storage and Handling

- [COVID-19 Vaccine Product Guide (eziz.org)](eziz.org)
- Storage and handling for Pfizer pediatric (6 months-4 years, **maroon cap**) is the same as the Pfizer pediatric (5-11 years, **orange cap**) vaccine
  - 10 doses per vial
  - Long-term storage in ultracold freezer
  - Do not store in standard freezer
  - Stored in refrigerator for up to 10 weeks
  - Requires diluent
    - 2.2 mL per vial

Possible Pfizer Shelf-Life Extension

- Pfizer may receive approval for shelf-life extension of its vaccine
  - We heard it may be announced in the next few weeks

- Shelf-life would go from 9 months to 12 months (when stored in ultra-cold temperatures)

- More information to come!

Moderna Booster Vials

- EUA was released: [Moderna COVID-19 Vaccine HCP FS Purple 03292022 (fda.gov)](fda.gov)

- These vials will have a blue cap and a different NDC

- The booster doses pulled out of these "booster only" vials are a 0.5mL volume
  - Booster doses from the current 10 dose vial are a 0.25mL volume

- We will update you with further information when we have it

Vaccine Management

Eric Norton and Claudia Aguiluz, CDPH

What's Next in My Turn? - Release 25*

New updates for My Turn Public and Clinic launched April 6th.

My Turn Public

Release Highlights

- ✓ A new COVID + Flu clinic tag was added so patients can seek out Clinics that offer both vaccine options.

My Turn Clinic

Release Highlights

- ✓ Clinic Managers can deactivate Self Service Clinic Links if they are no longer in use.
- ✓ Clinics have filters added on the Clinics tab.
- ✓ The COVID and flu clinic tag is available to select by Clinic Managers to add to their Clinics.
- ✓ Live Chat button has been redesigned.

What's Next in My Turn - Release 25 (04/06)*
COVID and flu Combo Tag
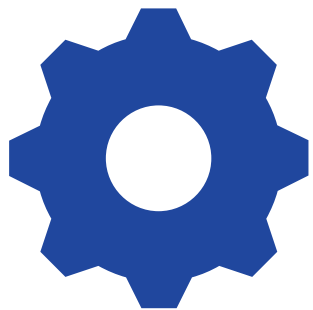
Use the Clinic Settings to add the **COVID and flu tag** to your Clinic on My Turn Public!

If a user is looking for both vaccines and this box is checked, they may seek **you** out!

Clinic Settings

☐ Accept walk-in patients

☐ Allow group scheduling on My Turn ⓘ

☐ COVID & flu tag on My Turn ⓘ

☐ Free flu vaccine offered ⓘ

☐ Nasal spray offered at this clinic ⓘ

☐ Accept pediatric patients only ⓘ

☐ School vaccination site ⓘ

☐ Vendor clinic ⓘ

☐ Enable geofencing ⓘ

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What's Next in My Turn - Release 25 (04/06)*
Clinic Page Filters

Clinics can now be filtered like the Appointments tab

✓ Clinic Name

✓ Address

✓ Vaccine Type

✓ Start Date

✓ Close Date

*Full list of updates in Appendix

What's Next in My Turn - Release 25 (04/06)*
Clinic Link Deactivation

Deactivating the Clinic specific links for any Clinic is as easy as *1, 2, 3*!

1. Navigate to the Clinic you wish to deactivate links for.

2. Click the Clinic Links tab

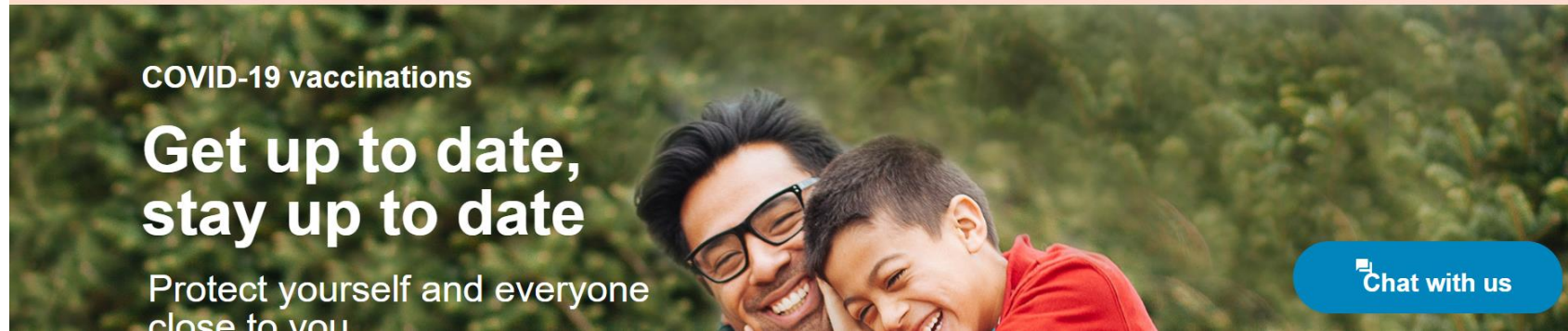3. Select "Deactivate Link" for whichever links you wish to deactivate!

Reminder: Second Booster Doses Now LIVE! (4/6)

Patients can now schedule their 2nd Booster doses on My Turn if they are eligible!

My Turn Clinic Council Reminder

My Turn Clinic Council

Next Council Date:

Thursday, April 14th

4PM

Reminder: My Turn Council is bi-weekly.

What's Next in myCAvax? - Release 24*

New updates for Providers launched April 7th.

Providers

Release Highlights

- ✓ The NEW dynamic landing page for Location Coordinators is available. Coordinators can review tasks, notifications, open orders, and manage vaccine inventory all from one page.
- ✓ Help Text was added to indicate which products you can opt-out of Ancillary Kits for.
- ✓ Waste Events over 1,000 doses are flagged for CDPH review.

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New Landing Page for Location Coordinators*
Changes for **Providers**

The new myCAvax homepage better represents your day-to-day tasks as a Location Coordinator. From the new homepage, you can…

1. Order vaccine, manage inventory and add/update locations

2. View open orders (i.e. awaiting approval and fulfillment) and a PDF describing the shipping cadence

3. Access the Knowledge Center

4. View Chatters

What's Next on myCAvax: Release 24 (04/07)*
Changes for **Providers**

A new callout reminds Providers when ancillary kit opt-out is not available for Pfizer products.

APPENDIX

What's Next on My Turn: Release 25 (04/06)

My Turn Public

General Enhancements

✓ Translation Audit for Public Portal occurred.

✓ A new COVID + Flu clinic tag was added that Clinic Managers can add during clinic creation flow or under Tags tab for the specific clinic.

✓ Public site supports format customization for checkboxes.

✓ A Group Scheduling specific report was created.

My Turn Clinic

General Enhancements

✓ The clinic specific link has an added an Expiration Date column.

✓ The Self-Service Clinic Specific Link has the added Deactivation functionality.

✓ Clinics without 5-11 Vaccine Supply / Inventory are not listed as a walk-in option for individuals in that age range.

✓ Filters were added to the Clinic Tab so that you can sort similarly to the appointments page.

✓ Live Chat Enhancements
  - ✓ Redesign Live Chat Button
  - ✓ Add "in Queue" Chat
  - ✓ Live Chat Identification Fields/Form

✓ Bulk Upload Hybrid Import (CSV File to Bulk) is allowed.

✓ Syncope was added as an Immediate Adverse Reaction.

✓ Flu Add-on Tag Validation on the clinic was executed.

✓ Agree/Decline PII Statement was added.

✓ Hybrid Profiles have been removed.

✓ To Load IIS Search Results, you must use the ENTER key.

✓ 2nd Dose Booster Walk-in & VA flow has been added based on the new guidance.

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What's Next on myCAvax: Release 24 (04/07)

Multi-Line Ordering Enhancements

✓ Help Text was added to Multi-Line Ordering to indicate which products cannot opt-out of Ancillary Kits.

✓ The Doses Requested Minimum Allowed field checks both the TPR and Local fulfillment methods logic to be more representative of the smallest amount based on available ordering options.

✓ Updated the Vaccine Order review with Standard and Small Orders doses requested field with "smart" capabilities.

Order Management

✓ Order fulfillment method defaults to the TPR (AmerisourceBergen) when that is the only method that can accommodate the order specifics.

Order Management

✓ Location Coordinators have an updated dynamic landing page. Coordinators can review tasks, notifications, open orders, and manage vaccine inventory.

Vaccine Orders

✓ The default value of Doses Requested adjusts to 0 and no longer creates orders if the field is 0 or blank.

✓ The account fields for the Standard and Small Order creation flows on the Vaccine Order Review page have been changed from picklist fields to lookup fields. LHDs and MCEs can now search for their accounts by account name and COVID ID.

Waste Events

✓ Waste Events with reported doses over 1,000 are now flagged on the Waste Event record for review. Waste events can now only be able to be created with a maximum of 9,999 records per waste.

Enrollment

✓ The location tab view was updated such that rejected applications will be removed from the tab.

Live Support Schedule – *Easter Sunday*

My Turn and myCAvax Help Desk

Closed Operation
- April 17th

Help Desk Support will resume on Monday, April 18th

myCAvax – Known Issues - *Updated 4/7*

Known Issues

'Inventory On Hand' Creation Issue

- ✓ We fixed an issue in which inputting 'On Hand Inventory' data into the multi-line ordering form is not creating 'Inventory On Hand' related records when you 'Submit' your order. This is however working correctly, if you 'Save as Draft'.

Intended Use Column

- ✓ LHDs and MCEs may see the intended use column on the Vaccine Order Review page. This was corrected in Release 24.

Excessive Order Emails

- ✓ We are investigating an issue where some providers are getting emails for orders from all their related locations/organizations. Only the primary and backup coordinators for the location should be getting order emails

Workaround/Next Steps

- ✓ Fix: 4/7
- ✓ This has been corrected with Release 24.
- ✓ Please keep your VaccineFinder data up-to-date

- ✓ Fix: 4/7
- ✓ This has been corrected with Release 24.

- ✓ Fix: 4/7
- ✓ This has been corrected with Release 24.

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Wrap-up

Leslie Amani, CDPH

Additional Support

Type of Support	Description	Updated 12.29.21

COVID-19 Provider Call Center

The COVID-19 Call Center for Providers and Local Health Departments is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution, including the Vaccine Marketplace.

- Email: covidcallcenter@cdph.ca.gov
- Phone: (833) 502-1245, Monday through Friday from 8AM–6PM

Enrollment Support

For Provider enrollment support, please contact myCAvax Clinic Operations at

- Email: myCAvaxinfo@cdph.ca.gov

myCAvax Help Desk

Dedicated staff provide up-to-date information and technical support on the myCAvax system.
- Email: myCAvax.HD@Accenture.com
- Phone: (833)-502-1245, option 3, Monday through Friday 7AM–7PM, Saturday and Sunday 8AM-1PM

For training opportunities: https://eziz.org/covid/education/

My Turn Clinic Help Desk

For **onboarding support** (those in the process of onboarding): myturnonboarding@cdph.ca.gov

For **technical support** with My Turn Clinic for COVID-19 and flu vaccines: MyTurn.Clinic.HD@Accenture.com or (833) 502-1245, option 4: Monday through Friday 7AM–7PM, Saturday and Sunday 8AM–1PM.

For job aids, demos, and training opportunities: flu at https://eziz.org/covid/myturn/flu/ and COVID at https://eziz.org/covid/myturn/

Archived Communications

For archived communications from the COVID-19 Provider Call Center about the California COVID-19 Vaccination Program visit

- Website: EZIZ Archived Communications

Provider Office Hours Q&A

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

Thank you!

Monday:

My Turn myCAvax Office Hours

Next session: Monday, April 11, 12 PM

Friday:

Provider Office Hours

Next session: Friday, April 15 9 AM