California Department of Public Health Immunization Updates for Providers
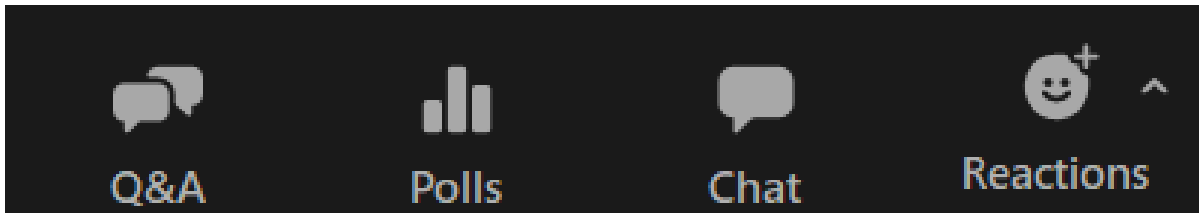
Friday, October 6, 2023

9:00AM – 10:30AM

Questions

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

Resource links will be dropped into, "Chat"

Housekeeping

Reminder to Panelists:

Please mute yourself when not speaking.

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

Reminder to Attendees:

Today's session is being recorded. Access today's slides and archived presentations at: CDPH Immunization Updates for Providers_10.6.23

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

Agenda: Friday, October 6, 2023

No.	Item	Speaker	Time (AM)
1	Welcome and Announcements	Leslie Amani (CDPH)	9:00 – 9:05
2	Clinical Guidance: RSV	Caterina Liu, MD (CDPH)	9:05 – 9:15
3	RSV Insurance Coverage	Edward Salaguinto, PharmD, RPh (CDPH)	9:15 – 9:20
4	Information and Education: Respiratory Syncytial Virus (RSV)	Edgar Ednacot, PhD (CDPH)	9:20 – 9:25
5	Vaccines for Children (VFC): RSV	Claudia Aguiluz (CDPH)	9:25 – 9:30
6	Clinical Update: COVID-19 Vaccine	Caterina Liu, MD (CDPH)	9:30 – 9:35
7	Storage and Handling	Katherine McHugh (CDPH)	9:35 – 9:40
8	Vaccine Management	Josh Pocus (My Turn) and Claudia Aguiluz (myCAvax)	9:40 – 9:50
9	COVID-19 Vaccine Access: Pharmacy	Edward Salaguinto, PharmD, RPh (CDPH)	9:50 – 9:55
10	Resources	Leslie Amani (CDPH)	9:55 – 10:00
11	Q&A	CDPH Subject Matter Experts	10:00 – 10:30

Thank you, California Providers!

Announcements

Leslie Amani, CDPH

Virtual Grand Rounds

When: Tuesday, October 10, 2023

Time: 12PM – 1PM, PDT

Topic: Opioid Treatment: Practical

Guidance for Clinicians

Register **here**

Webinar: Virtual Grand Rounds - Opioid Treatment - Practical Guidance for Clinicians

Join CDPH and the California Medical Association for a conversation about California's escalating opioid epidemic, the availability of naloxone over the counter, and buprenorphine and methadone (opioid dependence treatments). Additionally, CDPH Assistant Deputy Director, Dr. James Watt, will present updates on COVID-19 and the current status of vaccine recommendations for the fall.

Tuesday, October 10, 2023
12:00 p.m. to 1:00 p.m. PDT
Register for free

Register

Virtual Grand Rounds
EMERGING PUBLIC HEALTH ISSUES

Webinar: Respiratory Syncytial Virus (RSV)

When: Monday, October 16, 2023

Time: 12PM – 1PM, PDT

Register **here**

Please join CDPH for a webinar focused on

"Nirsevimab Updates and Implementation Guidance and Considerations" and other RSV-related content.

Please share the invitation with LHD staff, Providers, and other healthcare staff that can benefit from this webinar.

📅 Upcoming COVID-19 Crucial Conversations Webinar

Topic: Talking with Patients about the Fall COVID-19, Flu, and RSV Season

Description: Learn how to effectively communicate with patients about the upcoming respiratory virus season and strategies for increasing vaccine administration.

Speaker: Dr. Ilan Shapiro

When: Wednesday, October 18, 2023

Time: 12PM - 1PM PT

Please register here

📅 SGF Flu Vaccine Management 102 for Providers

When: Monday, October 23, 2023

Time: 12PM – 1PM

Audience: Providers

Register **here**

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

Bridge Access Program myCAvax Office Hours

When: Thursday, October 26, 2023

Time: 11AM – 11:30AM

Audience: Providers and LHDs

Register **here**

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

Mpox Webinar

When: Thursday, October 26, 2023
Time: 12PM – 1PM, PDT
Register **here**

Learning Objectives

- Identify the clinical and epidemiological factors leading to mpox infection, transmission, and severity as well as treatment options.

- Apply the latest information and research on mpox, including transmission characteristics, vaccine equity, and vaccine effectiveness, to your clinical practice to ensure patients are appropriately vaccinated, diagnosed, tested, and treated for mpox.

CA MPOX Provider & LHJ Alerts

October 3, 2023

California Mpox Update for Healthcare Providers - October 2023

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

California Mpox Update for Healthcare Providers
Thursday, October 26, 2023
12:00 - 1:30 PM (PDT)
REGISTER TODAY!

Job Aid: Vaccine and Clinic Eligibility by Funding Source

Vaccine and Clinic Eligibility Guidelines by Funding Source

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

Program	VFC — Vaccines for Children Program	BAP — Bridge Access Program	317 — Local Health Departments[1]	VFA — Vaccines for Adults Program	SGF — State General Funds[2]
Funding	VFC-Federal entitlement program for eligible children. Funds are used to pay for vaccines recommended by ACIP and approved into the VFC program.	BAP-Limited federal funds (Section 317) for eligible adult populations to maintain access to COVID-19 vaccines through existing public health infrastructure.	317-Limited federal funds (Section 317) used to pay for adult vaccines recommended by ACIP and support limited vaccine supply for outbreak activities via Public Health Departments.	317-Limited federal funds (Section 317) used to pay for adult vaccines recommended by ACIP and included in the VFA Program.	Limited state funds for the purchase of vaccines to prevent respiratory illness.
Age and Eligibility	**Children Birth–18 years:** • Medi-Cal/CHDP eligible • Uninsured (no health insurance) • American Indian or Alaskan Native • Underinsured: health insurance does not cover vaccines (ONLY if the LHD has a FQHC or RHC designation).	**Adults 19 years and older:** • Uninsured (no health insurance) • Underinsured (vaccines are not covered by insurance) (Adults with Medicare part B and D are considered insured and not eligible to receive 317 BAP vaccines.)	**Adults 19 years and older:** • Uninsured adults (no health insurance) • Underinsured adults (vaccines are not covered by insurance) • Insured exceptions-Adults part of outbreak control, post-exposure prophylaxis, or disaster relief efforts as approved by CDPH & LHDs. • Household contacts or sexual contacts of HBsAg+ pregnant woman	**Adults 19 years and older:** • Uninsured adults (no health insurance) • Underinsured adults (vaccines are not covered by insurance)	**All ages:** • No restrictions
Clinic Type	• Federally Qualified Health Center (FQHC), Rural Health Center (RHC), and State-licensed • Community Health Centers • Health Department and CDPH Approved Health Department Authorized Sites • Juvenile halls/youth correctional facilities • Private providers, School-based clinic, Hospitals, Pharmacies (pilot program)	• Health Department Clinics • Federally Qualified Health Center (FQHC), Rural Health Center (RHC) • Tribal Clinics • Indian Health Services • Limited sites designated by Local Health Department as BAP Provider	• Health Department and CDPH Approved Health Department Authorized Sites (HDAS) • Juvenile halls/youth correctional facilities (for 19-25 years of age)	• VFC enrolled Federally Qualified Health Center (FQHC), Rural Health Center (RHC)	• State-licensed Community Health Centers • Federally Qualified Health Center (FQHC), Rural Health Center (RHC) • Health Department and CDPH Approved Health Department Authorized Sites (HDAS) • Private provider • School-based clinic

California Department of Public Health, Immunization Branch

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(Partial page 2 visible:)

	Dept.	Vaccines for Adults Program (VFA)	State General Funds (SGF)
		• Hepatitis A • Hepatitis B • HPV • Meningococcal Conjugate (MenACWY) • MMR • Pneumococcal Conjugate (PCV20) • Td only when Tdap is not indicated • Tdap • Varicella • Zoster	• Influenza • Tdap (children only)

myCAvax — California Vaccine Management System for flu vaccine (refer to your LHD for other vaccines)

...re plans are considered fully insured). 317 vaccine may not be used in travel clinic settings.
...Status (EZIZ.org/assets/docs/IMM-1247.pdf) for more details.
...VFA Eligibility Based on Insurance Status (EZIZ.org/assets/docs/IMM-1247.pdf) for more details.

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

Discontinuation of COVID-19 Vaccine Webpage
COVID-19 Vaccine Archived Communications Webpage on EZIZ

The COVID-19 Vaccine Archived Communications Webpage has been discontinued.
Please see below relevant links to previous communications

- FDA Authorizes Updated Novavax COVID-19 Vaccine_10.4.23

- Weekly Wrap Up: Provider Webinars Have Transitioned, Impacts to Immunization Services with Government Shut Down, myCAvax Changes_9.29.23

- myCAvax Release Notes for Providers_9.25.23

- CDC Letter: Discontinuation of U.S.G. COVID-19 Vaccination Program & Resources to Access & Order COVID-19 Vaccines_9.22.23

- CDC Recommends Updated 2023-2024 COVID-19 Vaccines for Everyone 6 Months and Older_9.13.23

Display Location on Vaccines.gov

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

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

1. Set location for BAP participation

2. Set up vaccine availability at your location

3. Make vaccine availability visible on Vaccines.gov

Questions?

Email CARS_HelpDesk@cdc.gov or call 833-748-1979.

Indigenous Peoples' Day: Monday, October 9, 2023
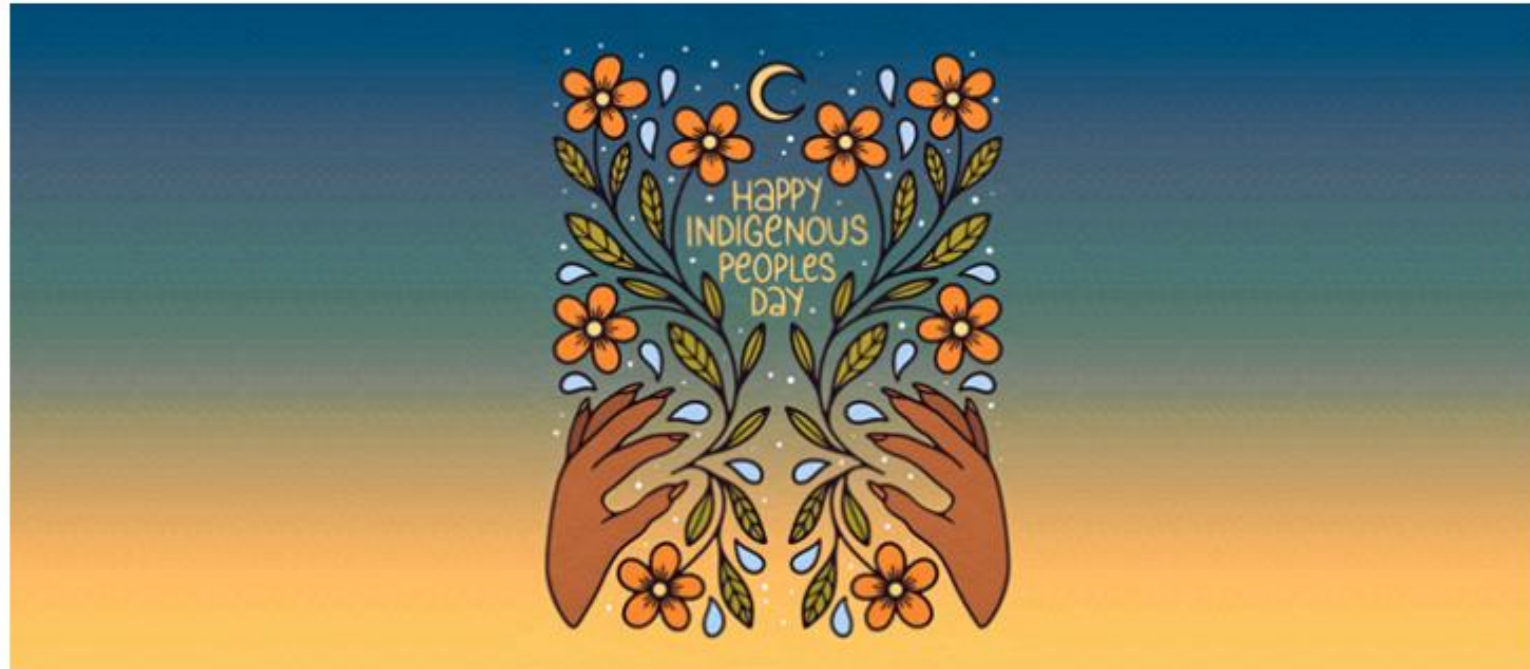
Indigenous Peoples' Day honors the histories, cultures, and perspectives of Indigenous peoples and their ancestors who lived on the land now known as North America. They existed in these areas for thousands of years before the first European explorers arrived. Indigenous Peoples' Day is celebrated annually on the second Monday in October. This year, it will be observed on Monday, October 9.

October is Breast Cancer Awareness Month

Link: FDA Office of Women's Health Pink Ribbon Guide

Pink Ribbon Guide - Mammography Matters

Share | Tweet | Linkedin | Email | Print

Many of us know someone who has been affected by breast cancer—a friend, mother, sister, or maybe even yourself. Approximately one in eight women in the United States will get breast cancer during their lifetime. Each year, more than 40,000 women die from breast cancer. Early detection of breast cancer can help improve a woman's chance of survival.

Although mammograms cannot prevent breast cancer, a mammogram is the best primary screening tool to find breast cancer early when it is easier to treat and before it is big enough to feel or cause symptoms. Women should ask their healthcare provider if and when a mammogram is right for them.

The FDA Office of Women's Health launched the **Pink Ribbon Sunday Mammography Awareness Program** in 1998 to educate women about early detection of breast cancer through mammography. Pink Ribbon Sunday originally targeted African American and Hispanic churches.

Spread the word. Mammograms help save lives.

6 Tips to Stay Healthy this Cold & Flu Season

- Stay Up to Date on Vaccines
- Stay Home & Test If Sick
- Seek Treatment
- Consider Masking
- Wash Hands
- Cover Your Cough

SLOW THE SPREAD

CDPH Office of Communications

New Resources: Respiratory Virus Prevention

Respiratory viruses like flu, COVID-19, and RSV circulate year-round in California, but are typically more active in fall and winter. Use these resources to remind people to take simple actions to lower their chances of getting and spreading respiratory viruses.
Visit our new Respiratory Virus webpage.
Share messages from our Respiratory Virus Prevention toolkit.

Share our messages on social media.

Suggested message: Respiratory viruses like flu, COVID-19 and RSV spread more easily in the fall and winter months. Avoid getting sick this cold and flu season and do your part to help keep yourself and your community healthy.

Visit MyTurn.ca.gov to schedule your vaccines.
#stopthespread

Respiratory Syncytial Virus (RSV) Segment

Clinical Guidance: RSV Immunizations

Caterina Liu, MD, CDPH

2023 CDC Immunization Schedules Updated

- CDC Immunization Schedules typically updated in February

- New addenda summarize recommendations adopted in 2023 for COVID-19, RSV, poliovirus, and influenza:

  - Recommended Child and Adolescent Immunization Schedule, United States, 2023

  - Recommended Adult Immunization Schedule, United States, 2023

- By publishing updated official schedules now, CDC reduces the time between new recommendations and insurance coverage for the new recommendations, as required by the Affordable Care Act.

RSV Immunization Products Overview

Infants & Toddlers
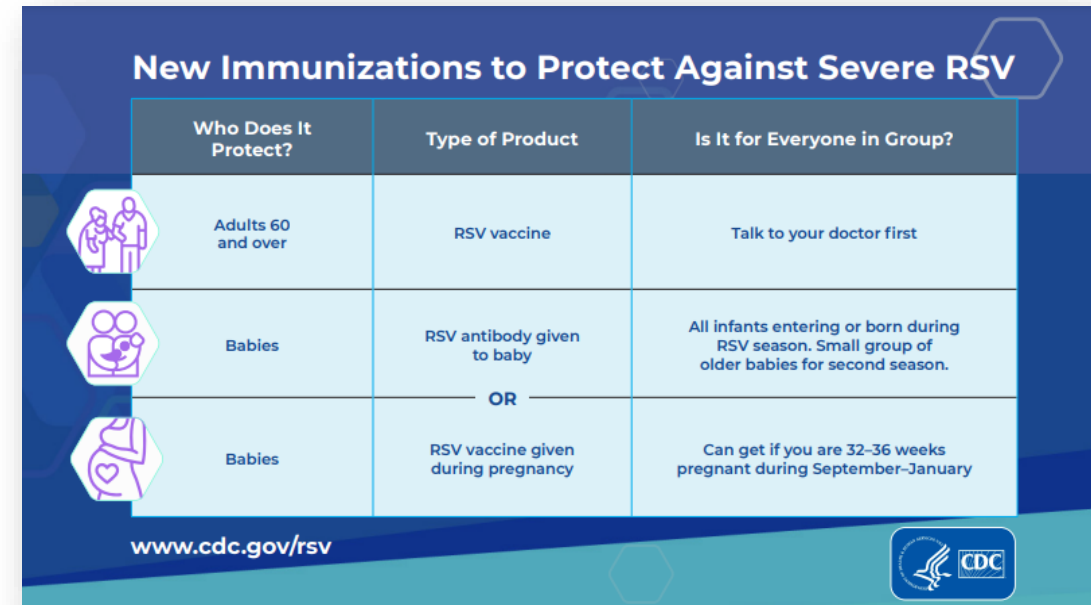
- One dose of nirsevimab is recommended for all infants younger than 8 months of age who are born during — or entering — their first RSV season

- One dose of nirsevimab is recommended for infants 8 through 19 months of age who are at higher risk of severe disease shortly before, or during, their second RSV season.

Pregnant People

- RSV vaccine administered between 32 – 36 weeks of pregnancy, between September-January

Older adults

- Adults 60 years and older may be eligible for an RSV vaccine, under shared clinical decision making with their health care provider

CDC RSV Immunization Infographic

RSV Vaccines Approved for Adults Ages ≥ 60 Years
Single dose, Intramuscular Injection

RSVPreF3 (AREXVY™, GSK)

- 120ug RSVpreF3

- Adjuvant: AS01E^

- 83% reduction in risk of RSV-associated lower respiratory tract disease*

RSVPreF (ABRYSVO™, Pfizer)

- 60ug each of RSVpreF A and RSVpreF B

- No adjuvant

- 86% reduction in risk of RSV-associated lower respiratory tract disease* with ≥3 symptoms

*Lower respiratory tract disease signs/symptoms include cough, sputum, and difficulty breathing.
^Similar to adjuvant used for Shingrix (half dose of same components)

RSV Vaccines for Older Adults: Safety

Frequency of Adverse Event	RSVPreF3 (AREXVY™, GSK)	RSVPreF (ABRYSVO™, Pfizer)
Pain at injection site	61%	11%
Fatigue	34%	16%
Myalgia	29%	10%
Headache	27%	13%
Arthralgia	18%	*Not reported*

Serious adverse events under monitoring:
- Guillain-Barré Syndrome & other immune-mediated demyelinating conditions
- Supraventricular arrhythmias

Older Adult RSV Vaccine Recommendations

- Adults aged 60 years and older may receive a single dose of RSV vaccine, using shared clinical decision-making.

- Give as early as vaccine supply becomes available and continue to offer vaccination to eligible adults who remain unvaccinated.

- Co-administration of RSV vaccines with other adult vaccines during the same visit is a recommended option.

Shared Clinical Decision-Making Guidance

- Base the decision to vaccinate on discussion between the provider and the patient, guided by:
  - the patient's risk for disease and their characteristics, values, and preferences
  - the provider's clinical discretion
  - vaccine characteristics

- Consider factors associated with severe RSV-associated disease:
  - chronic medical conditions
  - frail or advanced age*
  - Residents of nursing homes and long-term care facilities*
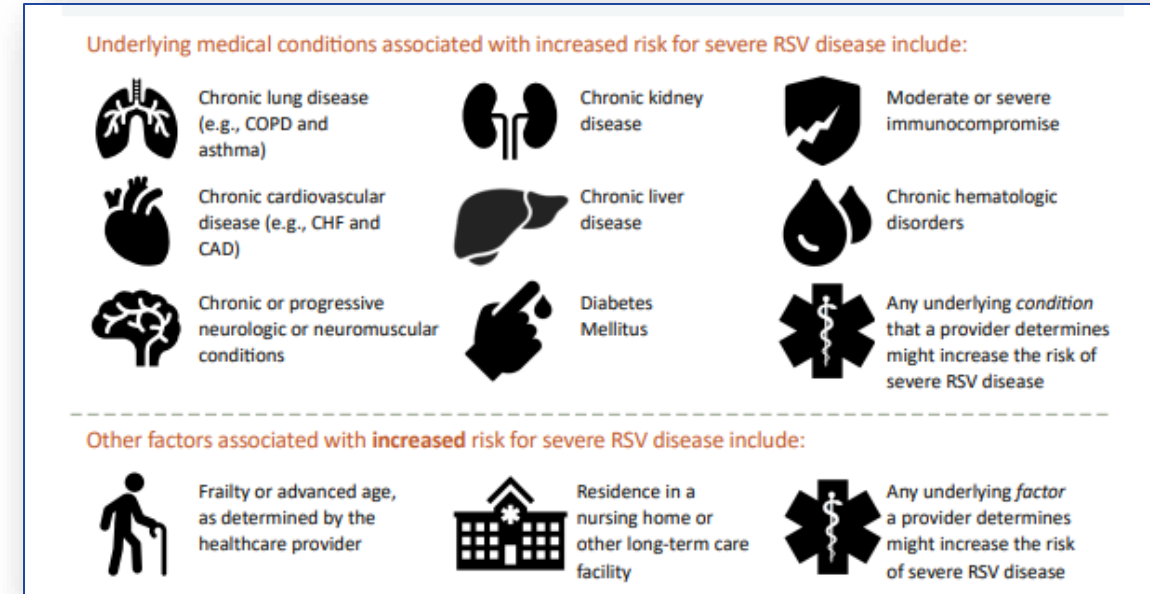
  *Limited enrollment of these populations in clinical trials

Underlying medical conditions associated with increased risk for severe RSV disease include:

- Chronic lung disease (e.g., COPD and asthma)
- Chronic kidney disease
- Moderate or severe immunocompromise
- Chronic cardiovascular disease (e.g., CHF and CAD)
- Chronic liver disease
- Chronic hematologic disorders
- Chronic or progressive neurologic or neuromuscular conditions
- Diabetes Mellitus
- Any underlying *condition* that a provider determines might increase the risk of severe RSV disease

Other factors associated with **increased** risk for severe RSV disease include:

- Frailty or advanced age, as determined by the healthcare provider
- Residence in a nursing home or other long-term care facility
- Any underlying *factor* a provider determines might increase the risk of severe RSV disease

[Flyer Link]

RSV Immunizations to Protect Infants & Toddlers

CDC Recommends RSV Vaccine for Pregnant People

- RSV vaccine (RSVpreF, ABRYSVO™) is recommended for pregnant people at 32 through 36 weeks of pregnancy during the months of September through January to prevent RSV infections in their infants.

- People can receive the RSV vaccine on the same day as other vaccines recommended during pregnancy, including Tdap, COVID-19, and influenza.

- Most infants will likely only need protection form either the prenatal RSV vaccine or infant immunization, but not both.

- Healthcare providers of pregnant people **should provide information on both products and consider patient preferences** when determining whether to vaccinate the pregnant patient.

RSV Immunization for Infants and Toddlers

- An [RSV immunization](#) called nirsevimab (Beyfortus^{TM}) can help protect infants and toddlers from severe RSV illness.

- The antibodies in nirsevimab are just like those that develop after a typical vaccine.

- RSV immunization is recommended for:

  - All infants aged < 8 months born during or entering their first RSV season, including those recommended by the AAP to receive palivizumab.
  - Infants and children aged 8-19 months who are at increased risk of severe RSV disease and entering their second RSV season, including those recommended by AAP to receive palivizumab.

Nirsevimab: Dosing and Timing of Administration

- Dose depends on age and weight

- Infants born shortly before and during the RSV season should receive nirsevimab within the first week of life, including in hospital settings.

- Offer nirsevimab now, as soon as supplies become available.

- Protection is expected to last at least 5 months, about the length of an RSV season

- Co-administration of nirsevimab with other routine pediatric vaccines during the same visit is a recommended option.

Nirsevimab (Beyfortus) Guide (CDPH)

Nirsevimab Frequently Asked Questions (aap.org)

Nirsevimab: 8 -19-Month-Old High-Risk Eligibility Criteria

- Chronic lung disease (CLD) of prematurity who required medical support at any time during the 6 months (steroids, diuretics, oxygen) before the start of RSV season.

- Severe immunocompromise

- Cystic fibrosis who have either 1) severe lung disease or 2) weight for length <10%

- American Indian and Alaska Native children (this group is newly recommended in contrast to current palivizumab recommendations).

- Detailed information on palivizumab eligibility can be found in AAP Red Book and the 2014 guidance for palivizumab for RSV prophylaxis.

What if nirsevimab is not available for my high-risk patient?

- If nirsevimab is not available and the child is eligible to receive palivizumab, then palivizumab may be administered.

- If < 5 doses of palivizumab are administered and nirsevimab becomes available, the child should receive 1 dose of nirsevimab.

- The recommended minimum interval between palivizumab and nirsevimab is 30 days

- No further palivizumab should be administered following receipt of nirsevimab.

Efficacy of RSV Immunizations to Protect Infants

Product	Age	Reduction in RSV-associated lower respiratory tract disease (LRTD)	Reduction in severe RSV-associated LRTD
Abrysvo™ Vaccine given at 32-36 weeks of pregnancy	Infants <90 days old	34.7%	91.1%
Abrysvo™ Vaccine given at 32-36 weeks of pregnancy	Infants <180 days old	57.3%	76.5%
Beyfortus™ (Nirsevimab)	Infants < 150 days old	79%	80.6%

*lower respiratory tract disease signs/symptoms include cough, sputum and difficulty breathing

ABRYSVO | FDA
Clinical guidance for use of products to prevent RSV disease in infants (CDC Webinar 9/27/23)

RSV Immunization Safety

Prenatal RSV Vaccine

- In the clinical trials, the side effects most often reported by pregnant people were pain at the injection site, headache, muscle pain, and nausea.
- Pre-eclampsia occurred in 1.8% of pregnant people who received the RSV vaccine compared to 1.4% of pregnant people who received a placebo.
- The clinical trials identified a small increase in the number of preterm births in vaccinated pregnant people. It is not clear if this is a true safety problem related to RSV vaccine or if this occurred for reasons unrelated to vaccination.

Nirsevimab

- Side effects after nirsevimab were uncommon in clinical trials. The most common side effects are pain, redness, or swelling at the injection site, and a rash. No serious allergic reactions occurred in the clinical trials.

Reporting Adverse Events

- Report adverse events following vaccination to **VAERS**

- *Nirsevimab considerations:*

   o Report side effects that happen after getting nirsevimab to the **MedWatch website** or by calling 1-800-FDA-1088.

   o If a child also received *any* vaccine on the same day as nirsevimab, the side effects also may be reported to VAERS.

RSV Vaccine Insurance Coverage

Edward Salaguinto, PharmD, RPh, CDPH

RSV Vaccine Covered by Medi-Cal & Medicare Part D

- Currently covered only as a **pharmacy benefit** currently for Medi-Cal & Medicare Part D
- Managed Medi-Cal may possibly be covered in MD office per plan.

Medi-Cal Rx Contract Drugs List

Effective 10/01/2023

DHCS

Drug Name	Dosage	Strength/Package Size	Billing Unit	UM Type	Code I
Topical & Local Preparations: Vaccines					
Abrysvo (Respiratory Syncytial Virus Vaccine) *	Vial	120 mcg/0.5 ml	ea		* Use of this vaccine must be based on the guidelines published by the Centers for Disease Control and Prevention (CDC).
Arexvy (Respiratory Syncytial Virus Vaccine, Adjuvanted) *	Kit	120 mcg/0.5 ml	ea	AL	* Restricted to: 1) Medi-Cal beneficiaries 60 years of age and older. 2) Use of this vaccine must be based on the guidelines published by the Centers for Disease Control and Prevention (CDC).

Respiratory Syncytial Virus (RSV) Vaccines Arexvy™ and Abrysvo™ Now on the Contract Drugs List (dhcs.ca.gov)

Nirsevimab Coverage

- Definition of "Vaccine"
  - No statutory definition of vaccine in the statute for the Vaccines for Children (VFC) program (section 1928 of the Social Security Act)
  - No statutory definition of vaccine in the Affordable Care Act (section 2713 of PHS Act), or its implementing regulations, which has a provision that mandates coverage of vaccine recommendations included on CDC's immunization schedules

- Nirsevimab is recommended by ACIP
  - **covered by insurance**
  - included in the **VFC program**
  - Important for ensuring equitable access to nirsevimab

- Approximately 10% of birthing hospitals participate in the VFC program

- Pharmacy involvement: unknown – unlikely in the first season.

Information and Education: RSV

Edgar Ednacot, PhD, CDPH

Stay Healthy this Virus Season

6 Tips for Staying Healthy this Virus Season

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

Stay Up to Date on Vaccines
Vaccines are the best protection against severe illness. Visit MyTurn.ca.gov to schedule your vaccines or contact your health care provider.
- **Flu and COVID-19 vaccines** are available for everyone 6 months and older.
- **RSV immunizations** are available for infants and some young children, pregnant people and adults 60 years and older.

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

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

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

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

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

Scan the QR code to see interactive links on this flyer

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FALL-WINTER 2023-24 IMMUNIZATIONS

	Who is eligible?	What immunizations are recommended?	When should I get it?
Influenza	6 months and older	Flu vaccines target 4 strains of flu and are available as a shot or nasal spray. Flu vaccine prevents millions of illnesses and flu-related doctor's visits each year.	September or October are ideal, but catching up later can still help.
COVID-19	6 months and older	Updated COVID-19 vaccines target the Omicron XBB strain to protect against COVID-19 this fall and winter	Get it now to help protect against severe disease (if at least two months since your last COVID-19 shot).
RSV (Pregnant Persons)	Pregnant persons during weeks 32-36 of pregnancy	RSV vaccine to reduce the risk of severe RSV disease in infants (baby will receive protection that lasts for months after birth)	Recommended from September to January to help protect your baby during RSV season
OR			
RSV (Infants and Toddlers)	All infants from birth to 8 months and children 8-19 months at high risk of severe RSV disease	Immunization contains preventive antibodies that help fight RSV infections and protect children from getting very sick.	Before or during RSV season, usually October-March
RSV (Older Adults)	60 years and older	RSV vaccine to protect older adults against RSV disease	Available now - Talk with your doctor to determine if vaccination is right for you.

Where to get vaccinated?
- Contact your doctor or local pharmacy. Influenza and COVID-19 vaccines continue to be free for most people through their private, Medi-Cal or Medicare insurance plans.
- Check with your insurance on timing of RSV immunization coverage.
- You can receive influenza, COVID-19 and/or RSV immunizations during the same visit.
- Adults without health insurance can get no cost COVID-19 vaccine at many pharmacies and clinics participating in the Bridge Access Program. Visit vaccines.gov to find the nearest location.
- Children who are Medi-Cal eligible, American Indian/Alaskan Native, uninsured and underinsured may get no cost vaccines through the Vaccines for Children Program.

Thanks to Katelyn Jetelina, PhD, MPH and Caitlin Rivers, PhD, MPH for allowing CDPH to adapt this resource.

California Department of Public Health | Immunization Branch   IMM-1481 (10/23)

New RSV Resources Webpage

- **RSV FAQs**

- **Nirsevimab Timing Guide**

- CDC Clinical Recommendations

- Patient Resources

Upcoming Educational Opportunities

- Clinical considerations for prevention of RSV in children American Academy of Pediatrics (AAP) Tuesday, October 10, 2023, at 4PM, PST Registration Link

- Nirsevimab implementation strategies in outpatient practices (AAP); Tuesday, October 17, 2023, at 5PM, PST. Registration Link

- Clinical Update on the 2023 Respiratory Virus Season (CDC Current Issues in Immunization Webinar), Wednesday, October 18, 2023. Time: TBD

- Crucial Conversations: Talking with patients about RSV, COVID-19 and Flu Immunizations, Wednesday, October 18, 12PM-1PM Registration Link

Vaccines for Children (VFC): RSV

Claudia Aguiluz, CDPH

Pediatric RSV in VFC!

- Beyfortus™ is expected to become available starting mid-October through the Vaccines for Children (VFC) Program.

- Detailed information regarding Beyfortus™ and ordering will be communicated to all VFC Providers when available.

- As with COVID-19 Vaccines, VFC Providers who see patients in that age group will be required to offer Beyfortus™, along with all other age-appropriate ACIP recommended vaccines.

RSV in VFC's Order Form

Estimating Initial Orders for Beyfortus™

Infants <8 Months Entering 1st RSV Season

- Look at newborn patients served per month during the fall and winter months; use data estimate overall number of monthly doses needed
  - Determine % patients are likely to be under 5kg and over 5kg to determine how much of each formulation to order

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

- Determine estimated number of high-risk children for which RSV will be indicated if entering their 2nd RSV season
  - Determine patient estimates per month, and order 2X this amount for the 100mg formulation

Include eligibility and insurance coverage for the calculations above to determine orders for privately purchased doses and VFC doses

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

Nirsevimab should be given before the start of RSV season (usually October-March). The dosage depends on age, weight, and health condition. View CDC's RSV page for web version and additional guidance.

All Infants <8 Months Entering 1st RSV Season
without prenatal vaccination during 32-36 weeks gestational age*

If born October-March
1 dose in <1 week of birth

If born April-September
1 dose in October/November

Weight <5kg — Nirsevimab 50mg
OR
Weight ≥5kg — Nirsevimab 100mg

or as soon as possible during the RSV season

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

200mg dose before RSV season

Nirsevimab** 100mg + Nirsevimab** 100mg

or as soon as possible during the RSV season

(Two 100mg syringes, same day, different sites, regardless of weight)
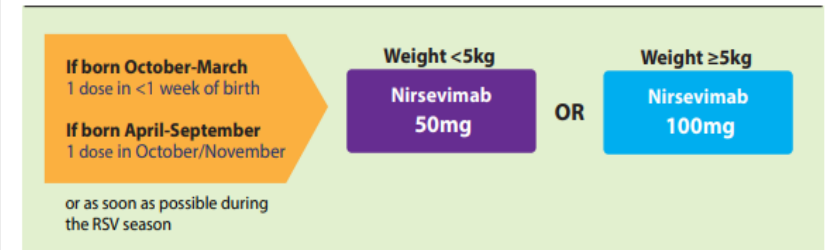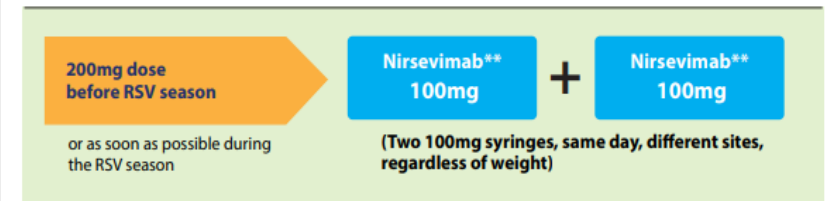
High-risk conditions include:

- **Chronic lung disease of prematurity that required medical support** (chronic corticosteroid therapy, diuretic therapy, or supplemental oxygen) any time during the 6-month period before the start of the RSV season.
- **Cystic fibrosis with either:**
  1. Manifestations of severe lung disease (previous hospitalization for pulmonary exacerbation in the 1st year if life or abnormalities on chest imaging that persist when stable OR
  2. Weight-for-length <10th percentile
- **Severe immunocompromise**
- **American Indian or Alaskan Native children**

* In limited situations, an infant may be recommended to receive RSV immunization after prenatal vaccination.

** If nirsevimab is unavailable and the child is eligible to receive palivizumab, then palivizumab should be administered. If < 5 doses of palivizumab are administered and nirsevimab becomes available, the child should receive 1 dose of nirsevimab.

California Department of Public Health, Immunization Branch EZIZ.org

IMM-1480 (10/2/23)

COVID-19 Vaccine Segment

Clinical Update: COVID-19 Vaccine

Caterina Liu, MD, CDPH

Novavax 2023-2024 COVID-19 Vaccine Now Authorized

- Individuals 12 years of age and older previously vaccinated with a COVID-19 vaccine (and who have not already been vaccinated with a recently updated mRNA COVID-19 vaccine) are eligible to receive one dose at least 2 months after their last dose.

- Unvaccinated individuals are eligible receive two doses.

- Immunocompromised individuals are eligible for an additional dose of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) at least 2 months following the last dose of a COVID-19 vaccine (2023-2024 Formula). Additional doses of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) may be administered at the discretion of the healthcare provider,.

- **Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) is no longer authorized for use in the United States and should no longer be used.**

Novavax Vaccine Resources

- Detailed CDC clinical guidance expected soon; ACIP not expected to meet again, as data was already reviewed at recent ACIP meeting.

  o Check CDC Product Page for updated Novavax standing orders (not yet posted)

- Updates to CDPH materials are coming soon.

- Updated Novavax FDA Materials

  o Fact Sheet for Healthcare Providers Administering Vaccine

  o Fact Sheet for Recipients and Caregivers

Storage and Handling

Kate McHugh, CDPH

What to Do with Deauthorized Novavax Vaccine

⚠️ Quarantine deauthorized Novavax vaccine to prevent administration errors!

📄 Report doses as "Waste" in myCAvax and use "Other" to add comment "deauthorized"!

🗑️ Dispose of vaccines following practice protocols; vaccines may be disposed of in a pharmaceutical waste container, or a comingled pharmaceutical/Sharps waste container!

Vaccine Management

Josh Pocus, My Turn, and Claudia Aguiluz, myCAvax, CDPH

What is My Turn?

My Turn is a platform that connects patients with tools and resources to receive vaccinations and provides Clinic Managers (CMs) and Vaccine Administrators (VAs) with the tools to manage vaccination clinics.

Screenshot of the My Turn Public portal
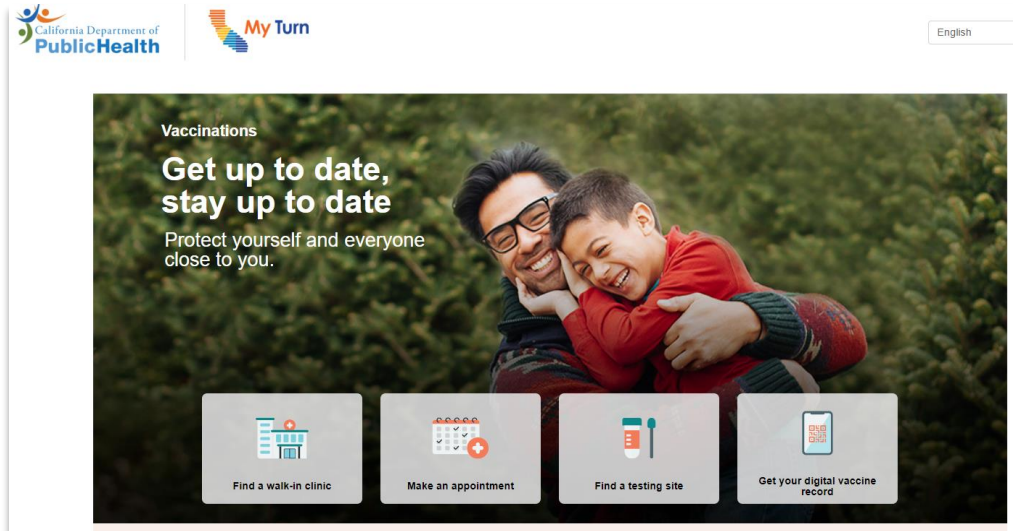
On My Turn:

✓ CMs set up clinics, schedule hours of operation, and add vaccine inventory and vaccine supply.

✓ Patients book appointments using My Turn Public.

✓ VAs manage appointments, vaccinate patients, and record vaccination data.

CAIR2 System Maintenance

Due to scheduled system maintenance, CAIR2 will be unavailable on **Sunday, October 8, 2023**, from **7:00 AM – 12:00 PM PT**.

During this time, all administration data will be queued and submitted once the scheduled downtime is complete.

What to Expect: My Turn and COVID-19 Vaccine Updates

Privately-funded COVID-19 Vaccine Providers will need to:

Remove deauthorized vaccine supply. Do not remove deauthorized vaccine inventory to ensure continued historical vaccine appointment upload.

Add new vaccine supply* and inventory. Mark the supply for **insured** populations. Add / update a required clinic phone number and clinic availability.

Update all existing appointments for the deauthorized COVID-19 vaccine.

Bridge Access Program (BAP) Providers will need to:

Remove deauthorized vaccine supply. Do not remove deauthorized vaccine inventory to ensure continued historical vaccine appointment upload.

Add new vaccine supply* and inventory. Mark the supply for **uninsured** populations. Add / update a required clinic phone number and clinic availability.

Update all existing appointments for the deauthorized COVID-19 vaccine.

*NOTE: Vaccine supply is now distinguished by insurance status and will impact public clinic tags and scheduling.

Mass Vax Alternative Functionality

Mass Vax Alternative (name TBD) is a new tool being added to the My Turn system that will provide a quick and easy way to upload vaccination data directly to CAIR2. It will enable a Provider a simple multi-line form to enter, submit, and update vaccinations in CAIR. The My Turn team is working to add all supported vaccines to the tool so that providers can utilize it for any vaccine they provide to patients.

How is this different that the current CAIR Mass Vax Tool?
- Will support all Vaccines
- Will allow providers to edit/update/re-submit vaccination records
- Will support CSV upload for offline vaccination scenarios
- Will allow providers to upload vaccinations without a My Turn clinic dependency
- Will allow providers ability to upload historical vaccinations to become compliant with AB 1797
- Will submit data to CAIR & RIDE (Healthy Futures)
- Provides CDPH the ability to update/add/remove vaccines supported quickly

Naming **Poll**: My Turn Mass Vax Alternative Solution

Q: Given what you have heard about this tool so far, which option below do you think is the most clear and descriptive name?

- CAIR Quick Entry
- CAIR Direct
- CAIR Express

What is myCAvax?

myCAvax is a state-wide centralized system for healthcare providers to request vaccine and manage inventory for multiple vaccine programs, including Bridge Access Program and the State General Fund program.

Screenshot of the myCAvax Provider Community
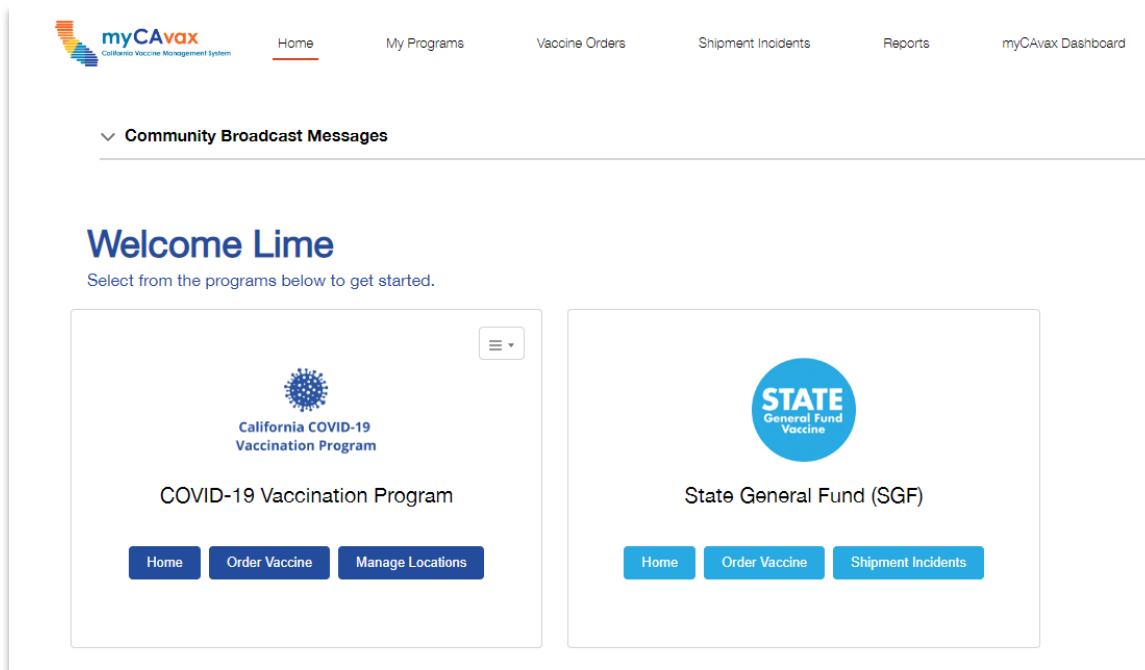
On myCAvax:

✓ Eligible Providers are invited to enroll in select vaccine programs.

✓ Once approved, Providers can request vaccine (as available).

✓ LHDs and CDPH will review, approve, and process orders as available.

✓ Providers can manage vaccine inventory, like reporting waste events.

Important Update to Provider Location Addresses in myCAvax

1

Background: The 'Vaccine Administration Address' was an active and relevant field in the U.S.G. COVID-19 program, in addition to the 'Shipping Address' field.

2

Upcoming Change: On Friday, October 20, 2023, the 'Vaccine Administration Address' will be removed from myCAvax. To comply with CDC policy, providers must be prepared to receive vaccine shipments at the same address in which you are administering vaccine, and the shipping address listed on your Location Account must be used by all Program Locations.

3

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

Bridge Access Program: CAIR2 Reporting Reminder

As a reminder, BAP providers are required to report doses administered (including eligibility category of 317) using My Turn or their EHR connected to CAIR2.

For more information, please review the BAP Provider Operations Manual and the BAP Requirements at a Glance document.
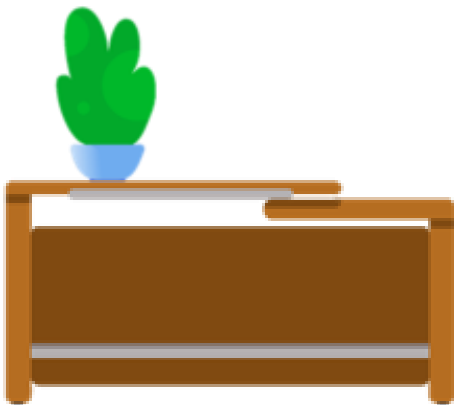
BAP-Eligible Providers: Enroll Now

If you are a BAP-eligible provider interested in receiving BAP vaccine doses, complete program enrollment in the myCAvax Provider Community by **Friday, October 27, 2023**.

Delaying enrollment may result in the prioritization of limited vaccine doses to other provider locations.
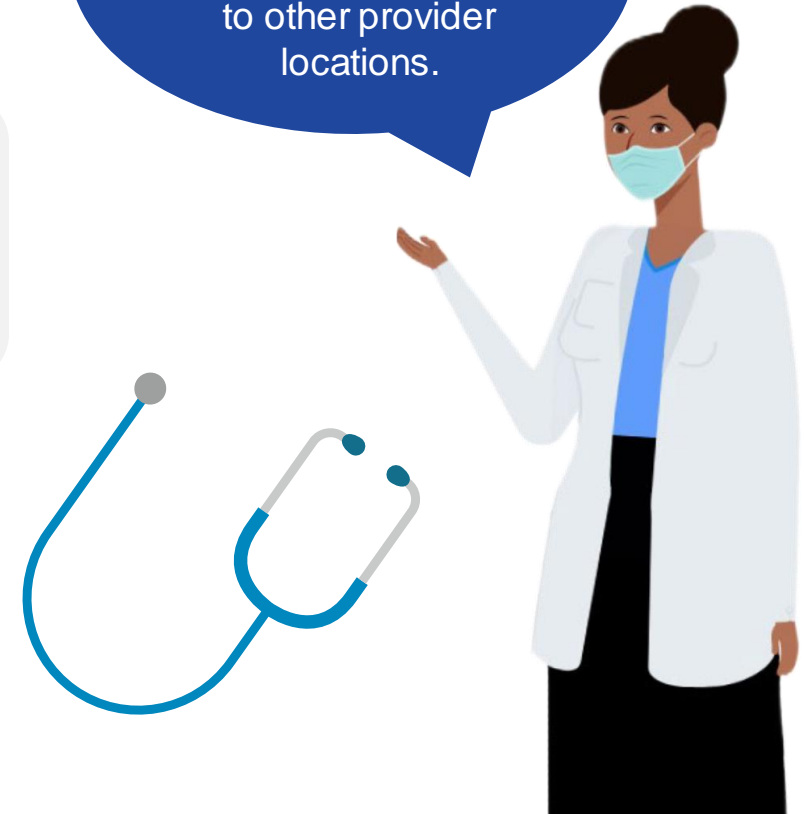
Bridge Access Program: Provider Enrollment Update (1/2)

Great work! 59% of BAP-eligible providers have enrolled in the program so far.

As of **Thursday, October 5, 2023**, 689 BAP-eligible providers have completed enrollment, out of 1166 total providers eligible for BAP enrollment.

If you are a BAP-eligible provider, be sure to
complete program enrollment in the myCAvax
Provider Community by **Friday, October 27, 2023**.

Bridge Access Program: Provider Enrollment Update (2/2)

If you are a BAP-eligible Provider who cannot access myCAvax, contact the Provider Call Center to confirm that your account is active.

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

NOTE: Provider enrollment is completed from the Provider Community. If questions, contact the Provider Call Center at providercallcenter@cdph.ca.gov or call (833) 502-1245, M–F 8:00 AM–5:00 PM PT.

Opting Out of BAP Participation

CDPH encourages provider participation in the Bridge Access Program as you play a critical role in the vaccination of key populations. We also understand that there are BAP-eligible providers who do not wish to participate in the program for a variety of reasons. To maximize vaccine allocation and approval to interested providers, if you are BAP-eligible and would not like to participate in the program, contact your LHD. Your LHD will notify the CDPH Enrollment Team of the opt-out request via Chatter.

Bridge Access Program: Ordering Cadence Update

Tentative Routine Ordering Cadence Calendar
COVID-19 Vaccines for Providers & LHDs

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	Provider Order (submit by 5PM)		LHD Approval 12PM*		
			CDPH Transmits Orders to CDC**		
Week 2		Estimated Delivery – McKesson (Moderna/Novavax) & Pfizer Direct ship**			
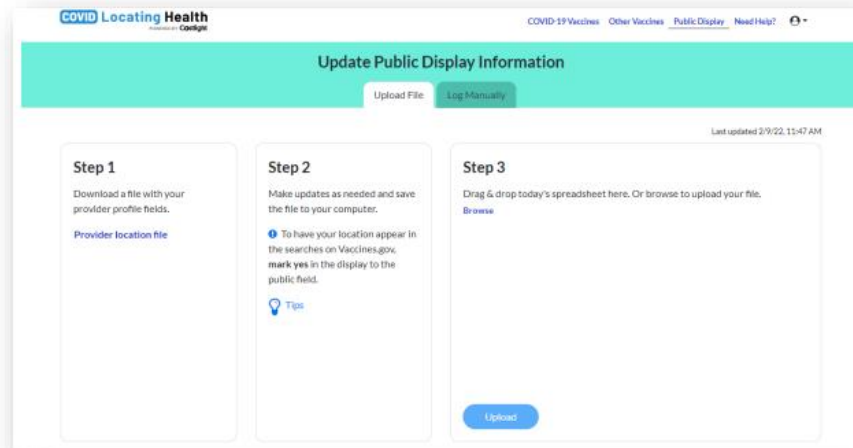
- **Delivery windows are dependent on the processing CDPH date and the provider's days/hours of operation.
- Watch for emails regarding order confirmations, advance shipment notices of vaccine, and temperature monitoring alerts.
- Note for VFC Providers: Pediatric doses ordered through the VFC Program are processed daily.

Bridge Access Program: Enabling a Location on Vaccines.gov

Instructions for Providers Managing Own Reporting via File Upload

To set location for Bridge Access Program participation

1. **If not already logged in**, login to provider portal account: https://covid.locating.health/login
2. Click the **"Public Display"** hyperlink at the top right of the screen.
3. Click the **"Upload File"** tab.
4. Click the **"Provider location file"** hyperlink in the box labeled **Step 1** to download current location details.
5. Open file in Excel (or another spreadsheet app).
6. In the spreadsheet, update appropriate settings (*note: participants in Bridge Access Program must be visible on vaccines.gov site*):
   a. Set **Display to the Public** column to **Yes**
   b. Set **Bridge Access Program** column to **Yes**
7. Save all changes to the file, in **.csv file format**.
8. Click the **"Browse"** hyperlink in the box labeled **Step 3**, locate updated file, and click **"Open"**.
9. Click the **"Upload"** hyperlink in the box labeled **Step 3**.
10. Make sure file was successfully uploaded.

If you are a Provider administering BAP vaccine, be sure to set your location on Vaccines.gov by follow the steps in this job aid.

The State General Fund Program in myCAvax

As a reminder, SGF flu vaccine will be managed in myCAvax beginning with the 2023–2024 flu season. Expired flu vaccine from the previous season will need to be reported to myVFCvaccines and returned to McKesson as appropriate.

Upcoming: State General Fund Vaccine Management 102 Webinar

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

Date: **Monday, October 23, 2023**, from **12:00 PM – 1:00 PM PT**.
Please register here to attend.

Slide Icon Key

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

COVID-19 Vaccine Access: Pharmacy

Edward Salaguinto, PharmD, RPh, CDPH

- ❖ Work directly with eTrueNorth to enroll your pharmacy location in the Bridge Access Program.

- ❖ eTrueNorth makes participation easy by providing a secure online platform for convenient patient sign-up and participating pharmacy reimbursement.

- ❖ Interested pharmacies can visit www.joinetruenorth.com to enroll.

To register, visit:
www.joinetruenorth.com

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

All pharmacy applications are subject to approval by HHS.

Bridge Access Program

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

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

By encouraging enrollment, you can:

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

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

Support more **robust IIS reporting.**

eTrueNorth (eTN) Patient Journey

Registration and eligibility verification

- [COVID-19 Access (covidaccess.com)](covidaccess.com)

- Phone support 1-800-635-8611 (includes language line/TTD/TTY)

- Checks patient demographics and insurance status
  - Uninsured and underinsured insurance status validated

- Receive eTN Voucher to present at pharmacy (with billing information for pharmacy staff).

COVID-19 Vaccine Locations: covidaccess.com

COVID-19 Vaccine Locations: vaccines.gov

Need help finding a COVID-19 vaccine in the U.S.? Call
1-800-232-0233
(TTY 1-888-720-7489)

Transportation Resource

- Medi-Cal support for transportation to a doctor or clinic through managed care health plan.

- Information in English and Spanish

NEED A RIDE?

Medi-Cal can help you get to a doctor or clinic.

- If you receive Medi-Cal through a managed care health plan, call the member services (or transportation) number on your health plan card or speak with your doctor to see if you qualify.

- For patients with straight Medi-Cal, also called Fee-for-Service, call 1-800-541-5555 or your doctor.

For more information,
visit the Department of Health Care Services' (DHCS') transportation webpage:
www.dhcs.ca.gov/services/medi-cal/Pages/Transportation.aspx.

¿NECESITA TRANSPORTE?

Su plan de salud de Medi-Cal le puede ayudar a llegar a su doctor o clínica.

- Si tiene un plan de salud administrado por Medi-Cal, llame al número de servicios para miembros (o de transporte) en su tarjeta del plan de salud o hable con su doctor para verificar si puede recibir asistencia de transporte.

- Para pacientes con planes de Medi-Cal de pago por servicios, también conocido como Fee-For-Service, llame al 1-800-541-5555 o a su doctor.

También puede visitar la página web de transporte del Departamento de Servicios de Salud (DHCS, en inglés): www.dhcs.ca.gov/services/medi-cal/Pages/Transportation.aspx

IMM-1251 (11/18)

Resources and Q&A

Leslie Amani and CDPH SMEs

Updated COVID-19 Resources

- **Jump links** to navigate to specific topics
- **Vaccine Ordering & Manufacturer Info** webpage (private & public vaccines)
- **Vaccine Information Statements** to be published this fall; what to do in the interim!
- **Novavax resources** updated for 2023-24 formula!

Novavax (2023-24 COVID-19 Vaccine, Adjuvanted)
- Authorization under EUA for 12Y+: <u>Fact Sheet for HCPs</u> | <u>Fact Sheet for Recipients & Caregivers</u> | <u>Novavax COVID-19 Vaccine (FDA)</u>
- <u>Expiry Checker</u>
- Websites: <u>Manufacturer</u> | CDC Resources (coming soon)

Vaccine Ordering & Manufacturer Info

For privately insured patients, providers purchase vaccines directly from vaccine manufacturers or wholesale distributors.

Ordering information and customer service contacts are provided! Includes:
- Private purchase (manufacturer and/or distributor)
- Private returns (if available)
- Bridge Access Program (BAP) and Vaccines for Children (VFC) orders and returns
- Customer service numbers, temperature excursions

Accessible from **COVID-19 Vaccine Resources** and all **BAP webpages**!

Updated BAP Resources

Includes:

- **Moderna Spikevax Vaccine 12Y+ Fact Sheet**
- **Novavax Vaccine 12Y+ Fact Sheet**
- **Pfizer-BioNTech Comirnaty Vaccine 12Y+ Fact Sheet**
- **Vaccine Ordering & Manufacturer Info webpage**
- Blended temperature logs for VFC/BAP providers!

Temperature Logs
- COVID-19 Vaccine Log (all vaccines)
- Hourly Log
- VFC/BAP Blended Logs:
  - ULT Freezer
  - Refrigerator: Fahrenheit | Celsius
  - Freezer: Fahrenheit | Celsius
- How to Record Temperatures
- Report Temperature Excursion Worksheet

CA Bridge Access Program Provider Operations Manual

This Provider Operations Manual (POM) provides step-by-step instructions and links to available resources.

Audience:
- Existing COVID-19 vaccine providers new to BAP
- New BAP organizations & locations
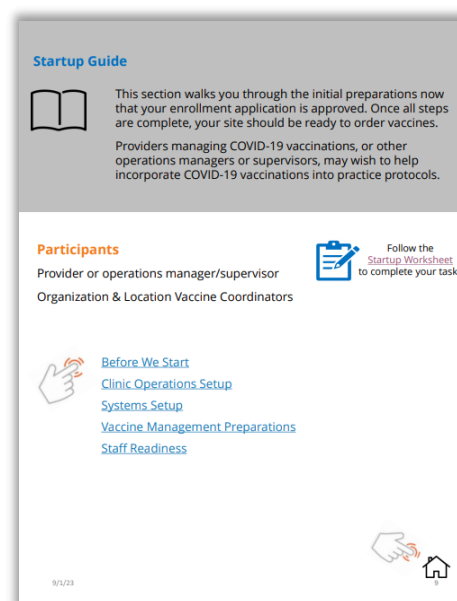
Startup Worksheet
(for new organizations & locations)
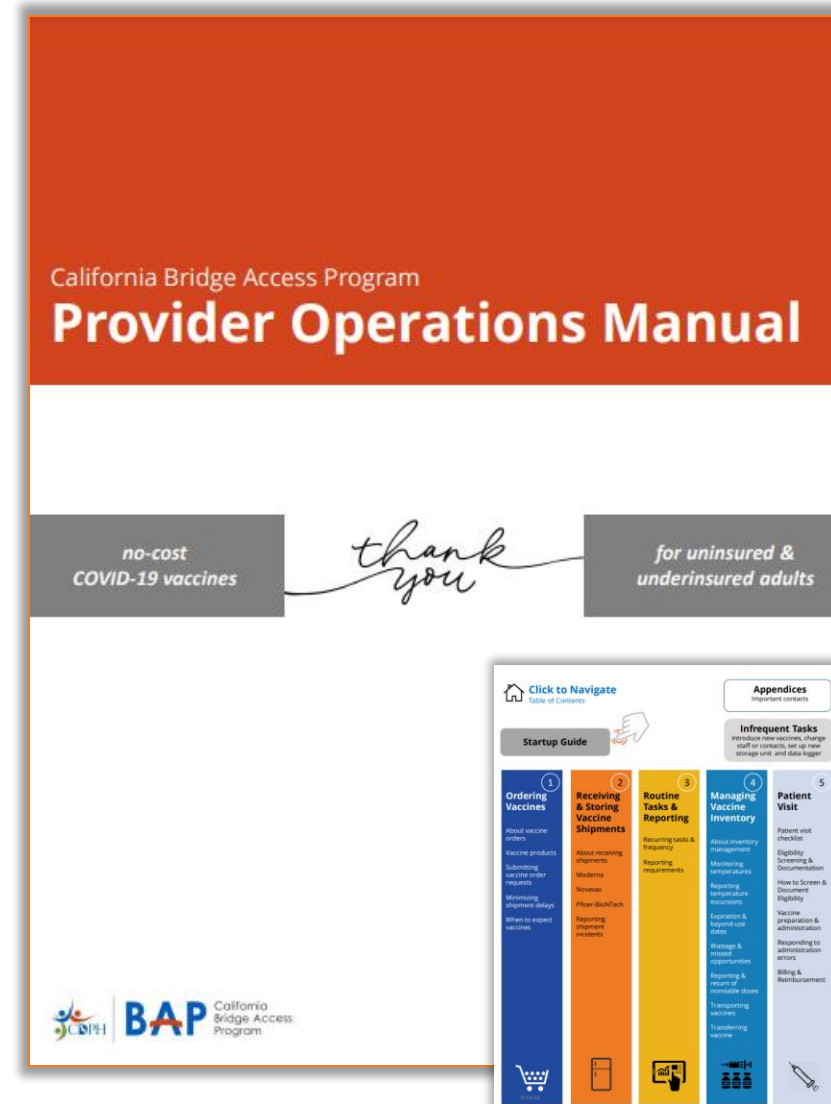
Updated BAP POM

The Bridge Access Program (BAP) Provider Operations Manual (POM) has been updated for 2023-24 Novavax COVID-19 Vaccine!

Fact Sheets are updated as these resources become available:

- Standing orders (Pfizer & Moderna now linked!)
- Storage & Handling/Beyond Use Date (BUD) labels (awaiting CDC)
- Expiry checkers (awaiting manufacturers)
- At a Glance summary sheets (Pfizer & Moderna now linked!)

CDPH Required Training

IMMUNIZATION BRANCH

COVID–19 Vaccine Training

Training and Resources

- COVID-19 Vaccine Product Training
- Technical Resources for New Vaccinators

Required Training for Participation in the California Bridge Access Program

Providers and key practice staff storing, handling, managing, or administering vaccines must complete the required training to meet federal and state program requirements.

Program Training

This training prepares sites to incorporate program requirements into clinic protocols and identifies key resources for use on the job. Organization & Location Coordinators must complete the required program training in myCAvax during enrollment but may access the lessons below. Review times are approximate.

CDPH Required Training Page
Product trainings for the updated 2023-24 COVID-19 vaccines are now live."

🌉 CA Bridge Access Program: At a Glance

Requirements at a Glance

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

COVID-19 vaccine product and CDC's Vaccine Product Training will be posted after FDA authorization/CDC recommendation.

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

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

Program Components:

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

Topic	Requirements & Guidance	Resource Links
⭐	**What's new for existing COVID-19 providers?** California's BAP Provider Participation Agreement replaces the federal COVID-19 Provider Agreement. While most requirements remain the same, look for orange stars identifying new requirements and job aids to assist you.	
Primary Documents	• BAP Provider Participation Agreement • BAP Provider Operations Manual (and Startup Worksheet for new providers) • COVID-19 Vaccine Commercialization FAQs	

BAP Requirements at a Glance*

Overview document links requirements and guidance to new resources!

Topics include:
- Provider Participation Agreement
- Required Vaccine Product Training
- Storage and Handling
- Reporting
- Vaccine Product Information
- Fact Sheets
- Much more to explore!

Commercialization at a Glance: Provider Transition Guide

Updated: 9.8.23

CDPH has created a multiple-page "Commercialization Provider Transition Guide".

The current information, and other resources, can be found on EZIZ.org using this link: Commercialization at a Glance: Provider Transition Guide

🚨 Vaccine Support

Provider Call Center

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

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

myCAvax

- Virtual Assistant resolves many questions but will direct you to the Provider Call Center queue for live assistance!

- Knowledge Center houses key job aids and videos that are updated every release. Once logged in, you can access job aids from the myCAvax homepage (or at various places throughout the system) using the links as shown below. Need help? View our jobs aids in the Knowledge Center, or contact us.
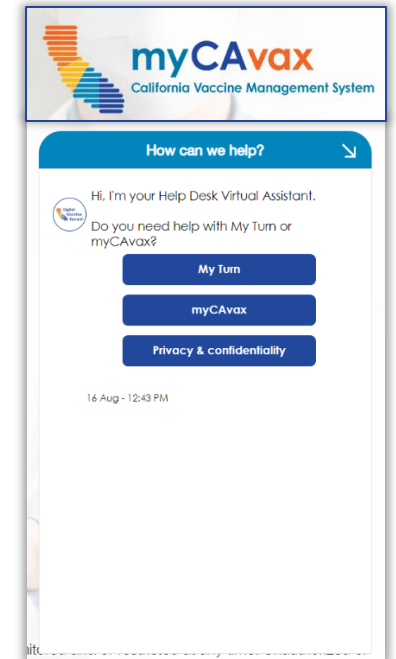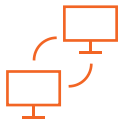
COVID-19 Therapeutics Resources

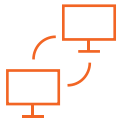| Type of Support	Description —
Clinical Guidance	**For general Therapeutics questions, please email: COVIDRxProviders@cdph.ca.gov**
General Information	CDPH COVID-19 Treatments Webpage (provides general information for healthcare providers, allocations, distribution and ordering, drug facts sheets, and additional resources) CDPH COVID-19 Treatments Job Aid (questions and answers for the public on COVID-19 therapeutics) COVID-19 Therapeutics Best Practices Checklist (testing, prescribing, dispensing, and more) Frequently Asked Questions document for clinics, providers, and pharmacists
Locating Resources	Finding Providers and Test-to-Treat Sites • COVID-19 Therapeutics Locator (arcgis.com) • Test-to-Treat (hhs.gov)
LHJ Therapeutics SharePoint	Primary source for recorded webinars, slides, datasets and HPOP reporting information. (For access, email JEOCuser54@cdph.ca.gov) • Therapeutic Weekly Email Update files (SharePoint) • CDPH Therapeutics HPoP Account Verification & Reporting information
Questions	For general CDPH Therapeutics questions, please email COVIDRxProviders@cdph.ca.gov For ordering, program inquiries, signing up new HPOP Accounts: please e-mail CDPHTherapeutics@cdph.ca.gov

Questions

During today's webinar, please use the Q&A panel to ask your questions so CDPH subject matter experts can respond directly.
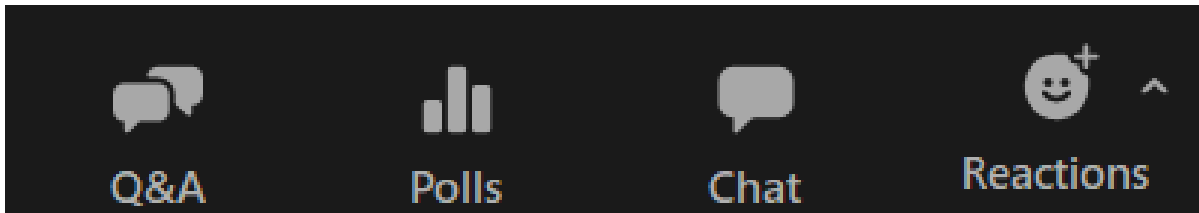
Resource links will be dropped into, "Chat"

Upcoming Webinar Opportunities

CDPH Immunization Updates for Providers

Next session: Friday, October 13, 2023

9AM – 10:30AM