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California Department of Public Health



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TO: Vaccines for Children (VFC) Providers  
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SUBJECT: VFC 2019-2020 Seasonal Influenza Vaccine Information

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**SUMMARY**

Routine annual influenza immunization with any licensed, age-appropriate influenza vaccine (inactivated, live or recombinant) is recommended for all persons 6 months and older who do not have contraindications. Influenza causes significant illness, medical visits, hospitalizations, and death each year. Influenza vaccines continue to be the best way to prevent influenza.

The federal Advisory Committee on Immunization Practices (ACIP) has recently posted its recommendations for the Prevention and Control of Seasonal Influenza with Vaccines for the 2019-2020 influenza season at <https://www.cdc.gov/mmwr/volumes/68/rr/rr6803a1.htm>. The recommendations are summarized below.

Optimally, vaccination should occur before onset of influenza activity in the community. Vaccination should be offered by end of October, if possible, and for as long as influenza viruses are circulating and unexpired vaccine is available.

Emphasis should be placed on vaccination of high-risk groups, including children aged 6–59 months; patients who are American Indians/Alaska Natives; children with chronic pulmonary conditions (including asthma); cardiovascular disease (excluding isolated hypertension); renal, hepatic, neurologic, hematologic, or metabolic disorders (including diabetes mellitus); pregnant teens; and children and adolescents (aged 6 months through 18 years) receiving aspirin- or salicylate-containing medications and who might be at risk for Reye syndrome.



Children younger than 9 years of age who have not been previously immunized with at least two doses of influenza vaccine before July 1, 2019 need two doses of influenza vaccine this season for optimal protection. All children aged 6 months through 8 years who are recommended for two doses should receive their first dose as soon as possible after vaccine becomes available; these children should receive the second dose 4 weeks or more after the first dose.

We encourage your practice to implement strategies to achieve high influenza vaccination coverage rates of your patients and decrease missed opportunities for vaccination. This may include plans to remind patients to come in for their annual influenza vaccination and mechanisms to track patients who will be due for a second dose. Please refer to the recent VFC Program letter, "[Planning for the 2019-2020 VFC Flu Season](#)," for additional strategies.

## ELIGIBILITY FOR VFC-SUPPLIED SEASONAL INFLUENZA VACCINE

All VFC-eligible children aged 6 months through 18 years of age in your practice should be vaccinated according to ACIP recommendations.

VFC-supplied seasonal influenza vaccine can be administered only to VFC-eligible children. As with all other VFC-supplied vaccines, influenza vaccine doses:

- Can be used only for VFC-eligible children.
- CANNOT be used for privately insured children or adult patients 19 years of age and older under any circumstance; this may constitute fraud or abuse of VFC-supplied vaccines.
- Doses may be administered to underinsured children ONLY at a Federally Qualified Health Center or Rural Health Center.

## 2019-2020 INFLUENZA VACCINE COMPOSITION AND FORMULATIONS

For the 2019-2020 influenza season, the California VFC Program is offering only quadrivalent, inactivated influenza vaccines representing the following strains:

- A/Brisbane/02/2018 (H1N1)pdm09-like virus\*
- A/Kansas/14/2017 (H3N2)-like virus\*
- B/Colorado/06/2017-like virus (B/Victoria/2/87 lineage)
- B/Phuket/3073/2013-like virus (B/Yamagata/16/88 lineage).

\*change in strain from the 2018-19 formulation

VFC Program products for the 2019-2020 influenza season include:

Products	Dose Volume	Minimum Age in California	CPT
Fluarix® pre-filled syringes	0.5 mL at <u>all ages</u>	6 months	90686
FluLaval® pre-filled syringes	0.5 mL at <u>all ages</u>	6 months	90686
Fluzone® pre-filled syringes	0.5 mL at <u>all ages</u>	6 months	90686
FluLaval® Multi-dose vial	0.5 mL	3 years; and not pregnant*	90688
Fluzone® Multi-dose vial	0.5 mL	3 years; and not pregnant*	90688
Flucelvax® pre-filled syringes	0.5 mL	4 years	90674
FluMist® pre-filled syringes^	0.2 mL	2 years; and not pregnant*	90672

\*According to [California law](#), pregnant women or children younger than 3 years old may only receive vaccine doses that contain no more than trace levels of mercury [Health and Safety (H&S) Code Section 124172, Chapter 837, Statutes of 2004 (AB 2943, Pavley)]. **Multi-dose**

**vials of influenza vaccine currently exceed the legal limit of mercury content and should not be used in these groups.** VFC preservative-free influenza VFC vaccine formulations should be used for administration to VFC-eligible children younger than 3 years of age and pregnant teens younger than 19 years of age.

^ Limited supply available primarily to school-based influenza vaccination efforts.

More information on VFC influenza vaccines offered for 2019-2020 is available in the Food and Drug Administration (FDA) information and ACIP recommendations.

## **DOSAGE AND ADMINISTRATION**

The dosage of most VFC influenza vaccines this season regardless of age is 0.50 mL. The dosage for children 2 years of age and older for FluMist is 0.20 mL.

The dosage for children 6 to 35 months for some formulations available for private purchase but NOT from VFC (Afluria® and Fluzone® Pediatric formulation) is 0.25 ml. **Please note that while Fluzone® is available for private purchase in two options (0.25 mL and 0.50 mL) for children 6 to 35 months, only the 0.5 mL formulation is available from VFC; the 5mL Multi-dose vial Fluzone formulation in the VFC program is only for children 3 years of age and older. Care should be taken to administer the correct dose. Avoid errors by double-checking doses and administering the entire syringe contents of the age-appropriate formulation.**

The vaccine syringe or vial should be shaken well before administration. Vaccine should be inspected visually for particulate matter and discoloration prior to administration. If either of these conditions exists, the vaccine should not be administered.

When administering vaccines, please:

- **DO NOT** access more than one dose from a single-dose vial
- **DO NOT** use half of a 0.5 ml syringe for infants 6-35 months of age and waste the rest
- **DO NOT** split a 0.5 ml syringe into two 0.25 ml doses for ages 6-35 months
- **DO NOT** combine two doses of 0.25 mL to make a 0.5 ml dose
- **DO NOT** administer two doses of 0.25 mL to a patient to make a 0.5 mL dose

Inactivated influenza vaccine should be administered intramuscularly in the anterolateral aspect of the thigh for infants and young children. Older children and adults should be vaccinated in the deltoid muscle.

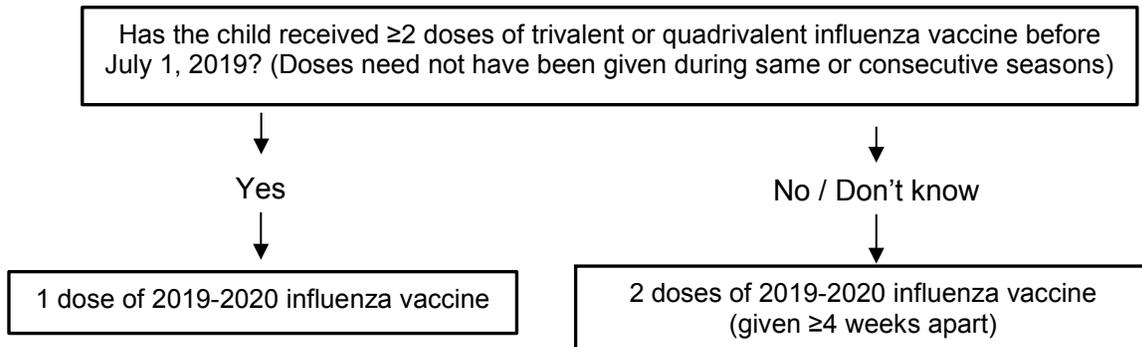
### **Vaccine Type**

If more than one type of vaccine is appropriate and available for a specific person, ACIP does not express a preference for use of any particular vaccine product over another. An age-appropriate vaccine formulation should be used. Providers should not delay vaccination to procure a specific vaccine preparation.

### **Number of doses of 2019-2020 seasonal influenza vaccine by age**

Children 9 years and older: One dose.

Children 6 months through 8 years of age:



From: <https://www.cdc.gov/mmwr/volumes/68/rr/rr6803a1.htm>

**Current ACIP Recommendations for Persons with Egg Allergy**

- Providers should consider observing all patients for 15 minutes after vaccination to decrease the risk for injury if syncope occurs.
- Persons with a history of severe allergic reaction to egg (i.e., any symptom other than hives) should be vaccinated with any licensed and recommended influenza vaccine (for the patient's age and health status) in an inpatient or outpatient medical setting (including but not necessarily limited to hospitals, clinics, health departments, and physician offices), under the supervision of a health care provider who is able to recognize and manage severe allergic conditions.
- Persons with a history of egg allergy who have experienced only hives after egg exposure should continue to receive influenza vaccine (i.e., any age-appropriate IIV or RIV3) that is otherwise appropriate for the recipient's age and health status.
- For more details, please see <https://www.cdc.gov/mmwr/volumes/68/rr/rr6803a1.htm>

**Reporting of Suspected Vaccine Reactions or Errors**

Providers should report suspected reactions to influenza vaccines or any other vaccine to the Vaccine Adverse Events Reporting System (VAERS) at 800-822-7967 (toll-free) or <http://vaers.hhs.gov>.

Providers are encouraged to report any vaccine administration errors to the National Vaccine Errors Reporting Program (VERP) at <http://verp.ismp.org/>. Examples of potential errors include administering half the content of a pre-filled syringe dose to a 1 year old, or a vaccine licensed only for adults 65 years and older to an 8 year old. In their reports, providers may make recommendations for error prevention. This surveillance program aims to prevent future errors.

**VACCINE INFORMATION STATEMENTS (VISs)**

The [inactivated influenza Vaccine Information Statement](#) must be provided to a parent or guardian before the child receives each dose of influenza vaccine. Each time a VIS is provided the following information must be included in each patient's permanent medical record:

- (1) Edition date of the current Vaccine Information Statement that was provided.
- (2) Date that the VIS was provided.

Copies of the latest influenza VISs are attached. There has been no change in the VIS since last season. The current inactivated influenza vaccine VIS version date is 8/15/2019.

## **VACCINE STORAGE AND HANDLING**

Influenza vaccines must be stored at a temperature range of 36°F to 46°F (2°C to 8°C). Vaccine doses deemed spoiled due to exposure to out-of-range temperatures may not be readily replaced.

Do not freeze or expose vaccines to out-of-range temperatures. Vaccine that has been frozen or deemed non-viable by a vaccine manufacturer may not be used and should be returned to the VFC program according to established guidelines.

Single-dose vials should not be accessed for more than one dose.

Multiple-dose vials should be returned to recommended storage conditions between uses.

Vaccines should not be used after the expiration date on the label. “Beyond-use-date” (manufacturer-specified days for use once a multi-dose vial stopper has been punctured) differs for some influenza vaccine products. Please carefully refer to the package insert of any multi-dose vaccine products your clinic may be receiving this reason.

## **BILLING NOTES**

### **Child Health and Disability Prevention Program (CHDP)**

Please refer to relevant [CHDP Provider Information Notices](#) on influenza vaccines and any relevant Medi-Cal Bulletin Newsflashes.

In addition, CHDP providers with additional questions are advised to contact their [County CHDP Program](#) at <http://www.dhcs.ca.gov/services/chdp/Pages/CountyOffices.aspx>.

### **Medi-Cal Managed Care**

Please contact the specific Medi-Cal managed care health plan for information on immunization billing and reimbursement.

### **Medi-Cal Fee for Service (FFS)**

To bill Medi-Cal for administration of VFC-supplied influenza vaccines, use the appropriate CPT-4 code followed by the “-SL” modifier. Providers will be reimbursed only for the administration fee when using VFC vaccines.

For specific information and details on Medi-Cal billing, please refer to the [Medi-Cal provider manual](#) on VFC. Providers with questions on Medi-Cal billing policies and procedures and Provider manual information may call the [Telephone Service Center \(TSC\)](#) at 1-800-541-5555.

### **CPT Codes (Quadrivalent VFC Influenza Vaccine) – See Table on Page 3**

A complete list of influenza vaccine products and CPT codes may be found at <http://www2a.cdc.gov/vaccines/IIS/IISStandards/vaccines.asp?rpt=cpt>.

## **QUESTIONS?**

If you have any questions, please contact your VFC Field Representative, or call the VFC Program at 877-243-8832 (877-2GET-VFC), or visit [www.eziz.org](http://www.eziz.org).

**Resources**

- [AAP Influenza Implementation Guidance and links to Resources](#)
- [ACIP 2019-2020 Recommendations: Prevention and Control of Seasonal Influenza with Vaccines](#)

**Enclosures**

- [Influenza Vaccine Identification Guide \(IMM-859, 8/19\)](#)
- [Flu Usage Log \(IMM-1053F, 8/19\)](#)
- [Inactivated Influenza Vaccine VIS \(8/7/15\)](#)