

Welcome to  
CDPH Immunization Branch  
Afternoon TEACH Webinar:  
What's New with COVID-19, Flu, and RSV?

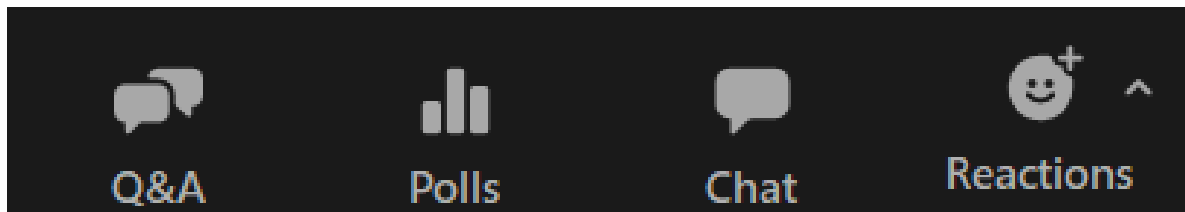


September 14, 2023  
12:00PM – 1:00PM



# 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: <https://eziz.org/resources/afternoon-teach/>.



If you have post-webinar questions, please email [rachel.jacobs@cdph.ca.gov](mailto:rachel.jacobs@cdph.ca.gov)



# Webinar Objectives:

By the end of the presentation, attendees should be able to:

- Describe the latest ACIP flu and RSV immunization recommendations.
- Understand the updated COVID-19 vaccine formulations and recommendations for children.
- Understand how COVID-19 vaccines will become part of the VFC Program.
- Identify relevant patient and provider education resources.



# Agenda: Thursday, September 14, 2023

No.	Item	Speaker(s)	Time (PM)
1	Welcome	Rachel Jacobs (CDPH)	12:00 – 12:03
2	Updates on COVID-19 Vaccine Formulation and Recommendations for Children	Samantha Johnston, MD, MPH (CDPH)	12:03 – 12:15
3	Updated CDC ACIP Recommendations for Flu and RSV	Samantha Johnston, MD, MPH (CDPH)	12:15 – 12:25
4	Transition of COVID-19 Vaccines to VFC Program	Claudia Aguiluz (CDPH)	12:25 – 12:35
5	VFC Flu Reports	Claudia Aguiluz (CDPH)	12:35 – 12:40
6	Resources	Terisha Gamboa, MPH (CDPH)	12:40 – 12:45
7	Questions & Answers	CDPH Subject Matter Experts (SMEs)	12:45 – 1:00

**Thank you!**



# Updates on COVID-19 Vaccine Formulation and Recommendations for Children

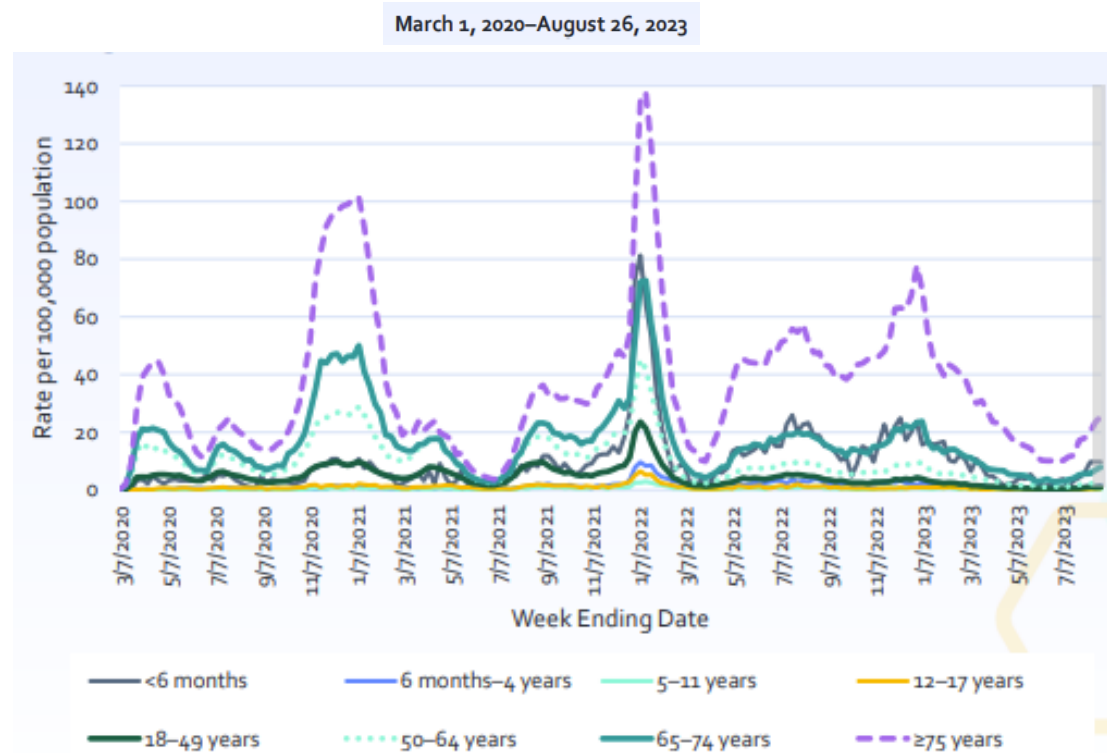
Samantha Johnston, MD, MPH

Medical Officer, CDPH Immunization Branch

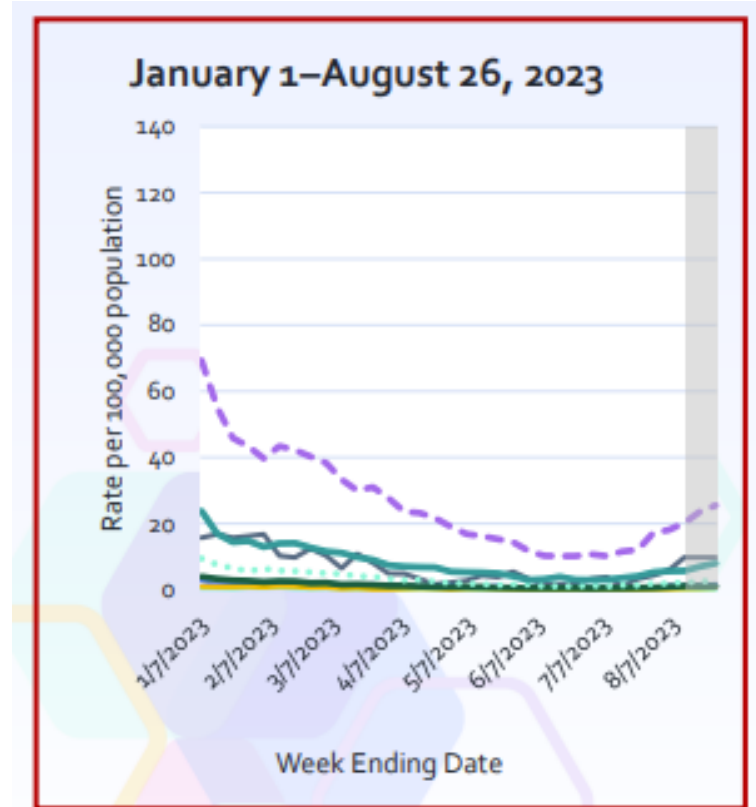


# Weekly Population-Based Rates of COVID-19 Association Hospitalizations

March 2020 – August 26, 2023



Gray boxes indicate potential reporting delays. Interpretation of trends should be excluded from these weeks.

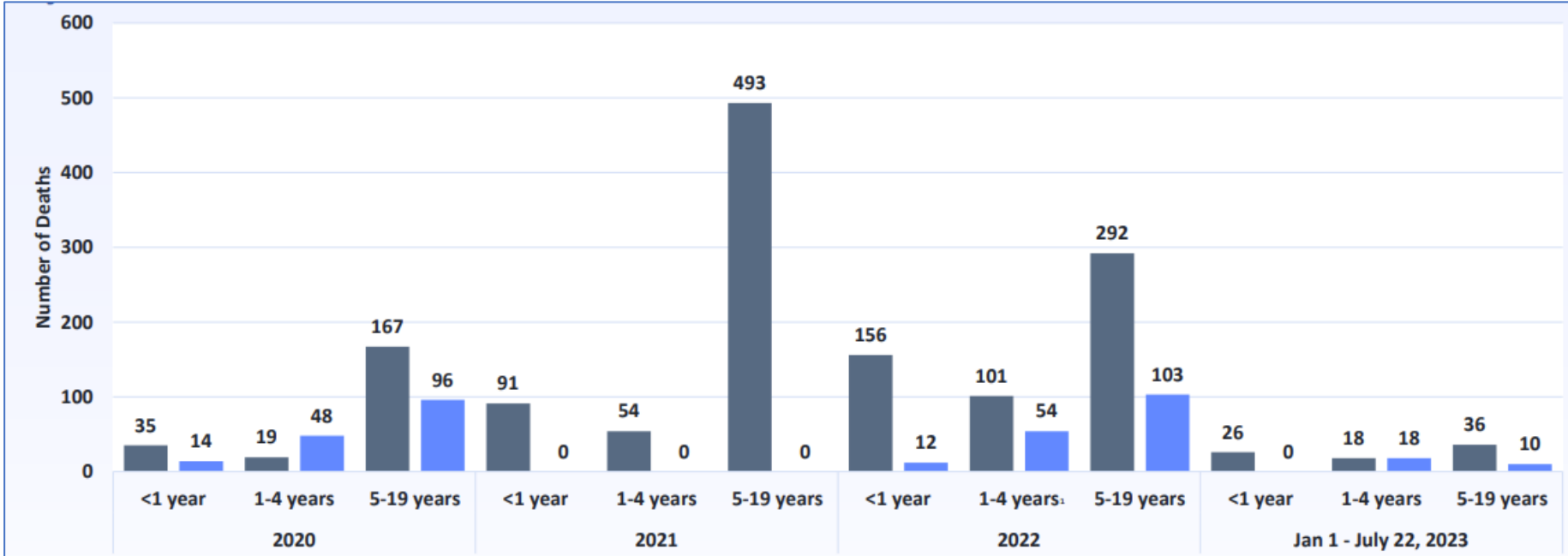


**Rates highest in ≥75 years, followed by infants <6 months and adults 65–74 years**



[ACIP presentation Sept 12, 2023 - Dr. Wallace](#)

# COVID-19 and Influenza-associated deaths in persons ages 19 years and younger (by underlying cause of death), by age and year



<sup>1</sup> Provisional data  
<sup>2</sup> Partial data  
 Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Provisional Mortality on CDC WONDER Online Database. Data are from the final Multiple Cause of Death Files, 2018-2021, and from provisional data for years 2022-2023, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Number of deaths includes influenza codes (J09-J11) or COVID-19 code (U07.1) as the underlying cause of death. Accessed at <http://wonder.cdc.gov/mcd-icd10-provisional.html> on Aug 25, 2023 4:53:59 PM





# 2023-24 Updated COVID-19 Vaccine Recommendation

- Everyone  $\geq$  6 months should get an updated 2023-2024 COVID-19 vaccine.
- Updated formulation contains XBB.1.5 (Omicron subvariant) and are a better match for currently circulating COVID-19 strains.
- Vaccination remains the [best protection](#) against COVID-19-related hospitalization and death. Vaccination can also reduce the chance of suffering the effects of [Long COVID](#).
- COVID-19 vaccines are safe and hundreds of millions of people have safely received a COVID-19 vaccine in the U.S.
- Bivalent Moderna and Pfizer-BioNTech vaccines are **no longer authorized** for use in the United States.
- Novavax COVID-19 2023-24 products are currently under review.



# CDC ACIP Recommendations



## Proposed recommendations for children aged 6 months – 4 years without immunocompromise

### Doses recommended:

- Initial series of 2 Moderna vaccine doses OR 3 Pfizer-BioNTech vaccine doses
  - **At least 1 dose of 2023–2024 COVID-19 vaccine**
- 
- All doses should be homologous (i.e., from the same manufacturer)
  - All Moderna doses in ages 6 months – 11 years are now 25 µcg



# CDC ACIP Recommendations

Breaking news!

## Proposed recommendations for people aged 5 years and older without immunocompromise

### Doses recommended:

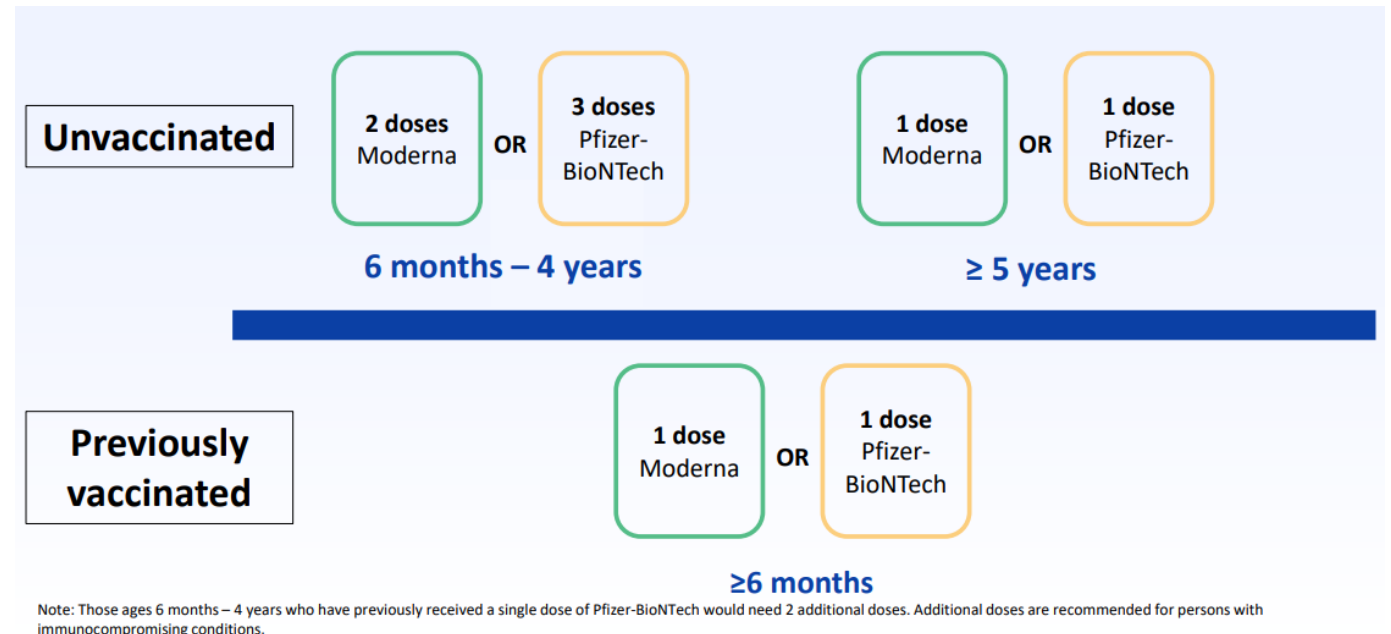
- **1 dose of 2023–2024 COVID-19 vaccine**, regardless of prior vaccination history

- New harmonized age cutoff for recommendations for young children for Moderna and Pfizer-BioNTech COVID-19 vaccines
- Resulting in simplified recommendations for 5-year-olds
- All Moderna doses in ages 6 months – 11 years are now 25 µcg
- 2023–2024 COVID-19 vaccine dose is recommended at least 2 months after receipt of the last COVID-19 vaccine dose



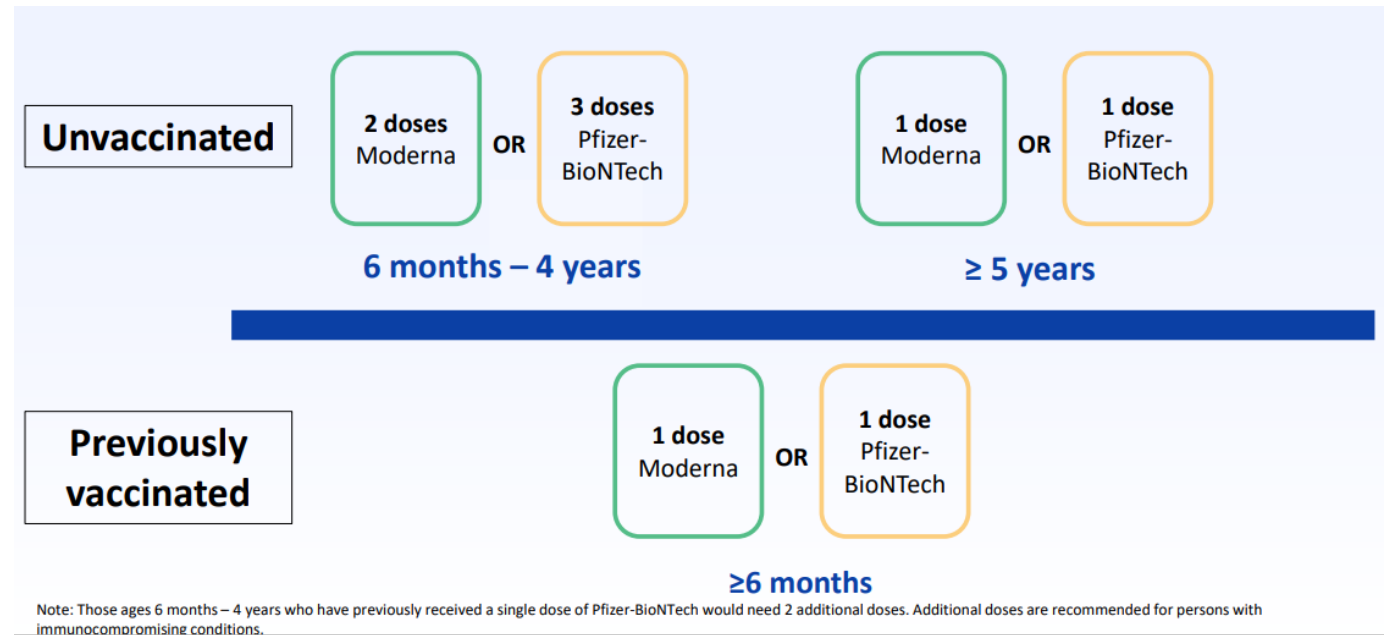
# Which COVID-19 Vaccine is Recommended for an Unimmunized 5-year-old?

Those  $\geq 5$  years old are recommended to receive one dose of Moderna or Pfizer mRNA COVID-19 vaccine.



# Which COVID-19 Vaccine is Recommended for a Previously Vaccinated 5-year-old?

Those  $\geq 5$  years old are recommended to receive one dose of Moderna or Pfizer mRNA COVID-19 vaccine



# Updated CDC ACIP Recommendations for Flu and RSV

Samantha Johnston, MD, MPH

Medical Officer, CDPH Immunization Branch



# Influenza Season: 2022-23 Burden Estimates

CDC estimates\* that, from **October 1, 2022** through **April 30, 2023**, there have been:

27 – 54 million  
flu **illnesses**



12 – 26 million  
flu **medical visits**



300,000 – 650,000  
flu **hospitalizations**



19,000 – 58,000  
flu **deaths**



\*Because influenza surveillance does not capture all cases of flu that occur in the U.S., CDC provides these estimated ranges to better reflect the larger burden of influenza. These estimates are calculated based on data collected through CDC's Influenza Hospitalization Surveillance Network (FluSurv-NET) and are **preliminary**.





# 2019-20 Influenza Season: Burden Averted by Vaccination

During the 2019-2020 season, nearly **52%** of the U.S. population aged 6 months and older received an influenza vaccine and this **PREVENTED** an estimated:



**7.5M**

**illnesses**

About the same as the population of the Bay Area



**105K**

**hospitalizations**

Enough people to fill both Oracle Park and the Oakland Coliseum



**6,300**

**deaths**

Equivalent to saving about **17 lives per day** over the course of a year



[Estimated Influenza Illnesses, Medical visits, and Hospitalizations Averted by Vaccination in the United States — 2019–2020 Influenza Season | CDC](#)



# 2023-24 Seasonal Influenza Recommendations



Search

## Morbidity and Mortality Weekly Report (*MMWR*)

### Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023–24 Influenza Season

*Recommendations and Reports* / August 25, 2023 / 72(2);1–25

[Print](#)

Lisa A. Grohskopf, MD<sup>1</sup>; Lenee H. Blanton, MPH<sup>1</sup>; Jill M. Ferdinands, PhD<sup>1</sup>; Jessie R. Chung, MPH<sup>1</sup>; Karen R. Broder, MD<sup>2</sup>; H. Keipp Talbot, MD<sup>3</sup> ([VIEW AUTHOR AFFILIATIONS](#))



[2023-24 CDC Influenza Vaccination Recommendations](#)

# CDC 2023-24 Influenza Vaccine Guidance

## Highlighted updates:

- 2023-24 Influenza Vaccine Composition
  - All vaccines are quadrivalent
  - All vaccines contain hemagglutinin derived from two A and two B viruses
- People with egg allergy may receive any influenza vaccine (egg-based or non-egg based) that is appropriate for their age and health status; additional safety measures are no longer recommended



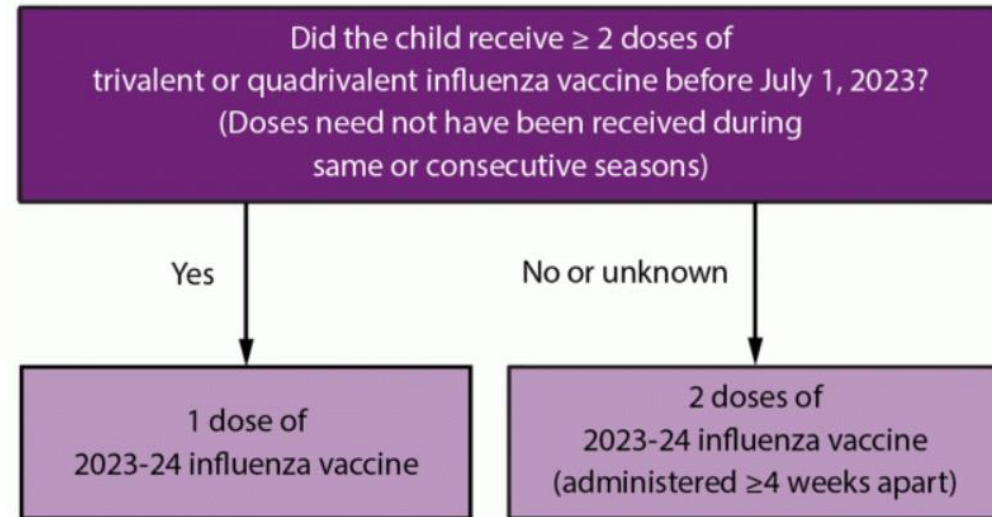
# Vaccination of Children 6 months – 8 Years of Age

- All persons 6 months of age and older are recommended to get an annual influenza vaccine.
- Children younger than 5 years old—especially those younger than 2— are at higher risk of developing serious [influenza-related complications](#).
- [Children 6 months to 8 years of age receiving their first influenza vaccine](#), or who have not previously received 2 or more doses, [need two doses](#), given at least 4 weeks apart.



# Influenza Vaccine Dosing for Children Aged 6 Months Through 8 Years

FIGURE. Influenza vaccine dosing algorithm for children aged 6 months through 8 years\* — Advisory Committee on Immunization Practices, United States, 2023–24 influenza season



\* Children aged 6 months through 8 years who require 2 doses of influenza vaccine should receive their first dose as soon as possible (including during July and August, if vaccine is available) to allow the second dose (which must be administered  $\geq 4$  weeks later) to be received, ideally, by the end of October. For children aged 8 years who require 2 doses of vaccine, both doses should be administered even if the child turns age 9 years between receipt of dose 1 and dose 2.



# Timing of Influenza Vaccination

- September and October are the best times for most people to get vaccinated
- **Children who require 2 doses:** 1<sup>st</sup> dose as soon as possible (including July/August).
- **Children who require 1 dose:** Consider July/August for this group, particularly as may represent an opportunity to vaccinate prior to start of school.
- **Most adults (especially  $\geq 65$  years) and those in 1<sup>st</sup>/2<sup>nd</sup> trimester:** Avoid July/August vaccination unless vaccination later in the season won't be possible. Wait until September/October.
- **Pregnant women in 3<sup>rd</sup> trimester:** Vaccinate in July/August as vaccination during pregnancy is associated with reduced risk for infant influenza.

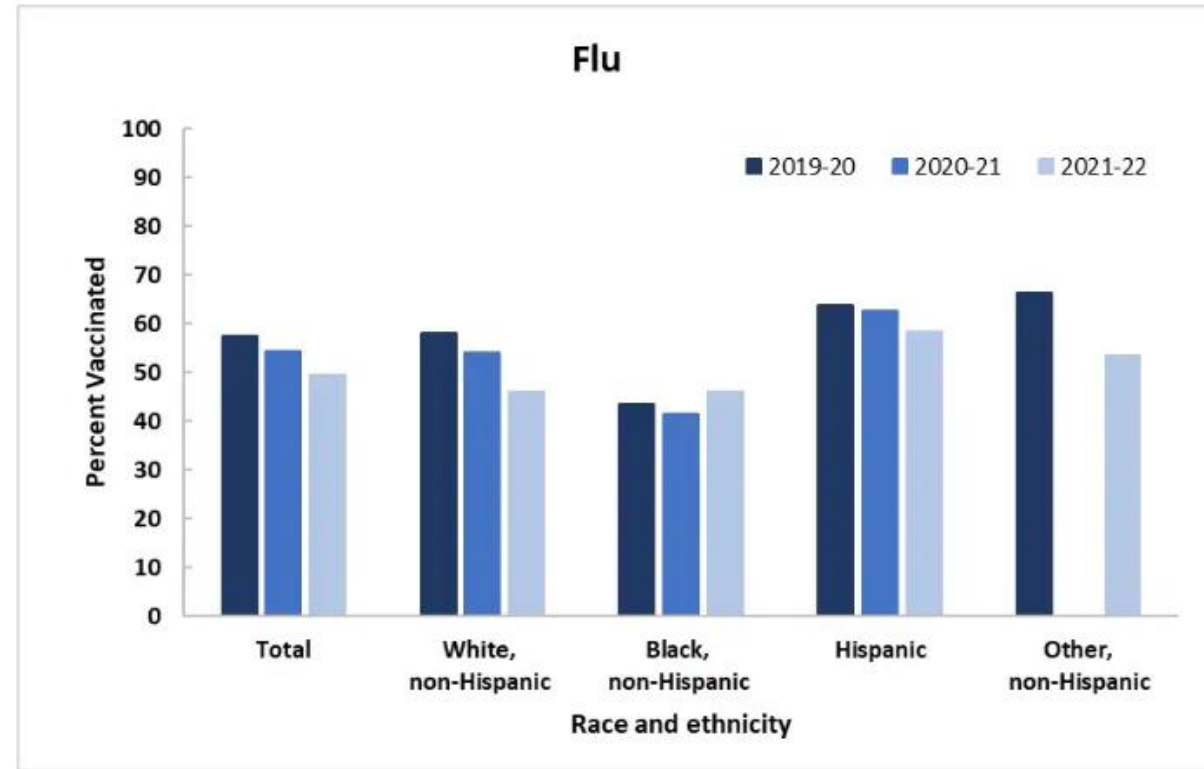


# Pregnant People Hit Hard by Flu in 2022-2023 Season, While Vaccination Continues to Decrease

On 12/9/22, [CDC reported](#):

- ~50% of flu hospitalizations in women of childbearing age have been in women who are pregnant.
- Concerningly, flu vaccination coverage among pregnant people is >10% lower than 2021 and >20% lower than pre-pandemic rates.

Figure 1. Flu (n=2,015) and Tdap (n=838) vaccination coverage among pregnant women, by race and ethnicity — Internet panel survey, United States, April 2020 – April 2022

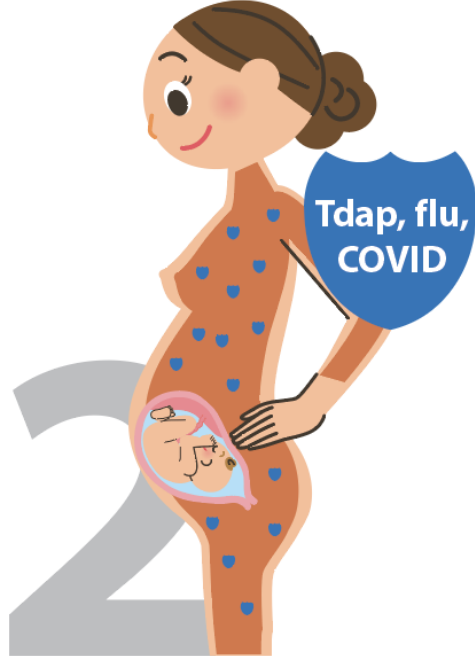




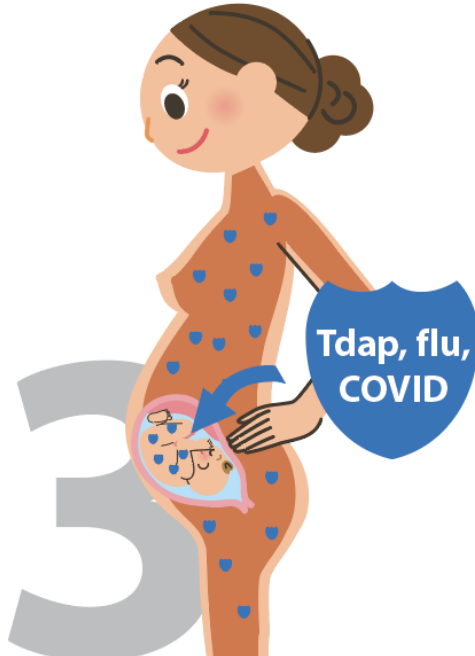
# Immunization During Pregnancy is Important



**Give mom  
Tdap, flu, and  
COVID shots**



**Mom creates  
antibodies**



**Antibodies pass  
to baby**



**Mom & baby  
protected**



# ≥65-year Preferential Recommendation

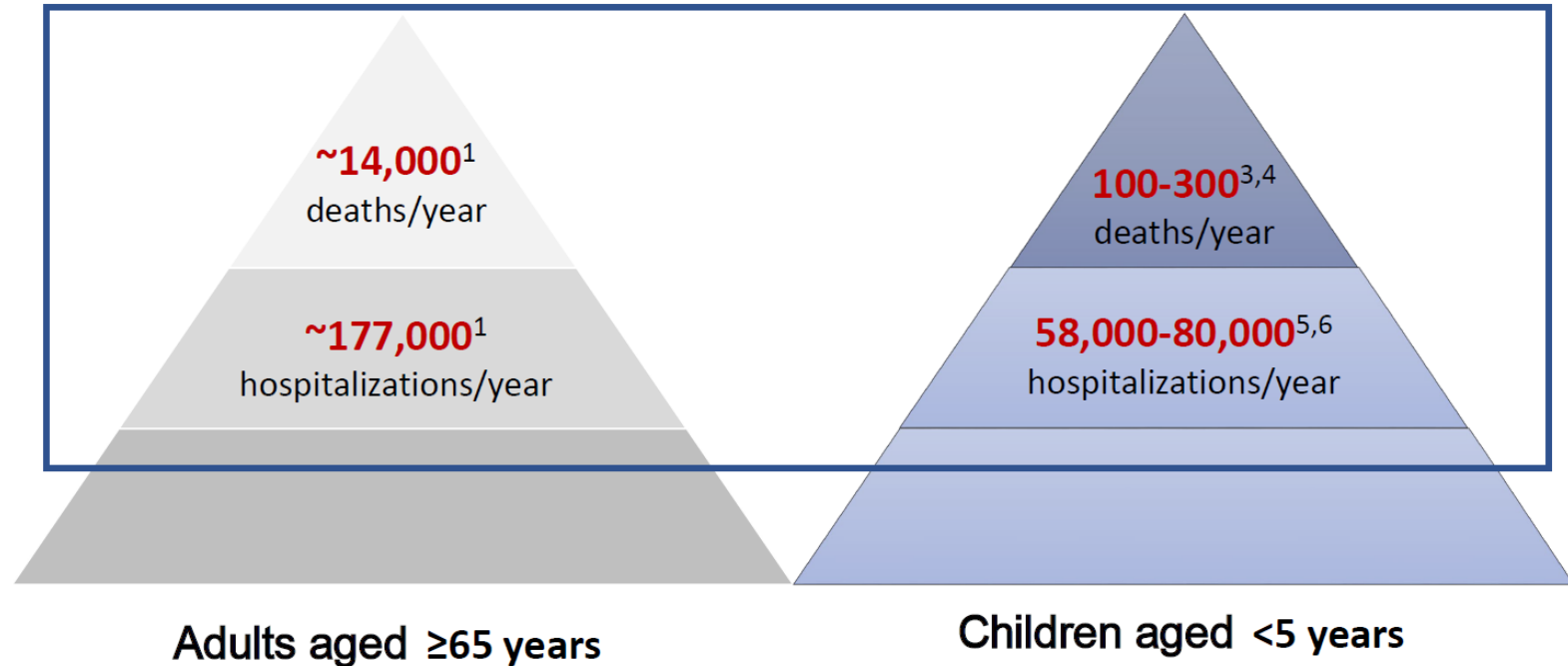
- CDC continues to recommend that Adults aged ≥65 years should preferentially receive one of the following higher dose or adjuvanted influenza vaccines:
  - Quadrivalent high-dose inactivated influenza vaccine (HD-IIV4),
  - Quadrivalent recombinant influenza vaccine (RIV4), or
  - Quadrivalent adjuvanted inactivated influenza vaccine (aIIV4).
- If none of these three vaccines is available at an opportunity for vaccine administration, then any other age-appropriate influenza vaccine should be used.





# Respiratory Syncytial Virus (RSV)

- Affects all ages and usually causes mild upper respiratory tract symptoms
- In infants, young children and older adults, can result in severe lower respiratory tract disease
  - Bronchiolitis
  - Pneumonia
  - Asthma, COPD, CHF exacerbations



<sup>1</sup>Falsey et al, NEJM (2005); <sup>2</sup>Adapted from Falsey et al, NEJM (2005); <sup>3</sup>Thompson et al, JAMA, 2003; <sup>4</sup>Hansen et al, JAMA Network Open, 2022; <sup>5</sup>Hall et al, NEJM, 2009; <sup>6</sup>McLaughlin et al, J Infect Dis, 2022

6



# RSV Disease Burden in Infants

Original Investigation | Infectious Diseases

## Infants Admitted to US Intensive Care Units for RSV Infection During the 2022 Seasonal Peak

- 600 infants <12 months
- 81% had no underlying medical conditions
- 71% were NOT born premature
- 24% required mechanical ventilation
- 4 infants required ECMO
- 2 infants died



# Increased Respiratory Syncytial Virus (RSV) Activity in Parts of the Southeastern United States: New Prevention Tools Available to Protect Patients

[Print](#)



Distributed via the CDC Health Alert Network

September 05, 2023, 2:00 PM ET

CDCHAN-00498

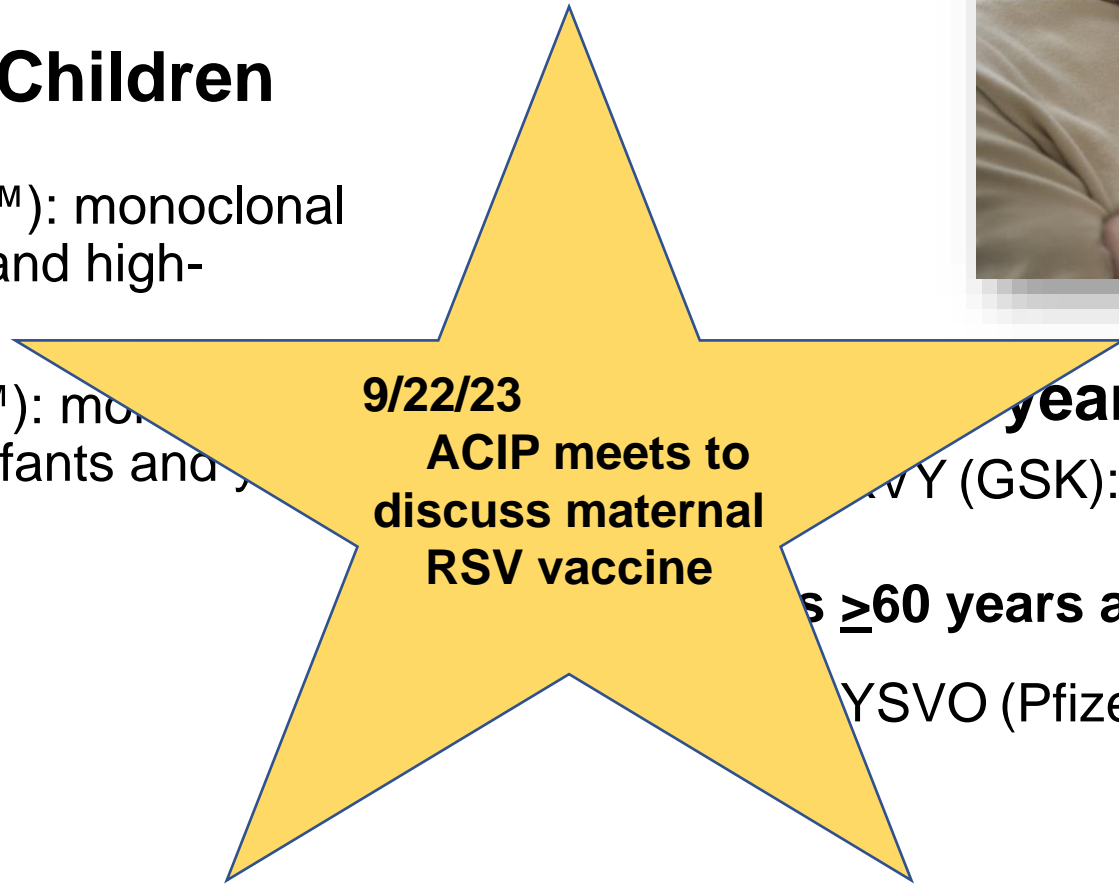


# RSV Prevention Products



## Infants and Young Children

- Nirsevimab (Beyfortus™): monoclonal antibody for all infants and high-risk young children
- Palivizumab (Synagis™): monoclonal antibody for high-risk infants and young children



**years**

**Abrysvo (GSK): vaccine**

**for individuals  $\geq 60$  years and 32-36 weeks pregnant\***

**Abrysvo (Pfizer): vaccine**



\*August 21, 2023, the FDA approved Abrysvo for pregnant individuals to prevent lower respiratory tract disease caused by RSV in infants from birth through 6 months of age. ACIP expected to issue recommendations in the coming weeks.

# Efficacy of RSV Vaccines

Product	Age	Reduction in RSV-associated LRTD	Reduction in severe RSV-associated LRTD
RSVPreF3 (Arexvy, GSK)	Adults $\geq 60$ years	82.6% *with signs/symptoms including cough, sputum and difficulty breathing	
RSVPreF (Abrysvo, Pfizer)	Adults $\geq 60$ years	85.7% * with $\geq 3$ symptoms	
RSVPreF (Abrysvo, Pfizer) When given 32-36 weeks gestation	Infants $\leq 90$ days old	34.7%	91.1%
RSVPreF (Abrysvo, Pfizer) When given 32-36 weeks gestation	Infants $\leq 180$ days old	57.3%	76.5%

\*August 21, 2023, the FDA approved Abrysvo for pregnant individuals to prevent lower respiratory tract disease caused by RSV in infants from birth through 6 months of age.

ACIP expected to issue recommendations in the coming weeks.



[ABRYSVO | FDA](#) [AREXVY | FDA](#)

[FDA Approves First Vaccine for Pregnant Individuals to Prevent RSV in Infants | FDA](#)

# CDC ACIP and AAP recommend Nirsevimab

- 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.

ACIP: Advisory Committee for Immunization Practices  
AAP: American Academy of Pediatrics



[RSV ACIP Vaccine Recommendations | CDC](#)  
[ACIP and AAP Recommendations for Nirsevimab](#)

# Nirsevimab (Beyfortus™)

- Monoclonal antibody that is a passive immunization
- A single dose is administered shortly before or during RSV season.

Weight/Indication	Dose	Route
<5 kg	50 mg	Intramuscular
≥5 kg	100 mg	Intramuscular
Second RSV season	200 mg (2 x 100mg injections)	Intramuscular

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



# Nirsevimab (Beyfortus™)

- Contraindications: history of serious hypersensitivity reactions, including anaphylaxis, to nirsevimab or to any of its components.
- Illness or febrile diseases are not contraindications to receiving nirsevimab.
- [CDC General Best Practice Guidelines for Immunizations](#)





# Nirsevimab: Timing of Administration

- Infants born shortly before and during the RSV season should receive nirsevimab within **the first week of life**, including in hospital settings.
- Currently, few hospitals participate in the VFC program, thus coordination between birth hospitals and the medical home is important to timely administration of nirsevimab.
- “Shortly before the RSV season” in most US states means administration October 1 - March 31.
- Epidemiology varies, providers can adjust scheduled based on local RSV activity. Data are available at [the National Respiratory and Enteric Virus Surveillance System](#).



# Nirsevimab: 8 to 19 Month Old Eligibility Criteria

- Chronic lung disease (CLD) of prematurity who required medical support during the 6 months (diuretics, oxygen, chronic steroids) 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](#).



[Nirsevimab Frequently Asked Questions \(aap.org\)](#)

[Respiratory Syncytial Virus | Red Book: 2021–2024](#)

[Updated Guidance for Palivizumab RSV Prophylaxis | American Academy of Pediatrics \(aap.org\)](#)

# Alaska Native and American Indian Eligibility: Nirsevimab vs. Palivizumab

## **Nirsevimab:**

American Indian and Alaska Native children aged 8-19 months are eligible to receive a dose of nirsevimab in their second RSV season (note that this is a new group for whom second-season prophylaxis is recommended in contrast to the current palivizumab recommendations).

## **Palivizumab:**

Limited information is available concerning the burden of RSV disease for other American Indian populations. However, local assessment of the cost-benefit, as occurs for Alaska Native and Navajo/White Mountain Apache populations, may be prudent for other American Indian populations. **If local data supports a high burden of RSV disease in select American Indian populations, selection of infants eligible for prophylaxis may differ from the remainder of the United States for infants for their first RSV season.**



[Respiratory Syncytial Virus | Red Book: 2021–2024](#)

[Updated Guidance for Palivizumab RSV Prophylaxis | American Academy of Pediatrics \(aap.org\)](#)



## FAQ #1: 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.





## FAQ #2: Should I Recall Patients who will be less than 8 Months of Age at the Start of RSV Season?

- Yes.
- Healthy infants become ineligible for nirsevimab at 8 months. To realize the full benefits of nirsevimab during the 2023-2024 season, it is recommended that age eligible infants be recalled at the start of the RSV season, before they become ineligible based on age.
- [Reminder and recall tools](#) are available through the AAP.
- Nirsevimab may be administered as part of a health maintenance visit or as part of a separate visit.



# RSV Vaccine Recommendations: Older Adults

- For the 2023–24 season, adults aged  $\geq 60$  years may receive a single dose of an RSV vaccine, using shared clinical decision-making.
  - [RSV Vaccination for Adults 60 Years and Older \(cdc.gov\)](#)
  - [Frequently Asked Questions About RSV Vaccine for Adults | CDC](#)
- Coadministration of RSV vaccines with other adult vaccines during the same visit is acceptable.
- Full recommendations: [Adult RSV ACIP Vaccine Recommendations | CDC](#)



# Adults Who May Be At Higher Risk of RSV Disease Include Persons With:

The infographic is enclosed in a blue border and contains ten categories of risk factors, each with a line-art icon above a blue text box. The categories are arranged in two rows. The first row includes: Chronic lung diseases (lungs icon), Chronic cardiovascular diseases (heart icon), Immune compromise (mask icon), Hematologic disorders (blood bag icon), and Residents of nursing homes (nursing home icon). The second row includes: Neurologic disorders (brain icon), Endocrine disorders (syringe icon), Kidney and liver disorders (kidneys icon), and Other underlying conditions (cross icon).

- Chronic lung diseases such as COPD and asthma
- Chronic cardiovascular diseases such as congestive heart failure and coronary artery disease
- Immune compromise
- Hematologic disorders
- Residents of nursing homes and other long-term care facilities
- Neurologic disorders
- Endocrine disorders such as diabetes
- Kidney and liver disorders
- Other underlying conditions or factors that the provider determines might increase the risk of severe respiratory illness





# Coadministration





# Coadministration of Nirsevimab with Other Childhood Vaccines

## **Coadministration with routine childhood vaccines**

- In accordance with the CDC's general best practices for immunizations, simultaneous administration of nirsevimab with age-appropriate vaccines is recommended.
- In clinical trials, when nirsevimab was administered concomitantly with routine childhood vaccines, the safety and reactogenicity profile of the concomitantly administered regimen was similar to the childhood vaccines administered alone.
- When concomitantly administered, nirsevimab is not expected to interfere with the immune response to other vaccines.



[ACIP and AAP Recommendations for Nirsevimab](#)

[Nirsevimab Frequently Asked Questions \(aap.org\)](#)

[Use of Nirsevimab for the Prevention of Respiratory Syncytial Virus Disease Among Infants and Young Children](#)

# Coadministration of COVID-19 Vaccine and Other Vaccines

- In accordance with [General Best Practice Guidelines for Immunization](#), routine administration of all age-appropriate doses of vaccines simultaneously (i.e., administering more than one vaccine on the same clinic day or “coadministration”) is recommended for children, adolescents, and adults if there are no contraindications at the time of the healthcare visit.
  - Providers may simultaneously administer COVID-19, influenza, and respiratory syncytial virus (RSV) vaccines to eligible patients; the [Health Alert Network \(HAN\)](#) published on September 5, 2023 may be consulted for additional information about simultaneous administration of these vaccines.
  - Simultaneous administration of COVID-19 vaccine and nirsevimab (a long-acting monoclonal antibody for certain infants and young children for prevention of RSV) is recommended
  - Coadministration of COVID-19 and RSV vaccine for older adults is acceptable
  - There are additional considerations if administering an orthopoxvirus vaccine and COVID-19 vaccine

## COVID-19 Vaccine Coadministration Tips Vaccinate ALL 58

**Routine and flu vaccines may be administered on the same day as COVID-19 vaccines.**

**Considerations—What are the risks of:**

- Missing recommended vaccines and catching COVID-19 or other vaccine-preventable diseases before the next appointment?
- Reactions from each vaccine?

**Organize syringes:**

- Label each syringe with vaccine name, dosage, lot number, initials of the preparer, and the exact beyond-use time.
- Place syringes on a clean tray, grouping vaccines by administration site.

**Patient Care:**

- When possible, administer the COVID-19 vaccine in a different arm from vaccines more likely to cause a local reaction (e.g., tetanus-toxoid-containing vaccines).
- Give the most painful injections last (e.g., MMR, HPV).
- If patient is anxious, try using these tips to ease anxiety during vaccination.
- After administration, observe patient for 15 minutes (30 minutes if at increased risk for anaphylaxis). Report any adverse events to VAERS.

**Examples for preteens and kids:**

**Separate injection sites by 1 inch or more, if possible.**

**Administer COVID-19 vaccines by intramuscular (IM) injection.**

**Age: 3 years and older**

- **Site: Deltoid muscle**, above the level of the armpit
- Needle: 1 inch, 22-25 gauge (1 1/2 inches for larger patients)
- Bunch up the muscle and insert entire needle at a 90° angle

Refer to CDC product info for administration steps by product.

**Under 3 years**

- **Site: Vastus lateralis muscle**, in the anterolateral thigh (outside of the leg in the mid- to upper-thigh)
- Needle: 1 inch, 22-25 gauge
- Bunch up the muscle and insert entire needle at a 90° angle

California COVID-19 Vaccination Program IMM-1389 (8/10/22)

## COVID-19 Vaccine Coadministration Tips



# Transition of COVID-19 Vaccines to VFC Program

Claudia Aguiluz

VFC Program Section Chief, CDPH Immunization Branch





# COVID-19 Vaccines Addition to VFC Program



# Commercialization Definition

Commercialization is the transition of COVID-19 medical countermeasures, including vaccines, treatments, and test kits previously purchased by the U.S. Government (USG), to established pathways of procurement (commercial market), distribution, and payment by both public and private payers.





# COVID-19 Vaccine Transition to Commercialization

Vaccine availability for pediatric and adult populations to follow current models for non-COVID-19 vaccines upon COVID-19 Commercialization, post sunset of the USG COVID-19 Program.

## **Pediatric populations:**

- Vaccines will be made available through the Vaccines for Children (VFC) Program for eligible children under 19 years of age.
- Vaccines for privately insured patients will be purchased following similar established mechanisms in healthcare for non-COVID-19 vaccines.

## VFC Program Eligibility

Children 0 through 18 years of age who meet at least one of the criteria:

- Medicaid eligible
- Uninsured, or
- American Indian/Alaska Native, or
- Underinsured\*

\* Eligible to receive vaccine only through an enrolled Federally Qualified Health Center (FQHC), Rural Health Center (RHC) or a deputized provider under Delegation of Authority



# COVID-19 Vaccine Transition to Commercialization

The Vaccines for Children (VFC) program helps ensure that all children have a better chance of getting their recommended vaccines. VFC has helped prevent disease and save lives.

## California's Vaccine For Children (VFC) Program

- 55% of CA children under 19 years of age (6.1M) are eligible to receive VFC supplied vaccines
- CA's program represents approximately 10% of the nation's provider participation-with over 3,500 active provider sites throughout the state
- Distributes over 9M doses of pediatric vaccines annually



# COVID-19 Vaccines Addition to VFC Program

- COVID-19 vaccine is already a routinely recommended ACIP\* vaccine, and has been officially voted into the VFC\*\* Program
- It is expected that ordering and availability for this vaccine, via routine VFC Program ordering processes, **will occur upon FDA approval of an updated monovalent COVID-19 vaccine, ACIP vote, CDC recommendation, AND available vaccine supply (Allocations).**

Resolution No. 10/22-1

ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES

VACCINES FOR CHILDREN PROGRAM

VACCINES TO PREVENT COVID-19

*The purpose of this resolution is to add vaccines for the prevention of COVID-19 to the VFC program.*

**Eligible Groups**  
*All children aged 6 months through 18 years.*

**Recommended Vaccination**  
COVID-19 vaccines that are approved under a Biologics License Application (BLA) for the most recent age- and vaccine-specific considerations for COVID-19 (<https://www.cdc.gov/vaccines/imz/downloads/covid-19-vaccine-considerations/covid-19-vaccine-considerations/covid-19-vaccine-considerations.pdf>)

**Recommended Dosage**  
Dosage information is available at <https://www.cdc.gov/vaccines/imz/downloads/covid-19-vaccine-considerations/covid-19-vaccine-considerations.pdf>

**Contraindications and Precautions**  
Contraindications and precautions for COVID-19 vaccines (<https://www.cdc.gov/vaccines/imz/downloads/covid-19-vaccine-considerations/covid-19-vaccine-considerations.pdf>)

Adopted and Effective: October 2022

This document can be found at <https://www.cdc.gov/vaccines/imz/downloads/covid-19-vaccine-considerations/covid-19-vaccine-considerations.pdf>

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

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CDC Recommends Updated COVID-19 Vaccine for Fall/Winter Virus Season

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CDC Recommends Updated COVID-19 Vaccine for Fall/Winter Virus Season

Print

Press Release

For Immediate Release: Tuesday, September 12, 2023  
Contact: [Media Relations](mailto:Media.Relations@cdc.gov)  
(404) 639-3286

CDC recommends everyone 6 months and older get an updated COVID-19 vaccine to protect against the potentially serious outcomes of COVID-19 illness this fall and winter. Updated COVID-19 vaccines from Pfizer-BioNTech and Moderna will be available later this week.

Vaccination remains the **best protection** against COVID-19-related hospitalization and death. Vaccination also reduces your chance of suffering the effects of **Long COVID**, which can develop during or following acute infection and last for an extended duration. If you have not received a COVID-19 vaccine in the past 2 months, get an updated COVID-19 vaccine to protect yourself this fall and winter.

The virus that causes COVID-19 is always changing, and protection from COVID-19 vaccines declines over time. Receiving an updated COVID-19 vaccine can restore protection and provide enhanced protection against the variants currently responsible for most infections and hospitalizations in the United States. Last season, those who received a 2022-2023 COVID-19 vaccine saw **greater protection** against illness and hospitalization than those who did not receive a 2022-2023 vaccine. To date, hundreds of millions of people have **safely received a COVID-19 vaccine** under the most intense safety monitoring in U.S. history.

Most Americans can still get a COVID-19 vaccine for free. For people with health insurance, most plans will cover COVID-19 vaccine at no cost to you. People who don't have health insurance or with health plans that do not cover the cost can



\*Advisory Committee on Immunization Practices-CDC

\*\*Vaccines for Children



# COVID-19 Vaccines Transitioning to the VFC Program: What Will Change?



- The current COVID-19 vaccine Provider Participation Agreement is no longer valid.
- All current VFC program requirements are applicable to COVID-19 vaccines.
- Vaccine ordering, vaccine distribution, inventory management and reporting, vaccine transfer policies, etc. to follow VFC Program guidelines.
- Participating providers are expected to ensure adequate vaccine supply for VFC and non-VFC eligible populations.
- No Redistribution of VFC supplied vaccines allowed.
- No reporting of inventory to VaccineFinder!
- Vaccines will no longer ship with ancillary kits.



# COVID-19 Vaccines Transitioning to the VFC Program: What Will Change?

## Insurance plans will cover the 2023-2024 COVID-19 vaccines immediately

- The Affordable Care Act (ACA) requires insurers to cover *most* ACIP-recommended vaccines without cost sharing by the *next* coverage year<sup>1</sup>
  - COVID-19 vaccines are on recommended schedules since February 2023<sup>2</sup>
- Section 3203 of the CARES Act expedites coverage of **COVID-19 vaccines** beyond that which is required of most preventive services
  - As of January 5, 2021: “plans and issuers must cover COVID-19 vaccines and their administration without cost sharing **immediately** once the vaccine becomes authorized under an EUA or approved under a BLA, and according to the scope of the applicable EUA or BLA”<sup>3</sup>
- In July 2023, HHS issued guidance to payors to prepare to cover COVID-19 vaccination with the onset of COVID-19 vaccine commercialization<sup>4</sup>

1. 42 U.S. Code § 300gg-13 - Coverage of preventive health services. <https://www.law.cornell.edu/uscode/text/42/300gg-13>

2. CDC Immunization Schedules by Age: <https://www.cdc.gov/vaccines/schedules/hcp/index.html>

3. FAQs about Affordable Care Act Implementation Part 50: <https://www.dol.gov/sites/dolgov/files/EBSA/about-ebsa/our-activities/resource-center/faqs/aca-part-50.pdf>

4. CMS Administrator Brooks-LaSure Letter to Payors Regarding Coverage of COVID-19 Vaccines Post Commercialization, July 13 2023: <https://www.hhs.gov/about/news/2023/07/13/cms-administrator-brooks-lasure-letter-to-payors-regarding-coverage-covid-19-vaccines-post-commercialization.html>



# Anticipated COVID-19 Vaccine Products in VFC

## Pediatric COVID-19 Vaccine Price List

**Note:** The table below reflects contracts for the 2023-2024 Pediatric COVID-19.

Vaccine	Brandname/ Tradename	NDC	Packaging	CDC Cost/ Dose	Private Sector Cost/ Dose	Contract End Date	Manufacturer
Covid-19 (Age 12 years and older)	Spikevax™	80777- 0102-95	10 pack – 1 dose vial	\$85.91	\$128.00	6/6/2024	Moderna
Covid-19 (Age 6 months through 11 years)	COVID-19 Vaccine	80777- 0287-92	10 pack- 1 dose vial	\$85.91	\$128.00	6/6/2024	Moderna
Covid-19 (Age 12 years and older)	Comirnaty®	00069- 2362-10	10 pack- 1 dose vial	\$97.75	\$115.00	6/6/2024	Pfizer
Covid-19 (Age 5 years through 11 years)	COVID-19 Vaccine	59267- 4331-02	10 pack- 1 dose vial	\$65.45	\$77.00	6/6/2024	Pfizer
Covid-19 (Age 6 months through 4 years)	COVID-19 Vaccine	59267- 4315-02	10 pack- 3 dose vial	\$48.88	\$57.50	6/6/2024	Pfizer

\*Not yet available through VFC. ^ Products approved for emergency use (under EUA)



# All COVID-19 Products will be Offered to California VFC Providers for Ordering, as Supply Permits

Vaccine Group	Vaccine Name	Min Order Qty	NDC
COVID (6 months - 4 years)^	(Pfizer) 3 Dose Vial – 30 doses/10 Vials Per Box	30 doses	59267-4315-02
COVID (6 months - 11 years)^	(Moderna) Single Dose Vials - 10 Per Box*	10 doses	80777-0287-92
COVID (5 years - 11 years)^	(Pfizer) Single Dose Vials - 10 Per Box	10 doses	59267-4331-02
COVID (12 years - 18 years)	Comirnaty (Pfizer) Single Dose Vials - 10 Per Box	10 doses	00069-2362-10
	Novavax 5 Dose Vial – 10 doses/2 Vials Per Box*	10 doses	80631-0105-02
	Spikevax (Moderna) Single Dose Vials - 10 Per Box	10 doses	80777-0102-95

\*Not yet available through VFC. Moderna’s pediatric presentation for children 6m-11y and Novavax’s presentation for children will be available for ordering at a future date.

^ Products approved for emergency use (under EUA)



# Pediatric COVID-19 Vaccine Ordering

- VFC COVID-19 Vaccine is anticipated to be available the week of 9/18/2023.
- VFC providers will order COVID-19 vaccine using the same order process they do for all other routine vaccines on the VFC order form of your [MyVFCVaccines](#) account.
- VFC Providers do NOT need to enroll in myCAvax.
- A new section for COVID-19 vaccines has been added to VFC's order Form.
- Products are grouped by Age to facilitate ordering.

COVID-19 Vaccines			
COVID-19 (6m - 4y)	<input type="text"/> VFC	1. <input type="text" value="--Choose vaccine--"/> <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> # of Doses   Lot Number   Expiration (mm/dd/yyyy) <a href="#">Add More ↓</a>	Pfizer 3 Dose Vial - 30 doses/10 Vials Per Box <input type="text" value="0"/>
COVID-19 (6m - 11y)	<input type="text"/> VFC	1. <input type="text" value="--Choose vaccine--"/> <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> # of Doses   Lot Number   Expiration (mm/dd/yyyy) <a href="#">Add More ↓</a>	Currently not available
COVID-19 (5y - 11y)	<input type="text"/> VFC	1. <input type="text" value="--Choose vaccine--"/> <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> # of Doses   Lot Number   Expiration (mm/dd/yyyy) <a href="#">Add More ↓</a>	Pfizer Single Dose Vials - 10 Per Box <input type="text" value="0"/>
COVID-19 (12y - 18y)	<input type="text"/> VFC	1. <input type="text" value="--Choose vaccine--"/> <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> # of Doses   Lot Number   Expiration (mm/dd/yyyy) <a href="#">Add More ↓</a>	<input type="text" value="--Choose vaccine--"/> <input type="text" value="0"/> <a href="#">Add More ↓</a>



# VFC Ordering Expectations

- As agreed upon during initial enrollment and recertification, all actively enrolled VFC Providers must “order all ACIP-recommended vaccines (including flu and special-order vaccines) to meet the needs of the total VFC-eligible patient populations reported for the VFC PIN” (Provider Agreement Addendum 8A).
- Enrolled VFC Providers will be expected to order COVID-19 vaccines for all their VFC-eligible patients.
- VFC Providers who have not historically ordered VFC Vaccines but want to only order COVID-19 vaccines cannot do so. They are also expected to order all other routine vaccines for their VFC-eligible patients.



# Initial COVID-19 Vaccine Orders

- Providers can place supplemental orders for COVID-19 vaccine even if it is not yet time for their routine order.
- No need to list prior formulations of COVID-19 vaccine as part of the VFC on-hand inventory
  - Previous Bivalent mRNA COVID-19 vaccines for Pfizer and Moderna have now been deauthorized following authorization of updated COVID-19 vaccines.
  - Old formulations should be wasted following local regulations and practice protocols for disposing of regulated medical waste.
- Providers may submit COVID-19 ordering on a monthly frequency



**IMPORTANT:** Providers that would like to receive COVID-19 vaccines from VFC must be enrolled in the program and receive vaccines directly. No redistribution of VFC supplied vaccines is allowed.





# Vaccine Shipments & Deliveries

- Vaccine Shipments

- Moderna and Novavax vaccines will be shipped by McKesson.
  - COVID-19 vaccine orders will follow same shipping timelines for routine vaccines (shipping approximately within 3 days of order receipt at McKesson).
  - Moderna (SPIKEVAX®) vaccine ships frozen between -50°C and -15°C (-58°F and 5°F).
  - Novavax vaccine ships like other routine refrigerated vaccines at temperatures between 2° to 8°C (36° to 46°F).
- Pfizer vaccines will ship directly from Pfizer (Direct Ship Vaccines).
  - Will be shipped on dry ice on ultra low temperature conditions.
  - CDC contract stipulates vaccines must be delivered within 15 days of order receipt by CDC.
  - For vaccines with diluent (6m-4y) diluent will be shipped separately and will arrive at the same time of before vaccines arrive.





# Vaccine Storage Space

When ordering, ensure that you have enough vaccine storage space to accommodate your routine VFC vaccines, flu vaccine, private-purchase vaccines and COVID vaccines. And soon to come RSV vaccines!

Monitor vaccine storage units regularly and purchase additional storage units if capacity cannot accommodate the inventory in a manner consistent with VFC Program requirements (*Provider Agreement Addendum 13G*).

## Setting Up Vaccine Storage Units



MMRV, Varicella, and MMR<sup>®</sup>II (Merck) must be stored in the freezer. Shingrix and Priorix (MMR-GSK) must be stored in the refrigerator with all other VFC and VFA vaccines. Refer to the [COVID-19 Vaccine Product Guide](#) for storage info that varies by product. Organize refrigerators and freezers to facilitate vaccine management and reduce administration errors. Do not store vaccines until storage units have stabilized within their OK ranges for 3-5 days.

**Sample Refrigerator**

- ✓ Clearly label VFC, VFA, BAP, and private vaccines.
- ✓ Group vaccines (pediatric, adolescent, adult).
- ✓ Label shelf space or baskets to make vaccines easy to find.
- ✓ Position vaccines or baskets 2-3 inches away from walls, floor, and other baskets.
- ✓ Store vaccines in original packaging with earliest expiration date in front.
- ✓ Diluents may be stored next to refrigerated vaccines unless manufacturer states otherwise. Never store diluents in the freezer.
- ✓ If necessary, medications or biologics may be stored below vaccines and on a different shelf.

CDPH Contact:

Usable space for vaccine is inside dashed lines.

- ✗ Do not block air vents.
- ✗ Do not stack baskets on top of each other.
- ✗ No vaccines in doors.
- ✗ No food or beverages.

**Sample Chest Freezer**

Refrigerator temperatures: 36.0°F to 46.0°F (OK range)

Freezer temperatures: -58.0°F to 5.0°F (OK range)



# Vaccine Management

- Unlike the previous US Government COVID-19 Vaccine Program, wasted, spoiled, and expired COVID-19 doses must be reported to VFC.
- Expired/spoiled vaccines must be returned to McKesson. Wasted doses should be wasted following local regulations and practice protocols for the disposal of regulated medical waste.
- Just like with all other routine VFC vaccines, VFC providers will be required to account for all COVID-19 vaccine doses ordered on their [MyVFCVaccines](#) account, including reporting on-hand inventory, and doses administered.



# Provider Resources and Communications



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

ENHANCED BY Google

**Home**

**COVID-19 Vaccine Resources**

**Vaccine Information**

- COVID-19 Vaccine Access & Ordering (Infographic)
- COVID-19 Vaccine Product Guide
- COVID-19 Vaccine Timing Guide | Spanish

**Pfizer-BioNTech (2023-24 COVID-19 Vaccine)**

- Approval of Comirnaty for 12Y+: Provider Letter | Package Insert | COMIRNATY (FDA)
- Authorization under EUA for 6M-11Y: Provider Letter | Fact Sheet for HCPs | Fact Sheet for Recipients & Caregivers | Pfizer-BioNTech COVID-19 Vaccine (FDA)
- Websites: Manufacturer | CDC Resources

**Moderna (2023-24 COVID-19 Vaccine)**

- Approval of Spikevax for 12Y+: Provider Letter | Package Insert | FDA page
- Authorization under EUA for 6M-11Y: Provider Letter | Fact Sheet for HCPs | Fact Sheet for Recipients & Caregivers | Moderna COVID-19 Vaccine (FDA)
- Websites: Manufacturer | CDC Resources

**Novavax (2023-24 COVID-19 Vaccine)**

- TBD
- Websites: Manufacturer | CDC Resources

**General Resources**

- CDC Recommends Updated COVID-19 Vaccine for Fall/Winter Virus Season (CDC)
- Updated mRNA COVID-19 Vaccines to Better Protect Against Currently Circulating Variants (FDA)
- Updated COVID-19 Vaccines for Use in the United States Beginning in Fall 2023 (FDA)
- Resources for the Fall Respiratory Illness Season (COVID-19, Flu and RSV) (FDA)

**Vaccine Administration**

- Interim Clinical Considerations for Use of COVID-19 Vaccines (CDC)
- ACIP Recommended Immunization Schedules: Child and Adolescent | Adult (CDC)
- Coadministration of COVID-19 Vaccines (CDC) | Coadministration Tips (graphic)
- Reporting Adverse Events to VAERS
- Reporting Page & Feedback

**Contact VFC**

Phone: 1-877-243-8832  
Business hours:  
Monday - Thursday: 9 am - 4:30 pm  
Friday: 9 am - 4 pm  
Fax: 1-877-329-9832

- Find a VFC field representative in your area
- Find other VFC provider offices in your area
- Send us your comments at MyVFCVaccines@cdph.ca.gov

**Sign up to receive EZIZ news and VFC letters via email!**

**Frequently Asked Questions**

COMING SOON

**COVID-19 Vaccine Product Guide**

Check vaccine labels and EUA fact sheets before use to avoid mix-ups. EUA fact sheets supersede info on vials and carton. Refer to CDC Product Guide for more information.

	Pfizer			
	Infant/Toddler 6 months-4 years*	Bivalent 6 months-4 years	Pediatric Primary Series 5-11 years	Bivalent 5-11 years
	Deauthorized	"Bivalent" on label	Deauthorized	"Bivalent" on label
<b>Packaging</b>	Maroon Cap	Maroon Cap	Orange Cap	Orange Cap
Doses Per Vial	10 doses	10 doses	10 doses	10 doses
Carton Size	100 doses	100 doses	100 doses	100 doses
Min. Standard Order	Not Available	100 doses	Not Available	100 doses
NDC Unit of Use (total)	59267-0078-01	59267-0609-01	59267-1055-01	59267-0565-01
CVX Code	219	302	218	301
<b>Storage Limits Before Puncture:</b> Label vaccine with expiration and use-by dates.				
ULT (-90°C to -60°C)	Up to 24 months from manufacture date.			
Thermal Shipper				
Freezer				
Refrigerator (2-8°C)	Up to 10 weeks (write the date on carton)			
Expiration Date	24 months from manufacture date printed on vial and carton or check product website.			
<b>Administration</b>				
Diluent (supplied)	2.2 mL per vial	2.2 mL per vial	1.3 mL per vial	1.3 mL per vial
Dose Volume-Primary/Additional	<b>Do not use.</b>	0.2 mL <sup>1</sup> (3 mcg dose)	<b>Do not use.</b>	0.2 mL <sup>1</sup> (10 mcg dose)
Dose Volume-Booster	N/A	N/A	N/A	N/A
Room Temp Thaw Time	≤ 25°C (77°F)			
Total Time at				

Updated version coming soon!

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

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

GAVIN NEWSOM  
Governor

September 1, 2023 IZB-FY-23-24-04

TO: California Vaccines for Children (VFC) Providers

**COVID-19 VFC Program Letter**

SUBJECT: New Pre **Coming soon!** line (PCV20);

**Dear VFC Provider,**

The US Food and Drug Administration (FDA) has licensed and the federal Advisory Committee on Immunization Practices (ACIP) has issued recommendations for the 20-valent pneumococcal conjugate vaccine (PCV20).

**Key updates include:**

- Children ages 2-23 months should receive either PCV15 or PCV20 according to recommended dosing and schedules.
- PCV15 or PCV20 can be used for catch-up vaccination for healthy children ages 24-59 months.
- Children ages 2-18 years with any risk condition who have received all recommended doses before age 6 years do not need additional doses if they have received at least one dose of PCV20. If they received PCV13 or PCV15 but not PCV20, they should receive a dose of PCV20 or pneumococcal polysaccharide vaccine (PPSV23) using the previously recommended doses and schedules.
- Children ages 6-18 years with any risk condition who have not received any dose of PCV13, PCV15 or PCV20 should receive a single dose of PCV15 or PCV20. When PCV15 is used, it should be followed by a dose of PPSV23 at least eight weeks later if not previously given.

Prevnar 20 (Pfizer) is a 20-valent pneumococcal conjugate vaccine indicated for active immunization for the prevention of

- invasive disease caused by *Streptococcus pneumoniae* serotypes 1, 3, 4, 5, 6A, 6B, 7F, 8, 9V, 10A, 11A, 12F, 14, 15B, 18C, 19A, 19F, 22F, 23F, and 33F in individuals 6 weeks of age and older.

Immunization Branch / Division of Communicable Disease Control  
850 Marina Bay Parkway, Bldg. P, 2<sup>nd</sup> Floor, Richmond, CA 94804  
(510) 620-3737 • FAX (510) 620-3774 • Internet Address: [www.getimmunized.ca.gov](http://www.getimmunized.ca.gov)

## COVID-19 Vaccine Resources



# VFC Flu Reports: 2023-2024

Claudia Aguiluz

VFC Program Section Chief, CDPH Immunization Branch



# Expanded VFC Flu Reports Coming this Fall

- [AB 1797](#) requires all providers to enter immunizations administered into the immunization registry (CAIR or RIDE).
- This fall, we are expanding our VFC provider flu reports to include number of flu doses administered reported in CAIR.
- As with previous reports, flu vaccine goal and % of target met will still be based on vaccine ordering.
- Use this opportunity to compare flu doses administered in your myVCFvaccines.org account and CAIR and review the tips on the report.



October 2023

## New Expanded Fall Flu Vaccine Report

Clinic: Happy Pediatrics  
PIN:123456 CAIR ID: 12345

### Get Ready to Expand Your Practice's Flu Excellence

During 2022-23, you reached 93% of flu vaccine target goal and your rating was: EXCELLENT. Congratulations for your accomplishment. Keep up the great work! See your last season report by logging in to your [MyVFCvaccines.org](#) account.

What's New? The California VFC Program is expanding your flu report for 2023-24 season to include VFC flu administration data from the California Immunization Registry (CAIR). While your rating (% target met) is still determined using the number of flu doses ordered on [myVFCvaccines](#), use this report to begin looking at your flu vaccine administration in CAIR.

How Are You Doing?		
Flu Doses for 2023-24		
Ordered:	Your Goal:	% of Flu Target Met:
75	100	75%

VFC Flu Doses Administered Reported to CAIR: 50

**Ratings will be based on % of target reached:**

**EXCELLENT:** >90%  
**GOOD:** 66%-89%  
**FAIR:** 41%-65%  
**POOR:** <40%

VFC providers who reach excellence by June 30, 2024 will be recognized on EZIZ.org.

### Are your flu doses administered keeping pace with your flu doses ordered?

California state law ([AB1797](#)) requires all providers to report vaccinations to the immunization registry the same day of administration but no later than 14 days. Future flu targets are anticipated to be based on flu doses reported to CAIR. Evaluate any discrepancy between VFC flu doses administered in CAIR and flu doses in [MyVFCvaccines](#). A difference likely indicates that some doses are not being entered into CAIR. We urge you to take the following actions:

1. Check your CAIR ID on this report. If your CAIR ID is not the one listed above, please edit your CAIR ID on your account at [myVFCvaccines.org](#). Each clinic site must have its own unique CAIR ID.
2. Ensure that your EHR is able to capture VFC eligibility. You will need to use this when assessing VFC flu doses.
3. Compare your VFC flu doses ordered to your VFC flu doses administered. In CAIR, set the date parameter to start the flu season on August 1 and end Oct 30 (to match this Flu Report). How close is your flu doses administered to your VFC flu order target? Are the VFC flu vaccines ordered being administered to your VFC patients?



# Expanded VFC Flu Reports Coming this Fall

You will be able to access your VFC 2023 Flu progress Reports, previous year's reports, and other awareness reports, such as the COVID Awareness Card for your practice in the main page of your myVFCVaccines account!



## MAIN PAGE

**Izzy the Bear- Pediatrics MD**  
**PIN: 888888**

**Provider of Record:** I'ma Person  
**Provider of Record email:** test\_provider@cdph.ca.gov  
**Vaccine Coordinator:** I'ma Person  
**Order confirmation email:** bklouie@comcast.net  
**Add'l order confirmation email:**  
megan.brunner@cdph.ca.gov  
**Phone:** (877) 243-8832  
**Address:** 850 Marina Bay Pkwy  
Richmond, CA 94804

[Current Provider's Information](#) | [Update Practice Information](#)

[Key Practice Staff Change Request](#)

[EZIZ Training Accounts Linked to PIN](#)

VFC Practice Profile [2022](#) [2021](#) [2020](#) [2019](#) [2018](#) [2017](#) [2016](#)

Flu Progress Report: [October 2021](#) [January 2022](#) [July 2022](#)  
[October 2022](#) [January 2023](#) [July 2023](#)

COVID Awareness Card: [May 2022](#) [October 2022](#)  
[March 2023](#)

VFA IIS Data Report: [April 2023](#) [August 2023](#)

**Provider Category:** Low Volume  
**Order Frequency:** Every 3 months

**Date of last order:**  
**Last order processed on:**



## Orders

[Order VFC Vaccine](#)

[View Order History](#)

## Inventory

[Enter Returns & Transfers](#)

[View Returns & Transfers](#)

[View Shipping History](#)

## Recertification

[View Recertification](#)

## SHOTS

All temperature excursions must be reported through SHOTS (Storage and Handling Online Triage System)

[Report/View Excursions](#)

[Log Out](#)



# Additional Resources for Providers

Terisha Gamboa, MPH

Health Educator, CDPH Immunization Branch



# CDPH Resources

## Updated Flu, COVID-19, RSV Job Aids

- [Pediatric/Adult Influenza Vaccine Guide \(IMM-859\)](#)
- [VFC Flu Usage Log \(IMM-1053F\)](#)
- [Block Timing Schedule \(IMM-395\) | Spanish](#)

### Immunization Timing 2023

Suggested schedule to meet recommendations on time. Refer to web version.

Birth		6 months – 18+ years					
HepB <sup>1</sup>		COVID-19 vaccine(s) <sup>2</sup>			Flu vaccine, every fall <sup>3</sup>		
Age	Interval from previous dose	Age	Interval from previous dose	Age	Interval from previous dose	Age	Interval from previous dose
2 months		4 months	1-2 months	6 months	1-2 months	12 months	1-2 months
DTaP (Diphtheria, Tetanus, Pertussis)		DTaP		DTaP		HepA <sup>4</sup> (age: 12-23 months)	
Polio (IPV)		Polio (IPV)	1-2 months	Polio (IPV)	1-14 months	MMR <sup>4,5,6</sup> (ages: 12-15 months)	
HepB <sup>3</sup> (age: 1-2 months)	1-2 months after birth dose	HepB <sup>3</sup> (if 1st dose given at 2 months)	1-2 months	HepB <sup>3</sup> (age: 6-18 months)	2-12 months and 24 months after 1st dose	Var <sup>10</sup> (age: 12-15 months)	
Hib (Hib meningitis)		Hib	1-2 months	Hib <sup>5</sup>	1-2 months	Hib (age: 12-15 months)	2-8 months
PCV (Pneumo)		PCV	1-2 months	PCV	1-2 months	PCV <sup>11</sup> (age: 12-15 months)	6-8 weeks
RV <sup>7</sup> (Rotavirus)		RV <sup>7</sup>	4-10 weeks	RV <sup>7</sup> (if Rotarix used for doses 1 or 2)	4-10 weeks		
						Age 4-6 years	DTaP Polio (IPV) MMR <sup>4,5,6</sup> Varicella <sup>10</sup>
						Age 11-12 years	Tdap HPV <sup>12</sup> (2 doses, can start at age 9) MenACWY (MCV4) MenB <sup>13</sup>
						Age 16 years	MenACWY (MCV4) MenB <sup>13</sup>

California Department of Public Health, Immunization Branch • EZIZ.org IMM-395 (9/23)

[Block Timing Schedule \(IMM-395\)](#)

### 2023-2024 FLU USAGE LOG

#### VACCINES FOR CHILDREN (VFC) PROGRAM

PIN: \_\_\_\_\_ Usage Period: \_\_\_\_\_ to \_\_\_\_\_

INSTRUCTIONS: Keep this log near your vaccines. Fill in today's date, patient info and then make a check for each vaccine administered. Upon completion of this form, count the number of checks for each vaccine and write in the Usage Period Total VFC flu vaccine usage since the previous order and current flu vaccine inventory must be reported with each vaccine order. File all usage logs for 3 years.

Today's Date	Patient Name (or medical record)	Date of Birth	Fluarix <sup>®</sup> 0.5 mL syringes	Flucelvax <sup>®</sup> 0.5 mL syringes	Fluzone <sup>®</sup> 0.5 mL syringes	Flumist <sup>®</sup> 0.2 mL sprayer	Fluorix <sup>®</sup> 0.5 mL syringes
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							

[VFC Flu Usage Log \(IMM-1053F\)](#)

## PEDIATRIC/ADULT INFLUENZA VACCINE 2023-2024

6 MONTHS & OLDER	<p><b>Fluarix<sup>®</sup> Quadrivalent</b> GlaxoSmithKline Biologicals 0.5 mL single-dose syringe</p>	<p><b>FluLaval<sup>®</sup> Quadrivalent</b> GlaxoSmithKline Biologicals 0.5 mL single-dose syringe</p>
	<p><b>Flucelvax<sup>®</sup> Quadrivalent</b> Seqirus 0.5 mL single-dose syringe</p>	<p><b>Fluzone<sup>®</sup> Quadrivalent</b> Sanofi Pasteur, Inc. 0.5 mL single-dose</p>
	<p><b>Afluria<sup>®</sup> Quadrivalent</b> Seqirus 0.5 mL single-dose syringe</p>	<p><b>Fluzone<sup>®</sup> Quadrivalent</b> Sanofi Pasteur, Inc. 0.5 mL single-dose vial</p>
3 YEARS & OLDER	<p><b>Afluria<sup>®</sup> Quadrivalent</b> Seqirus 5.0 mL multi-dose vial*</p>	<p><b>Fluzone<sup>®</sup> Quadrivalent</b> Sanofi Pasteur, Inc. 5.0 mL multi-dose vial*</p>
	<p><b>Flucelvax<sup>®</sup> Quadrivalent</b> Seqirus 5.0 mL multi-dose vial*</p>	<p><b>Fluzone<sup>®</sup> Quadrivalent</b> Sanofi Pasteur, Inc. 5.0 mL multi-dose vial*</p>
2-49 YEARS OLD & HEALTHY	<p><b>FluMist<sup>®</sup> Quadrivalent</b> MedImmune Vaccines, Inc. 0.2 mL single-dose nasal sprayer</p>	<p><b>FLUAD<sup>®</sup> Adjuvanted Quadrivalent</b> Seqirus 0.5 mL single-dose syringe</p>
	<p><b>FluBlok<sup>®</sup> Quadrivalent</b> Protein Sciences 0.5 mL single-dose syringe</p>	<p><b>Fluzone<sup>®</sup> High-Dose Quadrivalent</b> Sanofi Pasteur, Inc. 0.7 mL single-dose syringe</p>
18 YEARS & OLDER		<p><b>Fluzone<sup>®</sup> High-Dose Quadrivalent</b> Sanofi Pasteur, Inc. 0.7 mL single-dose syringe</p>

**STORE ALL INFLUENZA VACCINES IN THE REFRIGERATOR.**

**VFC Questions: Call 877-2GET-VFC (877-243-8832)**

Children under 9 years of age with a history of fewer than 2 doses of influenza vaccine are recommended to receive 2 doses this flu season. See [CDC Website](#).

Vaccines available through the Vaccines for Children Program in 2023-24 should only be used for VFC-eligible children 18 years of age or younger.

\* Multi-dose flu vaccines, which contain thimerosal, should NOT be given to pregnant women and children under 3 years of age unless Secretary of the Health and Human Services Agency issues an exemption (CA Health & Safety Code 124172).

Preferred vaccine product for persons 65 or older. If not available, any other age-appropriate inactivated product may be given.

California Department of Public Health IMM-859 (8/23)

[Pediatric/Adult Flu Vaccine Guide \(IMM-859\)](#)





# CDPH Resources cont.

## Additional Updated Job Aids

- Pneumococcal Timing Guide for Children (IMM-1159) – **will be posted soon!**
- [Vaccine Fact sheets](#)
  - [MenACWY](#) (IMM-1064)
  - Pneumococcal Conjugate (IMM -1451) – **coming soon!**

**Vaccine Fact Sheet: MenACWY (MCV4)**

Topic	Menactra*	Menveo*
<b>Manufacturer</b>	Sanofi Pasteur <a href="#">Detailed Prescribing Information</a> ( <a href="#">Fda.gov/files/vaccines,%20blood%20&amp;%20biologics/published/Package-Insert---Menactra.pdf</a> )	GSK <a href="#">Detailed Prescribing Information</a> ( <a href="#">Gskpro.com/content/dam/global/hcpportal/en_US/Prescribing_Information/Menveo/pdf/MENVEO.PDF</a> )
<b>Protects Against</b>	Invasive Meningococcal Disease caused by Neisseria meningitidis A, C, Y and W-135.	Invasive Meningococcal Disease caused by Neisseria meningitidis A, C, Y and W-135.
<b>Routine Schedule</b>	One (1) dose at 11-12 years and one (1) booster dose at 16 years	<b>At 2 months of age</b> – “4 dose series at 2, 4, 6, and 12 months” <b>At 7-23 months of age</b> – “2 dose series with the second dose administered in the second year of life, and at least 3 months after the first dose” For individuals 2-55 years – administer as single dose (primary vaccination), and single booster dose for individuals 15-55 years (has to be at least 4 years after prior dose).
<b>Minimum Intervals</b>	8 week minimum interval between doses	8 week minimum interval between doses
<b>Approved Ages</b>	9 months to 55 years	2-vial presentation approved for children 2 months through 55 years. 1 vial presentation approved for 10 year through 55 years.
<b>Administration</b>	Intramuscular (IM) injection	Intramuscular (IM) injection
<b>Packaging</b>	Vaccine is packaged as 5 single-dose vials of lyophilized Hib vaccine and 5 single dose 0.6mL vials of diluent	Vaccine is packaged as 2-vials (5 pack) and <b>requires reconstitution</b> before use. OR 1-vial (10 pack) and <b>does not require reconstitution</b> before use.
<b>Storage</b>	Refrigerate between 36°F and 46°F (2°C to 8°C) <b>Do not freeze</b>	Refrigerate between 36°F and 46°F (2°C to 8°C) <b>Do not freeze</b>
<b>Full ACIP Recommendations</b>	<a href="#">ACIP MCV4 Vaccine Recommendations   CDC</a> ( <a href="#">Cdc.gov/vaccines/hcp/acip-recs/vacc-specific/mening.html</a> )	<a href="#">ACIP MCV4 Vaccine Recommendations   CDC</a> ( <a href="#">Cdc.gov/vaccines/hcp/acip-recs/vacc-specific/mening.html</a> )

[MenACWY \(IMM-1064\)](#)

## Pneumococcal Vaccine Timing–For Children

### Age 2-23 Months

[View web version of this schedule.](#)

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

- Catch-up: Healthy children 24-59 months: 1-4 doses PCV15 or PCV20 depending on age and timing of past doses.  
Children 24-71 months with underlying conditions: 1-4 doses PCV15 or PCV20 depending on age and timing of past doses.

### Age 2-18 Years With Underlying Condition(s)

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

### Risk Categories:

**Chronic conditions:**

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

**Immunocompromise:**

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


PCV 20  
Prennar®

OR

PCV15  
Vaxneuvance®

8 weeks

PPSV 23  
Pneumovax® 23



## Pneumococcal Timing Guide for Children (IMM-1159)



# CDPH Resources cont.

## Provider Resources

- [COVID-19 Clinical Talking Points for Providers](#) (IMM-1431)
- [VFC Flu Vaccine Page](#) (EZIZ)

## Promotional Materials

- [Who needs a flu vaccine? poster](#) (IMM-782)
- [Flu & Respiratory Disease Materials](#) (EZIZ)

## Vaccine Communication Toolkits

- [Don't Wait Vaccinate Toolkit](#) (CDPH)
- [Fight Flu. Get Vaccinated Toolkit](#) (CDPH)
- [Don't Wait Vaccinate Flu Toolkit](#) (CIC)

# Guess who needs flu and COVID vaccines ?



Everyone **6 months of age and older** needs COVID-19 and yearly flu vaccines. **Children 8 years and younger need 2 doses** of flu vaccine the first time they get vaccinated. Ask us about getting vaccinated today!

Todas las personas **mayores de 6 meses** de edad necesitan las vacunas contra el COVID-19 y la vacuna anual contra la influenza. **Niños menores de 8 años necesitan 2 dosis** de la vacuna contra la influenza la primera vez que se vacunan. ¡Pida que lo vacunemos hoy mismo!

This publication was supported by Grant Number H23/CCH922507 from the Centers for Disease Control and Prevention (CDC). IMM-782 (7/23)



[Who needs flu and COVID-19 vaccines? poster \(IMM-782\)](#)

# Protect yourself from COVID-19, flu, and RSV

## [CDC Respiratory Viruses page](#)

- CDC recommends that everyone 6 months and older stay up to date on [COVID-19 vaccines](#) and receive a [seasonal flu vaccine](#).
- If you are 60 years and older, talk to your healthcare provider to see if RSV vaccination is right for you.
- CDC also recommends nirsevimab for all infants younger than 8 months who are born during or entering their first RSV season, as well as older babies 8 to 19 months old including AIAN children.
- [Up-to-date COVID-19 resources](#) (CDC) – **updated on 9/12!**

**Protect yourself from COVID-19, Flu, and RSV**  
It is common to get sick from respiratory viruses such as [COVID-19](#), [flu](#), and [respiratory syncytial virus \(RSV\)](#), especially in the fall and winter. There are actions you can take to protect yourself and others. Learn about whether you're more likely to get seriously ill, how to prevent these viruses, and if these viruses are spreading in your community.

**COVID-19**  
COVID-19 can be very contagious and spreads quickly. Most people with COVID-19 have mild symptoms, but some people become severely ill.

**Flu**  
Flu is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and sometimes the lungs.

**RSV**  
RSV usually causes mild, cold-like symptoms. Most people recover in a week or two, but RSV can be serious, especially for babies and older adults.

**Respiratory Virus Activity**  
Select your state or territory:  
United States

Percent of Total ED Visits

End Date of Week

Legend: COVID (Green), Flu (Blue), RSV (Purple), Combined (Black)

End Date of Week	COVID (%)	Flu (%)	RSV (%)	Combined (%)
09/10/2022	2.0	2.0	0.5	4.5
10/15/2022	2.0	2.0	0.5	4.5
11/19/2022	2.0	2.0	0.5	4.5
12/24/2022	2.0	2.0	0.5	4.5
01/28/2023	2.0	2.0	0.5	4.5
03/04/2023	2.0	2.0	0.5	4.5
04/08/2023	2.0	2.0	0.5	4.5
05/13/2023	2.0	2.0	0.5	4.5
06/17/2023	2.0	2.0	0.5	4.5
07/22/2023	2.0	2.0	0.5	4.5
08/26/2023	2.0	2.0	0.5	4.5



# Updated FDA Materials

- [Moderna](#) and [Pfizer](#):
  - Fact Sheet for Recipient and Caregivers
  - Fact Sheet for Healthcare Providers
  - Dear Healthcare Provider Letters

## COVID-19, Flu and RSV

*FDA Resources for the Fall Respiratory Illness Season*



You may be eligible for three vaccinations this fall – flu, COVID-19, and RSV (respiratory syncytial virus) – and wondering if you should get all three shots.

This is your guide to FDA-authorized and approved vaccines, tests and treatments for all three illnesses. Talk to a health care professional about what works best for you.

[Vaccines](#) | [Tests](#) | [Treatments](#)

### VACCINES



COVID-19 Vaccines



Flu Vaccines

[FDA Resources for the Fall Respiratory Illness Season](#)





# Additional Partner Resources

## General Resources

- [Child and Adolescent Immunization Schedule](#) (ACIP)
- [Vaccines by age \(0-18 years\)](#) (CDC)

## Flu Resources

- [Flu Communications Resources Toolkit](#) (CDC)

## RSV resources

- [RSV Immunizations General Info Page](#) (CDC)
- [RSV FAQs](#) (CDC)
- [American Academy of Pediatrics FAQs on RSV](#) (AAP)
- [Emily's Story on Shotbyshot.org](#)

## Campaigns

- [Let's Rise Campaign](#) for Routine Immunizations (CDC)

**Upcoming Webinars:** [Immunization and Training Webinar on RSV in Infants - September 27](#) (CDC)



# AB 1797 Resources

- [FAQs](#) page
- Short [video](#) highlighting benefits of using CAIR
- [Doses administered report](#)
  - See [CAIR user guides](#) to enter doses correctly



Please ensure you are entering all doses administered into the Immunization Registry (CAIR or RIDE). All newly recommended immunizations, including monoclonal antibodies, need to be submitted to the registry.



## Prepare for the New Immunization Registry Requirement

### What is the new requirement?

AB 1797, a California bill effective January 1, 2023, requires providers to enter immunizations they administer as well as a patient's race and ethnicity into a California immunization registry (CAIR or HealthyFutures/RIDE).



### Where can I learn more? Visit [bit.ly/AB1797FAQ](https://bit.ly/AB1797FAQ).

### Enroll Now

**There are many benefits to participating in an immunization registry.** To learn more, visit [bit.ly/CAIRvideo](https://bit.ly/CAIRvideo) or to start the enrollment process, visit [cairweb.org](https://cairweb.org).

Providers in Alpine, Amador, Calaveras, Mariposa, Merced, San Joaquin, Stanislaus, or Tuolumne counties will need to enroll in Healthy Futures/RIDE ([www.myhealthyfutures.org](https://www.myhealthyfutures.org)). For assistance, contact the Healthy Futures/RIDE Help Desk at (209) 468-2292 or [support@myhealthyfutures.org](mailto:support@myhealthyfutures.org).



### We are here to support you along the way

Questions? [CAIRHelpdesk@cdph.ca.gov](mailto:CAIRHelpdesk@cdph.ca.gov)

Phone: 800-578-7889

## [AB 1797 Communication Flyer](#)

# Digital Vaccine Record

**GET YOUR DIGITAL VACCINE RECORD**



Private. Convenient. Secure.

**What is a Digital Vaccine Record (DVR)?**  
Your Digital Vaccine Record (DVR) is an electronic vaccination record from the California Immunization Registry (CAIR) and is an official record of the state of California.

**What information does the DVR include?**  
The DVR has your name, date of birth, vaccination dates, and the vaccines you received.

**Where do I access my Digital Vaccine Record?**  
Visit [myvaccinerecord.cdph.ca.gov](http://myvaccinerecord.cdph.ca.gov) to access your record. You will need to enter your first and last name, date of birth, and mobile number or email address. You will create a PIN which will be required to obtain your DVR when the link to your record is provided to you.

**What digital records can I access from the DVR Portal?**  
There are two types of records you can access from the DVR Portal:

- **COVID-19 QR code** that (when scanned by a SMART Health Card reader) will display the same information as your paper CDC vaccine card: your name, date of birth, vaccination dates, and vaccines.
- **Record of all your vaccinations** that were reported by pharmacies and healthcare providers to CAIR. Note that your historical vaccinations may not have been reported to CAIR.




For more DVR questions, visit [myvaccinerecord.cdph.ca.gov/faq](http://myvaccinerecord.cdph.ca.gov/faq) or call 1-833-422-4255 (open M-F 8AM-8PM, SA-SU 8AM-5PM).

California Department of Public Health, Immunization Branch

IMM-1461 (3/9/23)

[DVR Fact Sheet](#)

**OBTENGA SU REGISTRO DIGITAL DE VACUNACIÓN**



PRIVADO. COVENIENTE. SEGURO.



**Registro Digital de Vacunación (DVR)**  
Su Registro Digital de Vacunación (DVR, por sus siglas en inglés) es un registro electrónico de vacunación procedente del Registro de Vacunación de California (CAIR, por sus siglas en inglés) y es un registro oficial del estado de California.

**¿Qué información incluye el DVR?**  
El DVR tiene su nombre, fecha de nacimiento, fechas de vacunación y las vacunas que recibió.

**¿Dónde accedo mi Registro Digital de Vacunación?**  
Visite [myvaccinerecord.cdph.ca.gov](http://myvaccinerecord.cdph.ca.gov) para acceder su registro. Necesita ingresar su primer nombre y apellido, fecha de nacimiento y número de celular o correo electrónico. Necesitará crear un PIN para poder obtener su DVR cuando se le proporcione el enlace a su registro.

**¿Qué registros digitales puedo acceder desde el Portal DVR?**  
Hay dos tipos de registros a los que puede acceder desde el Portal DVR:

- **Código QR de COVID-19** que (cuando es escaneado por un lector de tarjetas SMART Health) mostrará la misma información que su tarjeta de papel de los CDC: su nombre, fecha de nacimiento, fechas de vacunación y las vacunas.
- **Registro de todas las vacunas** que informaron las farmacias y otros proveedores de salud a CAIR. Tome en cuenta que es posible que su historial de vacunación no se haya ingresado a CAIR.



Para más preguntas sobre el DVR, visite [myvaccinerecord.cdph.ca.gov/faq-es/](http://myvaccinerecord.cdph.ca.gov/faq-es/) o llame al 1-833-422-4255 (L—V 8AM-8PM, S-D 8AM-5PM).

California Department of Public Health, Immunization Branch

IMM-1461S (3/30/23)

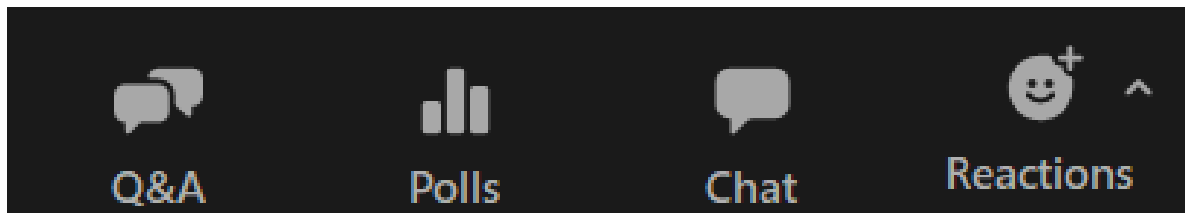
[Spanish Version](#)

- To access their DVR, patients should visit the [Digital Vaccine Record \(DVR\) portal](http://myvaccinerecord.cdph.ca.gov) ([myvaccinerecord.cdph.ca.gov](http://myvaccinerecord.cdph.ca.gov))
- Flyers are also available in [Arabic](#), [Simplified Chinese](#) and [Traditional Chinese](#), [Korean](#), [Tagalog](#) and [Vietnamese](#).
- The DVR request form is also available in the languages listed above to support easy communication. Records are also printable in these languages! See our [DVR FAQs](#) for more information.



# 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”**







# Stay informed!

## Provider Resources on [eziz.org](https://eziz.org)

 California Vaccines for Children Program	 California Vaccines for Adults Program	 California Bridge Access Program	 Local Health Departments
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### COVID-19 Vaccine Resources

#### Vaccine Information

- [COVID-19 Vaccine Access & Ordering \(Infographic\)](#)
- [COVID-19 Vaccine Product Guide](#)
- [COVID-19 Vaccine Timing Guide | Spanish](#)

### [EZIZ COVID-19 Resources](#)

#### Alerts!



#### 2023 COVID-19 Vaccine

- [CDC Recommends Updated 2023-2024 COVID-19 Vaccines for Everyone 6 Months and Older \(9/13\)](#)
- [Resources](#)



[Immunization Branch Listserv Emails Sign-Up](#)

# Upcoming COVID-19 Crucial Conversations Webinar

**Topic:** Talking with Patients about the Updated COVID-19 Vaccine

**Description:** Learn conversation methodologies for effectively talking with patients about the updated 2023-2024 monovalent COVID-19 vaccine.

**Speaker:** Dr. Alex McDonald, cofounder of #ThisIsOurShot

**When:** Wednesday, September 27 at 12:00PM - 1:00PM PT

[Register here!](#)



**COVID-19 Crucial Conversations**



**Upcoming Webinar:**  
**Talking with Patients about the Updated COVID-19 Vaccine**

Learn conversation methodologies for effectively talking with patients about the updated monovalent COVID-19 vaccine.

**Wednesday, September 27**  
**12:00PM - 1:00PM PT**

[\*\*Register here!\*\*](#)





# Weekly Provider Webinar



**Friday**

**[Weekly Provider Webinar](#)**

**Next session: Friday, September 22, 9AM-10:30AM**



**Special Thanks to  
Today's Presenters:  
Samantha Johnston, MD, MPH  
Claudia Aguiluz  
Terisha Gamboa, MPH**



**Thank you for joining CDPH for Afternoon  
TEAch!**

