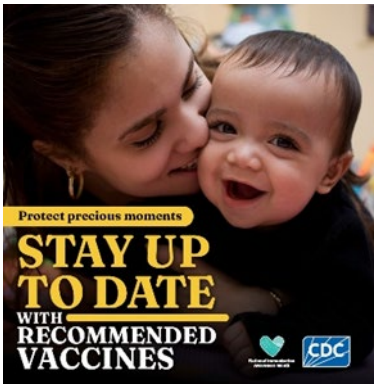
August 2024 VFC Provider Updates



National Immunization Awareness Month

National Immunization Awareness Month (NIAM) is an annual observance held in August to highlight the importance of vaccination for people of all ages.

Vaccine Updates

PCV21

Capvaxive (Merck) is a new PCV21 vaccine, licensed for adults only. This vaccine is recommended for adults 19 years and older who currently are recommended to receive a pneumococcal conjugate vaccine.

RSV

- A single lifetime dose of RSV vaccine of either Abrysvo, Arexvy, or MResvia is recommended for all adults 75 years and older.
- A single lifetime dose of RSV vaccine of either Abrysvo, Arexvy, or MResvia is recommended for adults 60 - 74 years of age if they are at increased risk of RSV. Below is a listing of medical conditions or risk factors that may qualify an individual 60 - 74 years of age to receive an RSV vaccine:
  - Chronic lung or chronic heart disease
  - Cardiovascular disease
  - Moderately to severely immunocompromised individuals in the 60 - 74 age group
  - Neuromuscular or neurologic conditions in individuals in the 60 - 74 age group
  - Advanced chronic kidney disease in individuals in the 60 - 74 age group
  - Liver disease, blood disorders, and other chronic medical conditions that healthcare providers determine to put the individual at risk for RSV
  - Adults 60 years and older who reside in a long-term care facility
- Pregnant women should receive a single lifetime dose of the **Abrysvo RSV vaccine** between 32 - 36 weeks gestation from September 1 - January 31.
  - Infants who are born to women who received Abrysvo during a previous pregnancy are recommended to receive Beyfortus after delivery
  - Missouri Pharmacists cannot immunize children less than 3 years of age. Also, they cannot administer Abrysvo, Axevy, MResvia or Beyfortus without a prescription

  - Providers needing to purchase private stock can visit https://pro.campus.sanofi/us/products/beyfortus/resources/plan-next-rsv-season for purchase options
  - VFC providers offering women's health should order Abrysvo for pregnant VFC-eligible patients. If you have questions about whether you should stock Abrysvo, please speak to your VFC Consultant.
- **<u>If the individual has already received a single dose of either Abrysvo, Arexvy, or MResvia no further doses are needed.</u>**
- Beyfortus (Nirsevimab) is recommended for infants birth up to 8 months of age who are entering their first RSV season starting October 1 - March 31 each year if the mother did not receive a dose of Abrysvo during this pregnancy.
  - Dosing is as follows:
    - Infants who weigh less than 5 kg or 11 lbs. should receive 50 mg IM
    - Infants who weigh 5 kg or 11 lbs. and more should receive 100 mg IM
    - Infants 8 - 19 months of age should receive 200 mg IM (2 doses of 100 mg) if they are at increased risk of RSV disease as defined by the ACIP
      - Premature infants with chronic lung disease
      - Severely immunocompromised
      - Severe Cystic Fibrosis disease
      - American Indian and Alaskan Native
  - VFC providers with patients under the age of two years, must follow the ACIP recommended guidelines and order Beyfortus (Nirsevimab) for patients according to the provider patient profile

Influenza

- Updated **trivalent** 2024 - 2025 influenza vaccine containing the following strains:
  - H1N1
  - H3N2
  - B/Victoria
- Adults 18 - 64 years and older who have received a solid organ transplant or who are taking immunosuppressive medication are now recommended to receive the HD-IIV3 or the adjuvanted (aIIV3) vaccine.

COVID-19

ACIP approved the new FDA-recommended updated 2024 - 2025 COVID-19 vaccine for all ages 6 months and older. This updated COVID-19 vaccine will be available this fall, however, we do not have an exact date.

All VFC providers must order and administer COVID-19 vaccine according to the patient population in the provider profile.

MenQuadfi

MenQuadfi is no longer available in 5-pack-1-dose vial packaging. The presentation is now a 10-pack-1 dose vial and the replacement NDC is 49281-0590-10.

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Penbraya

- Penbraya is a combination MenABCYW vaccine composed of MenACWY (Nimenrix) and MenB-FHbp (Trumenba).
- Penbraya may be used for adolescents 16 years of age and older and:
  - Need a 2nd dose of MenACWY and are receiving their first dose of MenB;
  - Need a 2nd dose of MenACWY and a 2nd dose of MenB Trumenba.
- Providers administer a dose of Trumenba 6 months after the dose of Penbraya. Bexsero cannot be used to finish the MenB series.
- ACIP makes recommendations based on the risk-benefit analysis conducted by the ACIP-designated workgroup. These recommendations may differ from the package insert. VFC providers must use the ACIP recommendations for vaccination.
- The benefit is one less needle stick for older adolescents needing the 2nd dose of MenACWY and the 1st dose of MenB.
- Providers still need to carry a monovalent MenB vaccine.

VFC Program Updates

VFC411

Please look for VFC411 dates for Spring 2025! We will offer face-to-face training for VFC providers next spring. The VFC primary and backup contacts have the following options for training for this year:

- Participation in a VFC Compliance or Site Visit
- Completion of Vaccines for Children (VFC) and Vaccine Storage and Handling modules at the CDC You Call the Shots website

2024 Medicare Plan Coverage/Section 317 Funded Adult Vaccines

Patients must be screened for eligibility before vaccination and eligibility must be documented upon vaccine administration.

Part A	Part B	Part D
This plan does not provide coverage for any vaccinations. Patients with this coverage are eligible for all Section 317 vaccines.	This plan provides coverage for the following vaccines only: Influenza, Pneumonia, Hepatitis B, and COVID. All other vaccines are eligible for Section 317 vaccines.	This plan provides coverage for most vaccinations. Patients with this coverage are not eligible for Section 317 vaccines.

Additional Information can be found at https://www.medicareinteractive.org/get-answers/medicare-covered-services/preventive-services/vaccines-and-immunizations

CDC Validation Survey

The CDC conducts ongoing telephone surveys of random providers who receive federal direct ship vaccine orders. These phone calls are usually made within 2-3 weeks of the order being transmitted to CDC. We encourage you to respond timely to this brief telephone validation survey.

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CHIP

MOHealthnet has several different CHIP codes; however, for immunization eligibility and administration purposes, only codes 73, 74, & 75 are considered for CHIP vaccine. Any changes to this will be relayed to all VFC providers from the Department of Health and Senior Services, Bureau of Immunizations.

Reminders

- **PIN -** Each VFC provider has a unique PIN (Provider Identification Number). Please include your PIN on all documents and emails sent to the VFC program to avoid delays in processing.
- **Vaccine Orders/Returns -** When submitting vaccine orders or returns, the date created must be the current date.
- **Normal Ordering Cadence -** VFC orders are placed during the regular ordering cycle from the 1st to the 14th of the month. However, if you determine that your vaccine stock is not sufficient, you may place an additional order with the submission of a current reconciliation and temperature documentation if it has been more than 14 days since the last submission.
- **VFC Shipments -** VFC providers must accept vaccine shipments in ShowMeVax when the shipment arrives at the clinic, not at the end of the month.
- **Temperature Excursions -** Temperature excursions occur when the actual, minimum or maximum temperature deviates from 2ºC and 8ºC (36ºF - 46ºF) in the refrigerator or deviates from -50ºC and -15ºC (-58ºF - 5ºF) in the freezer, regardless of the length of time of the excursion. Each excursion must be reported to the VFC Program immediately by contacting the help desk at vfc-smvsupport@health.mo.gov or speaking directly with your VFC Consultant for additional requirements and guidance. Vaccines that have been exposed to an excursion must be quarantined and should never be used on any patients until the manufacturers have determined the vaccine is viable.
- **Vaccine Transfers -** VFC providers must submit a request to transfer vaccines to another provider. Transfer requests should be submitted to vfc-smvsupport@health.mo.gov and must include the vaccines being transferred along with the PIN of the provider receiving the vaccine.
- **Vaccine Borrowing -** Effective immediately, VFC providers do not need to submit borrowing forms to the helpdesk. Borrowing forms must be kept on-site for a minimum of three years and made available upon request. VFC providers who use the auto decrementing feature in ShowMeVax must complete a paper borrowing form and keep it on file at the clinic.
- **Reconciliation and Temperature Documentation -** Reconciliation and temperature documentation are due monthly, no exceptions, even when a vaccine order is not being placed. Both items must be completed from the 1st of the month through the 14th of the month for the entire previous month.
- **Primary and Back-Up VFC Contacts -** The primary and back-up VFC contacts need to ensure they are receiving email notifications from ShowMeVax for the following: orders approved or rejected, returns approved or rejected, temperature excursions, and thermometer calibrations due date. To verify notifications are turned on, log into ShowMeVax, go to the arrow next to your username, click 'User Defaults', then scroll to the bottom to email notifications, and check the box for each of the items in the list above.