



Fall is in the air! Thank you for your continued participation in the VFC Program.

VFC Consultants

The VFC Program would like to welcome our new VFC Consultant, Katie Sims! The [Regional Immunization Contact](#) map is available on our website.

November and December Ordering

VFC providers need to evaluate the VFC inventory needs for November and December. Providers must order enough VFC stock during November to last through January 1, 2024. If you determine after the ordering period closes in November that you do not have sufficient stock, you may place an additional order with the submission of a reconciliation and temperature documentation. However, due to routine annual shipping shutdowns, the VFC program cannot guarantee receipt of the order in a timely manner after November 14, 2023.

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.

Vaccine Inventory

VFC providers must stock all routine Advisory Committee on Immunization Practices (ACIP) vaccines, public and private, according to the Provider/Clinic Population Information in the VFC Provider Agreement. This includes COVID-19 vaccine, however, providers have until March 31, 2024 to meet this requirement for the COVID-19 vaccine. The only exception is for birthing centers, as these patients are not in the prescribing age range.

VFC Shipments

VFC providers must accept vaccine shipments in ShowMeVax when the shipment arrives at the clinic, not at the end of the month.

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.

October 2023 Updates

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

Each VFC provider must have a primary and backup VFC contact. The contacts must be kept current at all times in ShowMeVax. If the primary contact is out of the clinic for an extended time frame, providers must update the contact information for a temporary primary contact to receive communication regarding orders, shipments, etc.

PIN

Each VFC provider has a unique PIN (Provider Identification Number). Please ensure you are including your PIN on all documents and emails sent to the VFC program to avoid delays in processing.

2023-2024 COVID-19 Vaccine

The new VIS can be found at [Vaccine Information Statement: COVID-19 \(cdc.gov\)](https://www.cdc.gov/vaccines/information/COVID-19/). For the most current vaccine schedule visit <https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html>.

- Pfizer “Comirnaty” is available in limited quantities for children 6 months and older
 - Store in the refrigerator between 2°C to 8°C (36°F to 46°F) for up to 10 weeks
 - Multi-dose vial for children 6 months through 4 years
 - Once diluted use within 12 hours
 - Single-dose vials or prefilled syringes for children 5 years and older
- Moderna “SpikeVax” for children 6 months and older.
 - Product may be stored in a freezer or refrigerator:
 - Stored in the freezer until the expiration date
 - Store in a refrigerator between 2°C to 8°C (36°F to 46°F) for up to 30 days
 - Available in all single-dose vials or single prefilled syringes
 - Discard any remaining fluid in the vial after the correct dose is withdrawn. Doses for the following populations:
 - Dose for 6 months – 11 years is 0.25mL
 - Dose for 12 years and older is 0.5mL
- Novavax for adolescents 12 years and older
 - Store in a refrigerator between 2°C to 8°C (36°F to 46°F) until expiration date
 - Provided in a multi-dose vial. There are 5 doses in each vial
 - Discard the vial after 5 doses have been withdrawn

Training

Does your staff receive training on vaccine scheduling and spacing? Are you having more errors related to vaccination? The Bureau of Immunizations can help. We can provide in-person or virtual training. If interested contact Lana Hudanick at лана.hуданік@health.mo.gov to schedule something today.

Immunization Quality Improvement for Providers (IQIP)

The VFC program offers a CDC-recommended quality improvement program known as IQIP. The program is twelve months long with one in-person visit and three virtual visits. The provider, nurse, VFC coordinator, and quality improvement coordinator should be present at the visit. During the in-person visit, the IQIP consultant will review the clinic’s immunization coverage assessments, and then the clinic will choose two strategies to focus on for the next twelve months. If you are interested in scheduling an IQIP visit, contact Lana Hudanick at лана.hуданік@health.mo.gov.



Nirsevimab (Beyfortus)

VFC now offers the RSV monoclonal antibody for infants. RSV season generally occurs from October through March. A single dose is recommended for infants entering their first RSV season unless otherwise noted. Providers should administer a single dose in the anterolateral thigh. The product should be stored in the refrigerator between 36°F to 46°F (2°C to 8°C) and may be administered along with other vaccines. For more information visit <https://www.cdc.gov/vaccines/vpd/rsv/hcp/child.html>. The most current VIS can be found here <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/rsv.html>.

The recommended dose of Nirsevimab (Beyfortus) depends on the weight of the child and age:

- 50 mg = 0.5mL for children <5Kg (less than 11 lbs.)
- 100 mg = 1.0mL for children ≥ 5Kg (11 lbs. or greater)
- Children 8 months to 19 months should receive a 200 mg dose

At this time quantities of Nirsevimab (Beyfortus) are limited by the manufacturer. The Centers for Disease Control and Prevention have made the following recommendations for the 2023-2024 RSV Season:

- Administer 50 mg of nirsevimab to infants weighing <5 kg within the first week of life who are born during October 2023 and throughout the 2023-2024 RSV season; and
- For infants weighing ≥5 Kg (11lb) prioritize using 100 mg nirsevimab doses in infants at highest risk of severe RSV disease. These risk factors include:
 - Infants less than 6 months of age;
 - American Indian and Alaskan Native;
 - Infants less than 6 months of age who were born at 29 weeks gestation;
 - Infants with chronic lung disease of prematurity (Bronchopulmonary dysplasia);
 - Infants who have hemodynamically significant congenital heart disease;
 - Infants who are severely immunocompromised;
 - Infants who have severe cystic fibrosis with any of the following conditions:
 - Manifestations of severe lung disease;
 - Weight for length is less than 10th percentile on the growth grid; and
 - Neuromuscular disease or congenital pulmonary abnormalities that impair the infant's ability to clear secretions from the airway.
- Providers should suspend the use of Nirsevimab in children 8 - 19 months of age for the 2023-2024 RSV season. Instead have these children receive Palivizumab (Synagis) as recommended by AAP [Palivizumab Prophylaxis in Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection | Pediatrics | American Academy of Pediatrics \(aap.org\)](#)
- Providers **should not** use two doses of 50 mg of Nirsevimab to make one dose of 100 mg:
 - 50 mg doses of Nirsevimab should be reserved for infants weighing less than 5 kg (11 lbs.);
 - Testing of two 50 mg doses of Nirsevimab has not been done and efficacy and safety have not been evaluated; and
 - Insurers may not cover the cost of two doses of 50 mg of Nirsevimab for one infant.

October 2023 Updates

*****Upcoming or recorded webinars and trainings available for clinicians and staff*****

- COVID-19 vaccine provider training with continuing education credits may be found at <https://www2.cdc.gov/vaccines/ed/covid19/index.asp>. This link and training are good until August 2025.
- Current Issues in Immunization Webinars are found here: <https://www.cdc.gov/vaccines/ed/ciiw/index.html>. Webinars are recorded and are available on demand. New topics include RSV guidance for children, updates on the 2023 Respiratory season, RSV for Adults, and Pneumococcal vaccine recommendations.
- Clinician Outreach and Communication Activity offers recordings and live communications for providers. Protecting Infants from Respiratory Syncytial Virus (RSV) was presented on October 26. If you were unable to attend the live broadcast clinicians are able to view the recording found at [COCA Calls and webinars](#)
- The National Foundation for Infectious Diseases (NFID) will offer a webinar on “Immunization Recommendations during Pregnancy” on November 2. To register visit [Webinars - NFID](#). Additional recorded webinars are also available.