COVID-19 Vaccine Ordering for Programs in Illinois

Illinois Vaccines for Children (VFC) and Bridge Access programs outside of Chicago can now order COVID-19 vaccines through the following methods:

**VFC Program**: COVID-19 vaccine can be ordered as a “Pediatric/VFC Limited Qty” order in I-CARE.

**Bridge Access Program (18 years of age and older)**: The COVID-19 vaccine will always be considered a limited quantity order. It can now be ordered in I-CARE through the COVID tab. **COVID-19 vaccines are not available through the 317 Routine Adult Vaccine Program.**

All limited-quantity orders will be reviewed and processed weekly. Order quantities may be reduced. More ordering details can be found in the [SIREN issued on 10/5/23](#). Please note, vaccines ordered through IDPH vaccine programs will not be delivered on the following days:

- Friday, November 10th – Veteran's Day (IDPH closed)
- Wednesday, November 22nd – Day before Thanksgiving
- Thursday, November 23rd – Thanksgiving (IDPH closed)
- Friday, November 24th – Day after Thanksgiving (IDPH closed)

Chicago providers should reach out to [ChicagoVFC@cityofchicago.org](mailto:ChicagoVFC@cityofchicago.org) to request COVID-19 vaccines for either of these programs.
COVID-19 Vaccine Updates

CDC COVID-19 Vaccination Program Has Ended

As the US government is no longer purchasing COVID-19 vaccines, the CDC COVID-19 Vaccination Program is over. The CDC released an update on the required close-out activities including:

**Step 1: Reporting and disposal of remaining USG-provided vaccine inventory.**
Remaining USG-provided COVID-19 vaccine inventory should be reported in jurisdictional reporting systems using the wastage transaction. Properly dispose of those vaccines according to state and local regulations. *This reporting requirement is for inventory purposes only and will not be used to judge provider performance.*

**Step 2:** Check the [CDC Provider Agreement Update website](https://www.cdc.gov/vaccines/health-care-workers/covid-19.html) for additional program close-out steps.

**Step 3: Using unexpired ancillary supplies.**
USG-purchased COVID-19 vaccine doses and ancillary supplies cannot be sold. Ancillary supplies cannot be exchanged for anything of value either. They can be shared domestically among other clinics within the practice, other sites offering healthcare services & veterinary clinics. Ancillary supplies provided by the USG through the CDC COVID-19 Vaccination Program can be used to administer commercially purchased vaccines. Expiration dates printed on the exterior box of the CDC ancillary kit do not apply to all items in the kit. This date is based on the earliest expiry of any of the kit's components. Dispose of expired components in accordance with state and local requirements. Exercise discretion with continuing to use unexpired kit components (e.g., needles and syringes) until they expire. Per federal funding requirements, ancillary kits cannot be donated outside of the United States or to organizations that will use the supplies outside the US.

**Step 4: Vaccines.gov vaccine locator service.**
Providers already participating in Vaccines.gov (including those whose data previously was updated by the jurisdiction public health agency) can update their information (instructions in the Provider Resources section of Vaccines.gov). For providers not previously enrolled in Vaccines.gov, more information will be available soon. Remember, participation is required for Bridge Access Programs.

**Other information:** Vaccine providers are no longer required to complete COVID-19 vaccination record cards following vaccine administration, as the CDC is no longer distributing them. Please refer to the [CDC Provider Agreement Update website](https://www.cdc.gov/vaccines/health-care-workers/covid-19.html) for additional information, this is not the official list and ICAAP is not an official authority on USG or state vaccine program requirements.

*Any previously distributed information about the continued used of ancestral Novavax COVID-19 vaccine can be disregarded, as the 2023 - 2024 formulation of the Novavax COVID-19 vaccine has been authorized for use.*
COVID-19 Vaccine Updates Continued

2023 – 2024 Fall Novavax COVID-19 Vaccine Formulation

On October 3rd, the FDA authorized an updated COVID-19 vaccine from Novavax for people ages 12 years and older. This product has also been recommended for use by the CDC. The updated formulation contains the XBB.1.5 strain like other fall COVID-19 vaccines.

Under this authorization, people 12 years and older can receive one dose of the updated Novavax vaccine if they were previously vaccinated with any COVID-19 vaccine and have not already received a fall 2023-2024 mRNA vaccine. Those who are unvaccinated can receive two doses of the updated Novavax vaccine. The previous Novavax formulation may not be administered and should be disposed of according to state/jurisdictional guidelines.

Coding for 2023 – 2024 Products

With the FDA authorizing the use of the fall 2023-2024 COVID-19 vaccines and the CDC recommending them for use in everyone ages 6 months and older, updated CPT codes are available. Guidelines from the AAP outline coding for vaccine products, administration, and vaccine counseling with or without administration. Centers for Medicare & Medicaid Services (CMS) also has updated payment allowances and coding information for Medicare Part B coverage on their website.

Pfizer Allowing 100% Returns on COVID-19 Vaccines

As of October 1st, Pfizer is allowing for their three-dose vials of COVID-19 vaccine, authorized for children aged 6 months - 4 years, to be returned at 100%. This policy allows for both unopened and partially used vials to be returned, offering greater flexibility to pediatric practices. It aims to address the challenge of predicting vaccine demand, ultimately enhancing access and availability for this critical demographic. To read more about this return policy, refer here.

Updated COVID-19 Dosing & Scheduling Charts

- Ages 6 months–4 years
- Ages 6 months–4 years (Immunocompromised)
- Ages 5–11 years
- Ages 5–11 years (Immunocompromised)
- Ages 12 years and older
- Ages 12 years and older (Immunocompromised)
ACIP Schedule Updates

The CDC updated its immunization schedules ahead of their usual February timeline to help keep providers up-to-date on vaccine recommendations and to speed up insurance payments. This change includes an addenda for new or updated ACIP vaccine recommendations, specifically around COVID, RSV, flu, and pneumococcal disease for children & adolescents. See the CDC website for changes.

Pertussis Cases Increasing in Illinois

IDPH has identified an increase in pertussis cases compared to those reported in 2021 and 2022. While the number of cases is still lower than those reported pre-pandemic, the number is expected to continue rising to pre-pandemic levels. Providers should ensure all their patients are up to date on their routine vaccines, including DTap and Tdap. RT-PCR by NP swab or a culture confirmation are the preferred methods of diagnosis and options for treatment may include azithromycin, clarithromycin, and erythromycin. Additional information is available through the CDC’s Manual for the Surveillance of Vaccine-Preventable Diseases.

Prevnar 20

Prevnar 20 received extended FDA approval on April 27, 2023 and according to the September 29, 2023 MMWR, on June 22, 2023, CDC’s ACIP recommended use of PCV20 as an option to PCV15 for: routine vaccination of all children aged 2–23 months; catch-up vaccination for healthy children aged 24–59 months who have not received age-appropriate doses; and children aged 24–71 months with certain underlying medical conditions at increased risk for pneumococcal disease who have not received age-appropriate doses. In addition, recommendations were updated for children aged 2–18 years with any risk conditions.

The current Prevnar 20 packaging states “For Use in Individuals 18 Years of Age and Older.” This packaging will be updated to remove the statement, in the meantime, Prevnar 20 can be used as indicated by ACIP guidelines.
RSV Prevention Tools

Resources for RSV Immunization

As RSV prevention tools become available, a number of resources are available:

- The AAP has published coding guidance for both Palivizumab (Synagis) and Nirsevimab (Beyfortus). CPT codes now include administration codes.
- An immunization information statement (IIS) is available for nirsevimab and is the equivalent of a vaccine information statement (VIS) for this product. It is required that patients (or their guardians) receive the appropriate IIS upon administration of the product.
- The CDC has allowed for VFC program flexibilities that may improve access to nirsevimab. These flexibilities include relaxing the requirement that VFC providers also carry private stock, allowing virtual enrollment visits for specialty providers, and permitting bi-directional borrowing between VFC and private stock. State/jurisdictional guidance on these allowances is forthcoming. Be sure you are signed up for the IDPH SIREN and CDPH HAN so you receive the most updated guidance straight to your inbox.
- Beyfortus is now available to order through the IDPH VFC program! Because Beyfortus is a monoclonal antibody, providers that transmit vaccine data to I-CARE via HL7 should ensure with their EHR vendors that their systems are ready to transmit Beyfortus to I-CARE. Beyfortus administration data can also be entered directly into I-CARE. Beyfortus is also included on CDPH’s formulary as of 10/1/23.
- ICAAP has updated handouts on Nirsevimab: Information for Parents/Guardians (English) and Information for Parents/Guardians (Spanish), and Nirsevimab Summary for Providers.

Learn more from an upcoming AAP webinar on Nirsevimab Implementation Strategies in Outpatient Pediatric Practices

RSV Vaccination for Pregnant Peoples

Pregnant people are now eligible to receive a RSV vaccine. The CDC recommends a RSV vaccine for pregnant people to protect their babies from severe RSV disease. Pregnant people should get a single dose of Pfizer’s bivalent RSVpreF vaccine (Abrysvo) during weeks 32 through 36 of pregnancy during September through January. These recommendations are available on CDC’s website. Most infants whose mother receives Abrysvo vaccine will not need Nirsevimab. There is additional guidance on use of RSV monoclonal antibodies for infants and high-risk toddlers.
10 Year HPV Vaccine Data

A recent study revealed that HPV vaccination rates among US teenagers did not increase in 2022, with only 62% of surveyed teens being up to date on HPV vaccines. Additionally, a MERCK study assessed the long-term effectiveness of the HPV vaccine in 1,272 participants 9 to 15 years old, finding no cases of vaccine targeted HPV-related diseases, cancers, or genital warts. This data supports the vaccine’s protective effects for at least 10 years. Given the public health significance of HPV-related cancers and diseases, this serves as a strong reminder to expand coverage, education, and vaccination efforts to protect all eligible individuals from HPV-related cancers.

Adolescent Vaccination Coverage

The CDC analyzed data from the 2022 National Immunization Survey to assess vaccine coverage for teenagers 13 to 17 years old. The study focused on the main recommended vaccines for adolescents including tetanus, diphtheria, and acellular pertussis vaccine (Tdap), meningococcal conjugate vaccine (MenACWY), and human papillomavirus (HPV) vaccines. Participants' vaccine providers were contacted for immunization history with parental consent. Results showed that adolescents born in 2008 had lower coverage of Tdap and MenACWY vaccines by age 13 years and lower coverage of Tdap and HPV vaccinations by age 14 years than those born in 2007, demonstrating pandemic disruptions to routine vaccination. For all adolescents aged 13-17, HPV vaccination initiation did not increase in 2022 for the first time since 2013 and might be declining in certain eligible groups within the VFC program. This study demonstrates that catch up vaccination should be prioritized for certain birth cohorts that missed out on well-visits due to the pandemic.

Evolving View of Vaccination

A survey distributed by the Harvard Research Program worked to understand people's changing views of vaccine preventable diseases. The majority of people (84%) view vaccines as doing good and providing protection from disease, including protecting from severe outcomes and keeping diseases under control. Those that are hesitant about vaccines showed concerns over safety, side effects, and general distrust in the government and/or vaccine manufacturers. People generally view the COVID-19 vaccines as moderately effective and safe, while flu vaccines are perceived as being similarly effective but much safer. Furthermore, only 38% of adults ages 65+ and 34% of adults with serious underlying medical conditions identify themselves as being at higher risk for severe COVID-19. Among those ages 60+ there is only moderate interest in receiving the RSV vaccine, with a concern over safety and desire for more research. Less than 1/3 of those who responded know that pregnant people are at risk for RSV. This study demonstrates the continued impact of vaccine hesitancy and the effects that it may have on an individuals' decision to vaccinate themselves or their children. To address concerns and promote vaccination, messaging and education should focus on vaccine safety/efficacy, vaccination benefits, and building trust with the community.
Upcoming Events

RSV VACCINES FOR OLDER ADULTS WEBINAR
Tuesday, October 17 at 12:00PM

COVID-19 VACCINE UPDATES
Friday, October 13 at 12:00PM
Friday, October 27 at 12:00PM

MINI I-VAC BOOTCAMP
Friday, October 27
8:00AM – 10:00 AM

ANNUAL EDUCATION CONFERENCE
November 9th & 10th at NIU Campus Naperville

ECHO-CHICAGO COVID-19 LEARNING COLLABORATIVES
Biweekly on Tuesdays at 5:30PM, next session: October 24
Register here.

Check out These Additional Resources!

- CDC COVID-19 Vaccine Clinical Guidance
- ICAAP’s Respiratory Virus Page
- AAP Town Hall with AAP President Sandy Chung, MD, FAAP & CDC Director Mandy K. Cohen, MD, MPH.
- AAP Nirsevimab FAQ
- Vaccine Expiration Date and Beyond-Use Date or Time Video Series
- AAP Nirsevimab Administration Visual Guide (which provides an algorithm to help with decision making)
- AAP Red Book Recommendations on Nirsevimab