Clinical Update

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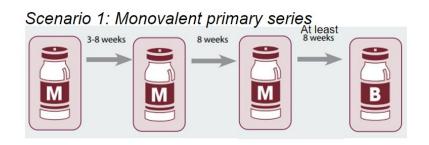
Pfizer Infant / Toddler Bivalent Booster Update





The FDA authorized and the CDC recommends that children ages 6 months – 4 years who previously completed a third dose Monovalent Pfizer COVID-19 vaccine primary series can receive one Bivalent Pfizer COVID-19 Booster dose at least 2 months after completion of the monovalent primary series.

Children ages 6 months – 4 years who completed their primary series with two Monovalent Pfizer COVID-19 vaccines and one Bivalent Pfizer COVID-19 vaccine are not eligible for a booster dose of a bivalent vaccine at this time.



Scenario 2: 2 monovalent + 1 bivalent







Updated: Long-Term Care Facility (LTCF) COVID-19 Vaccine Toolkit

Updated pharmacy links to onsite vaccine clinic request forms

Updated pharmacy contact information

Updated pharmacy minimum dose requirements (Flu & Covid-19)

Long-Term Care Facility (LTCF) COVID-19 Vaccine Toolkit

The LTCF COVID-19 Vaccine Toolkit has been developed as a resource to ensure that Long-Term Care (LTC) residents and staff have continued access to primary series and booster doses of COVID-19 vaccine. The following are vaccine access options, vaccination resources, and staff and resident education resources.



LTCF 90-Day Initiative Update

- CDC's <u>90-day sub-provider initiative</u> for long-term care facilities (LTCFs) ended on March 15, 2023 (began December 15, 2022)
 - When the program began, most <u>Federal Retail Pharmacy Program (FRPP)</u> partners were only able to order Pfizer SDVs for use by LTCFs that they partnered with through the 90-day initiative.
 - However, on February 23, 2023, SDVs became available to all FRPP partners for administration at their own facilities.
- Potential impact of program
 - In November 2022, approximately 39% of LTCF residents and 9% of LTCF staff had received a bivalent booster and were up to date with their COVID-19 vaccinations.
 - As of March 2023, national up-to-date vaccination rates in LTCFs have risen to 53% for residents and 12% for staff.
 - Note: California had minimal participation in this program, but resident and staff up to date rates increase through other local programs.



Dr. Tomás Aragón: Long-Term Care Facilities Letter



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



GAVIN NEWSON

March 13, 2023

Dear Directors of Long-Term Care Facilities (LTCFs) in California,

LTCF residents and staff continue to be vulnerable to COVID-19 and other respiratory illnesses. Rates of up-to-date vaccination in adults 65 years of age and older, the population with the highest risk for hospitalization or death from COVID-19, are lower than last winter. To protect our most vulnerable population against new viral variants, we need your help to get residents, staff, and their families vaccinated now with updated (bivalent) COVID-19 boosters. The safest facilities have high vaccination rates and easy access to COVID-19 treatments for those residents and staff who do become infected.

To that end, I highly encourage you to:

- Offer COVID-19 boosters on site at your facilities to increase access. Medicare-enrolled immunizers may bill directly and receive direct reimbursement from the Medicare program for vaccinating Medicare LTCF residents. This means that vaccinators, such as pharmacies or home health agencies, may be available to help provide onsite vaccinations at LTCFs.
- Provide access to high filtration face masks to residents and staff. Masks that offer the best fit and filtration (e.g., N95s, KN95s, KF94s), are highly recommended, and remain a critical component of our multi-layered approach for protection against COVID-19 infection.
- Reach out to your LTCF pharmacy partner to request vaccination assistance. For LTCFs without existing partners, find a local pharmacy using the CDPH LTCF COVID-19 Vaccine Toolkit.
- Use this sample letter to share onsite or offsite vaccination opportunities with residents and their families.
- · Work closely with your residents' clinical team to ensure that updated (bivalent) COVID-19 boosters are being strongly recommended to all residents and that residents have a plan in place for COVID-19 treatment, if needed

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- Encourage staff to stay up to date. Staying protected takes a team effort. Ensuring that all staff are protected not only helps protect those around them, but it also sends the message to residents and family members that they should stay up to date too. Consider asking staff to wear stickers (PDF) or buttons to show their support for COVID-19 vaccination.
- Educate residents and their families about the importance of the updated. (bivalent) COVID-19 boosters. You may choose to display this poster in the lobby, cafeteria, hallways, or other common areas. This poster is also available in Spanish and other languages. Additional resources are also
- Monitor current COVID-19 trends in your community, so you can alert families and residents about the current impact COVID-19 is having on your
- Make it easy to get treatments when residents or staff become ill. Follow best practices for skilled nursing or other long-term care facilities. Make sure that residents, families, and staff have access to information about treatments by posting the COVID-19 Treatments Questions and Answers when there are any active cases. Long-term care facilities and skilled nursing facilities should communicate with long term care pharmacies to ensure COVID-19 antiviral therapeutics are readily available.

The updated (bivalent) COVID-19 vaccine booster is available for everyone 6 months of age and older. Residents, staff, and their family members can get the updated (bivalent) COVID-19 booster at least two months after completing the primary series or after receiving any prior monovalent COVID-19 booster. Most adults are eligible for the updated (bivalent) COVID-19 booster now.

Thank you in advance for your partnership and assistance in helping protect your vulnerable residents against COVID-19.

With you in health

Tomás J. Aragón, MD, DrPH

Director & State Public Health Officer California Department of Public Health

