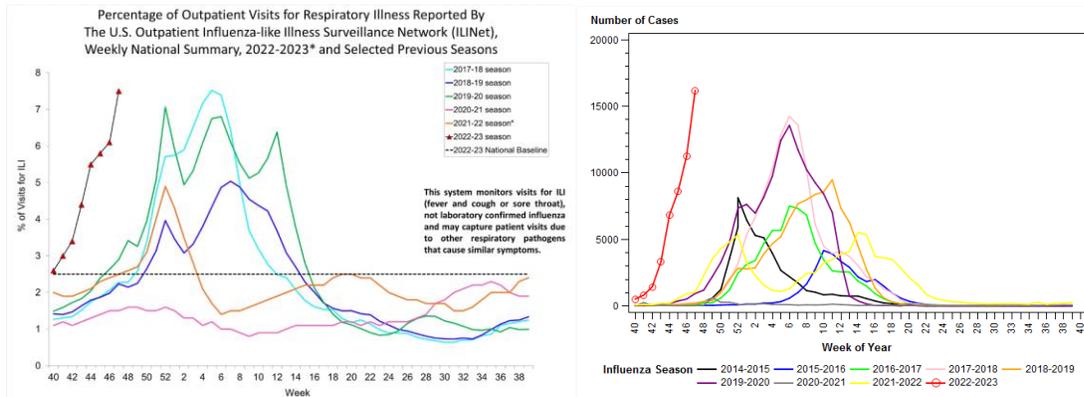


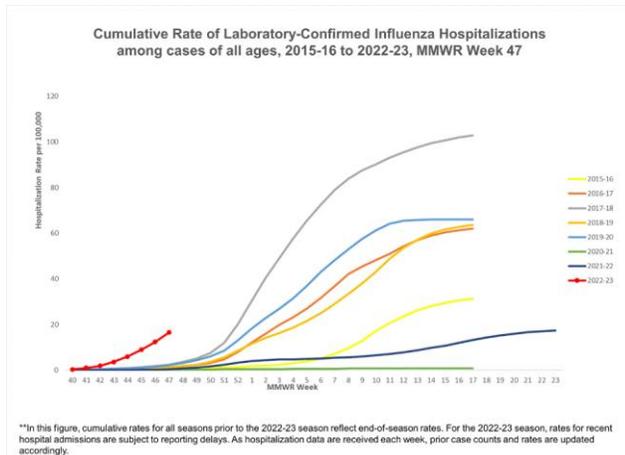
2022Dec6 Vaccine News and Rise to Immunize Data

This week (Dec. 5–9) is [National Influenza Vaccination Week](#) (NIVW), highlighting the importance of administering influenza vaccines to everyone six months and older. **Please take the opportunity to remind everyone 6 months and older that there's still time to protect themselves and their loved ones from influenza. This holiday season, spread cheer, not flu. It's not too late to vaccinate for flu!**

Flu cases are increasing exponentially in the country and state.



Early trends indicate this flu season may be severe with significant increase in flu-related hospitalizations per [CDC's FluView](#) report.



Additionally, a recent [Morbidity and Mortality Weekly Report](#) (MMWR) titled “Influenza Incidence and Vaccine Effectiveness During the Southern Hemisphere Influenza Season – Chile, 2022” revealed data from the southern hemisphere demonstrating an increase in flu cases this season compared to the last few years. It also underscored the **effectiveness of influenza vaccination**; in Chile the adjusted vaccine effectiveness against influenza A(H3N2)-associated hospitalization was 49%.

Co-administration of influenza and COVID-19 vaccine is okay and encouraged if due. As discussed at the [2022 National Adult and Influenza Immunization Summit – 11/3/22](#), it occurred 24%-28% of the time among adults per HIS-ACM surveys, and > 42% of the time among those 5+ who presented for COVID bivalent booster per Vaccine Safety Datalink without any safety concerns.

LVHN is a participant of the [Rise to Immunize™ \(RIZE\) campaign](#), which encourages all groups to increase immunizations against influenza as well as 3 other adult vaccinations of Td/Tdap, zoster and pneumococcal. **Your hard work to vaccinate patients can have a large impact on reducing hospitalizations and saving more lives.**

Attached are the data of how we compare to other organizations participating in the RIZE program. As you can see, we did improve in our Td/Tdap measures (and moved up 3 rankings compared to others) as well as on Zoster. We are still below average on flu, zoster and the bundle of all 4 vaccinations. All vaccine average percentages have declined compared to Q3 a year ago with the exception of zoster, and that increase has not been as robust this quarter.

SHARE your reasons for influenza vaccination –

- **S**hare the benefits of the vaccine based upon patient risk
- **H**ighlight positive experiences to strengthen confidence
- **A**ddress patient questions regarding side effects, safety and effectiveness
- **R**emind patients of the protection of themselves and their loved ones from serious illness and complications from influenza
- **E**xplain potential costs of illness – health effects, time, spread to others and financial

Use the standing orders – the LVPG influenza vaccine protocol.

Avoid missing opportunities – vaccinate at every visit unless contraindicated (allergy to the vaccine, moderate or severe illness, less than 6 months of age)

2023Feb7 Vaccine News

Measles – [Ohio state health officials declared the outbreak over.](#)

- At least 85 children were infected, 36 hospitalized in Oct-Dec 2022
- Most unvaccinated, 80 of them < 5 years old
- [Vaccine rates for kindergartners have fallen over the past 2 years.](#)
 - Nationally, 2-dose MMR coverage was 93.5% in kindergartners during the 2021-2022 school year.
 - Rates for measles need to be $\geq 95\%$ in order to prevent spread.
 - [Two doses of MMR vaccine are about 97% effective at preventing measles; one dose is about 93% effective.](#)

PHE – The Biden Administration announced its plan to [extend both the COVID-19 national emergency and public health emergency \(PHE\) declarations to May 11.](#) After it ends,

- **Federally purchased COVID-19 vaccines will continue to be free to all people, regardless of insurance coverage.** Providers of federally purchased vaccines are not allowed to charge patients or deny vaccines based on the recipient's coverage or network status.
- **Covid vaccinations will continue to be covered at no cost for Medicare and Medicaid beneficiaries** per Inflation Reduction Act, even when federally purchased supplies run out.
- Covid vaccinations will likely be free for those with private insurance who go to in-network providers, [but going to an out-of-network providers could incur charges](#) if using private commercial vaccine.
- [Moderna](#) and [Pfizer](#) have tentatively said they plan to sell their shots for up to \$130 each.
- **Paxlovid** and other antivirals [will remain covered by Medicare](#) under EUA, thanks to the [Consolidated Appropriations Act \(CAA\), 2023.](#)
- Funding for testing and vaccines will end.

COVID – is still with us at [almost 500 deaths/day](#) (averaging ~180K/year), although cases, hospitalizations down.

Daily Update for the United States

Cases

New Cases (Weekly Total)

280,911

Case Trends



Dec 2022 Feb 2023

Deaths

New Deaths (Weekly Total)

3,452

Death Trends



Dec 2022 Feb 2023

Hospitalizations

New Admissions (Daily Avg)

3,459

Admission Trends



Dec 2022 Feb 2023

Vaccinations

% with Updated Booster Dose

15.7%

Total Population



COVID Vaccines – bivalent booster uptake still low at 15.7%

- [Bivalent booster doses provide additional protection against symptomatic infection with BA.5 \(VE 52%\) and XBB-related sublineages \(VE 48%\)](#) in persons who had previously received 2, 3, or 4 monovalent vaccine doses
- As of January 20, 2023, >90% of circulating SARS-CoV-2 variants in the United States, specifically Omicron BQ.1, BQ.1.1, XBB, and XBB.1.5 sublineages, are unlikely to be susceptible to the combined monoclonal antibodies, tixagevimab and cilgavimab (Evusheld) used for preexposure prophylaxis against SARS-CoV-2 infection.
- **Being up to date on COVID-19 vaccination remains the most effective way to prevent SARS-CoV-2–associated serious illness, hospitalization, and death.**

Updated (bivalent) boosters became available on:

- ▶ September 2, 2022, for people aged 12 years and older
- ▶ October 12, 2022, for people aged 5–11 years
- ▶ December 9, 2022, for children aged 6 months–4 years who completed the Moderna COVID-19 vaccine primary series
- ▶ Updated (bivalent) Pfizer-BioNTech COVID-19 vaccine also became available on December 9, 2022 for children aged 6 months–4 years to complete the primary series. (No booster)

https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fvaccines%2Fbooster-shot.html

If you haven't had a vaccine after these dates for your age group, you are not up to date!

- ▶ **Everyone 6 months and older should have a primary series AND**
 - ▶ 5 years and older should have bivalent booster (either Pfizer or Moderna) if it has been at least 2 months since the last primary dose.
 - ▶ 6 months–4 years who had Moderna primary series should get a bivalent Moderna booster at least 2 months later
 - ▶ 6 months-4 years who had 2 doses of the Pfizer-BioNTech COVID-19 vaccine should complete the primary series with the Pfizer bivalent vaccine. (There is no booster for those who have had all 3 doses of the Pfizer monovalent vaccine).

If you have a weakened immune system or live with someone who does, create a COVID-19 action plan

Prevention Measures:

Get an updated COVID-19 vaccine



Improve ventilation and spend time outdoors when possible



Learn about testing locations and treatment options **before** getting exposed or sick



Get tested if you've been exposed or have symptoms*



Wash your hands often



Wear a well-fitting respirator or mask and maintain distance in crowded spaces



*Talk to your doctor about treatment options if you test positive

bit.ly/mm7205e3

JANUARY 27, 2023

MMWR