
COVID-19 Vaccine Information Brief

September 19, 2023

IMPORTANT/NEW COVID-19 Vaccine Information

- **Interim Clinical Considerations for Use of COVID-19 Vaccines - Updated**
 - 2023–24 COVID-19 Vaccine Up to Date Definition
 - Simultaneous Administration of COVID-19 and Other Vaccines
 - Federal COVID-19 Vaccination Program Ends
 - Remove ALL Bivalent Moderna and Pfizer COVID-19 Vaccines from IRIS and Physical Inventory
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Interim Clinical Considerations for Use of COVID-19 Vaccines - Updated

CDC has updated the [Interim Clinical Considerations for Use of COVID-19 Vaccines in the United States](#) as of September 15, 2023. Recommendations for use of the 2023–24 formulations of Moderna COVID-19 Vaccine and Pfizer-BioNTech COVID-19 Vaccine:

- Everyone ages 5 years and older is recommended to receive 1 dose of updated (2023–24 Formula) mRNA COVID-19 vaccine
- Children ages 6 months–4 years
 - Initial vaccination: should receive either 2 doses of updated (2023–24 Formula) Moderna or 3 doses of updated (2023–24 Formula) Pfizer-BioNTech COVID-19 vaccine
 - Received previous mRNA doses: need 1 or 2 doses of updated (2023–24 Formula) Moderna or updated (2023–24 Formula) Pfizer-BioNTech COVID-19 vaccine, depending on the number of prior doses
- People who are moderately or severely immunocompromised
 - Initial vaccination: should receive a 3-dose series of updated (2023–24 Formula) Moderna or updated (2023–24 Formula) Pfizer-BioNTech COVID-19 vaccine
 - Received previous mRNA doses: need 1 or 2 doses of updated (2023–2024 Formula) Moderna or updated (2023–24 Formula) Pfizer-BioNTech COVID-19 vaccine, depending on the number of prior doses
 - May receive 1 or more additional updated (2023–24 Formula) mRNA COVID-19 vaccine doses

- **Bivalent mRNA COVID-19 vaccines are no longer recommended in the United States**
- Updated guidance for COVID-19 vaccination and myocarditis or pericarditis
- Updated guidance for COVID-19 vaccination and Multisystem Inflammatory Syndrome (MIS) in children (MIS-C) and in adults (MIS-A)
- Reorganization and consolidation of sections on contraindications and precautions, including allergic reactions to COVID-19 vaccines

Additional COVID-19 Vaccine Resources

- [FAQs for the Interim Clinical Considerations \(Updated September 2023\)](#)
 - [Comirnaty \(COVID-19 Vaccine, mRNA\) \(2023-24 Formula\)](#)
 - [Spikevax \(COVID-19 Vaccine, mRNA\) \(2023-24 Formula\)](#)
 - [Moderna COVID-19 Vaccine \(2023-24 Formula\)](#)
 - [FDA Resources for the Fall Respiratory Illness Season](#)
 - [Pfizer-BioNTech COVID-19 Vaccine \(2023-24 Formula\)](#)
 - [Updated COVID-19 Vaccines for Use in the United States Beginning in Fall 2023](#)
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2023–24 COVID-19 Vaccine Up to Date Definition

- Everyone aged 5 years and older are recommended to get one 2023–24 COVID-19 vaccine to be up to date.
 - **Children aged 6 months – 4 years** and **people who are moderately or severely immunocompromised** need multiple doses, including at least one 2023–24 COVID-19 vaccine dose to be up to date.
 - People who are moderately to severely immunocompromised may get additional doses of the 2023–24 COVID-19 vaccine.
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Simultaneous Administration of COVID-19 and Other Vaccines

- In accordance with [General Best Practice Guidelines for Immunization](#), routine administration of all age-appropriate doses of vaccines simultaneously (i.e., administering more than one vaccine on the same clinic day or “coadministration”) is recommended for children, adolescents, and adults if there are no contraindications at the time of the healthcare visit.
 - Providers may simultaneously administer COVID-19, influenza, and respiratory syncytial virus (RSV) vaccines to eligible patients; the [Health Alert Network \(HAN\)](#) published on

September 5, 2023 may be consulted for additional information about simultaneous administration of these vaccines

- Simultaneous administration of COVID-19 vaccine and nirsevimab (a long-acting monoclonal antibody for certain infants and young children for prevention of RSV) is recommended
 - Coadministration of COVID-19 and RSV vaccine for older adults is acceptable
 - There are additional considerations of administering an orthopoxvirus vaccine and COVID-19 vaccine
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Federal COVID-19 Vaccination Program Ends

The Federal COVID-19 vaccine program has ended with the approval and commercialization of the new 2023-24 COVID-19 vaccine products. COVID-19 provider agreements are no longer in effect or valid.

All participating providers have been unenrolled automatically; no action is needed on behalf of the COVID provider.

Federally-purchased COVID-19 vaccines will continue to be available only through the Vaccines for Children Program for eligible children through age 18 years and the Bridge Access Program for underinsured and uninsured adults (19+ years).

COVID-19 vaccines available through the Iowa Bridge Access Program will be limited and will be available through the following providers only:

- Local Public Health Agencies
- Federally Qualified Health Centers/Community Health Centers
- Tribal Health Centers/Clinics

In addition to the Iowa Bridge Access Program, CDC negotiated contracts with CVS, Walgreens, and eTrueNorth in order to provide pharmacy-based vaccination services to eligible adults in low access areas and areas of low vaccination coverage. eTrueNorth will assist independent or other non-Walgreens and non-CVS pharmacies with participation in this program. Providers should complete the interest form for general inquiries or to indicate interest in the Bridge Access Program at [eTrueNorth/Connect](#).

Remove ALL Bivalent Moderna and Pfizer COVID-19 Vaccines From IRIS and Physical Inventory

As part of FDA’s actions, the **bivalent Moderna and Pfizer-BioNTech COVID-19 vaccines are no longer authorized for use in the United States**. To minimize the risk of [vaccine administration errors](#), providers should:

- **Remove all bivalent mRNA COVID-19 vaccines from storage units immediately, even if the vaccines are not expired.**
- Vaccines should be removed from IRIS using the reason code “Open vial but all doses not administered”.
 - Healthcare providers can use the [Adjusting COVID-19 Vaccine Inventory for Wastage](#) instructions to account for wasted doses.
- **Moderna and Pfizer bivalent mRNA COVID-19 vaccines should be disposed of at the provider level.** The federal government does not have a method to return wasted or expired COVID-19 vaccines.
- IRIS staff are available to help manage IRIS inventory by calling 800-374-3958.

DISCONTINUED BIVALENT VACCINE

Manufacturer Name	Vaccines.gov Name / Age	Primary NDC	Color Coding
Moderna, COVID-19 Vaccine, Bivalent Booster, 50mcg/0.5 mL	Moderna newly authorized bivalent (age 6-11)	80777-0282-05	Blue Cap/Grey Label
Pfizer-BioNTech, COVID-19 Vaccine, Bivalent Booster, 30mcg/0.3mL	Pfizer-BioNTech newly authorized bivalent (age 12+ / 18+)	59267-0304-01	Gray Cap/"Bivalent" on Label
Pfizer-BioNTech, COVID-19 Vaccine, Bivalent Booster, 10mcg/0.2 mL	Pfizer-BioNTech newly authorized bivalent (age 5-11)	59267-0565-01	Orange Cap/"Bivalent" on Label
Pfizer-BioNTech, COVID-19 Vaccine, Bivalent Booster, 30mcg/0.3mL, single dose	Pfizer-BioNTech newly authorized bivalent (age 12+ / 18+)	59267-0304-01	Gray Cap/"Bivalent" on Label
Moderna, COVID-19 Vaccine, Bivalent Booster, 10mcg/0.2 mL	Moderna newly authorized bivalent (age 6 months-5 years)	80777-0283-99	Dark Pink Cap/Bivalent on Label
Pfizer-BioNTech, COVID-19 Vaccine, Bivalent, 3mcg/0.2 mL	Pfizer newly authorized bivalent (age 6 months-5 years)	59267-0609-02	Maroon Cap/"Bivalent" on Label
Pfizer-BioNTech, COVID-19 Vaccine, Bivalent Booster, 10mcg/0.2 mL	Pfizer-BioNTech newly authorized bivalent (age 5-11)	59267-0565-02	Orange Cap/"Bivalent" on Label

KEY ACTIONS ITEM:

- Remove all bivalent mRNA COVID-19 vaccines from storage units immediately, **even if the vaccines are not expired.**
- Dispose of bivalent mRNA vaccine at the provider level.