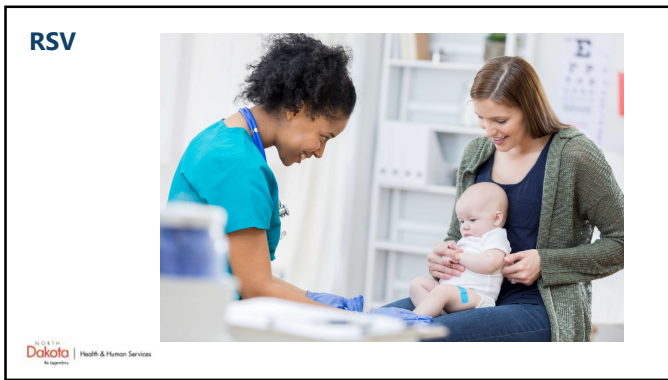
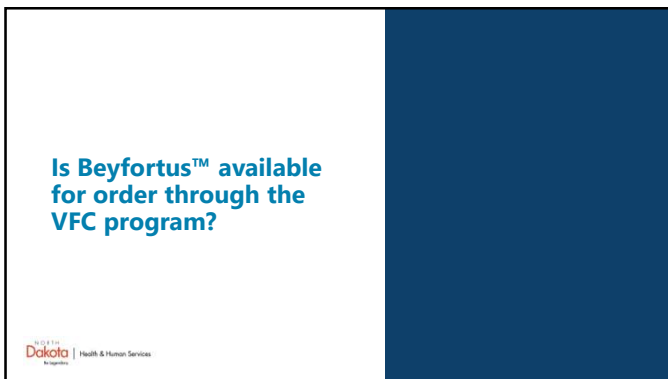




1



2



3

YES - VFC Ordering

- Beyfortus™ has been available for order from the VFC program since October 2nd
- Providers should at least carry a minimum package quantity (5 doses)
- If providers carry appropriate quantities of Beyfortus™ on hand there will not be penalties if they are unable to be used before expiry.
- See [Vaccine Loss Policy](#) for more details

4

Your facility does not currently have private Beyfortus™ on hand. Can we borrow a dose from VFC?

5

YES - Borrowing

- Bidirectional borrowing of Beyfortus™ is allowed under the federal VFC policy but the balance cannot exceed 5 doses owed to VFC supply.
- Providers must also do everything in their power to repay the dose within one month.
- Procedures should be put into place so that excessive borrowing does not occur. As a reminder complete borrowing documentation includes both the NDIIS and the borrow/return form.

6

What RSV vaccines are available for adults?

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RSV Vaccine for Older Adults

- For adults 60 years and older for prevention of lower respiratory tract disease caused by RSV
 - Arexvy™
 - Abrysvo™
- Currently a shared clinical decision-making recommendation between the patient and the medical provider
- May be co-administered with other vaccines
- Subsequent or booster doses not recommended at this time, but this may change as additional study data becomes available

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8

You have a newborn in your office for their first visit. Mom received Abrysvo™ at 32 weeks. Does the baby need nirsevimab?

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9

NO - Abrysvo™ in Pregnancy

- Abrysvo™ should be administered between 32 to 36 weeks of pregnancy
- Same RSV vaccine that is administered to older adults
- This is to protect babies from birth to 6 month
- If mom received a dose of Abrysvo™ 14 days prior to the infant's birth the infant does not need a dose of Nirsevimab
- A dose may be administered in rare circumstances based on clinical judgment of the healthcare professional
- If the Abrysvo™ was given less than 14 days prior to birth, nirsevimab should still be administered.

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What is the recommended dosage of Nirsevimab?

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Nirsevimab Dosage

- Current dosage of Nirsevimab to be administered during the months of October through March
- For infants less than 8 months one dose
 - 50 mg (0.5mL) dose for infants less than 5 kg (<11 pounds)
 - 100 mg (1.0 mL) dose for infants 5 kg or more (≥11 pounds)
- For infants 8 - 19 months who are entering their second RSV season and are high risk
 - 200 mg (Two 1.0 mL) dose
- Nirsevimab is not recommended for any child who is age 20 months and older. Children ages 20 months and older have likely already experienced two RSV seasons and been infected with RSV, and thus are less likely to benefit from nirsevimab

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High Risk Children

- Children who are considered high risk:
 - Chronic lung disease of prematurity who required medical support (chronic corticosteroid therapy, diuretic therapy, or supplemental oxygen) any time during the 6-month period before the start of the second RSV season
 - **American Indian or Alaska Native children**
 - Severe immunocompromise, children with cystic fibrosis who have either
 - manifestations of severe lung disease (previous hospitalization for pulmonary exacerbation in the first year of life or abnormalities on chest imaging that persist when stable), or
 - weight-for-length <10th percentile.

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You have a 6 month old child that is due for an influenza vaccine and also a dose of nirsevimab. Can they both be administered today?

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YES - Vaccine Administration

- In accordance with CDC General Best Practice Guidelines for Immunization, simultaneous administration of nirsevimab with age-appropriate vaccines is recommended

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Can a child who has already
had RSV this season still
receive Nirsevimab?

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YES - Nirsevimab after RSV Infection

- Nirsevimab recommendations are the same regardless of prior RSV infection or RSV-associated hospitalization
- Reinfection with RSV, even during the same season, can occur
- Children who are moderately or severely ill with or without fever including those who have known current RSV infection should defer nirsevimab until recovery from the acute illness

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17

COVID



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18

What are the different age groups for COVID19 vaccine?

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COVID-19 Vaccine Presentations

- Pfizer COVID-19 vaccine
 - 6m to 4 years
 - 5 to 11 years
 - 12+ years
- Moderna COVID-19 vaccine
 - 6 m to 11 years
 - 12+ years
- Novavax COVID-19 vaccine
 - 12+ years

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You have a 1 year old child in your office that needs a second dose of COVID-19 vaccine. They received Pfizer for their first dose. Your facility only carries Moderna. Can this child be vaccinated today?

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COVID-19 Vaccine in Young Children

- The recommendation for children 6 months to 4 years of age is to receive the same product for all COVID vaccine doses
- In the following exceptional situations, a different age-appropriate COVID-19 vaccine may be administered when FDA authorization requires that a vaccine from the same manufacturer be used:
 - Same vaccine not available
 - Previous dose unknown
 - Would otherwise not complete the vaccine series
 - Unable to complete a vaccination series with the same COVID-19 vaccine due to a contraindication

WY 10-11-2023
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22

What are the current COVID-19 vaccine recommendations?

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By Regent

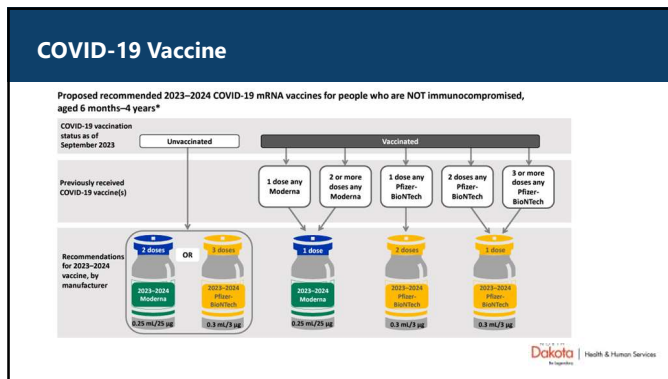
23

COVID-19 Vaccine Dosages

- Individuals 5 years of age and older (regardless of previous vaccination) are eligible to receive a single dose of an updated COVID-19 vaccine at least 2 months after the last dose of any COVID-19 vaccine.
- Unvaccinated individuals 12 years and older have the option to receive either 1 dose of updated mRNA COVID-19 vaccine or 2 doses of updated Novavax COVID-19
- Individuals 6 months through 4 years of age who have been vaccinated against COVID-19 are eligible to receive one or two doses of an updated mRNA COVID-19 vaccine (timing and number of doses to administer depends on the previous COVID-19 vaccine received).
- Unvaccinated individuals 6 months through 4 years of age are eligible to receive three doses of the updated authorized Pfizer-BioNTech COVID-19 Vaccine or two doses of the updated authorized Moderna COVID-19 Vaccine.

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25

Do providers have to separate adult COVID19 vaccine from peds COVID19 vaccine from NDHHS?

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Vaccine Stock Separation

- Providers are encouraged to separate VFC and VFC COVID-19 vaccine as that is how the vaccine is being purchased from CDC
- When providers receive their allocation emails the quantity of doses being allocated to VFC and VFA are indicated in the email

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27

You have an uninsured adult in for the COVID19 vaccine. Which stock of vaccine should this patient receive?

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COVID-19 Vaccine for Adults

- Any un/underinsured adult should receive VFA COVID-19 vaccine
- On July 13, 2023, the Centers for Disease Control and Prevention (CDC) announced that beginning this fall, after commercialization, uninsured adults will have access to COVID-19 vaccine free of charge through a Bridge Access Program.
- As part of this program doses will be made available to states to distribute through our existing Vaccines for Adults (VFA) program.

NDHHS will be announcing the availability of funding shortly that will offset the cost of provider expenses to vaccinate un/underinsured adults.

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COVID-19 Vaccine for Adults

- CDC has also contracted with some retail pharmacies to provide no-cost COVID-19 vaccines to un/underinsured adults.
- CDC established new contracts with CVS, Walgreens, and eTrueNorth (a pharmacy aggregator)
- eTrueNorth is currently working to enroll independent pharmacies in North Dakota into the Bridge Access Program.

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What are the storage requirements for COVID-19 vaccine?

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COVID-19 Vaccine Storage and Handling

- Pfizer
 - Can be stored in an **ultra cold freezer** until the expiration date
 - Can be stored in the refrigerator for up to 10 weeks
- Moderna
 - Can be stored in a freezer until the expiration date
 - Can be stored in the refrigerator for up to 30 days
- Novavax
 - Can be stored in the refrigerator until the expiration date

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32

Are there current COVID-19 vaccine VIS?

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33

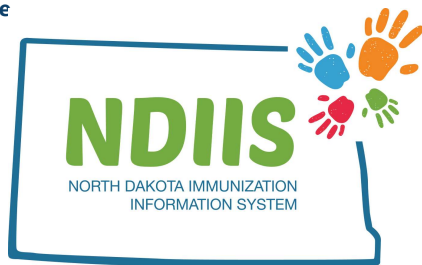
COVID-19 Vaccine VIS

- There are currently no VIS available for any of the COVID-19 vaccines
- Providers can use the current package insert for the appropriate vaccine or develop a FAQ. HHS is currently working on updating the vaccine FAQs
- Pfizer 6m through 11 years patient fact sheet
<https://labeling.pfizer.com/ShowLabeling.aspx?id=19543>
- Pfizer 12+ patient package insert
<https://labeling.pfizer.com/ShowLabeling.aspx?id=16351&Section=PPI>
- Moderna 6 m to 11 years fact sheet
<https://www.fda.gov/media/167208/download?attachment>
- Moderna 12+ patient package insert
<https://www.fda.gov/media/155675/download?attachment>
- Novavax 12+ fact sheet <https://www.fda.gov/media/159897/download>

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Immunization

34

NDIIS, Vaccine Ordering, VFA Program and Vaccine Storage and Handling



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When attempting to place a VFC vaccine order for PCV13 and you are not able to. Why is that?

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Immunization

36

PCV Ordering

- PCV13 is no longer available for ordering for any age group since September 1, 2023.
- PCV20 has been available for ordering since September 1, 2022 for un/underinsured adults.
- PCV20 has been available for ordering since September 1, 2023 for VFC eligible children.

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PCV Childhood Recommendations

- All children are recommended to receive either PCV15 or PCV20 at 2, 4, 6 and 12-15 months of age
- PCV15 and PCV20 can be used interchangeably for children who are healthy or have underlying conditions
- Existing supplies of PCV13 should be used prior to ordering PCV15 or PCV20. Doses should not be wasted just to move to the new presentation.

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What is the normal vaccine shipment cadence for VFC and VFA vaccines?

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Vaccine Shipping

- Providers should allow up to 2- 3 weeks for vaccine deliveries
- Refrigerated vaccines will ship Monday, Tuesday and Wednesdays to be delivered on Tuesday, Wednesday and Thursdays
- Frozen vaccine shipment will ship to be delivered any day of the week
- Influenza and COVID-19 vaccine deliveries will also ship for overnight deliveries any day of the week
- Holidays, weather and other delivery issues can delay vaccine shipments

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Vaccine Shipping Cont

- Shipping delays can and do occur, McKesson will recall vaccine in an attempt to keep the vaccine viable
- Tracking information in NDIIS will allow providers to track the shipment. McKesson will inform Immunization Unit staff will be informed by McKesson once the shipment has been received at McKesson. Reshipment will occur not long after the shipment is received. The Immunization Unit does not receive tracking information on these shipments
- If providers have not received their reshipments within a couple of weeks of the vaccine return please reach out to vaccine@nd.gov

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Your patient has a duplicate record in NDIIS. What needs to be done to get the records merged?

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43

NDIIS Patient Record Deduplication

- Providers who come across potential duplicate patient records in the NDIIS can click the Possible Duplicate checkbox at the top of the demographics page and save the patient record
- This will flag the record on the NDIIS team's weekly report that is run every Thursday. Flagged records are then merged by end of day Friday every week
- In situations where key demographic data (like the name or birthdate) is incorrect in one of the records, providers who find the duplicate needs to update the information so both records have the correct name and birthdate
- The NDIIS team is asking that users start solely using the new checkbox to flag duplicate records and ask that users no longer type the word "DUPLICATE" on the patient's demographics page



44


BBFITYSEVEN, TEST SET

Print: 2023 | User: Mary Vinciguerra (id:82-92)

Help

[Overview](#) |
 [Interventions](#) |
 [Comments](#) |
 [Birth Record](#) |
 [Milestones](#)

Patient Information

Last Name:

BBFITYSEVEN

First Name:


TEST

Middle Name:


TEST

Suffix:

Race:


UNKNOWN 

Ethnicity:

UNKNOWN 


Birth Date:

(1/1/1995)



☒ Multiple Birth (Twins, triplets, etc)

Gender:

FEMALE 

Alias First Name:

Alias Middle Name:

Alias Last Name:


Address:

123 TEST ST

City:

FARGO


State:

NORTH DAKOTA 


Zip:

58103

County:

CASS 


Birth State/Country:

NORTH DAKOTA 

Primary Phone:


555-555-5555

Phone Number Type:

Mobile Phone 

Email Address:

Primary Language:

☐ SELECT ONE 

☐ Opt client in for text reminder recall

☐ Exclude client from reminder recall

☐ Exclude client from client De-Duplication


Last Name:

First Name:

Middle:

Maiden Name:

Relationship to Patient:

☐ SELECT ONE 

Last Name:

Middle Name:

First Name:

No Relationship Comments

Save

Fields Appearing with an Asterisk (*) Are Required.

Health & Human Services

Can providers place more than one VFC vaccine order per month?



45

Vaccine Ordering

- We ask that providers only order once per calendar month
- Please contact the Immunization Unit (vaccine@nd.gov) prior to placing additional orders
- Vaccine orders are submitted to the HHS Immunization Unit via NDIIS by providers for review and approval
 - Order minimum – 1 month
 - Order maximum – 3 months
- Anytime you are placing an order for more than the order maximum please leave a detailed comment as to why the extra doses are needed

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By Regulators

46

Vaccine Ordering

- Once vaccine orders are submitted to CDC providers are unable to add to the vaccine order
- If providers have ordered a vaccine in error please contact the immunization unit at vaccine@nd.gov
- Viable vaccine cannot be sent back to McKesson, if viable vaccine is returned to McKesson providers will need to replace the doses
- If the incorrect vaccine was inadvertently ordered in NDIIS please reach out to the Immunization Unit prior to placing another vaccine order
- The vaccine that was ordered will either need to be transferred to a provider that can use the doses or ordered prior to placing another order for the preferred vaccine

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By Regulators

47

**Your clinics doses
administered are not correct
in the ordering module.
Why is that?**

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By Regulators

48

NDIIS Vaccine Ordering

- Since providers are allowed to have up to a three month supply of vaccine on hand the doses administered for the current month are being calculated by how many total VFC doses that were administered in the previous calendar month and multiplying times three months
- The current inventory on hand that you are entering into NDIIS (not what NDIIS shows as the inventory) and the three month doses administered is how the minimum and maximum order quantities are generated

49

Your provider office had a temperature excursion on your storage unit. Does this need to be reported?

50

Temperature Monitoring and Excursions

- When reviewing daily minimum and maximum temperatures providers should be monitoring for those temperatures that are outside of the normal range of 2 to 8°C (36° to 46°F) or -50° to -15°C (-58° to +5°F)
- When these occur a provider should assess the length of time the unit was out-of-range and if an alarm occurred providers should take appropriate action for the temperature excursion
- Providers should contact the manufacturers, as to determine the viability of the vaccine
- Provider should also inform the Immunization Unit that an excursion has occurred. This can be done by email, phone, or online reporting form found here <https://www.hhs.nd.gov/storage-and-handling>

51

Temperature Excursion

- IF YOU NOTICE A TEMPERATURE EXCURSION:
 - Contact the primary or backup vaccine coordinator.
 - Document the current, minimum and maximum temperatures, duration of temperature excursion and the time when problem was discovered.
 - Label the vaccine "Do Not Use."
 - Store at the appropriate temperature. If your unit is not maintaining the appropriate temperature, transfer the vaccine to other storage units. Do not allow vaccines to remain in a unit while trying to fix it.
 - Contact the manufacturer for further guidance on use of the vaccine. Do not discard vaccine before contacting the manufacturer. If vaccine is wasted, report to the ND Immunization Unit.
 - Complete the online excursion tool to report the temperature excursion and any nonviable vaccine
- Submit temperature logs to dohtemplogs@nd.gov
- <https://www.hhs.nd.gov/storage-and-handling>

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Handling a Temperature Excursion in Your Vaccine Storage Unit

Any temperature reading outside ranges recommended in the vaccine product package insert is considered a temperature excursion. Identify temperature excursions quickly and begin corrective action to prevent harm. This can prevent vaccine waste and the potential for vaccine compromise.

Notify

- Notify the primary or alternate vaccine coordinator immediately to report the problem to a supervisor.
- Notify your facility's designated vaccine coordinator (VCC) and place them in a separate container until they can be moved to the storage unit. Do not discard these vaccines.

Document

- Document details of the temperature excursion:
 - Record time
 - Record current, minimum and maximum temperatures
 - Record duration of excursion
 - Record location of the excursion
 - Record the vaccine(s) involved
 - Record the lot number(s)
 - Record the expiration date(s)
 - Record the name of the person who discovered the excursion

Contact

- Contact your immunization program and/or vaccine manufacturer for guidance on your specific excursion (COPQ).
- Be prepared to provide the immunization program or manufacturer with documentation of the excursion, including the time, location, and duration of the excursion.

Correct

- If the temperature excursion is "off" (not recommended), do not administer the vaccine until you have documented and addressed the issue.
- Check the facility's equipment.
- If the excursion is a "hard" excursion, remove the vaccine from the storage unit and place it in a separate container until it can be moved to the storage unit.
- If the excursion is a "soft" excursion, move the vaccine to a different storage unit.

For more information, contact:

State	Phone
Alabama	1-800-333-0339
Arkansas	1-800-333-0339
California	1-800-333-0339
Colorado	1-800-333-0339
Connecticut	1-800-333-0339
Delaware	1-800-333-0339
District of Columbia	1-800-333-0339
Florida	1-800-333-0339
Georgia	1-800-333-0339
Hawaii	1-800-333-0339
Idaho	1-800-333-0339
Illinois	1-800-333-0339
Indiana	1-800-333-0339
Iowa	1-800-333-0339
Kansas	1-800-333-0339
Kentucky	1-800-333-0339
Louisiana	1-800-333-0339
Maine	1-800-333-0339
Maryland	1-800-333-0339
Massachusetts	1-800-333-0339
Michigan	1-800-333-0339
Minnesota	1-800-333-0339
Mississippi	1-800-333-0339
Missouri	1-800-333-0339
Montana	1-800-333-0339
Nebraska	1-800-333-0339
Nevada	1-800-333-0339
New Hampshire	1-800-333-0339
New Jersey	1-800-333-0339
New Mexico	1-800-333-0339
New York	1-800-333-0339
North Carolina	1-800-333-0339
North Dakota	1-800-333-0339
Ohio	1-800-333-0339
Oklahoma	1-800-333-0339
Oregon	1-800-333-0339
Pennsylvania	1-800-333-0339
Rhode Island	1-800-333-0339
South Carolina	1-800-333-0339
South Dakota	1-800-333-0339
Tennessee	1-800-333-0339
Texas	1-800-333-0339
Utah	1-800-333-0339
Vermont	1-800-333-0339
Virginia	1-800-333-0339
Washington	1-800-333-0339
West Virginia	1-800-333-0339
Wisconsin	1-800-333-0339
Wyoming	1-800-333-0339

Handling a Temperature Excursion

53

Your facility had a temperature excursion in your refrigerator. The maximum temperature reached was 46.4°F. Do the manufactures need to be contacted?

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Temperature Monitoring

- When determining if a temperature excursion has occurred in your storage units manufactures will take into account :
 - Any temperature ≤ 0.4 will round to the current degree
 - Example 46.4°F will round back to 46°F and 35.4 °F will round back to 35°F
 - Any temperature ≥ 0.5 will round up
 - Example 46.5°F will round up to 47°F and 35.5°F will round up to 36°F



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Wisconsin

55

Your reviewing a new patient's record in NDIIS and noticed that they have all of the required polio vaccines entered as OPV unspecified. However the NDIIS forecaster shows they need another dose. Why?

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Wisconsin

56

OPV Unspecified Doses

- Any historical doses of OPV that are entered into NDIIS as unspecified do not count towards a polio vaccine requirement since it cannot distinguish between bivalent or trivalent vaccines.
- OPV must be trivalent in order to count towards the US requirement.
- Any doses of OPV administered after April 1, 2016 will not count toward the polio requirement because the world moved to a bivalent OPV formulation.
- Providers should do their best to determine the type of polio vaccine given based off of description and date administered so the immunization record is accurate.

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Wisconsin

57

Your facility has an upcoming flu clinic and do not have enough VFC influenza vaccine. When will your facility receive the rest of your allocation?

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Influenza Vaccine

- Each influenza vaccine season vaccine is allocated to provider office based on what their office prebooked earlier in the year
- As the Immunization Unit receives influenza vaccine allocations vaccine is ordered for those providers who prebooked that brand/presentation
- The Immunization Unit does not know when we will receive an allocation nor do we know how many doses will be allocated the next
- If your facility has too much vaccine on hand please reach out to the Immunization Unit to stop further allocations
- Once all influenza vaccine allocations have been completed any remaining vaccine will be able to be ordered in NDIIS on a first come first serve basis
 - May come as soon as next week!

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Should the current COVID vaccine be entered as a wastage just like the previous supply?

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60

Vaccine Return vs Wastage

Return	Wastage
Any unopened MDV vaccine, including unopened vials of 23-24 COVID-19 vaccine	Open IPV, MDV influenza, opened MDV 23-24 COVID-19 vaccine
All 23-24 COVID-19 vaccine PFS or SDV	All doses of the older COVID-19 vaccine
Full unopened boxes of vaccine	Broken syringe/vial
Partially used boxes of vaccine	Vaccine drawn up and not administered
	Pandemic vaccine (MPOX)

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61

Your facility borrowed a VFC dose of Moderna and want to repay the dose, but your facility has only received your private Pfizer. Do you have to wait until you receive your Moderna to pay back the dose?

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YES - Vaccine Borrow and Returns

- Providers currently need to repay doses owed using the same brand and presentation of COVID-19 vaccines but we are working to harmonize the different presentations in the near future, as many of the VFC and VFA vaccines are on the report by family
- Doses of COVID-19 vaccine administered after September 12th will be counted towards the B/R report. Older formulations administered prior to that date are excluded from the B/R reports

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63

Borrow and Return Balance Report

Printed on 10/10/2023 2:13:48 PM

Provider: [REDACTED]

Vaccine	Starting Balance		(After 05/15/2013) Doses Given		Current Balance	
	Doses Owed to State Supply	Doses Owed to Private Supply	Doses of state supplied vaccine given to VFC non-eligible	Doses of private vaccine given to VFC or other non-eligible	Doses Owed to State Supply	Doses Owed to Private Supply
COVID Pfizer 2022-24 104	0	0	1	2	0	0
COVID Pfizer 2022-24 5 11	0	0	4	0	4	0
DTaP/HiV	0	0	1	2	0	1
DTaP/HiV (Pediatric)	0	0	3	4	0	4
HiV Pediatric	0	0	1	3	0	2
HiV Adult (Pediatric)	0	0	2	0	2	0
HiV Pediatric	0	0	3	3	0	0
HiV	0	0	3	4	0	3
Influenza (pediatric)	0	0	11	16	0	10
IPV	0	0	1	0	1	0
MCV4	0	0	2	4	0	2
MMR2	0	0	0	7	0	7
MMR	0	0	1	3	0	2
MMRV	0	0	2	4	0	2
PCV (pneumococcal)	0	0	2	4	0	2
PPSV23 (pneumococcal)	0	0	1	1	0	0
Rotavirus	0	0	1	3	0	2
Tdap	0	0	1	1	0	0
VARICELLA (CHICKENPOX)	0	0	1	1	0	0
ZOSTER Shingles	0	0	2	4	2	0

Requested On 10/10/2023 By ndsh-103 Page 1 of 1

64

Which vaccines are available for adults?

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65

VFC Vaccines

- HHS currently offers these vaccines for un/underinsured adults:
 - Td/Tdap
 - MCV4
 - MMR
 - PPSV23
 - 19 – 64 year old with a high-risk condition
 - Pneumococcal Conjugate (PCV15 and PCV20)
 - 19 – 64 year old with a high-risk condition

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66

VFC Vaccines Cont.

- Un/underinsured adults:
 - HPV
 - 19 – 45 years of age (2022 change)
 - All Medicaid adults should receive private vaccine (no longer an age gap in Medicaid coverage for adults)
 - Influenza
 - Available for all enrolled providers to prebook and order
 - COVID-19
 - Available for all VFC/VFA enrolled providers
 - Currently being allocated as HHS receives doses from the CDC

67

VFC Vaccines Cont.

- Un/underinsured adults:
 - Adult Hepatitis A and B
 - Not available to adults whose sole purpose of vaccination is for travel or employment.
 - Should be prioritized for those at risk of infection such as drug users and people experiencing homelessness.
 - For a complete list of risk factors please consult the vaccine coverage table at: www.hhs.nd.gov/immunizations/providers

68

Post-Test

- Post-test
- Nurses interested in continuing education credit, visit https://ndhealth.co1.qualtrics.com/jfe/form/SV_3DZafufMehXbxQ
 - Successfully complete the five-question post-test to receive your certificate
 - Credit for this session will not expire until November 7, 2023.
- This presentation will be posted to our website: www.hhs.nd.gov/immunizations

69

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70

24