

Pennsylvania Immunization Program Newsletter



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Congratulations!

Crystal Perez, MSN, RN, CSN, has been selected as Pennsylvania's 2023 **Association of Immunization Managers (AIM) Immunization Champion Award** recipient.

The AIM [Immunization Champion Award](#) recognizes individuals who are doing an exemplary job or going above and beyond to promote or foster immunizations in their communities for children and adults.



Crystal Perez led an extensive effort as the Assistant Director of Health Services for Allentown School District to implement a school-based Vaccines for Children Program in collaboration with the School Nurse Association and the Allentown Health Department. With their support, an educational needs assessment and hard-earned parental buy-in, Crystal and her team were able to secure parent support for school immunization clinics and developed a process for obtaining parental consent. With the expansion to five in-school VFC sites, she has made and continues to

make great progress toward reaching the goal of a 100% vaccination rate.

“Crystal’s ongoing mission is to protect student health, promote academic success, and preserve community relationships.”

Our sincere appreciation to Crystal for all her work in serving her communities to increase immunizations and eliminate vaccine-preventable diseases.

VACCINES FOR CHILDREN (VFC) PROGRAM

VFC New Provider Enrollment

The VFC Program welcomes new providers to the program; enrollment is always open!

- To streamline the enrollment process, the procedure is 100% online.
- Please visit the [VFC webpage](#), the Provider Enrollment section, to review the requirements, policies, and procedure.
- Providers must apply on-line to become a new VFC Provider.
- Any applications or documents that are faxed or emailed will not be accepted or reviewed.

For questions regarding new provider enrollment, or becoming a VFC Provider, please visit the [VFC webpage](#) or contact the PA VFC Program at RA-pavfc@pa.gov.

Provider Identification Number (PIN) on All VFC Correspondence

As a reminder, please include your PIN on all correspondence and documents sent to the VFC Program.

- The PIN assigned to your site is a unique identifier and must be used for all communications.
- This includes voicemails and emails.

Proper Vaccine Storage and Handling New Videos

CDC offers new resources for proper vaccine storage and handling. The two new videos include “**How to Monitor Vaccine Temperatures**” and “**What You Need to Know About Vaccine Storage Equipment: Refrigerators, Freezers, and Thermometers**”.

- These new videos can be found under the existing CDC YouTube playlist titled “[Immunization Trainings for Healthcare and Public Health Professionals.](#)”
- You can also access these new resources directly:
 - [What You Need to Know About Vaccine Storage Equipment: Refrigerators, Freezers, and Thermometers - YouTube](#)
 - [How to Monitor Vaccine Temperatures - YouTube](#)

Any questions regarding proper vaccine storage and handling, please visit the [VFC webpage](#) or contact the VFC Program at: RA-pavfc@pa.gov.

Inventory Management Reminder

All VFC providers are required to properly manage their inventory according to VFC policies and procedures. This includes receiving vaccines into your inventory, updating doses administered, and accounting for any unused vaccines. Inventory management practices are necessary in reducing waste. Please remember to rotate your stock weekly, order only what you need monthly, and contact your Immunization Nurse to relocate vaccine(s) expiring within 90 days that will not be utilized. When vaccines are no longer viable, they must be removed from the site's active inventory in PA-SIIS. Providers must select the appropriate reconciliation reason, enter the correct quantity, and add any necessary notes.

Non-viable vaccines should be removed from the active inventory prior to submitting any return or waste requests.

Return & Waste Requests

Please remember to review the [Return and Waste Procedures](#) prior to submitting return and waste requests to DOI. The procedures are meant to aid providers in understanding which vaccines are returnable vs. which vaccines need to be wasted.

The [Spoiled/Expired Returnable Form](#) is used to report non-viable returnable vaccine. This includes expired vaccine or vaccine spoiled due to temperature excursions, transport conditions, power outages, or unit failure. All unopened vaccine that is no longer viable due to any of the above conditions must be returned to McKesson. Unopened vaccine is defined as "a pack of single dose vials or syringes with doses administered – the remaining doses are considered "unopened."

The [Wasted/Destroyed Form](#) is used to report non-viable vaccine that cannot be returned. This includes any opened multi-dose vials that have expired or spoiled, vaccine that has been drawn up but not administered, broken vials/syringes, and lost/unaccounted for vaccine. Wasted vaccine must still be reported and accounted for but can then be destroyed following state and local disposal requirements.

The Return and Waste Procedures, as well as step-by-step instructions for completing each form are located on the VFC website, [Resources and Forms](#) page.

ADOLESCENT IMMUNIZATIONS PROGRAM

Basic Information about HPV and Cancer



[Genital human papillomavirus \(HPV\)](#) is the most common sexually transmitted infection in the United States. More than 40 HPV types can infect the genital areas of men and women, including the skin of the penis, vulva (area outside the vagina), and anus, and the linings of the vagina, cervix, and rectum. These types can also infect the lining of the mouth and throat. HPV types are often referred to as “non-

oncogenic” (wart-causing) or “oncogenic” (cancer-causing), based on whether they put a person at risk for cancer.

[The International Agency for Research on Cancer](#) found that 13 HPV types can cause cervical cancer, and at least one of these types can cause cancers of the vulva, vagina, penis, anus, and certain head and neck cancers (specifically, the oropharynx, which includes the back of the throat, base of the tongue and tonsils). The types of HPV that can cause genital warts are not the same as the types that can cause cancer.

High Risk and Low Risk HPV

In general, HPV is thought to be responsible for more than 90% of anal and cervical cancers, about 70% of vaginal and vulvar cancers, and 60% of penile cancers. Cancers in the back of the throat (oropharynx) traditionally have been caused by tobacco and alcohol, but recent studies have shown that about 60% to 70% of cancers of the oropharynx may be linked to HPV. Many of these may be caused by a combination of tobacco, alcohol, and HPV. Most people who become infected with HPV do not know they have it. Usually, the body’s immune system gets rid of the HPV infection naturally within two years. This is true of both oncogenic and non-oncogenic HPV types. By age 50, at least 4 out of every 5 women will have been infected with HPV at one point in their lives. HPV is also very common in men, and often has no symptoms.

How an HPV Infection Can Lead to Cancer

When the body's immune system can't get rid of an HPV infection with oncogenic HPV types, it can linger over time and turn normal cells into abnormal cells and then cancer. About 10% of women with HPV infection on their cervix will develop long-lasting HPV infections that put them at risk for cervical cancer. Similarly, when high-risk HPV lingers and infects the cells of the vulva, vagina, penis, or anus, it can cause cell changes called precancers. These may eventually develop into cancer if they're not found and removed in time. These cancers are much less common than cervical cancer. Much less is known about how many people with HPV will develop cancer in these areas.

Preventing HPV-Associated Cancers

Vaccines protect against the types of HPV that most often cause cervical, vaginal, vulvar, penile, and anal precancers and cancers, as well as the types of HPV that cause most oropharyngeal cancers. The vaccine used in the United States also protects against the HPV types that cause most genital warts. Cervical cancer also can be prevented or found early through regular screening and follow-up treatment. Learn about cervical cancer screening test options:

- The Pap test (or Pap smear) looks for pre-cancers (cell changes on the cervix that might become cervical cancer if they are not treated appropriately).
- The HPV test looks for the virus that can cause these cell changes. If your doctor finds any abnormal results from a cervical cancer screening test, make sure to follow up in case you need treatment or further tests. Currently, screening tests for other types of HPV-associated cancers are not recommended.

Training Opportunity

Please know that the training: **"Promoting Access to Immunizations within Adolescent Populations"** will now be available for the public to attend virtually.

The first virtual training will be held on **Thursday, December 21, 2023, at 3:00 pm (EST)**. Please share this information with others who may be interested in attending, especially the Hispanic organizations, parents, and families you work with.



Anyone interested in attending this training should contact Jennifer M. Torres Del Valle at jtorresdel@pa.gov.

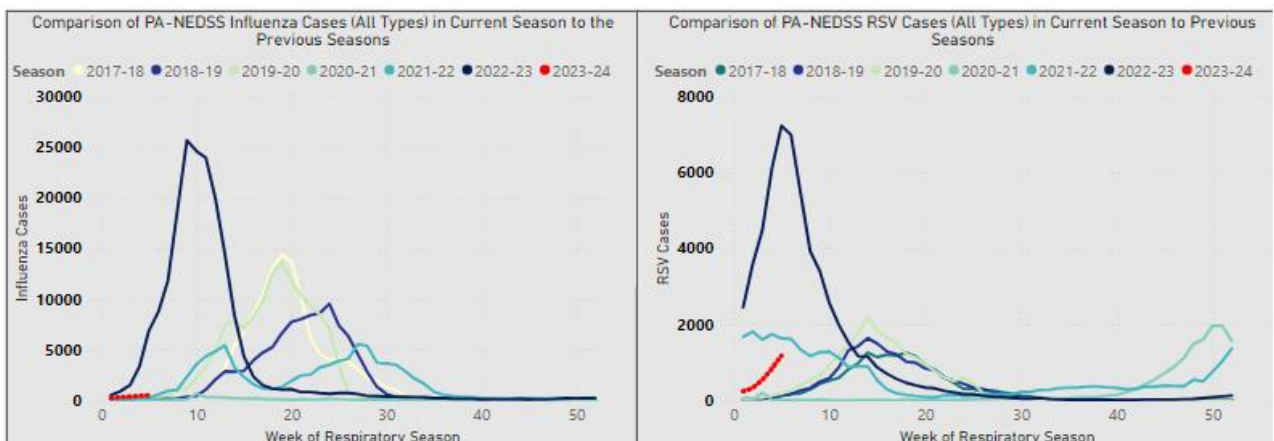
ADULT IMMUNIZATIONS PROGRAM

Pennsylvania Respiratory Virus Activity: Highlights for Week 44

- Influenza activity in Pennsylvania and the United States is currently low.
- RSV activity in Pennsylvania and the United States has been increasing, particularly among those under age 5.
- 1,841 laboratory-confirmed influenza cases and 3,109 laboratory-confirmed RSV cases have been reported season-to-date (10/1/23 – 11/4/23). Cases were reported from 65 of the 67 PA counties.
- Influenza A/H1N1 is currently the most prevalent circulating subtype reported by the PA Bureau of Laboratories.
- The percent of emergency department visits resulting in an influenza diagnosis is low at this time in all age groups and regions.
- The percent of emergency department visits resulting in an RSV diagnosis is increasing for those under age 5 in all regions.
- The percent of emergency department visits with a COVID-19 diagnosis is low at this time in all age groups and regions.
- COVID-19 new hospital admissions have remained steady for the last several weeks.
- 4 influenza-associated deaths and 245 COVID-19 related deaths in PA residents have been reported to CDC since 10/1/2023.

Seasonal Comparisons for Influenza & RSV

Data Through 11/4/2023



Source: [2023-24 Flu \(pa.gov\)](https://www.pa.gov/2023-24-flu)

Updated ACIP Recommendations

Each year, the Advisory Committee on Immunization Practices (ACIP) meets to review and update vaccine recommendations as a part of its ongoing review and update. Since October of last year, the following adult vaccine recommendations have been advised by the committee and approved by the CDC. These recommendations have now been added to the 2023 Adult Immunization Schedule as an addendum. You can access the full printable schedule at this link - [Adult-combined-schedule.pdf \(cdc.gov\)](#)

1. Meningococcal Vaccines (effective October 26, 2023)

Pfizer's MenABCWY vaccine may be used when both MenACWY and MenB are indicated at the same visit. *

*1) Healthy individuals aged 16–23 years (routine schedule) when shared clinical decision-making favors administration of MenB vaccination, 2) individuals aged 10 years and older at increased risk of meningococcal disease (e.g., due to persistent complement deficiencies, complement inhibitor use, or functional or anatomic asplenia) due for both vaccines.

2. Respiratory Syncytial Virus (RSV) Vaccines – Pediatric/Maternal (effective September 22, 2023)

Maternal Respiratory Syncytial Virus (RSV) vaccine is recommended for pregnant people during 32 through 36 weeks gestation, using seasonal administration, to prevent RSV lower respiratory tract infection in infants.

3. Respiratory Syncytial Virus (RSV) Vaccines – (Adults 60yrs and older) (effective June 27, 2023)

Adults 60 years of age and older may receive a single dose of Respiratory Syncytial Virus (RSV) vaccine, using shared clinical decision-making. For detailed information, please see:

<https://www.cdc.gov/mmwr/volumes/72/wr/mm7229a4.htm>

4. COVID-19 Vaccines (effective September 12, 2023)

CDC recommends 2023–2024 (monovalent, XBB containing) COVID-19 vaccines as authorized under EUA or approved by BLA in persons ≥6 months of age.

5. Poliovirus (IPV) (effective June 27, 2023)

Adults who are known or suspected to be unvaccinated or incompletely vaccinated against polio should complete a primary vaccination series with inactivated polio vaccine (IPV).

Additionally, adults who have received a primary series of trivalent oral polio vaccine (tOPV) or

IPV in any combination and who are at increased risk of poliovirus exposure may receive another dose of IPV. Available data do not indicate the need for more than a single lifetime booster dose with IPV for adults.

6. Influenzae (IIV4, ccIV4, RIV4, LAIV4) (effective June 27, 2023)

All person’s ages ≥6 months with egg allergy should receive influenza vaccine. Any influenza vaccine (egg based or non-egg based) that is otherwise appropriate for the recipient’s age and health status can be used. Please affirm the updated MMWR Recommendations and Reports, **“Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices—United States, 2023-24 Influenza Season”** www.cdc.gov/mmwr/volumes/72/rr/rr7202a1.htm

Make a Strong Influenza Vaccine Recommendation (SHARE)

It is important that all patients receive a strong recommendation for vaccination from their provider. CDC suggests using the SHARE method to make a strong vaccine recommendation and provide important information to help patients make informed decisions about vaccinations:



SHARE the reasons why an influenza vaccine is right for the patient given his or her age, health status, lifestyle, occupation, or other risk factors.

HIGHLIGHT positive experiences with influenza vaccines (personal or in your practice), as appropriate, to reinforce the benefits and strengthen confidence in influenza vaccination.

ADDRESS patient questions and any concerns about influenza vaccines, including side effects, safety, and vaccine effectiveness in plain and understandable language. Acknowledge that while people who get an influenza vaccine may still get sick, there are studies that show that illness may be less severe.

REMIND patients that influenza vaccines help protect them and their loved ones from serious influenza illness and complications that can result in hospitalization or even death for some people.

EXPLAIN the potential costs of getting influenza, including potential serious health effects for the patient, time lost (such as missing work or family obligations), financial costs, and potentially spreading influenza to more vulnerable family or friends.

Resources

[Our Best Shot: The Importance of Vaccines for Older Adults](#)

[Adult Immunization Schedule – Healthcare Providers | CDC](#)

[Adult Immunization Plans | HHS.gov](#)

[Vaccination Resources for Adult Patients with Chronic Conditions | CDC](#)

[Healthcare Personnel: Are Your Vaccinations Up-to-Date? Factsheet \(cdc.gov\)](#)

[Vaccination Resources for Spanish-speaking Adult Patients | CDC](#)

BRIDGE ACCESS PROGRAM

Frequently Asked Questions

What is CDC's Bridge Access Program?

CDC's Bridge Access Program provides no-cost COVID-19 vaccines to adults without health insurance and adults whose insurance does not cover all COVID-19 vaccine costs. No-cost COVID-19 vaccines through this program will be available until December 31, 2024.

Why is this program important?

In Fall 2023, the U.S. Government COVID-19 Vaccine Distribution Program came to an end. CDC's Bridge Access Program is a public-private partnership to help maintain access to no-cost COVID-19 vaccines for adults who are underinsured or uninsured through their local pharmacies, the existing public health infrastructure, and their local health centers. COVID-19 vaccines are still covered at no cost for most people living in the U.S. through their private health insurance, Medicare and Medicaid plans. However, there are 25-30 million adults without insurance and additional adults whose insurance does not provide no-cost COVID-19 vaccines after these products move onto the commercial market.

Who can get COVID-19 vaccines through this program?

Adults 19 years and older without health insurance can get a no-cost COVID-19 vaccine through the Bridge Access Program. Additionally, adults with health insurance that does not cover all COVID-19 vaccine costs can access updated COVID-19 vaccines through this program.

Can adults with health insurance that does not cover the entire cost of COVID-19 vaccines get COVID-19 vaccines through this program?

Yes, adults with health insurance that does not cover the entire cost of COVID-19 vaccines can get a no-cost COVID-19 vaccine through the Bridge Access Program.

Will non-COVID-19 vaccines be covered through the Bridge Access Program?

The Bridge Access Program will support only COVID-19 vaccinations and will not provide access to other vaccines routinely recommended for adults, such as flu, pneumonia, and Shingles.

What types of COVID-19 vaccines will be covered by this program?

All CDC-recommended COVID-19 vaccinations will be included in the Bridge Access Program.

Pharmacy Enrollment to the Bridge Access Program

Currently, there are two options for pharmacy participation:

- 1) the public health infrastructure option, and
- 2) the direct pharmacy option.

The first component of the program has been implemented directly through the state's immunization program. Please reach out to us via RA-DHCOVIDVAX@pa.gov if you have any questions around enrollment.

The second component of the program has been implemented through CVS, Walgreens, and eTrueNorth to provide pharmacy-based vaccination services to uninsured adults in low access and areas of low vaccination coverage. eTrueNorth is serving as an aggregator of independent pharmacies. Community/independent pharmacies may participate through either component of the program (either by working with the state or eTrueNorth). For information regarding pharmacies participating under the second option, please contact the pharmacy corporate representative directly.

Attention!!

Please note that Bridge Access Program adult COVID vaccines are not yet being ordered through PA-SIIS. If you are an enrolled Bridge provider and need additional doses, please email us at ra-dhccovidvax@pa.gov.

Purchasing COVID-19 vaccine products from the commercial marketplace

- **Moderna:** Providers can order through McKesson, Cardinal, and AmeriSource Bergen distributors or directly with Moderna at www.modernadirect.com and 1-866-MODERNA / 1-866-663-3762. Pre-booking is recommended to help the manufacturer manage production and distribution, including pre-filled syringes only available to commercial customers.
- **Pfizer:** Providers may work with wholesalers prior to and post launch of approved products or directly with Pfizer for minimum quantities at <https://primecontracts.pfizer.com> and 1-800-666-7248.
- **Novavax:** Providers can order larger volumes through Cardinal Health who will work with ABC, Schein, and McKesson distributors.

Resources

[Recommended updated \(2023-2024\) Formula Covid-19 vaccines for people who are NOT moderately or severely immunocompromised-October 12, 2023 \(cdc.gov\)](#)

[Recommend updated \(2023-2024 Formula\) COVID-19 vaccines for people who are moderately or severely immunocompromised \(cdc.gov\)](#)

MPOX VACCINE PROGRAM

State of the Outbreak

The total Mpox case count remains at 872 across the Commonwealth; 557 cases in Philadelphia and 315 in the rest of the state. As of October 24, a total of 17,180 doses of JYNNEOS have been administered. While vaccine continues to be delivered to at-risk individuals, this means the Commonwealth still has a long way to go in its response to the Mpox outbreak as approximately 70% of those [most at-risk in PA](#) still have not received their first dose. Among those who have received at least one dose, just over half have been fully vaccinated. Per the CDC, receiving the full 2-dose series increases protection against Mpox greatly, as demonstrated by the following reports through MMWR:

- [Receipt of First and Second Doses of JYNNEOS Vaccine for Prevention of Monkeypox — United States, May 22–October 10, 2022, | MMWR \(cdc.gov\)](#)
- [Effectiveness of JYNNEOS Vaccine Against Diagnosed Mpox Infection — New York, 2022 | MMWR \(cdc.gov\)](#)
- [Estimated Effectiveness of JYNNEOS Vaccine in Preventing Mpox: A Multijurisdictional Case-Control Study — United States, August 19, 2022–March 31, 2023, | MMWR \(cdc.gov\)](#)

Around the country Mpox cases continue to be diagnosed with 101 new cases being diagnosed between May 1 and August 9, 2023. According to the CDC, from mid-March through May 25, 2023, a cluster of Mpox cases were identified, with a total of 29 confirmed cases reported to the Chicago Department of Public Health. All were among symptomatic men. None of the patients were hospitalized. In response to this cluster of cases in Chicago, Health Alert Network (HAN) messages regarding the Potential Risk for New Mpox Cases were released by [CDC on May 15, 2023](#) and by [PADOH on May 17, 2023](#).

Preparing for Potential Increase in Mpox Cases

Based on the Commonwealth's vaccination rates and the cluster of cases seen in Chicago, the CDC's recent epidemiologic modeling of the nation's risk for [Mpox Case Resurgence](#) puts Pennsylvania at a greater than 35% risk for resurgence in Mpox cases. In preparation for potential increases, DOH began prepositioning Mpox test kits around the state in April 2023 with some of our HIV/STD partner providers who serve many of those most at-risk.

Ordering JYNNEOS

All JYNNEOS orders shall be submitted to DOH via the [PADOH MPOX Vaccine Supply Request Form](#). Providers may submit JYNNEOS requests any day or time; however, DOH only submits orders to the Strategic National Stockpile (SNS) on Wednesdays. The cutoff for weekly processing is Mondays at 11:59pm to allow time for review and processing. Orders received after will be included in the following week's order. Distribution of the vaccine occurs through direct-to-site shipping from the SNS, with vaccine typically arriving at Provider sites within 24-48 hours.

JYNNEOS Route of Administration Updates

JYNNEOS vaccine is licensed in the U.S. for subcutaneous administration in individuals 18 years of age and older. The U.S. Food and Drug Administration (FDA) issued an Emergency Use Authorization (EUA) in August 2022 to also allow for use of JYNNEOS vaccine:

- By subcutaneous injection for prevention of Mpox disease in individuals younger than 18 years of age
- By intradermal injection for prevention of Mpox disease in individuals 18 years of age and older

Intradermal administration (ID) is a recommended route of administration by the Commonwealth as it does afford extended supply of the JYNNEOS vaccine. However, subcutaneous administration is considered the CDC's standard regimen for administering JYNNEOS and is also supported by DOH. A person who presents for their second dose of JYNNEOS vaccine and is still experiencing erythema or induration at the site of intradermal administration of the first vaccine dose (e.g., the forearm) should have the second dose administered intradermally in the contralateral forearm or if that is not an option, in the upper back below the scapula, or at the deltoid.

Providers are encouraged to have a discussion with the patient regarding the potential routes of administration, especially if the patient expresses concern of stigma or a history of keloid scarring. As of August 2, 2023, this consideration is reflected under Section 15 of the [HHS Mpox Vaccination Program Provider Agreement](#), *"Either the standard (0.5mL Sub cut) or the alternative (0.1mL ID) regimen may be used. Providers may discuss with patients to determine which route of administration each patient prefers."*

Updates from CDC Public Health Emergency Response on Mpox

On August 7, 2023, CDC updated the Mpox webpage - [Demographics of Patients Receiving TPOXX for Treatment of Mpox | Mpox | Poxvirus | CDC](#) with information regarding CDC holding an [expanded access Investigational New Drug \(EA-IND\) protocol](#) for use of tecovirimat (TPOXX) for treatment of Mpox. The IND forms are required to be submitted to CDC.

As of August 2, 2023, CDC updated its [interim clinical considerations for the JYNNEOS vaccine](#) and the [Mpox Vaccination Program Provider Agreement](#) to encourage providers to discuss with patients whether they prefer to get the vaccine administered intradermally or subcutaneously.

MPOX Vaccine Locator

If your organization hasn't already done so, DOH encourages providers that offer the Mpox Vaccine to add their location to the [MPOX Vaccine Locator](#). **For Providers that are not listed on the locator:**

- *Step 1: Organizations that offer Mpox Vaccine but do not appear on the Mpox Vaccine Locator Widget can submit their information to npin.cdc.gov/organization/submit*
- *Step 2: Add the widget to your website by getting the embed code from www.cdc.gov/poxvirus/Mpox/vaccines/ and clicking on "Embed" on the widget. Here is the code just in case:*

```
<div data-cdc-widget="DynWidgets" data-component-name="MpoxLocator"></div>  
<script src="//tools.cdc.gov/1M1B"></script>
```

Resources

[Information For Healthcare Professionals | Mpox | Poxvirus | CDC](#)
[Clinician FAQs | Mpox | Poxvirus | CDC](#)

TEAM SPOTLIGHT

In October, the Shapiro Administration announced the recipients of the **2023 Governor's Awards for Excellence**, including the Department of Health's cross-bureau taskforce that responded to the 2022 Mpox outbreak. Director of the Division of Immunizations, **Tom McCleaf**, was one of the taskforce members who received the award.

Other members of the taskforce recognized with the awards are Bureau of Communicable Diseases Director Jill Garland; Public Health Program Directors Beth Butler, and Mari Jane Salem-Noll; Community Health Nurse Supervisor Mia Russo; Bureau of Emergency Preparedness and Response Director Andrew Pickett; Bureau of Epidemiology Assistant Director Lisa McHugh; Epidemiologist Manager Atmaram Nambiar; Bureau of Community Health Systems Nursing Director Jennifer Shirk; and Microbiologist Supervisor Melinda Johnston.

In partnership with federal partners and local health departments, the Mpox team advocated for equitable vaccine distribution across the Commonwealth. To make sure vaccine and test kits were delivered to those who already receive services in response to the outbreak, the team developed a strategic plan to overcome the challenges associated with a limited vaccine supply. Other jurisdictions across the country would later emulate the model used by Pennsylvania.

The Governor's Awards for Excellence recognize Commonwealth employees for exemplary job performance or service that reflects initiative, leadership, innovation and/or increased efficiency.

Congratulations!!!



PROVIDER WEBINARS

The Division of Immunizations (DOI) offers monthly webinars on the third Thursday from 12:00 p.m. – 1:00 p.m., to introduce new providers to the Vaccines for Children (VFC) Program. These webinars will give providers the opportunity to learn about the requirements of the program and ask questions. The main purpose of the webinars will be to educate providers who have recently completed an application to become a new VFC Provider or have expressed interest in becoming a provider.

- As a site who recently applied to become a provider, the designated primary and back-up vaccine coordinators are required to attend this webinar.
- However, current providers with new and existing staff who want to refresh themselves on the program requirements are welcome to attend as well.
- Both coordinators must register and be present for the entire webinar for their attendance to count.
- Once attendance for both the primary and back-up vaccine coordinators has been verified, the application can move forward, and the site will be contacted to schedule an enrollment visit.

Upcoming VFC New Provider Training Webinars, with registration links, include:

DATE: Thursday, **November 16, 2023.**

TIME: 12:00 – 1:00 p.m.

To REGISTER: <https://attendee.gotowebinar.com/register/7536292818582146904>.

DATE: Thursday, **December 21, 2023.**

TIME: 12:00 – 1:00 p.m.

To REGISTER: <https://attendee.gotowebinar.com/register/7723556141466904150>

Questions regarding upcoming VFC New Provider Training Webinars, please contact ra-pavfc@pa.gov.

CONTACT US

For all general concerns and questions please call our main line at **888-646-6864**. For program specific inquiries, you can also send us an email to the following resource accounts:

VFC: ra-pavfc@pa.gov

Adolescent & Adult Vaccine: ra-dhimmunize@pa.gov

COVID Vaccine/Bridge Access Program : ra-dhccovidvax@pa.gov

Mpox: ra-dhMpox_vax@pa.gov

PA-SIIS (general inquiries): ra-dhpasiis@pa.gov

PA-SIIS (data & quality assurance): ra-dhqapasiis@pa.gov

PIERS training /transition to Piers from PA-SIIS: ra-dhpierssupport@pa.gov

2024 National Conference for Immunization Coalitions and Partnerships (NCICP)

The National Conference for Immunization Coalitions and Partnerships (NCICP) is coming to Pennsylvania: Engaging Communities: Expanding Alliances & Advancing Equity. *The PA Immunization Coalition (PAIC)* is serving as the conference host for NCICP 2024.

DATES: April 9 – 11, 2024

TIME: 9:00 a.m. – 3:30 p.m.

LOCATION: Loews Philadelphia, 1200 Market Street, Philadelphia, PA

REGISTRATION COST: \$575.00 per person

Early Bird Registration Cost (Prior to December 18): \$375.00 per person

NCICP 2024 Sponsorship and Exhibition Opportunities are available.

NCICP 2024 WEBSITE: For more information about NCICP 2024 please visit the website: <https://www.loewshotels.com/philadelphia-hotel>

NCICP 2024 CONTACT: For specific conference, sponsoring and/or exhibiting opportunities, please contact cassandraoneill@me.com or shenak@chop.edu

2024: Pennsylvania Immunization Coalition (PAIC) Annual Coalition Meeting

DATE: Wednesday, June 12, 2024.

TIME: 1:00 – 4:00 p.m.

LOCATION: Hershey Lodge, Hershey PA.

For More Information: Once available, please visit: <https://www.immunizepa.org/>.

SAVE THE DATE: The 28th Statewide Pennsylvania Immunization Conference (PIC 2024)

DATE: Thursday, June 13, 2024.

TIME: 8:30 a.m. – 4:30 p.m.

7:30 a.m.: Check in, Breakfast, Visit the Exhibits, & Network.

LOCATION: Hershey Lodge, Hershey PA.

Attendance Options: In-person and virtual/live.

PIC 2024 Will be accredited, **continuing education credits (CEC)** will be available.

Conference Exhibitor Options: Will be available.

CONTACT: For more information, questions, requests to be placed on the **PIC** distribution listing to receive updates, and interests in serving as a **PIC 2024 Conference Exhibitor**, please visit: <https://ce.med.psu.edu/pennsylvania-immunization-conference/>.