



VACUNAS (VACCINES) UPDATE

National Alliance for Hispanic Health





CDC RECOMMENDS UPDATED MONOVALENT COVID-19 VACCINE FOR EVERYONE 6 MONTHS AND OLDER



The CDC has endorsed the Advisory Committee on Immunization Practices' (ACIP) recommendation that everyone 6 months and older receive an updated COVID-19 vaccine that helps protect against severe illness, hospitalization, and death from COVID-19. The recommendation applies to updated COVID-19 vaccines from Pfizer and Moderna recently approved by the U.S. Food and Drug Administration. The updated monovalent vaccines target a more recent variant of the Omicron strain called XBB.1.5.

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Although XBB.1.5 is no longer the dominant variant circulating, <u>recent studies show</u> that the updated COVID-19 vaccines can provide enhanced protection against variants currently responsible for most infections and hospitalizations. The CDC definition of up-to-date for COVID-19 vaccination is available by clicking <u>here</u> and may be updated as CDC monitors data.

PREPARING FOR RESPIRATORY ILLNESS SEASON

Everyone should prepare for the approaching respiratory illness season, especially older adults and those at higher risk for severe disease, as COVID-19, flu, and RSV (Respiratory Syncytial Virus) are likely to circulate at the same time over the next few months. Health experts advise following CDC guidelines and talking with your healthcare providers about eligibility to receive vaccines for all three viruses that help protect against severe illness, hospitalization, and death.

COVID-19: While COVID-19 can cause a range of mild to severe symptoms in all ages, older adults, those who are immunocompromised, and those with underlying health conditions are all at <u>higher risk</u> of experiencing severe illness from COVID-19. The CDC recommends that everyone 6 months and older <u>stay up to date</u> on COVID-19 vaccines by receiving the updated monovalent vaccine that targets the XBB.1.5 Omicron strain. The CDC recommends:

- Everyone 5 and older receive a single dose of an updated vaccine regardless of whether they have gotten a vaccine before.
- Children 6 months to 4 years old who have not received a coronavirus vaccine are advised to receive a primary series with two Moderna doses or three Pfizer-BioNTech doses. The doses should be from the same manufacturer
- People who are moderately or severely immunocompromised and haven't been vaccinated against the coronavirus should receive three doses of an updated vaccine.

People recently vaccinated should wait two months before getting an updated vaccine, the CDC says. Those who have been recently infected can wait three months, but they can also get it "as soon as they're feeling better," a CDC official, told the Advisory Committee on Immunization Practices that approved the updated vaccine.



Respiratory Syncytial Virus: RSV is a contagious respiratory virus that usually causes mild infections, but can cause serious illness in infants and older adults. The CDC recently approved the first RSV vaccines for adults 60 years of age and older and an RSV antibody shot for all infants under 8 months as well as some older infants at increased risk of severe illness. Older adults and parents of infants should talk with their healthcare providers about the new RSV immunization recommendations. The FDA also recently approved the first RSV vaccine for use in pregnant individuals to protect infants against RSV. The CDC is projected to vote on a recommendation for this vaccine in October.

More Information: Visit www.vacunashelp.org for more information and www.vaccines.gov to find a COVID-19 and flu vaccine near you. Visit https://testinglocator.cdc.gov/ to find free COVID-19 tests for those who are uninsured. Be sure to check the list of FDA authorized athome COVID-19 tests to confirm if previously acquired tests have expired or if their expiration dates have been extended.

NEW COVID-19 VARIANT BA.2.86 CONSIDERED A "VARIANT UNDER MONITORING"

Ahead of the fall vaccination season. BA.2.86 is a new coronavirus variant that has been labeled by the World Health Organization as a "variant under monitoring." This designation encourages countries around the world to track and report sequences they find, BA.2.86, nicknamed Pirola, has more than 30 amino acid changes to its spike protein compared with its closest ancestor, Omicron BA.2. Despite BA.2.86 being a highly mutated new variant, recent studies show that our immune response can defend itself against BA.2.86 as well as circulating XBB variants. Individuals who showed the most robust immune responses against BA.2.86 were those who had been infected with an XBB variant within the past six months. These findings suggest that the updated COVID-19 vaccines will provide protection against BA.2.86 since they target the XBB.1.5 Omicron strain.



FINANCIAL GUIDE FOR COVID-19, FLU, AND RSV VACCINATION COSTS

Private Health Insurance

Vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) are considered a preventive health service that should be <u>covered</u> without a co-pay by most private health insurance plans.

- **COVID-19:** The COVID-19 vaccine is recommended by ACIP, so individuals with private health insurance should be covered at no cost.
- Flu: Annual flu vaccines are a preventive health service recommended by ACIP for everyone 6 months and older, and are therefore <u>covered at no cost</u> for individuals 6 months and older covered by private health insurance.
- RSV (adults): Adults 60 years of age and older interested in getting vaccinated against
 RSV who have private health insurance should contact their health plan to inquire about
 coverage. Some are not covering the cost of vaccinations as adult RSV vaccines were
 approved as a <u>shared clinical decision-making recommendation</u>, leaving the final
 decision to vaccinate in the hands of individuals in consultation with their health care
 providers.
- RSV (infants): With ACIP's <u>recommendation</u> that infants and children receive the RSV antibody shot, infants under 8 months as well as some older babies at increased risk of severe illness covered by private health insurance should also be covered at no cost.

Medicare

Medicare Part B covers some vaccines at little or no cost. With the passing of the <u>Inflation</u> <u>Reduction Act of 2022</u>, Medicare Part D is required to cover cost sharing for any vaccine recommended by ACIP.

- COVID-19: Medicare Part B will continue to cover COVID-19 vaccines without cost sharing.
- Flu: Medicare Part B will cover flu vaccines at no cost.
- RSV: Medicare enrollees with a Part D plan should receive the RSV vaccine at no cost.
 Medicare enrollees without a Part D plan may have to pay for the RSV vaccine out of pocket. Those with a Medicare Advantage plan should check with their insurer about RSV vaccine coverage in their plan.

Medicaid/CHIP

Medicaid covers all recommended vaccines for children and some vaccines for adults.

 COVID-19: Medicaid will continue to cover all COVID-19 vaccinations without cost sharing through September 30, 2024, and will continue to cover vaccines recommended by ACIP for most beneficiaries.

• Flu: Medicaid will cover flu vaccination for everyone 6 months and older at no cost.

- RSV (adults): The Center for Medicare and Medicaid Services (CMS) has clarified that non-ACIP recommended vaccines can also be covered under Medicaid with no-cost sharing if deemed medically necessary. For example, if a health care provider recommends an RSV vaccine for an adult over the age of 60, this could be considered medically necessary and therefore would likely be covered.
- RSV (infants): As ACIP <u>voted to include</u> the RSV antibody shot for infants in the Vaccines for Children program, Medicaid-eligible children should have access to the shot at no cost.

Uninsured

The <u>Vaccines for Children program</u> provides immunizations recommended by ACIP at no cost to children through 18 years of age who are uninsured, underinsured, Medicaid-eligible, or American Indian or Alaska Native. Uninsured adults can contact a community health center for free or lower cost vaccinations and can find a community health center in their area by searching at www.findahealthcenter.hrsa.gov or call the Alliance's bilingual Su Familia Helpline at 1-866-783-2645.

- COVID-19 (adults): Uninsured adults will have access to free COVID-19 vaccines through
 the newly established <u>Bridge Access Program for COVID-19 Vaccines and Treatments</u>. The
 Bridge program will allow the CDC to purchase and distribute vaccines through its
 network of state, territorial, and local health departments. Additionally, the program will
 establish new partnerships with retail pharmacies that will enable them to continue
 offering free COVID-19 vaccines and treatments to uninsured individuals.
- COVID-19 (children): Children who are uninsured will have access to COVID-19 vaccines through the Vaccines for Children program.
- Flu (adults): Uninsured adults should contact a community health center (search at: www.findahealthcenter.hrsa.gov) in their area to find a flu vaccine for free or at a lower cost.
- Flu (children): Children who are uninsured can access flu vaccines at no cost through the Vaccines for Children program.
- RSV (adults): Uninsured older adults should contact a community health center (search at: www.findahealthcenter.hrsa.gov) in their area to find an RSV vaccine for free or at a lower cost.
- RSV (infants): ACIP <u>voted to include</u> the RSV antibody shot for infants in the Vaccines for Children program, so uninsured infants under 8 months as well as some older infants at increased risk of severe illness should have access to the shot at no cost.

HHS LAUNCHES OFFICE OF LONG COVID RESEARCH AND PRACTICE

The U.S. Department of Health and Human Services (HHS) announced the formation of the Office of Long COVID Research and Practice to lead and coordinate the federal government's response to Long COVID. The Office will be charged with enhancing efforts by the U.S. government to reduce the impacts of Long COVID by improving quality of life for individuals living with the disease and reducing disparities related to Long COVID. Government leaders also announced that the National Institutes of Health (NIH) is launching Long COVID clinical trials through the RECOVER initiative to understand, treat, and prevent Long COVID. Enrollment for the clinical trials began at the end of July 2023. It is estimated that around 7.7 - 23 million individuals in the U.S. have developed Long COVID.



STUDY SHOWS LONG COVID SYMPTOMS CAN LINGER AFTER 2 YEARS

A study published in the science journal Nature Medicine analyzed health records of around 139,000 U.S. veterans infected with COVID-19, compared with nearly six million U.S veterans who did not test positive for COVID-19. Researchers followed these individuals for two years to estimate risk of health problems that emerged after one month of COVID-19 infection. The study showed that even after two years since their infection, individuals infected with COVID-19 were at higher risk for many health issues that align with common Long COVID symptoms. Out of 77 medical conditions examined, individuals infected with COVID-19 who had not been hospitalized in the acute phase of infection remained at higher risk for 24 of the 77 medical conditions, compared with those who did not test positive for COVID-19. Individuals hospitalized for COVID-19 in the acute phase of infection were at higher risk for 50 of the 77 medical conditions, suggesting that severe symptoms in the beginning of a COVID-19 diagnosis can contribute to an increased risk of experiencing Long COVID. Researchers note a limitation of the study is that the data are only representative of the VA population that is largely comprised of older men, which may limit the generalizability of findings to a nonveteran population. Health experts note that these findings may help inform post-COVID care strategies to address the long-term care needs of people diagnosed with COVID-19.

FDA APPROVES FIRST VACCINE FOR PREGNANT INDIVIDUALS TO PROTECT INFANTS AGAINST RSV

The U.S. Food and Drug Administration has <u>approved</u> Abrysvo, the first respiratory syncytial virus (RSV) vaccine for use in pregnant individuals to protect infants from birth through 6 months of age. The RSV vaccine can be administered at 32 through 36 weeks gestational age of pregnancy. Abrysvo works by initiating production of protective antibodies in the mother that transfer to the infant through the placenta.

RSV is a contagious respiratory virus that causes infections of the lungs and breathing passages. Although most children infected with RSV will experience mild cases, RSV is the number one reason for child hospitalizations in the U.S. It is estimated that 58,000 - 80,000 children younger than 5, most of them infants, are hospitalized each year in the United States due to RSV infection.

In a vaccine trial of more than 7,000 pregnant people, Abrysvo reduced the risk that infants needed to see a doctor or be admitted to the hospital due to RSV complications. There are now several options to protect infants against RSV, including a recently approved antibody shot for all infants under 8 months, as well as some older babies at increased risk of severe illness. Before Abrysvo can be administered to pregnant individuals, the CDC's Advisory Committee on Immunization Practices' (ACIP) will meet in October to discuss this FDA recommendation. The committee will also consider how Abrysvo and the antibody shot, Beyfortus, will be recommended as both protect infants against RSV.



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