

Office Hours for New Mexico Vaccine Providers

Edward Wake Immunization Program November 20, 2025

New Mexico (NM) Immunization Program (IP) Key Staff



- ➤ Andrea Romero IP Manager
- ➤ Kathryn Cruz NM Statewide Immunization Information System (NMSIIS) Manager
- ➤ Lynne Padilla-Trujillo Vaccines for Children Program (VFC) Manager
- Scarlett Swanson Immunization Compliance Coordinator
- ➤ Vanessa Hansel Vaccine and Outreach Manager

Agenda



- Vaccination Issues and Updates in NM and US
- COVID-19 Vaccine Recommendations and Updates
- Influenza Vaccine Updates and Recommendations
- RSV Vaccine Updates and Recommendations
- Measles Update
- Avian Influenza A(H5) Virus Update
- Mpox Update
- The NMSIIS Newsfeed
- VFC Updates and Flu, COVID-19 and RSV Allocations
- COVID-19/Flu/RSV Epidemiology Updates
- Announcements
- Questions, Comments, Dialogues, Missives and Negotiations

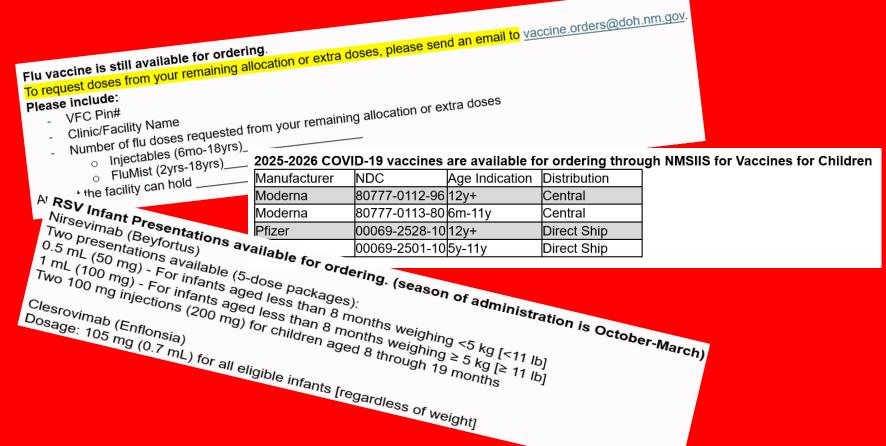




Vaccination Issues and Updates

Experience the Joy of Giving

All Respiratory Vaccines Throughout the Season!













NATIONAL INFLUENZA VACCINATION WEEK – DECEMBER 6-12, 2025

AWARENESS

DISEASES

HISTORICAL

UNITED STATES



ACIP Meeting December 4 - 5

MEETING OF THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES (AGENDA - DRAFT

Centers for Disease Control and Prevention Atlanta, Georgia 30329

Thursday, December 4, 2025

9:00 AM Welcome and Roll Call

Updates on ACIP Workgroups

CDC Vaccine Risk Monitoring Evaluation

Discussion

Vaccine Schedule History

Childhood/Adolescent Immunization Schedule

Discussion

Lunch

Vaccine Schedule Considerations

Discussion

Break

Adjuvants and Contaminants

Discussion

5:30 PM Adjourn

MEETING OF THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES (ACIP AGENDA – DRAFT

Centers for Disease Control and Prevention Atlanta, Georgia 30329

Friday, December 5, 2025

8:00 AM Welcome and Roll Call

Agency Updates

Hepatitis B Vaccine

Presentation Discussion

Break

Hepatitis B Vaccine (continued)

Presentation Discussion

Lunch

Hepatitis B Vaccine (continued)

VFC presentation CMS presentation Discussion

Public Comments

Break

Votes

5:00 PM Adjourn

Vaccines do not cause Autism*

NMHealth

 The Autism and Vaccines CDC webpage was updated Nov 19 to address three points

KEY POINTS

- The claim "vaccines do not cause autism" is not an evidence-based claim because studies have not ruled out the possibility that infant vaccines cause autism.
- Studies supporting a link have been ignored by health authorities.
- HHS has launched a comprehensive assessment of the causes of autism, including investigations on plausible biologic mechanisms and potential causal links.
- "HHS will evaluate plausible biologic mechanisms between early childhood vaccinations and autism. Mechanisms for further investigation include the impacts of aluminum adjuvants, risks for certain children with mitochondrial disorders, harms of neuroinflammation, and more.
- "* The header "Vaccines do not cause autism" has not been removed due to an agreement with the chair of the U.S. Senate Health, Education, Labor, and Pensions Committee that it would remain on the CDC website."
- https://www.cdc.gov/vaccinesafety/about/autism.html?CDC_AAref_Val=https://www.cdc.gov/vaccinesafety/concerns/autism.html#to

Lujan Grisham signs NM vaccine bill passed in special session



- 2025 Senate Bill 3 addresses the state's vaccine policy
 - Introduced when the federal government had not yet approved Advisory Committee on Immunization Practices (ACIP) recommended vaccination schedule, in part to allow the state to purchase children's COVID-19 vaccines.
 - CDC acting director subsequently approved changes to COVID-19 recs
- The bill will allow NMDOH going forward to rely on other professional health organizations' vaccine recommendations rather than those of ACIP
 - Previously relied on ACIP recommendations
- The bill lacked the two-thirds majority vote required to enact an emergency clause and become effective immediately
 - Bill will go in effect in three months





- NMDOH
 - https://vaccinereg.doh.nm.gov/
- Pfizer
 - https://www.vaxassist.com/schedule/results
- Novavax
 - https://www.novavaxcovidvaccine.com/
- Moderna
 - https://products.modernatx.com/finder
- Vaccines.gov (continues to not work)

Cooler returns

- Two types of qualified coolers are currently being used:
 - EcoFlex coolers, used for all frozen and most medium, large and extra-large refrigerated shipments
 - KoolTemp coolers, used for most small refrigerated shipments
- Each cooler contains a flyer for the provider about whether and how to return the cooler for recycling or re-use
- Awardees must ensure providers understand and comply with the cooler return process (coolers not returned will result in a cost impact for the routine program)



EcoFlex Cooler

Must be returned
(label on inner flap of the box)

KoolTemp Cooler
Discard

Note: If a provider receives an EcoFlex cooler that needs to be returned but doesn't include a pre-paid return label, contact NMIP so we can contact McKesson Customer Service. Please note that the KoolTemp coolers are not returnable and therefore will not include a pre-paid return label.

Conflicting Advice on Covid Shots Likely To Ding Already Low Vaccine Rates: KFF Health News

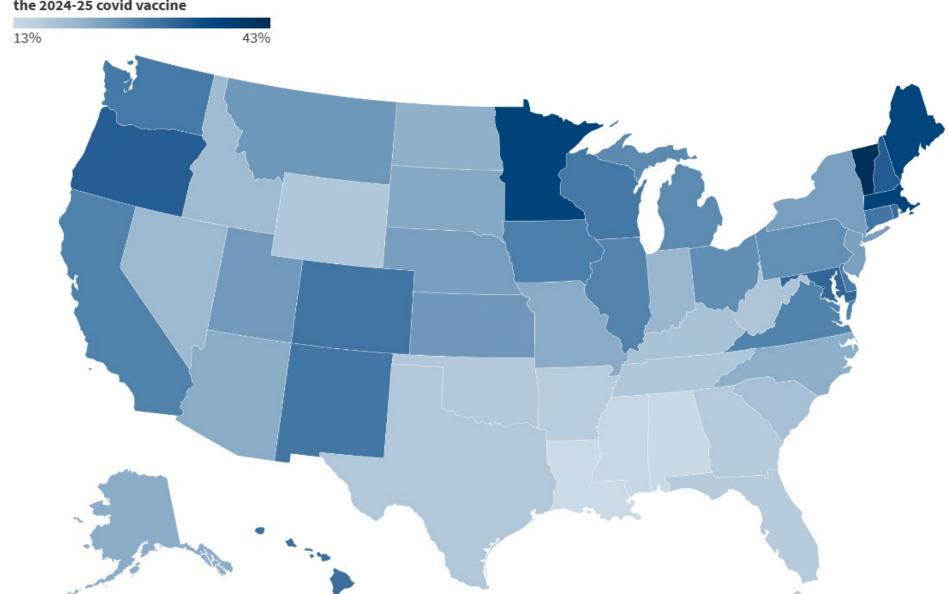


- Only about 23% of American adults got a covid shot during the 2024-25 virus season, well below the 47% of American adults who got a flu shot
- The vaccination rates for flu, measles, and tetanus are also going down
- Covid remains a serious, potentially deadly health risk (more later)

Covid Vaccination Rates Highest in Northeast

About 23% of U.S. adults had received a 2024-25 covid-19 vaccine by late spring. Vaccination rates were highest in the District of Columbia, Vermon Massachusetts, and Minnesota, according to CDC estimates. Rates were lowest in Alabama, Louisiana, and Mississippi.

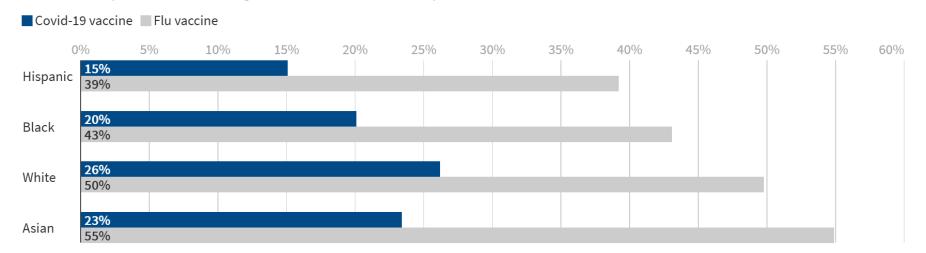
Percentage of adults who received the 2024-25 covid vaccine



Covid vaccine hesitancy in the 2024-25 virus season was higher among Latinos, African Americans, men, uninsured people, and people living in conservative states

Hispanic, Black Americans Vaccinated at Lower Rates

About 1 in 7 Hispanic American adults got a 2024-25 covid vaccine, compared with about 1 in 4 white American adults.



Vaccine Acceptance Study among Latinos



- A lot of misinformation is going around regarding covid," said Alein Haro-Ramos, an assistant professor of health, society, and behavior at the University of California-Irvine.
- Haro-Ramos co-authored a study published in 2024 that found many Latinos were hesitant to get vaccinated because of fears about their immigration status, and that experiencing health discrimination, like care denials or delays, increased their vaccine hesitancy.
- "Do you trust the health care system, broadly speaking? Do you want to provide your information your name, your address?" Haro-Ramos said. "Trust is critical."
- Federal plans to give the personal information of Medicaid enrollees to Immigration and Customs Enforcement increases fear.
 - Many Latinos are canceling doctor appointments to head off possible confrontation with immigration enforcement officials.

Vaccine Acceptance Study among African Americans



- Janani Rajbhandari-Thapa, an associate professor at the University of Georgia College of Public Health, recently coauthored a study of covid vaccination among nearly 1,500 African Americans living in south Georgia.
- The study found that participants were more likely to listen to their health care providers than faith leaders or co-workers when seeking advice on getting vaccinated.
- It's the clinicians who can take the messages about vaccination

 that these are myths

 https://kffhealthnews.org/news/article/covid-flu-vaccination-rates-virus-season-conflicting-guidanceimmigration/



COVID-19

Just a little reminder that from October 1, 2024, to September 6, 2025, COVID-19 was responsible for an estimated 3.2-4.6 million outpatient visits, 360,000-520,000 hospitalizations, and 42,000-60,000 deaths



Preliminary 2024-2025 U.S. COVID-19 Burden Estimates

CDC estimates* that, from October 1, 2024 through September 20, 2025, there have been:

13.8 million-20.3 million



COVID-19 Illnesses 3.3 million-4.8 million



Outpatient Visits

380,000-540,000



COVID-19 Hospitalizations 44,000 **-** 63,000



COVID-19 Deaths

*Based on data from September 29, 2024 through September 20, 202...

Download Data

Medscape-COVID-19 Vaccines: Navigating the Chaos of Conflicting Guidance

Medical groups, including the American Academy of Pediatrics (AAP), the American Academy of Family Physicians (AAFP), and the American College of Obstetricians and Gynecologists (ACOG), have published their own recommendations

ble. COVID	Vaccine	Recommend	lations
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Risk group	FDA	ACIP/HHS	AAFP	AAP	ACOG
Adults 65+	Approved	Shared decision- making	Recommend	N/A	N/A
6 months to 64 years with high-risk condition	Approved	Shared decision- making	Recommend	Recommend	N/A
Pregnant patients	Unclear, but pregnancy included as high-risk condition	Not approved	Recommend	N/A	Recommend
Children and adults without risk factors	Not approved	Shared decision- making	Recommend for age 6-23 months and administer to all others who desire it	Recommend for age 6-23 months and administer to all others who desire it	N/A

Source: match_fpf*

Who makes shared clinical decision-making recommendations?



Q: Who is considered a healthcare provider in this context?

A: CDC defines a health care provider as anyone who provides or administers vaccines:

- Primary care physicians
- Specialists
- Physician Assistants
- Nurse Practitioners
- Registered Nurses
- Pharmacists
- In plain terms, the decision to vaccinate is between you and a healthcare professional. This includes anyone who provides or administers vaccines, such as physicians, nurses, and pharmacists. Together, you'll weigh your personal risk of severe illness against the benefits of vaccination and any potential downsides.

NM COVID-19 Vaccines Guidance and Standing Order





New Mexico Department of Health Guidance on 2025-2026 COVID-19 Vaccine Administration

Background

On August 27, 2025, the U.S. Food and Drug Administration (FDA) approved updated COVID-19 vaccines for the 2025–2026 respiratory viral season. While narrowing the indications for the COVID-19 vaccines, the FDA did not raise any new safety concerns. To date, the Advisory Committee on Immunization Practices (ACIP) has not released official recommendations regarding the use of these vaccines.

Given this background, the New Mexico Department of Health (NMDOH) is issuing evidence-based recommendations to support clinical decision-making and public health planning for the upcoming season. This guidance is intended to assist healthcare providers in identifying populations for whom COVID-19 vaccination is currently advised. In general, given the constrained healthcare resources in the state, NMDOH recommends broad access to the COVID-19 vaccine.

This guidance document is based on review of guidance released by other medical professional organizations and the <u>Vaccine Integrity Project Evidence Review</u>. Where no new evidence review exists, NMDOH relied on ACIP and ACP guidance from the 2024-2025 season. NMDOH will review and revise this guidance as necessary following the release of new evidence or evidence-based recommendations from medical professional organizations.

This document outlines population-based recommendations for COVID-19 vaccination but does not include specific product, formulation, or dosing guidance.

FDA Approval

- 1. Pfizer's COMIRNATY is approved for:
 - · adults ages 65 years and older
 - people ages 5 through 64 years who have at least one condition that puts them at high risk for severe outcomes from COVID-19
- 2. Moderna's SPIKEVAX is approved for:
 - · adults ages 65 years and older
 - people ages 6 months through 64 years who have at least one condition that puts them at high risk for severe outcomes from COVID-19
- 3. Moderna's MNEXSPIKE is approved for:
 - · adults 65 years and older
 - people ages 12 through 64 years who have at least one condition that puts them at high risk for severe outcomes from COVID-19
- 4. Novavax's NUVAXOVID is approved for:
 - · adults 65 years and older
 - people ages 12 through 64 years who have at least one condition that puts them at high risk for severe outcomes from COVID-19



New Mexico Department of Health 2025-2026 COVID-19 Vaccine Standing Order

Effective Date 09/10/2025

PURPOSE

To reduce morbidity and mortality from COVID-19 by streamlining vaccine delivery across the state, this statewide COVID-19 vaccine standing order authorizes qualified health care providers, as defined below, to vaccinate persons aged 6 months and older, including pregnant individuals, who meet the criteria established by the New Mexico Department of Health's immunization program: NMDOH COVID-19 Vaccine Guidelines.

AUTHORITY

Under NMSA 1978, Sections 24-1-3(C) and 24-1-3(K), the NMDOH has the authority to:

- Investigate, control, and abate disease outbreaks and mortality.
- Ensure quality, accessible health services when care is otherwise unavailable.

POLICY

Qualified providers—physicians, physician assistants, nurses, nurse practitioners, and pharmacists holding an active and valid license in New Mexico—may assess eligibility and administer any FDA-approved 2025-2026 COVID-19 vaccine appropriate for age and health status (COMIRNATY, SPIKEVAX, MNEXSPIKE, or NUVAXOVID). Off-label use is permitted per professional guidelines and NMDOH recommendations: NMDOH COVID-19 Vaccine Guidelines.

As defined in this order, qualified health care providers include the following licensees who hold a New Mexico license in active status: physicians as set forth in the Medical Practice Act, NMSA 1978, Sections 61-6-1 to -35, physician assistants as set forth in the Physician Assistant Act, NMSA 1978, Sections 61-6C-1 to -8, nurses as set forth in the Nurse Practice Act, NMSA 1978, Sections 61-3-1 to -31, and pharmacists as set forth in the Pharmacy Act, NMSA 1978, Sections 61-11-1 to -31.

PROCEDURE

1. NMDOH RECOMMENDATIONS FOR USE OF COVID-19 VACCINE

- Offer vaccine to all individuals ≥ 65 years and those 6 months-24 months.
- Offer vaccine to all individuals 2–64 years at high risk OR cohabiting with or caring for high-risk persons.
- . Offer vaccine to individuals who are pregnant, recently pregnant, and lactating individuals.
- Offer vaccine to long-term care residents and those in congregate care settings.
- Offer vaccine to health care workers.
- May offer to any healthy person 2-64 years wishing protection.

Persons with immune-compromise or underlying conditions may self-attest to their medical conditions or treatments. Patients with known COVID-19 infection should defer vaccination until their symptoms have resolved and may choose to defer vaccination up to 90 days, as reinfection within 90 days is uncommon.

Coverage for Immunizations In 2025 And 2 Plan Years

STATE OF NEW MEXICO OFFICE OF SUPERINTENDENT OF INSURANCE



SUPERINTENDENT OF INSURANCE

DEPUTY SUPERINTENDENT

Alice T. Kane

Timothy Vigil

BULLETIN 2025-009

September 17, 2025

ALL HEALTH INSURERS AND HEALTH MAINTENANCE ORGANIZATIONS PROVIDING MAJOR MEDICAL OR COMPEHENSIVE COVERAGE IN NEW MEXICO

RE: COVERAGE FOR IMMUNIZATIONS IN 2025 AND 2026 PLAN YEARS

This bulletin is issued in accordance with Sections 59A-2-8, 59A-2-10, 59A-18-13.2. 59A-18-13.3, and 59A-18-16.2(G)(2) NMSA 1978. The purpose of this bulletin is to clarify:

- · since carriers considered and included cost and coverage for immunizations in rates for plan years 2025 and 2026; and
- · since the coverage and rates considered and included Advisory Committee on Immunization practices (ACIP) in place at the time of submittal to the Office of Superintendent of Insurance (OSI) by the carrier; and
- · since the coverage and rates were then reviewed and approved by OSI based upon the guidance from the ACIP at the time of rate approval;
- · then immunizations should be covered in plan years 2025 and 2026 regardless of any changes to guidance made by ACIP during a plan year.

Any changes to coverage for immunizations based on ACIP immunization guidance should be prospective to the 2027 plan year.

Questions concerning these directives should be directed to the Life and Health Bureau at life.health@osi.nm.gov

ISSUED this 17th day of September 2025

Main Office: 1120 Paseo de Peralta, Fourth Floor, Santa Fe, NM 87501 Satellite Office: 6200 Uptown Blvd NE, Suite 400, Albuquerque, NM 87110 Main Phone: (505) 827-4601 | Toll Free: (855) 4 - ASK - OSI www.osi.state.nm.us

- (S)ince carriers considered and included cost and coverage for immunizations in rates for plan years 2025 and 2026; and
- since the coverage and rates considered and included Advisory Committee on Immunization practices (ACIP) in place at the time of submittal to the Office of Superintendent of Insurance (OSI) by the carrier; and
- since the coverage and rates were then reviewed and approved by OSI based upon the quidance from the ACIP at the time of rate approval;
- then immunizations should be covered in plan years 2025 and 2026 regardless of any changes to guidance made by ACIP during a plan year.

Any changes to coverage for immunizations based on ACIP Immunization guidance should be prospective to the 2027 plan year.

COVID-19 Products Distributed through VFC NMHealth



2025-2026 COVID-19 vaccines are now available for ordering through NMSIIS for Vaccines for Children and Vaccines. Moderna and Pfizer formulations are available for order:

Manufacturer	NDC	Age Indication	Distribution
Moderna	80777-0112-96	12y+	Central
Moderna	80777-0113-80	6m–11y	Central
Pfizer	00069-2528-10	12y+	Direct Ship
Pfizer	00069-2501-10	5y-11y	Direct Ship

- Please place COVID orders separately from your routine vaccine orders
- Order as many doses as will be administered in a 2-month period to avoid overcrowding in your storage units, and excess loss or waste in the event of a storage unit malfunction

COVID-19 vaccines for the 2025-2026 season (continued)

COVID-19 vaccines on CDC's vaccine contracts are shown below:

Contract	Manufacturer	NDC	Age Indication	Distribution
Pediatric	Moderna	80777-0112-96*	12y+	Central
	Moderna	80777-0113-80	6m-11y	Central
	Pfizer	00069-2528-10	12y+	Direct Ship
	Pfizer	00069-2501-10	5y-11y	Direct Ship
	Sanofi	80631-0207-10	12y+	Central
Adult	Moderna	80777-0112-96*	12y+	Central
	Pfizer	00069-2528-10	12y+	Direct Ship
	Sanofi	80631-0207-10	12y+	Central

^{*}This is the only 12y+ Moderna COVID-19 vaccine that will be on CDC's contracts for the 2025-2026 season. If an awardee purchases a different Moderna 12y+ vaccine OUTSIDE of CDC's contract, the vaccine will be managed as a non-federal vaccine. This means the doses purchased will be assigned to your jurisdiction and will not rotate through federal inventory.

Shelf life for 2025-2026 COVID-19 Vaccines

- Moderna: Initially, providers should anticipate dating between 3-6 months. As the season progresses, dating may be shorter. Distribution will generally cease with 28-30 days of shelf life remaining, unless otherwise communicated.
- Pfizer: Initially, vaccines for persons 12y+ will arrive refrigerated with at least 12 weeks of remaining shelf life. Vaccines for children 5-11y will arrive ultracold with at least 3 months of remaining shelf life (when stored at ultracold storage temperature). As the season progresses, dating may be shorter.
- Sanofi/Novavax: Initially, providers should anticipate product expiry to be 12/31/2025. Sanofi is working with FDA on shelf-life extension this season. Distribution will generally cease with 12-14 days of shelf life remaining, unless otherwise communicated.
- To minimize vaccine wastage, CDC recommends smaller, more frequent provider orders.
 Quantities should be limited to the amount of vaccine that can be utilized within a 4–6-week period (Pfizer, Moderna) or within a 2-week period (Sanofi/Novavax).

NUVAXOVID - COVID-19 Vaccine, Adjuvanted NMHealth





- NUVAXOVID (AKA Novavax)
 is a vaccine indicated for
 active immunization to
 prevent coronavirus disease
 2019 (COVID-19) caused by
 severe acute respiratory
 syndrome coronavirus 2
 (SARS-CoV-2) in adults 65
 years and older
- NUVAXOVID is indicated for individuals 12 through 64 years who have at least one underlying condition that puts them at high risk for severe outcomes from COVID-19
- NMDOH is not ordering or distributing this product



COVID-19 Vaccine Job Aids 2025-26



COVID-19 Vaccine Schedule - Children and Adolescents

COVID-19 vaccination (minimum age: 6 months [Moderna Spikevax], 5 years [Pfizer-BioNTech Comirnaty], 12 years [Novavax Nuvaxovid, Moderna mNEXSPIKE])

Routine Vaccine Schedule for Healthy Persons Ages 6 Months-18 Years

AAP Immunization Schedule

Age 6-23	months
Vaccination Status	Recommended Doses
Unvaccinated	2 doses Moderna at 0, 4–8 weeks
Incomplete initial vaccination series with: 1 dose Moderna, or 1 or more doses Pfizer-BioNTech	Complete initial series with 1 dose Moderna 4–8 weeks after most recent dose
Completed initial vaccination series	1 dose Moderna at least 8 weeks after the most recent dose

Special situations

Age 2-18 years in the following risk groups:

- Persons at high risk of severe COVID-19
- Residents of long-term care facilities or other congregate settings
- Deregne who have never been vaccinated against COVID 10.



COVID-19 Vaccine Schedule - Adult

COVID-19 vaccination (minimum age: 6 months [Moderna Spikevax], 5 years [Pfizer-BioNTech Comirnaty], 12 years [Novavax Nuvaxovid, Moderna mNEXSPIKE])

Routine Vaccine Schedule for Healthy Adults 19 years and Older

Adult Immunization Schedule I American Academy of Family Practice AAFP

Age 1	19-64 years
Vaccination Status	Recommended Doses
Unvaccinated	1 dose Moderna or Pfizer-BioNTech
	2 doses Novavax at 0, 3–8 weeks
Previously vaccinated with:	
1 or more doses Moderna or Pfizer-	1 dose Moderna or Novavax or Pfizer-
BioNTech	BioNTech at least 8 weeks after the most
	recent dose
• 1 dose Novavax	1 dose Novavax 3–8 weeks after most
	recent dose. If more than 8 weeks after
	most recent dose, administer 1 dose
	Moderna or Novavax or Pfizer-BioNTech
2 or more doses Novavax	1 dose Moderna or Novavax or Pfizer-
	BioNTech at least 8 weeks after the most
	recent dose

VIS For Recipients and Caregivers-COVID-1



VACCINE INFORMATION STATEMENT

COVID-19 Vaccine:

What You Need to Know

Many vaccine information statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1. Why get vaccinated?

COVID-19 vaccine can prevent COVID-19 disease. Vaccination can help reduce the severity of COVID-19 disease if you get sick.

COVID-19 is caused by a coronavirus called SARS-CoV-2 that spreads easily from person to person. COVID-19 and be mild to moderate, lasting only a few days, or it can be severe, requiring hospitalization, intensive care, or a ventilator to help with breathing. COVID-19 can also result in death.

COVID-19 symptoms may appear 2 to 14 days after exposure to the virus. A person can have mild, moderate, or severe symptoms.

- Symptoms can include fever; chills; cough; shortness of breath or difficulty breathing; fatigue (tiredness); muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea; vomiting; and diarrhea.
- More serious symptoms can include trouble breathing; persistent pain or pressure in the chest; new confusion; inability to wake or stay awake; and pale, gray, or bluecolored skin, lips, or nail beds (depending on skin tone).

Older adults and people of any age with certain underlying medical conditions (like heart or lung disease or diabetes) are more likely to get very sick with COVID-19.

After COVID-19 illness, some people get Long COVID, a chronic condition with symptoms lasting 3 months or longer. Symptoms of Long COVID may get better, get worse, or stay the same.

People who are up to date with COVID-19 vaccination have a lower risk of severe illness, hospitalization, and death from COVID-19 than people who are not up to date. COVID-19 vaccination is the best way to prevent Long COVID.

Getting a COVID-19 vaccine helps the body learn how to defend itself from the disease and reduces the risk for sewere illness and complications. Additionally, COVID-19 vaccines can ofter added protection to people who have already had COVID-19, including protection against being hospitalized if they become infected with COVID-19 again.

2. COVID-19 vaccine

Updated 2024–2025 COVID-19 vaccine is recommended for everyone 6 months of age and older. This includes women who are pregnant, breastfeeding, trying to get pregnant now, or who might become pregnant in the future.

2024-2025 COVID-19 vaccines for infants and children 6 months through 11 years of age are available under Emergency Use Authorization from the U. S. Food and Drug Administration (FDA). Please refer to the Fact Sheets for Recipients and Caregivers for more information.

For people 12 years of age and older, 2024–2025 COVID-19 vaccines, manufactured by ModernaTX, Inc. or Pfizer, Inc., are approved by FDA.

Novavax COVID-19 Vaccine Adjuvanted (2024-2025 Formula) vaccine is available under Emergency Use Authorization from FDA for people 12 years and older. Please refer to the Fact Sheet for Recipients and Caregivers for more information.

- Everyone 6 months of age and older is recommended to receive an age-appropriate FDA-approved or authorized updated 2024–2025 COVID-19 vaccine.
- Certain people, such as those who have medical conditions or are taking medications that affect the immune system, may need additional doses of COVID-19 vaccine. Your health care provider can advise you.

3. Talk with your health care provider

Tell your vaccination provider if the person getting

- Has had an allergic reaction after a previous dose of COVID-19 vaccine or has any severe, life-threatening allergies
- Has had myocarditis (inflammation of the heart muscle) or pericarditis (inflammation of the lining outside of the heart)
- Has had multisystem inflammatory syndrome (called MIS-C in children and MIS-A in adults)

In some cases, your health care provider may decide to postpone COVID-19 vaccination until a future visit.

People with minor illnesses, such as a cold, may be vaccinated. People who are moderately or severely ill, including with COVID-19, should usually wait until they recover.

COVID-19 vaccine may be given at the same time as other vaccines.

4. Risks of a vaccine reaction

- Pain, swelling, and redness where the shot is given, fever, tiredness (fatigue), headache, chills, muscle pain, joint pain, nausea, vomiting, and swollen lymph nodes can happen after COVID-19 vaccination.
- Myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the lining outside the heart) have been seen rarely after COVID-19 vaccination. These risks have been observed most frequently in adolescent and young adult males. The chance of this occurring is low.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

As with any medicine, there is a very remote chance of a vaccine causing a severe allergic reaction, other serious injury, or death.

V-Safe is a safety monitoring system that lets you share with CDC how you, or your dependent, feel after getting COVID-19 vaccine. You can find information and enroll in V-Safe at <u>vsafe.cdc.gov</u>.

5. What if there is a serious problem?

An allergic reaction could occur after the vaccinated person leaves the clinic. If you see signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness), call 9-1-1 and get the person to the nearest hospital.

Seek medical attention right away if the vaccinated person experiences chest pain, shortness of breath, or feelings of having a fast-beating, fluttering, or pounding heart after COVID-19 vaccination. These could be symptoms of myocarditis or pericarditis.

For other signs that concern you, call your health care provider.

Adverse reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your health care provider will usually file this report, or you can do it yourself. Visit the VAERS website at www.vaers.hhs.gov or call 1-800-822-7967. VAERS is only for reporting reactions, and VAERS staff do not give medical advice.

6. Countermeasures Injury Compensation Program

The Countermeasures Injury Compensation Program (CICP) is a federal program that may help pay for costs of medical care and other specific expenses of certain people who have been seriously injured by certain medicines or vaccines, including this vaccine. Generally, a claim must be submitted to the CICP within one (1) year from the date of receiving the vaccine. To learn more about this program, visit the program's website at www.hrsa.gov/cicp. or call 1-855-266-2427.

7. How can I learn more?

- Ask your health care provider.
- · Call your local or state health department.
- Visit the website of the Food and Drug Administration (FDA) for COVID-19 Fact Sheets, package inserts, and additional information at https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines.
- Contact the Centers for Disease Control and Prevention (CDC):
- Call 1-800-232-4636 (1-800-CDC-INFO) or
- Visit CDC's COVID-19 vaccines website at www.cdc.gov/covid/vaccines/index.html.

Vaccine Information Statement
COVID-19 Vaccine

1/31/2025



https://www.immunize.org/vaccines/vis/covid-19/

U.S. CENTERS FOR DISEASE

COVID-19 Vaccine Contact Information NMHealth

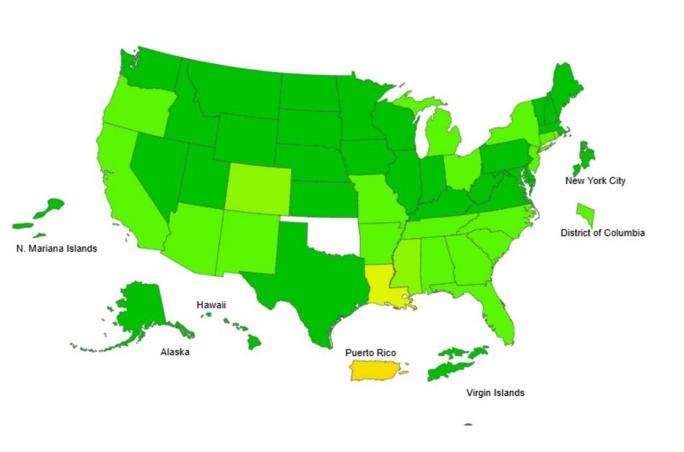
Contact	Information
Pfizer Customer Service	1-800-666-7248, Option 8
	cvgovernment@pfizer.com
Storage and handling, administration, FAQs,	Pfizer-BioNTech COVID-19 Vaccines CDC
Clinical Considerations, EUAs, etc.	
Expiration Date Look Up	lotexpiry.cvdvaccine.com
Medical Information and temperature	Pfizer US Medical Information
excursions	1-800-438-1985
Moderna Customer Service	1-866-MOD-ERNA or 1-866-663-3762
	excursions@modernatx.com
Storage and handling, administration, FAQs,	Moderna COVID-19 Vaccine CDC
Clinical Considerations, EUAs, etc.	
Expiration Date Lookup	Vial Expiration Date Lookup Moderna COVID-19
	Vaccine (EUA) (modernatx.com)
Novavax Customer Service	1-855-239-9174
	novavax.com/contact
	https://www.novavaxcovidvaccine.com/
Storage and handling, administration, FAQs,	Novavax COVID-19 Vaccine CDC
Clinical Considerations, EUAs, etc.	COVID 101/2in Information fourth - IIC
Expiration Date Lookup	COVID-19 Vaccine Information for the US Healthcare Professionals Novavax COVID-19
	Vaccine (novavaxcovidvaccine.com)
Shipping	vaccine (novavaxcovidvaccine.com)
	Custom on Comittee 1, 200, CCC 7349, Ontion 9
Pfizer vaccine shipment has a problem (including temperature excursions during	Customer Service 1-800-666-7248, Option 8 cvgovernment@pfizer.com
shipping)	<u>cvgovernment@prizer.com</u>
Moderna/Novavax shipment has a problem	Vaccine Viability Shipment Concerns:
(including temperature excursions during	Awardees/Providers - Phone
shipping)	1-877-TEMP123 (1-877-836-7123) Mon-Fri, 8:00
- 1-1- 67	a.m8:00 p.m. ET, leave voicemail after hours
	Awardees Only - email
	cdccustomerservice@mckesson.com
Data Systems and Monitoring	
General IIS Inquiries	IIS Support IISInfo@cdc.gov
Controlant Communications, including:	Pfizer.logistics@controlant.com
 Notice at time of vaccine shipment 	
with tracking information.	
 Exceptions for either shipment delay 	/
or cancellation	
 Delivery Quality Report 	
Controlant 24/7 Hotline and Support	support@controlant.com
	1-855-442-CONTROL or 1-855-442-6687
	1-701-540-4039 (to leave a message)
Vaccines.gov/Vaccine Finder Support	Monday to Friday, 8:00 a.m8:00 p.m. ET
	CARS HelpDesk@cdc.gov
	1-833-748-1979

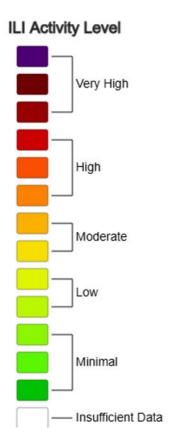


Influenza

US ILI Map 11/8







Influenza Vaccine Recommendations, CDC NMHealth

- Everyone 6 months and older in the United States, with rare exception, should get an influenza (flu) vaccine every season
- For most people who need only one dose of influenza vaccine for the season, September and October are generally good times to be vaccinated against influenza.
- Most adults, especially those 65 years and older, and pregnant people in the first or second trimester should generally not get vaccinated early (in July or August) because protection may decrease over time.
 - However, early vaccination can be considered for any person who is unable to return at a later time to be vaccinated
- Some children need two doses of influenza vaccine. For those children it is recommended to get the first dose as soon as vaccine is available, because the second dose needs to be given at least four weeks after the first
 - Vaccination during July and August also can be considered for children who need only one dose
- Vaccination during July and August also can be considered for people who are in the third trimester of pregnancy during those months, because this can help protect their infants for the first few months after birth (when they are too young to be vaccinated)









RSV

Ordering RSV for Infants



- The New Mexico Department of Health encourages administration of RSV infant antibodies now through the end of March 2026.
- Ordering of these products for VFC-enrolled providers has been opened since the beginning of August
- RSV ordering is permitted outside of your normal ordering cadence as in the previous years to maximize uptake during the short season.
- Contact your Regional Coordinator to open an order for your site if it is outside of your normal ordering time.
- Always put in the number of RSV doses administered in the clinic comments box when placing an RSV order outside of your normal ordering time so we can assure equitable distribution.





linic			Last Approved Order D									
ALLAS PEDIATRI	CS		05/03/2025	::::								
rder Number	Order D	ate	Order Status		Priority Re		Date Sub o VTrck\$					
025090455201	09/04/2	2025	IN WORK				MM/DD	/YYYY				
linic Comments			'		'						/_	
REPOSITIONING	RSV											
											_	
C Program Comn	nents											
	l Bassad/Dashasai											
	Brand/Packagi	-	CODE NDC OD PRAND/DACK	CACTNC H	ren e			_				
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BEGIN TYPING tent Add To Order	A VACCINE, MA	es Doses Per		ackage To			Total		Fund	Rec		
BEGIN TYPING ent Add To Order	A VACCINE, MA	es Doses Per		ackage To	otal Cost (\$)	Doses Per		Cost			Comments	
BEGIN TYPING Fent Add To Order Clear Vaccine	A VACCINE, MA	NUFACTURER es Doses Per	Package Total Doses Cost Per Pa	ackage To	Quantity of Packages	Doses Per		Cost 225.00	Туре		Comments	

VFC providers that are able to store and utilize more than 30 doses on-hand for the start of the 2025-2026 RSV season, may order outside of their normal ordering timeframe:

- Utilize the Clinic Comments box in NMSIIS to communicate need/demand of doses (e.g., "prepositioning RSV")
- If placing an order outside of the normal ordering time frame, contact your Regional Coordinator or
 - <u>Vaccine.Orders@doh.nm.gov</u> to request an order opened

Respiratory Syncytial Virus (RSV) Vaccine Considerations



- There are three RSV vaccines licensed by the U.S. Food and Drug Administration for use in adults aged 50 and older in the United States:
 - GSK's AREXVY
 - Moderna's mRESVIA
 - Pfizer's ABRYSVO
- Everyone ages 75 and older should receive the RSV vaccine.
- People ages 60–74 who are at increased risk of severe RSV, meaning they have certain chronic medical conditions, such as lung or heart disease, or they live in nursing homes, should receive the RSV vaccine.
- Some adults in their 50s with underlying health conditions may also be considered for vaccination, particularly those with conditions like chronic lung or heart conditions, or severe obesity.
- The RSV vaccine is not currently an annual vaccine, so individuals do not need to receive a dose every season.

RSV Vaccine - Pregnancy



- ACIP and CDC recommended maternal Pfizer RSVpreF (Abrysvo) vaccination in pregnant persons as a onetime dose at 32-36 weeks using seasonal administration (meaning from September-January) for prevention of RSV in infants under 6 months of age
- Only Pfizer RSVpreF (Abrysvo) may be administered to pregnant persons; Arexvy (GSK) and mRESVIA (Moderna) vaccines should not be administered during pregnancy
- Unlike TDap, pregnant people who have already received a maternal RSV vaccine during any previous pregnancy are not recommend to get another dose of RSV vaccine during subsequent pregnancies
- Maternal RSV vaccine can be administered during the same visit that a patient receives a Tdap, COVID-19, and/or influenza vaccine
- Vaccination for pregnant people should end on January 31



Co-administration of Respiratory Virus Response Vaccines



- COVID-19 vaccines may be administered without regard to timing of other vaccines.
- Flu vaccine and RSV products can be administered at the same time as COVID-19 vaccines.
- People who recently had SARS-CoV-2 infection may consider delaying a COVID-19 vaccine dose by 3 months from symptom onset or positive test (if infection was asymptomatic)
 - Studies have shown that increased time between infection and vaccination might result in an improved immune response to vaccination.

RSV Immunization - Infants/Toddlers



 Infants born during the RSV season (typically October through March) should receive a single dose of Nirsevimab or clesrovimab at birth or within 1 week after birth if the birth parent did not receive RSV vaccine at least 14 days prior to delivery



Immunization is recommended for:

 All infants younger than 8 months entering their first RSV season. Except in rare circumstances, most infants younger than 8 months of age do not need nirsevimab if they were born 14 or more days after their mother got an RSV vaccine. Some high-risk toddlers my need a second dose at 8-19 months

RSV Immunization - Infants/Toddlers



- Those at high risk for RSV needing a second dose include:
 - Children with 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
 - Children with 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 have weight-for-length that is < 10th percentile.
 - American Indian and Alaska Native Children
 - American Indian and Alaska Native Children are included in the high-risk category because they experience significantly higher rates of severe RSV disease and hospitalization, with children living in rural and reservation communities most impacted. Evidence supports that this increased risk is associated with social drivers of health.

RSV Immunization – Enflonsia



- US Food and Drug Administration (FDA) has approved its monoclonal antibody vaccine clesrovimab-cfor (Enflonsia) for preventing respiratory syncytial virus (RSV) through passive immunity in newborns and infants entering their first RSV season
- Effective July 1, 2025, CPT* code 903821 is available for ENFLONSIA.
 - Please ensure your systems are updated with the CPT code and product information.
- This product has two NDCs: 00006-5073-01 (1-pack, prefilled syringe); 00006-5073-02 (10-pack, prefilled syringe)
- Provider orders for clesrovimab are open for the season
 - Due to limited allocation, larger clesrovimab orders may be reduced to allow for equitable distribution statewide
 - Consider ordering the 1-pack if your clinic sees a low number of infant patients



RSV Infant Presentations available for ordering



- Nirsevimab (Beyfortus)
 - Two presentations available (5-dose packages):
 - 0.5 mL (50 mg) For infants aged less than 8 months weighing <5 kg [<11 lb]
 - 1 mL (100 mg) For infants aged less than 8 months weighing ≥ 5 kg [≥ 11 lb]
 - Two 100 mg injections (200 mg) for children aged 8 through 19 months

Clesrovimab (Enflonsia)

- Dosage: 105 mg (0.7 mL) for all eligible infants [regardless of weight]
 - 1 pack single-dose prefilled syringe (NDC 00006-5073-01)
 - 10 pack single-dose prefilled syringes (NDC 00006-5073-02

For Providers with 2024-25 RSV Supply



- Providers should ensure that they are administering the 2024-2025 supply of Beyfortus before administering the new 2025-2026 supply to avoid vaccine loss due to expiry
- Providers not expecting to administer 2024-2025 on-hand doses before their upcoming expiration dates should contact their regional coordinators to complete the Attempt to Transfer form, three months prior to expiration
- Dosage supplies will be transferred to a provider location that can utilize the supply and prevent wastage on this important supply during the season
- The formulation of Beyfortus will not change from year to year
- Beyfortus has a shelf life of about 18 months

Timing Chart for Administering Nirsevimab Starting In October To Infants Born Before the Typical RSV Season

Birth month					CDC-recommended administration period*						
Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
*						6 mo					
	*						6 mo				
		÷				4 mo		6 mo			
			*				4 mo		6 mo		
				*		2 mo		4 mo		6 mo	
					÷	1 mo	2 mo		4 mo		6 mo
Infant	Infant birth Optimal administration window					Month markers represent regularly scheduled well-baby visits.					

^{*}Timing of administration for RSV immunization may differ in certain areas.1

ACIP RSV Immunization Seasonal Recommendations Summary*

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
Infants and children (nirsevimab)		Administer during October- most of the continental U.S					h in	Providers can adjust administration schedules based on local epidemiology.†			pased	
Pregnant people (Pfizer, Abrysvo)	Administer during September– January in most of the continental U.S.				ONLY jurisdictions whose seasonality differs from most of the continental US may administer outside of September–January.†							
Adults 50+ (Pfizer, Abrysvo; GSK, Arexvy)		ffer as early as vaccine is available using shared clinical decision making; ontinue to offer vaccination to eligible adults who remain unvaccinated.										

Recommended tin	ning	Timing NOT recommended for immunization,
for immunization		except in limited situations (as indicated in chart)

^{*}The current slide reflects only the seasonal timing of vaccination for each population. For full RSV vaccine recommendations, please see: https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/rsv.html
†In jurisdictions with RSV seasonality that differs from most of the continental United States, including Alaska, southern Florida, Guam, Hawaii, Puerto Rico, U.S.-affiliated Pacific Islands, and U.S. Virgin Islands, providers should follow state, local, or territorial guidance.

Measles in NM and Beyond



NMDOH Calls End of Measles Outbreak, September 26, 2025

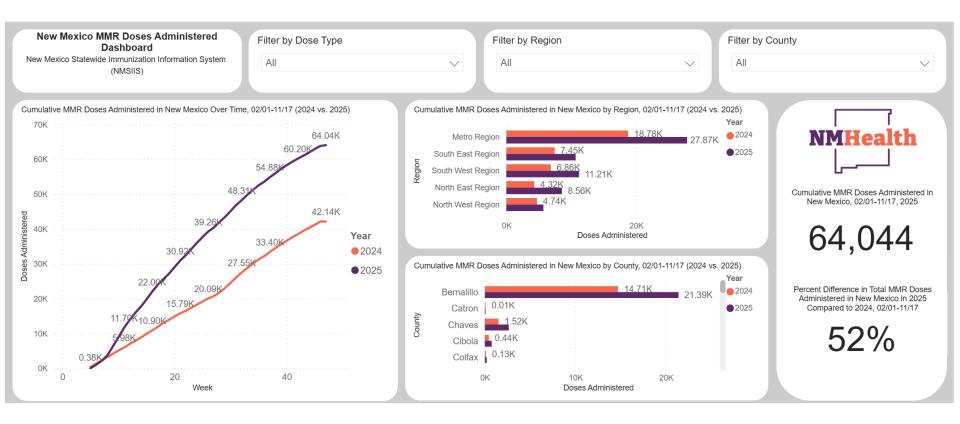


- The New Mexico Department of Health has declared the state's measles outbreak, which started on February 14, to be over
- The last cases were reported in Santa Fe County on August 14.
- Public health authorities consider a measles outbreak over when 42 days pass without new cases, a timeframe that represents twice the virus's maximum incubation period.
- One hundred cases of measles were identified during this outbreak, which was New Mexico's first measles outbreak since 1996, and its largest in decades. The outbreak began in Lea County, likely from exposures to an outbreak in neighboring West Texas.
- Over 64,000 people receiving an MMR vaccine since Feb. 1. The MMR vaccine is still widely available in New Mexico for anyone who wants it.
- epidemiologist in the Epidemiology and Response Division is available 24 hours per day/7 days per week/365 days per year by calling 1-833-SWNURSE (1-833-796-8773)
- If you suspect a case of measles, consultation with an



Vaccine Dashboard Data, through 11/17







NM Measles Infographics

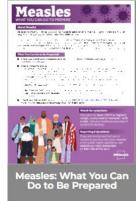
Infographics













Signage







US Measles Cases Reported By Week 11/13/2025nmHealth

- As of November 12, 2025, a total of 1,723 confirmed* measles cases were reported in the United States. Among these, 1,700 measles cases were reported by 43 jurisdictions: Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, New Jersey, New Mexico, New York City, New York State, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, Wisconsin, and Wyoming. A total of 23 measles cases were reported among international visitors to the U.S.
- There have been 45 outbreaks** reported in 2025, and 87% of confirmed cases (1,503 of 1,723) are outbreak-associated. For comparison, 16 outbreaks were reported during 2024 and 69% of cases (198 of 285) were outbreak-associated.

^{**}Outbreak defined as 3 or more related cases

Other Measles Updates

- Significant US outbreaks occurring in Arizona/Utah, South Carolina and Rockland Co, NY
- Eight recent international imported cases including Mexico, Isreal
- Pan American Health Organization, an international health agency revoked the country's measles-free status on Nov. 10, 2025
 - More than 5,000 Canadian cases in 2025
- The US will likely soon lose its measles-free designation as well
- By 2016, every country in the Americas had achieved measles elimination status
- The Americas lost that status in 2018 after outbreaks in Brazil and Venezuela but regained it in 2024
- Childhood vaccination rates have been falling worldwide, especially during and after the COVID-19 pandemic
- To protect communities from measles outbreaks, about 95% of the population must be vaccinated against the disease

Measles Case Summary – US – 11/13/25



U.S. Cases in 2025

Total cases

1723

Age

Under 5 years: **456 (26%)**

5-19 years: **682 (40%)**

20+ years: **573 (33%)**

Age unknown: 12 (1%)

Vaccination Status

Unvaccinated or Unknown: 92%

One MMR dose: 4%

Two MMR doses: 4%



Measles Hospitalizations US 10/8/25 NMHealth



U.S. Hospitalizations in 2025

12%

12% of cases hospitalized (206 of 1723).

Percent of Age Group Hospitalized

Under 5 years: 22% (99 of 456)

5-19 years: **6% (44 of 682)**

20+ years: 11% (63 of 573)

Age unknown: 0% (0 of 12)



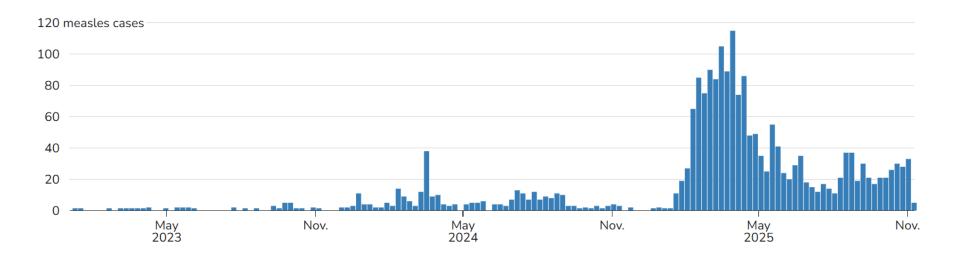
U.S. Deaths in 2025

3

There have been 3 confirmed deaths from measles.

US Weekly measles cases by rash onset date [____]

2023-2025* (as of November 12, 2025)



Measles - It's Not Just US (April-Oct 2025) NMHealth



September 2025

October 2025

Country	Number of Cases	Country	Number of Cases
Yemen	19,420	Yemen	17,059
Pakistan	13,227	Mongolia	12,197
India	10,368	Pakistan	11,463
Nigeria	7,542	Nigeria	10,959
Indonesia	7,134	India	8,035
Afghanistan	5,662	Indonesia	7,419
Kyrgyzstan	5,064	Russian Federation	4,573
Russian Federation	5,007	Mexico	4,550
Mexico	4,456	Afghanistan	4,525
Canada	3,815	Canada	3,844

Source: World Health Organization

Procedure for Notifications for Measles Cases in NM NMHealth

- Investigation initiated within 15 minutes this requires immediate reporting to central Epi.
- What is the timeframe for these next steps and who is responsible?
 - Provider Interview Central
 - Case Interview Regions
 - Contact Investigation Regional Nurse Epidemiologists, Epi and Response Division
 - Contact Prophylaxis-Immunization Program
 - Case management Public health nurses (PHNs), regional nurse epidemiologists, regional epidemiologists and others as needed

Consultation with an epidemiologist in the Epidemiology and Response Division is available 24 hours per day/7 days per week/365 days per year by calling 1-833-SWNURSE (1-833-796-8773)

Complete protocol: https://www.nmhealth.org/publication/view/general/5153/



Avian Flu (H5)

Recent Human Case of Avian Flu

NMHealth

- Washington State Dept of Health confirmed Grays Harbor County man was diagnosed with avian flu
- First US case since February
- First human ever known to be infected with the H5N5 strain
- Family has a mixed backyard flock of domestic poultry at home that had exposure to wild birds
- Individual was hospitalized with severe influenza symptoms in early November and was still as of November 14



Influenza A (H5) Situation (CDC) – 11/14



National Total Cases: 71

Cases	Exposure Source
41	Dairy Herds (Cattle)*
24	Poultry Farms and Culling Operations*
3	Other Animal Exposure†
3	Exposure Source Unknown‡

No New Mexico cases reported to date



Person-to-person spread

NONE

There is no known person-toperson spread at this time.

Current public health risk

LOW

The current public health risk is Low.

Cases in the U.S.

71 cases

Deaths in U.S.

1 death



Mpox

Mpox Clade Ib Cases in US

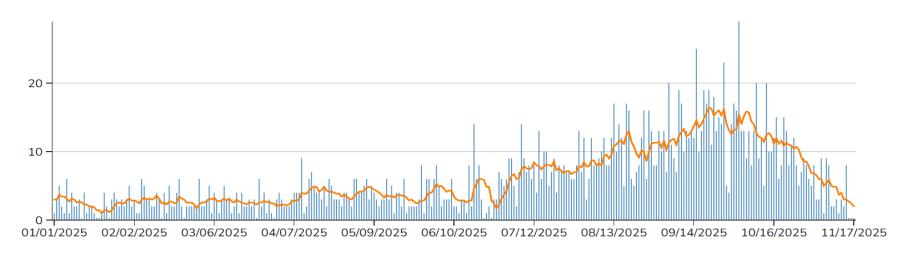


- A newer variant of mpox, is now spreading through some communities in the US and Europe
- California Dept of Public Health announced three cases of the newer variant:
 - known as clade lb, a clade with lower mortality than la.
 - All three of the patients two in Los Angeles and one in Long Beach were hospitalized and are now recovering
 - None of the patients had apparent links to each other and none had traveled internationally recently
 - Indicating the virus is likely spreading undetected in some communities
- Spain, Italy, the Netherlands and Portugal also report apparent community transmission of the newer variant, and the older variant continues to circulate globally
- There have been six other reported cases of clade I monkeypox in the United States in people who had recently traveled to affected areas in Central and Eastern Africa

Mpox Clade II Cases US 11-17



1947 cases in 2025



Mpox Symptoms



- The rash will go through several stages, including scabs, before healing.
- The rash can initially look like pimples or blisters and may be painful or itchy.
- Fever
- Chills
- Swollen lymph nodes
- Exhaustion
- Muscle aches and backache
- Headache
- Respiratory symptoms (e.g., sore throat, nasal congestion, or cough)









Mpox Information for Health Care Provider MHealth

- In New Mexico, it is essential to report any suspect, probable or confirmed cases. Call the NMDOH Helpline at 1-833-796-8773 for questions about:
- Clinicians should consider mpox when lesions consistent with mpox are observed in a patient, even if an alternate etiology (e.g., herpes simplex virus, syphilis) is considered more likely. Report any confirmed case to the New Mexico Department of Health (DOH) Helpline at 1-833-SWNURSE (1-833-796-8773)
- It is important to comprehensively evaluate patients presenting with genital or perianal ulcers for STIs. However, co-infections with MPOX and STIs have been reported and the presence of an STI does not rule out MPOX.
- Testing for mpox is available commercial labs and the state scientific laboratory (SLD). Please refer to your diagnostic laboratory's webpage for specimen collection and submission guidance.
- Specimens must be appropriately collected, stored, and submitted by the healthcare provider; patients cannot have specimens collected at laboratory service centers.
- Consult NMDOH for access to mpox therapeutics when appropriate.
 Treatment with tecovirimat can be considered via the NIH sponsored STOMP trial

Mpox Prevention Measures

- Avoid contact
- High risk people should receive vaccine
 - Travelers to affected countries who anticipate sex with a new partner, at a commercial venue, or festivals and events
 - MSM, transgender or non-binary people who in the last 6 months have had more than one sex partner, an STI, sex at a commercial venue, festival or other event
 - Sex partners of people with the risks described above
 - People who anticipate any experiencing of the above
- JYNNEOS vaccine, 2 dose series administered 28 days apart.
 Commercially available since 2024 and covered by insurance.

https://www.cdc.gov/monkeypox/hcp/clinical-overview/index.html



NMSIIS

The Newsfeed

COVID-19 Vaccine Recommender



Attention NMSIIS Users

We are aware of an existing issue within NMSIIS, where the recommender is **not** showing that children who recieved COVID-19 vaccine doses during the 2024-25 season are recommended to receive a dose during the 2025-26 season as well.

The issue stems from delays the CDSi logic recommender and we are hoping to have it updated soon. In the meantime, please **continue** recommending COVID-19 vaccine doses annually for all children, even if the NMSIIS recommender does not list it.

Thank you for your help

Flu Vaccine Is Still Available



Attention VFC Providers!

Flu vaccine is still available for ordering.

To request doses from your remaining allocation or extra doses, please send an email to vaccine.orders@doh.nm.gov.

Please include:

- VFC Pin#
- Clinic/Facility Name
- Number of flu doses requested from your remaining allocation or extra doses
 - o Injectables (6mo-18yrs)_____
 - FluMist (2yrs-18yrs)________
- Amount the facility can hold

School Immunization Survey



ATTENTION SCHOOLS!

THE 2025-26 SCHOOL IMMUNIZATION SURVEY HAS BEEN SENT OUT!

The New Mexico Department of Health (DOH) is conducting this survey of student immunization tracking data to measure compliance with NM school immunization requirements. New Mexico law requires each school superintendent to prepare a record showing the required immunization status of every child enrolled in or attending a school under his or her jurisdiction (NM Statute, Section 24-5-4).

If you do not have kindergarten or seventh grade students, you are not required to complete this survey.

You may view New Mexico's school immunization requirements for the 2025-2026 school year at: https://www.nmhealth.org/publication/view/policy/9106/

Please take the time to review your student immunization records and submit this survey by December 2, 2025. If you have not submitted the survey by that date, you will be contacted by DOH staff.

Each school should submit an individual survey - please do not submit a single survey combining data from all schools in a district, however if one school has both Kindergarten and 7th grade together, they may submit a single survey.

2025-2026 New Mexico School Self-Reporting Survey: https://redcap.link/01v9vil7

The Immunization Program provides educational training for school personnel to learn how to assess student's immunization records.

Gatekeeper training is available on the NMSIIS School page https://www.nmhealth.org/about/phd/idb/imp/siis/train%20/

Here is the direct link to the Gatekeeper training https://www.nmhealth.org/resource/view/1480/

For school administrators who need NMSIIS read only training, here is the link to the NMSIIS Training page https://www.train.org/nm/course/1108961/

Please reach out to Zahin Hossain (Zahin.Hossain@doh.nm.gov) with any questions.

COVID-19 Vaccine Reporting Update



2025-26 COVID Vaccines

Posted Monthly by KATHRYN CRUZ

COVID 2025-26 Vaccine Doses Approved

To prepare for the receipt of approval and authorization of the Updated 2025-2026 COVID-19 Vaccines, the Emergency Use Authorization for the following 2024-2025 formulation vaccines has been revoked: Novavax COVID-19 vaccine, Moderna COVID-19 vaccine, and Pfizer-BioNTech COVID-19 vaccine, as of 9/3/2025.

Vaccines whose EUA's have been revoked should no longer be administered to patients.

Return of 2024-2025 COVID-19 Vaccines

- Remove all 2024-2025 COVID-19 vaccines from storage immediately, even if they are not expired.
- Return all unused 2024-2025 COVID-19 vaccines ordered through the VFC or VFA programs that are still on-hand through NMSIIS using the return reason SPOILED.

The New Mexico Immunization Program will provide you with information about placing orders for 2025-2026 COVID-19 vaccines in the coming days.

COVID-19 Vaccine Ordering Update NMHea



ATTENTION PROVIDERS - 2025-2026 COVID-19 VACCINE

2025-2026 COVID-19 vaccines are now available for ordering through NMSIIS for Vaccines for Children and Adult Vaccines.

Manufacturer	NDC	Age Indication	Dsitrbution
Moderna	80777-0112-96	12y+	Central
Moderna	80777-0113-80	6m-11y	Central
Pfizer	00069-2528-10	12y+	Direct Ship
Pfizer	00069-2501-10	5y-11y	Direct Ship

As a reminder, vaccines ordered for children can only be used on children 18 years of age and younger. If you are a provider that stocks both pediatric and adult COVID-19 vaccine, please label your doses to avoid unintentional administration to an ineligible population.

You may start placing orders through NMSIIS. Please place COVID orders separately from your routine vaccine orders.

If you are outside your ordering timeframe you DO NOT need to reconcile and can request an order, be overrode by your Regional Coordinator.

As always only order as many doses as will be administered in a 2-month period – this is to avoid overcrowding in your storage units, and excessive loss and waste in the event of a temperature excursion or equipment failure.



VFC

VFC Reminders



- Certificates for VFC-required trainings are valid for one year from the date of completion (e.g., CHILe, You Call the Shots Module 10 and 16)
 - If certificates are over one year old, please complete new trainings and upload certificates to the staff member's contact in NMSIIS Clinic Tools
 - Instructions to upload certificates can be found on page 1 and pages 3-5 of the "VFC Provider Staff Change of Contact and Uploading Training Certificates" document in NMSIIS Reports
- Routine and emergency management plans are valid for one year from the form certification date
 - If plans are over one year old <u>or</u> if there are any staff changes, please update management plans and submit them your Regional Coordinator(s) for approval

VFC Providers to Receive Routine Updates ____

 Regional Coordinators will be sending out monthly reminder emails for:

- Temp logs due on the end of the first business day of the month
- Reconcile and order on the same day during your ordering timeframe
- Any other important information within your regions.

	October							
S	M	T	W	TH	F	S		
			1	2	3	4		
5	6	7	8	9	10	11		
12	13	14	15	16	17	18		
19	20	21	22	23	24	25		
26	27	28	29	30	31			

November						
S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

December							
S	M	T	W	TH	F	S	
	1	2	3	4	5	6	
7	8	9	10	11	12	13	
14	15	16	17	18	19	20	
21	22	23	24	25	26	27	
28	29	30	31				

2025-26 VFC PEDIATRIC FLU ALLOCATIONS NMHealth



- Pediatric flu vaccine orders and deliveries are ongoing.
- Flu vaccine shipments do not follow the "Vaccines Shipping Days" schedule, please be sure to check daily for flu shipments as these presentations ship faster than routine vax
- Please do not schedule patients or events until you have doses in hand
- Continue to order flu vaccine as there is ample supply for the season
- Doses of pediatric flu vaccine are to be entered into NMSIIS manually. This should be done as soon as the shipment arrives. Attached are the instructions to enter the pediatric flu into NMSIIS. Also attached is the drop-down list to assist with locating the CORRECT Pediatric flu in NMSIIS



2025-26 VFC PEDIATRIC FLU ALLOCATIONS



- FluMist is available through the VFC Program for the 2025-26 flu season. Based on the allocation requests received, we will be able to issue out of 100% the FluMist requested
- Injectable Flu vaccine doses will be issued with the 6 months-18 years presentation
- To request doses from your remaining allocation or extra doses, please send an email to vaccine.orders@doh.nm.gov.
- Please include:

VFC Pin#
Clinic/Facility Name
Number of flu doses requested from your remaining allocation or extra doses
Injectables (6mo-18yrs)______
FluMist (2yrs-18yrs)_____
Amount the facility can hold ______

	~ November 2025 ~					
Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
	Regular delivery	Regular delivery	Regular delivery	Regular delivery	Regular delivery	
9	Pac. Island orders placed in VTrckS after this date may not be delivered until 12/1/25 or later.	11 Veterans Day - Federal Holiday	12	13	14	15
	Regular delivery	No Delivery	Regular delivery	Regular delivery	Regular delivery	
16	17	18	19 Orders placed in VTrckS after this date may not delivered until 12/1/25 or later.		21	22
	Regular delivery	Regular delivery	Regular delivery	Regular delivery	Regular delivery	
23	24	25	26	27 Thanksgiving - Federal Holiday	28	29
	Regular delivery	Regular delivery	Limited Delivery	No Delivery	No Delivery	

Regular Delivery = Normal deliveries expected for routine orders for McKesson, Merck Direct Ship and Pfizer COVID Direct Ship.

Limited Delivery = McKesson priority orders only. No delivery for Merck Direct Ship & Pfizer COVID Direct Ship.

No Delivery = No deliveries expected.

	~ December 2025 ~							
Sun	Mon	Tue	Wed	Thu	Fri	Sat		
	1	2	3	4	5	6		
	Regular delivery	Regular delivery	Regular delivery	Regular delivery	Regular delivery			
7	Regular delivery	Pac. Island orders placed in VTrckS after this date may not be delivered until January 5 th or later. Regular delivery	10 Regular delivery	11 Regular delivery	Orders placed in VTrckS after this date may not be delivered until January 5th or later. Regular delivery	13		
14 Hanukkah begins	15	16	17	18	19	20		
21	Regular delivery 22	Regular delivery 23	Regular delivery 24	Regular delivery 25 Christmas - Federal Holiday	Regular delivery 26	27		
28	Limited Delivery 29	Limited Delivery 30	Limited Delivery 31	No Delivery	No Delivery			
	Limited Delivery	Limited Delivery	Limited Delivery					

Regular Delivery = Normal deliveries expected for routine orders for McKesson, Merck Direct Ship and Pfizer COVID Direct Ship.

Limited Delivery = McKesson priority orders only. No delivery for Merck Direct Ship & Pfizer COVID Direct Ship.

No Delivery = No deliveries expected.

	~ January 2026 ~					
Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1 New Years Day - Federal Holiday	2	3
				No Delivery	No Delivery	
4	5	6	7	8	9	10
	Regular delivery	Regular delivery	Regular delivery	Regular delivery	Regular delivery	
11	12	13	14	15	16	17
	Regular delivery	Regular delivery	Regular delivery	Regular delivery	Regular delivery	
18	19 Martin Luther King - Federal Holiday	20	21	22	23	24
	No Delivery	Regular delivery	Regular delivery	Regular delivery	Regular delivery	
25	26	27	28	29	30	31
	Regular delivery	Regular delivery	Regular delivery	Regular delivery	Regular delivery	

Regular Delivery = Normal deliveries expected for routine orders for McKesson, Merck Direct Ship and Pfizer COVID Direct Ship.

Limited Delivery = McKesson priority orders only. No delivery for Merck Direct Ship & Pfizer COVID Direct Ship.

No Delivery = No deliveries expected.

If you are expecting orders to arrive before the holidays, please keep in mind that routine shipments from McKesson can take up to 4 business days to process before they are shipped. Also, note that shipments may take longer than 4 days to process and ship if the provider does not have regular business hours daily (Regular hours are defined as M-F, 8am-5pm).

Providers are strongly encouraged to order early during the winter holidays. Providers are also encouraged to maintain a minimum of 4 weeks of inventory to prevent vaccine outages if orders are delayed due to weather and/or carrier interruptions.

Shipments may arrive on any day of the week, including Mondays, based on the way business hours are entered in VTrckS.

- Providers with hours other than normal business hours should note that orders may ship out later than the "order shipped by" date.
- Flu and direct ship vaccines cannot be shipped as priority and therefore should not be marked as priority in VTrckS.



Adult Vaccines

2025-2026 Adult Flu Vaccine Ordering



- Thank you for your continued support to protect New Mexicans during this respiratory season! Seasonal influenza activity remains *low* nationally but is increasing, primarily among children 0-4 years of age.
- Adult Flu doses are still available for ordering!
 - When you are needing additional Adult Flu doses, please send an email to adult.vaccines@doh.nm.gov with the following:
 - Pin #
 - Clinic/Facility Name
 - Number of flu doses requested from your remaining allocation or extra doses
 - · Amount your facility can hold
- For any Adult Flu dose transfers (must be approved by regional coordinator(s) or adult.vaccines@doh.nm.gov prior to transfer), please be sure you are sending the completed Adult Vaccine Transfer Form to your regional coordinator(s) as well as adult.vaccines@doh.nm.gov.

2025-2026 Adult COVID-19 Vaccines



- A limited quantity of Adult Moderna (NDC: 80777-0112-96) is available for ordering for NMDOH Public Health Offices (PHOs) and the Vaccine Mobile Unit
 - Orders may be reduced based on funding availability and to ensure we have equitable distribution statewide.
- Adult Pfizer (NDC: 00069-2528-10) is available for ordering for 317B providers. The amount available is extremely limited.
 - Orders may be reduced or rejected based on funding availability and to ensure we have equitable distribution statewide.
- For any questions, please contact <u>adult.vaccines@doh.nm.gov</u>.



Some Epi

NMHealth CDC COVID Surveillance and Data Analytics, (Suspended)

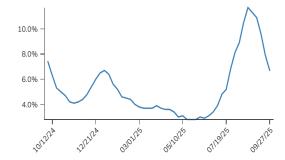
Early Indicators

Test positivity (the percentage of total reported tests that are positive) and the percentage of total emergency department visits due to COVID-19 are key metrics to assess the impact of COVID-19 on communities. For public health professionals, these metrics act as early indicators of potential increases in COVID-19 activity.

% Test Positivity

6.7%

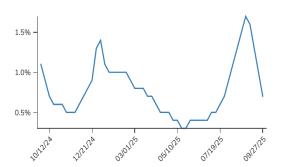
Week ending 2025-09-27 Previous Week 7.9%



% ED visits diagnosed as COVID-19

0.7%

Week ending 2025-09-27 Previous Week 1.0%



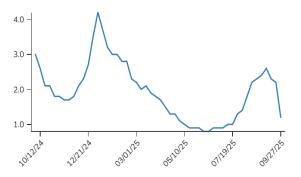
Severity Indicators

Hospitalizations and deaths are key metrics for assessing the severity and disease burden of COVID-19, including which groups are at the increased risk of severe COVID-19.

Hospitalization rate per 100,000 population

1.2

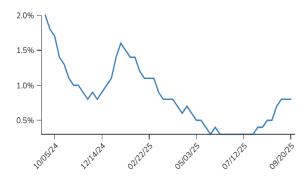
Week ending 2025-09-27 Previous week 2.2



% of All Deaths in U.S. Due to COVID-19

0.8%

Week ending 2025-09-20 Previous Week 0.8%



Respiratory Illnesses Data Channel-CDC



WHAT TO KNOW

- As of November 14, 2025, the amount of acute respiratory illness causing people to seek health care is at a low level.
- RSV activity is increasing in the Southeastern and Southern areas of the country with emergency department visits increasing among children 0-4 years old.
- Seasonal influenza activity remains low nationally but is increasing.
- COVID-19 activity is low nationally.



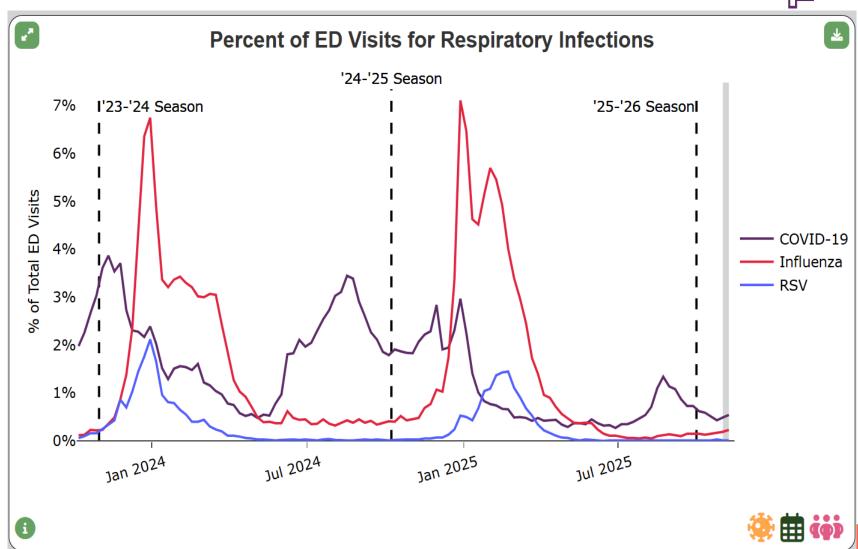
Emergency department visits in New Mexico

COVID-19 Flu RSV

Very Low
No Change Increasing ✓ Very Low
No Change

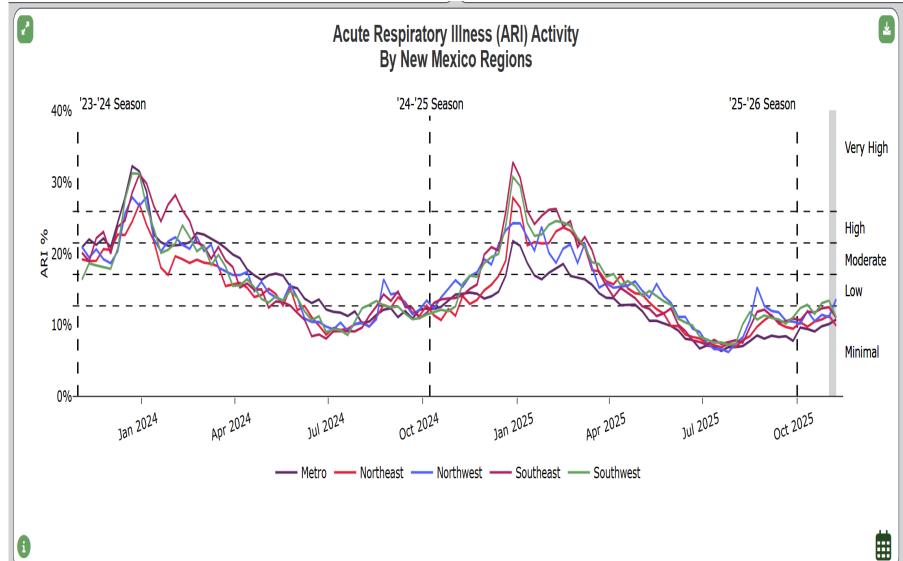
NM Respiratory VPD Epi Ending 11/8





NM Respiratory Epi Ending 11/8



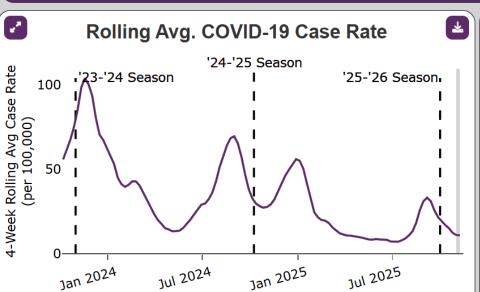


NM Respiratory COVID Epi Ending 11/8 NMHealth



Hospitalization Rate per 100,000

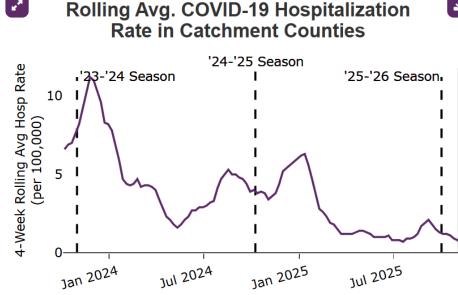
Change from Previous Week -0.5



Cumulative Case Rate (per 100,000)

		2020-		l	1		1		
20)20	2021	2022	2023	2024	2025	2026		
1,	340	10,448	16,819	3,876	2,118	1,135	73		

Rate Count



Cumulative Hosp. Rate (per 100,000)

2023-2024	2024-2025	2025-2026
234	122	4

Rate Count









NM Respiratory Epi Ending 11/8



Season	Adult COVID-19 Deaths	Pediatric COVID-19 Deaths	Total COVID-19 Deaths					
2025-2026*	0	0	0					
2024-2025	149	0	149					
2023-2024	317	1	318					

1

Season	Pneumonia Deaths	Adult Influenza Deaths	Pediatric Influenza Deaths	Total Pneumonia & Influenza Deaths			
2025-2026	0	1	0	1			
2024-2025	263	98	3	364			
2023-2024	356	74	4	434			

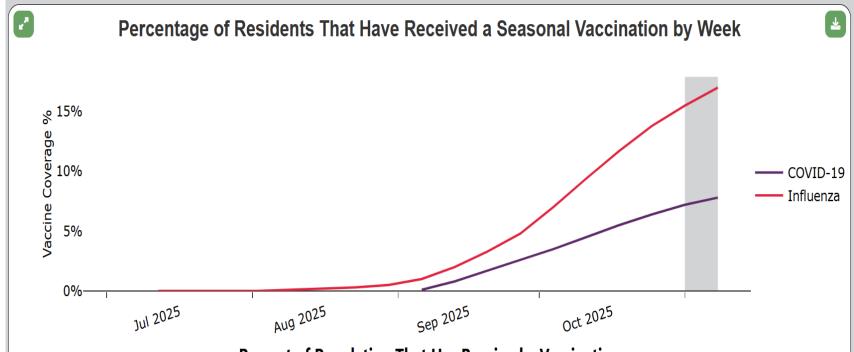
i

Season	Adult RSV Deaths	Pediatric RSV Deaths	Total RSV Deaths						
2025-2026	0	0	0						
2024-2025	1	0	1						
2023-2024	3	0	3						

a

NM Vaccination Ending 11/8





Percent of Population That Has Received a Vaccination

Vaccine	2023-2024	2024-2025	2025-2026
COVID-19	16.6%	15.7%	7.8%
Influenza	27.9%	27.1%	17%





NM Vaccination Ending 11/8





RSV Immunization Coverage



Pediatric RSV Immunization Coverage 2025-2026

Age Group	Percent Immunized			
0-7 months prior to Season (Oct 1) and immunized by injection	31.7%			
Born during Season (Oct 1 – Mar 31) and immunized by injection	20.2%			
Born during Season and immunized by either injection or maternal vaccination	46.6%			
8-19 Months during Season	1.4%			

Older Adults RSV Vaccination Coverage

Age Group	Percent Immunized	
75+ Years	39.5%	
50-74 Years	14.2%	





Respiratory Vaccine Distributed by NMDOH 11/17



• Flu:

• Flulaval: **36,930**

• Fluzone: 24,520

• Flumist: 4,920

• COVID-19:

• Spikevax (Moderna) 12+: 1,750

• Spikevax (Moderna) 6m-11y: **4,260**

• Comirnaty (Pfizer) 12+: 580

• Comirnaty (Pfizer) 5-11y: 310

RSV

- Beyfortus (nirsevimab) 50mg: 3,675
- Beyfortus (nirsevimab) 100mg: 4,335
- Enflonsia (clesrovimab) 1-pk: 0
- Enflonsia (clesrovimab) 10-pk: 330



Campaigns and Announcemets



Thank you to everyone that nominated an immunization champion. Awards will be given to the following during our annual New Mexico Immunization Coalition meeting held on November 21st, 2025 Congratulations to the awardees, thank you for going above and beyond the call of duty to improve immunization rates, practices, awareness, policy, and/or education. 11 Champions this year!!!



Immunization Champion Awards

NMDOH SW Region Las Cruces-Andrea Halvorson
NMDOH Immunization Program Santa Fe-Nathaniel Webb
Santo Domingo Health Center
NMDOH SE Region Tucumcari-Rickie Eslick
NMDOH Metro Region Albuquerque-Erica Flores, Crystal
Trujillo, and Melissa Padilla
Mescalero Indian Health Center- Nursing Department
NMDOH SW Region Socorro -Roberta Baca
Carlsbad Municipal Schools-Megan Perez
NMDOH NW Region Farmington-Scott Minard
NMDOH NE Region Santa Fe PHO-Anita Smith

University of New Mexico- Jennifer Ortega



Vaccines To Go-NMDOH Mobile Unit



Use the Request Form

https://forms.office.com/g/FvV63 M6B7M or QR code (which will take requesters to the form). If you have any inquiries about mobile vaccine requests, please direct them to complete the form. If there are any questions, contact the email address

dohmobile.vaccines@doh.nm.gov

or the NMSIIS Help Desk 833-882-6454. Make request at least 3 weeks in advance. **Note**: This form is not valid for correctional facilities; they must contact NMIP directly.

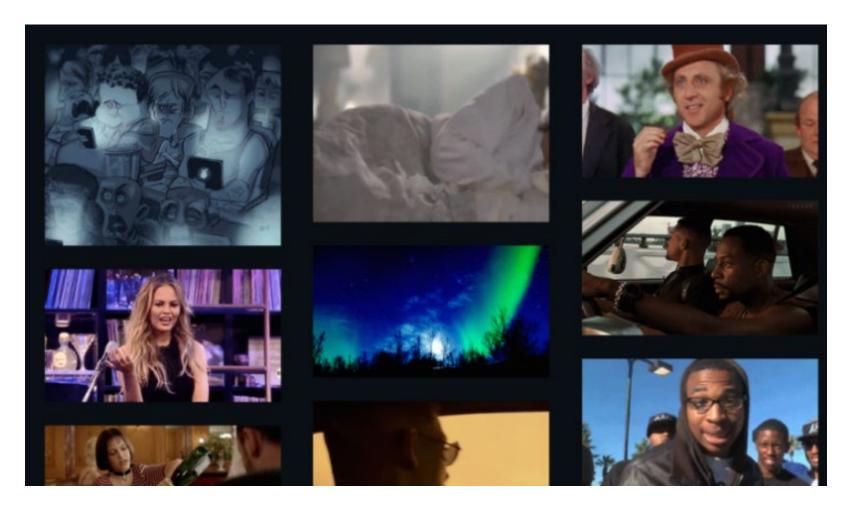
Population focus-Underserved and high need communities for vaccine access.



Next Providers' Office Hours Call

3rd Thursdays

Next Office Hours Call: December 18, noon





New Mexico Vaccines for Children (VFC) Program Staff

RUNNELS BUILDING

VFC Program Manager Lynne Padilla

Phone: 505-827-2147

Email: Lynne.Padilla-truji@doh.nm.gov

Vaccines for Children Health Educator Daisy Lujan

SANTA FE

Phone: 505-827-2415

Email: Daisy. Lujan@doh.nm.gov VFC.Health-Educator@doh.nm.gov

Vaccines for Children Clerk-A STATE OFFICE AT THE Rachel King

Phone: 505-827-1781

Email: Rachel.King@doh.nm.gov

Vaccines for Children Clerk-O

Carl Schoepke, JR. Phone: 505-827-2731

Email: Carl.Schoepke@doh.nm.gov

Immunization Compliance Coordinator Scarlett Swanson

Phone: 505-827-2898

Email: ScarlettC.Swanson@doh.nm.gov

REGIONAL OFFICES

Metro	Northwest	Northeast	Southeast (a) (b)	Southwest
Bernalillo, Sandoval,	Cibola, McKinley, San Juan	Colfax, Guadalupe, Los	A-Eddy, Lea, Lincoln, Chaves, B-Quay,	Catron, Doña Ana, Grant,
Valencia, Torrance		Alamos, Mora, Rio Arriba, San	Roosevelt, Curry, De Baca	Hidalgo, Luna Otero, Sierra,
		Miguel, Santa Fe, Taos, Union,		Socorro
		Harding		
Immunization Coordinators:	Health Educator:	Immunization Coordinator:	Immunization Coordinator:	Immunization Coordinator:
Fries Flance DN	Angelica Torres	Brittany Baca, RN	Kelly Bassett, RN	Vacant
Erica Flores, RN	505-534-0865	505-476-2643	575-288-9618	vacant
505-709-7866				
Erica.Flores@doh.nm.gov	Angelica.Torres@doh.nm.gov	Brittany.Baca@doh.nm.gov	Kelly.Bassett@doh.nm.gov	
Crystal Trujillo, RN		Health Educator:	Immunization Coordinator:	Immunization Coordinator:
505-709-7811				
Crystal.Trujillo@doh.nm.gov		Debra Wagner	Zach Washington, RN	Kimberly Orozco, RN
		505-476-2619	505-222-9011	575-528-5186
		Debra.Wagner@doh.nm.gov	Zachariah.Washington@doh.nm.gov	Kimberly.Orozco@doh.nm.gov
Melissa Padilla				
505-670-0153		Immunization Clerk:	Immunization Clerk:	Immunization Clerk:
Melissa.Padilla@doh.nm.gov				
		Renee Encinias	Theresa Rubio	Erica Nieto
		505-476-2622	575-288-9463	575-528-5113
		Renee.Encinias@doh.nm.gov	Theresa.Rubio@doh.nm.gov	Erica.nieto@doh.nm.gov
				<u></u>

Questions, Comments, Dialogues, Missives and Negotiations



