NMHealth

# Office Hours for New Mexico Vaccine Providers

Immunization Program

August 6, 2026

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

- Andrea Romero –IP Manager
- Catherine Campbell – NM State Immunization Information System (NMSIIS) Manager
- Grace Gonzales – Finance Manager
- Kathryn Cruz – Immunization Deputy Section Compliance Manager
- Lynne Padilla-Trujillo – Vaccines for Children Program (VFC) Manager
- Scarlett Swanson - Immunization Compliance Coordinator
- Vanessa Hansel – Vaccine Operations Manager

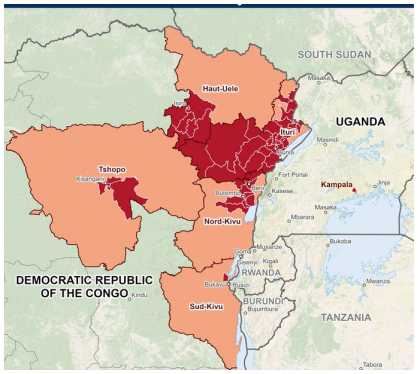
# Office Hours Agenda

- Essential National/International News
  - Ebola Updates
  - Advisory Committee on Immunization Practices Status Update
  - Federal Updates
- Vaccination Issues and Updates
  - Updated NMDOH Consent Forms
  - Storage, Shipping Tracking Updates
- COVID-19 Vaccine Updates
  - 2026-27 Vaccines?
- Influenza Vaccine Updates
- RSV Immunization Updates
  - Return of the Monoclonal Antibodies
- Measles
  - Domestic and International Updates
  - Updated Centers for Disease Control and Prevention CDC Web Pages
- Avian Influenza A(H5) Virus Update
  - Domestic and Worldwide
- Vaccines for Children/Pediatric Vaccine Updates
- Vaccines for Adults/Adult Vaccine Updates
- Disease Epidemiology Updates
- Campaigns and Announcements
  - VFA Provider Flu Meeting
  - Got Shots 2026 Continues
- Questions, Comments, Dialogues, Missives and Negotiations

# The Essentials- National/ International News

# Ebola Virus 2026-Current Sitch

- As of July 29, there are reports of 3895 confirmed cases, 1753 confirmed deaths (Democratic Republic of Congo, Uganda and France)
  - https://www.cdc.gov/ebola/situation-summary/index.html
- As of July 29, no Ebola cases associated with this outbreak have been reported in the United States
  - The overall risk to the American public and travelers remains low
- The virus causing the current outbreak is Bundibugyo, which has no licensed therapeutics or vaccines
- Trials for antivirals MBP134, remdesivir, obeldesivir are underway
- The World Health Organization (WHO) is also considering evaluation trials for Regeneron's antibody drug maftivimab combined with other antibodies



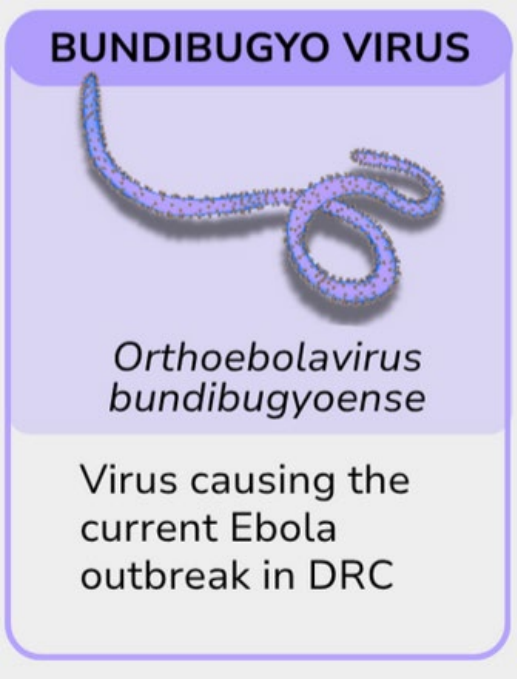
# Ebola Virus 2026-Current Sitch

## Vaccine Trials

- **Oxford ChAdOx1 Candidate:** The world's first human clinical trial for a Bundibugyo Ebola vaccine—developed using the ChAdOx1 vector platform by University of Oxford researchers and manufactured via the Serum Institute of India—began human safety testing
- **Hilleman Laboratories & Merck:** Hilleman Laboratories (a joint venture between Merck and Wellcome) is scaling up manufacturing support for clinical trial doses backed by Coalition for Epidemic Preparedness Innovations (CEPI)
- **Moderna mRNA Platform:** CEPI committed up to $50 million to advance a rapid-response mRNA-based vaccine candidate against the Bundibugyo strain with Moderna

# Ebola Virus 2026-Current Sitch, Cases

| Reported | Count |
|---|---|
| **DRC (as of Aug 03, 2026)** | |
| Confirmed cases | 3874 |
| Confirmed deaths | 1751 |
| Probable cases | 0 |
| Probable deaths | 0 |
| **Uganda (as of Aug 04, 2026)** | |
| Confirmed cases | 20 |
| Confirmed deaths | 2 |
| Probable cases | 1 |
| Probable deaths | 1 |
| **France (as of Aug 04, 2026)** | |
| Confirmed cases | 1 |
| Confirmed deaths | 0 |
| Probable cases | 0 |
| Probable deaths | 0 |
| **Totals** | |
| Confirmed cases | 3895 |
| Confirmed deaths | 1753 |
| Probable cases | 1 |
| Probable deaths | 1 |



# Judicial Moves -ACIP and Schedule

- The administration's push for a reduced vaccine schedule follows previous efforts that were met with legal resistance from the medical community, states and the courts
- In March, a federal judge in Massachusetts issued an injunction that temporarily:
  - Blocked HHS Secretary's appointment of 13 new members to the ACIP because the appointment likely violated the Federal Advisory Committee Act
  - Blocked all votes that the newly constituted ACIP had made, including the reduced vaccination schedule
  - Prevented the current ACIP from meeting until the case is resolved or another motion removed the temporary stay
- In April, HHS appealed the federal ruling, which put these changes on hold

# Stalemate and Possible Solution

- HHS has filed a motion to expedite its appeal of a court ruling that temporarily blocked changes to vaccine recommendations for US children
- HHS recently issued a revised charter to re-establish the group https://www.cdc.gov/acip/about/acip-charter.html:
- The Trump administration had a 60-day window from the March 16 ruling to file a formal appeal with the First Circuit. If the First Circuit sides with the Children's Defense Fund (who also filed a motion) or the administration, the vaccine schedule changes, and the frozen ACIP could potentially come back into effect while the full trial plays out
- The administration could also choose to accept the ruling on the committee removals and simply rebuild ACIP under whatever requirements the court has set out
  - Whether a court would accept that maneuver is the legal question
- A third path leads to the Supreme Court. If the case works its way through the First Circuit with rulings that favor either side, the losing party may seek further review
  - The Supreme Court's recent rulings on agency authority (most notably the 2024 decision overturning what is known as "Chevron deference," the longstanding rule that courts should defer to federal agencies' interpretation of their own laws) make the ultimate legal outcome genuinely unpredictable

https://historyofvaccines.org/blog/when-judge-hits-pause-vaccine-policy-follow-aap-v-kennedy/

# What This Means…

- **For parents**: Trying to figure out which vaccines their children should get right now, the schedule in place before Kennedy's changes took effect (specifically, the version from June 2024) is the one that is legally operative at this moment.
  - Your pediatrician's guidance and the AAP's own recommendations, which the Academy published independently in January 2026 after HHS' divergence is the current NMDOH position
- **For clinicians**: Insurance coverage for the full pre-change schedule remains in place under federal law for now. The major insurers have publicly committed to covering the June 2024 schedule
- **For the US**: The core question this case is asking is whether a cabinet secretary can bypass the expert review process that Congress wrote into law, not just for vaccines, but as a principle of how federal agencies must operate

# Senate Confirms Nominated CDC Director

- The US  Senate confirmed Dr. Erica Schwartz as the new director of the CDC on  Aug 5 (51-44 vote)
- She is the 22nd director of the Atlanta-based Centers for Disease Control and Prevention
- Retired rear admiral in the U.S. Public Health Service Commissioned Corps
- Earned a Master of Public Health degree from the Uniformed Services University of the Health Sciences in 2000
  - Completed a residency in occupational and environmental medicine in 2001
- Also has a Juris Doctor from the University of Maryland
  - Admitted to the District of Columbia Bar
- Appointed Deputy Surgeon General on January 1, 2019
- President of Insurance Solutions for Medicare and Retirement at United Healthcare, through June 2026

# A New Flu Vaccine

- On Aug 5, the U.S. Food and Drug Administration (FDA) officially approved the mRNA developed by Moderna, making it the first messenger RNA (mRNA-1010) vaccine approved for seasonal influenza.
- The new vaccine is authorized for people ages 50 to 64. The FDA issued an accelerated approval for adults 65 and older, which allows widespread use and can be converted to a full approval if the results of a follow-up study are deemed acceptable
- In a trial of approximately 40,000 participants aged 50 and older, mFlusiva (IM)reduced the relative risk of RT-PCR-confirmed influenza-like illness by about 26.6% to 27% compared to standard-dose traditional flu shots
  - The mRNA flu vaccines offer significantly higher efficacy, faster manufacturing speeds, and better strain accuracy compared to traditional egg-based vaccines, which are limited by slow production timelines and virus mutations during manufacturing
  - Solicited adverse reactions were more frequent with mRNA-1010 than with the standard-dose comparator (injection-site pain in 65.8% vs. 29.8%, fatigue in 45.1% vs. 20.3%, headache in 37.8% vs. 18.0%, and myalgia in 35.4% vs. 11.6%)
- Moderna anticipates to have the vaccine ready for the 2026-27 respiratory virus season

https://www.nejm.org/doi/full/10.1056/NEJMoa2516491

# NMDOH Gets Its Measles Propers

The **Annals of Internal Medicine** published the article "Economic Impact of the 2025 New Mexico Measles Outbreak: Highlighting the Cost of Efforts to Prevent Future Outbreaks"

- Background: In 2025, the United States experienced its highest measles case count since 1992. In New Mexico, 100 confirmed measles cases (99 outbreak-related cases), including 1 death, occurred across 9 counties from February through September 2025
- Objective: To estimate the societal economic burden of this outbreak while highlighting public health expenditures for vaccination-related activities that supported outbreak control and prevention of future outbreaks
- Results: The overall societal cost was estimated at $5.4 million ($53,522 per case, or $1817 per contact)
  - The largest component of the public health response to the outbreak (about $3.2 million) was costs from vaccination-related activities (about $2.1 million)
- Conclusion: These estimates offer important insights for decision making by policymakers and public health stakeholders regarding budgets for and expansion of vaccination coverage during an outbreak and strengthening outbreak preparedness. This study also highlights the societal value of protecting communities from vaccine-preventable diseases like measles, which can be effectively prevented through high vaccination coverage.
- Authors: Jamison Pike, PhD; Nora Holzinger, MA, MPH; Han (Tiffany) Xiao, PhD; Emma Stanislawski, MPH; Jessica Leung, MPH; Andrea Romero; and Chad Smelser, MD

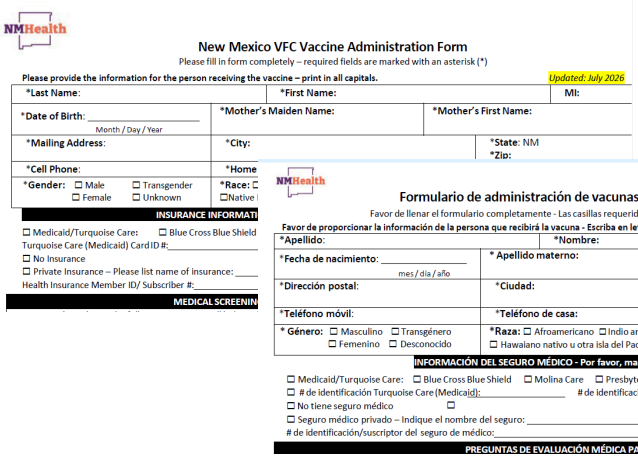
# Vaccination Reminders and Updates

# Clarification Regarding MenABCWY (Penbraya or Penmenvy) Letter

- A dose of MenABCWY (Penbraya or Penmenvy) administered at 11 years of age or older may be accepted as meeting the required first adolescent meningococcal (MenACWY-containing) dose for school entry
- These products contain protection against meningococcal serogroups A, C, W, and Y. Therefore, students who received Penbraya or Penmenvy at the appropriate age do not need to be immunized again with MenACWY solely to meet New Mexico school entry requirements
- These students should continue to follow the routine immunization schedule, including receipt of the MenACWY booster dose at the age of 16, unless otherwise indicated
- For school personnel: If a student's immunization record documents Penbraya or Penmenvy administered at age 11 years or older, the dose should be accepted as satisfying the first meningococcal vaccine requirement
- Letter was sent from NMIP on 8/3

# Updated NMDOH Vaccine Consent Forms - Adult and Pediatric

- For immediate use, NMIP has revised NMDOH Vaccine Consent forms, in English and Spanish, for adult and pediatric patients. NMSIIS Reports module has also been updated with these revised forms
- These are for internal NMDOH use and mobile outreach efforts only
  - **If external providers would like to use these forms and/or screening questions, they must remove our logo and branding**
- For screening questions in other languages, there are several options available here: https://www.immunize.org/clinical/topic/screening-checklists/


New Mexico VFC Vaccine Administration Form

Please fill in form completely – required fields are marked with an asterisk (*)

Please provide the information for the person receiving the vaccine – print in all capitals.

Updated: July 2026

*Last Name: | *First Name: | MI:

*Date of Birth: Month / Day / Year | *Mother's Maiden Name: | *Mother's First Name:

*Mailing Address: | *City: | *State: NM *Zip:

*Cell Phone: | *Home

*Gender: ☐ Male ☐ Transgender ☐ Female ☐ Unknown | *Race: ☐ ☐Native

INSURANCE INFORMATI

☐ Medicaid/Turquoise Care: ☐ Blue Cross Blue Shield
Turquoise Care (Medicaid) Card ID #:
☐ No Insurance
☐ Private Insurance – Please list name of insurance:
Health Insurance Member ID/ Subscriber #:

MEDICAL SCREENIN


Formulario de administración de vacunas VFC de Nuevo México

Favor de llenar el formulario completamente - Las casillas requeridas están marcadas con un asterisco (*)

Favor de proporcionar la información de la persona que recibirá la vacuna - Escriba en letras mayúsculas.

Actualizado: Ju

*Apellido: | *Nombre: | Inicial segundo nom

*Fecha de nacimiento: mes / día / año | * Apellido materno: | *Nombre de la madre:

*Dirección postal: | *Ciudad: | *Estado: NM *Código postal:

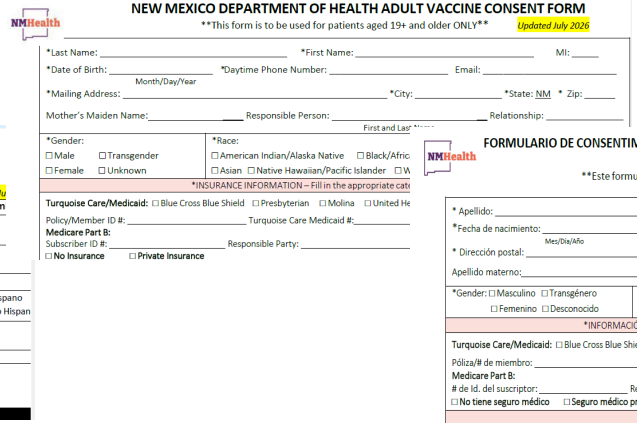
*Teléfono móvil: | *Teléfono de casa: | Correo electrónico:

*Género: ☐ Masculino ☐ Femenino ☐ Transgénero ☐ Desconocido | *Raza: ☐ Afroamericano ☐ Indio americano/nativo de Alaska ☐ Hawaiano nativo u otra isla del Pacifico ☐ Asiático ☐ Blanco ☐ Otro | *Etnicidad: ☐ Hispano ☐ No Hispan

INFORMACIÓN DEL SEGURO MÉDICO - Por favor, marque la categoría apropiada -REQUISITO*

☐ Medicaid/Turquoise Care: ☐ Blue Cross Blue Shield ☐ Molina Care ☐ Presbyterian ☐ United Healthcare ☐ Otro
☐ # de identificación Turquoise Care (Medicaid): # de identificación del seguro médico: # de grupo:
☐ No tiene seguro médico ☐
☐ Seguro médico privado – Indique el nombre del seguro:
# de identificación/suscriptor del seguro de médico: # de grupo:

PREGUNTAS DE EVALUACIÓN MÉDICA PARA NIÑOS Y ADOLESCENTES - REQUISITO*


NEW MEXICO DEPARTMENT OF HEALTH ADULT VACCINE CONSENT FORM

**This form is to be used for patients aged 19+ and older ONLY**

Updated July 2026

*Last Name: | *First Name: | MI:

*Date of Birth: Month/Day/Year | *Daytime Phone Number: | Email:

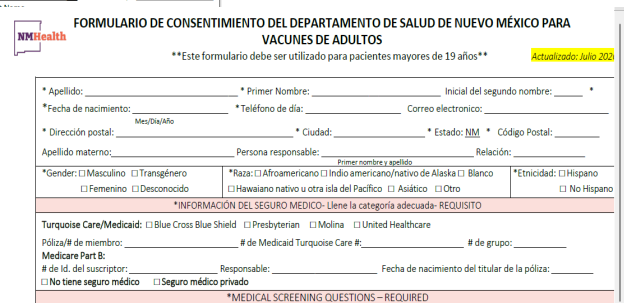
*Mailing Address: | *City: | *State: NM | * Zip:

Mother's Maiden Name: | Responsible Person: First and Last | Relationship:

*Gender: ☐ Male ☐ Transgender ☐ Female ☐ Unknown | *Race: ☐ American Indian/Alaska Native ☐ Asian ☐ Native Hawaiian/Pacific Islander ☐ Black/Afric ☐ W

*INSURANCE INFORMATION – Fill in the appropriate cat

Turquoise Care/Medicaid: ☐ Blue Cross Blue Shield ☐ Presbyterian ☐ Molina ☐ United He
Policy/Member ID #: Turquoise Care Medicaid #:
Medicare Part B:
Subscriber ID #: Responsible Party:
☐ No Insurance ☐ Private Insurance


FORMULARIO DE CONSENTIMIENTO DEL DEPARTAMENTO DE SALUD DE NUEVO MÉXICO PARA VACUNES DE ADULTOS

**Este formulario debe ser utilizado para pacientes mayores de 19 años**

Actualizado: Julio 202

* Apellido: | * Primer Nombre: | Inicial del segundo nombre: | *

*Fecha de nacimiento: Mes/Día/Año | *Teléfono de día: | Correo electronico:

* Dirección postal: | * Ciudad: | * Estado: NM | * Código Postal:

Apellido materno: | Persona responsable: Primer nombre y apellido | Relación:

*Gender: ☐ Masculino ☐ Femenino ☐ Desconocido | *Raza: ☐ Afroamericano ☐ Indio americano/nativo de Alaska ☐ Blanco ☐ Hawaiano nativo u otra isla del Pacífico ☐ Asiático ☐ Otro | *Etnicidad: ☐ Hispano ☐ No Hispano

*INFORMACIÓN DEL SEGURO MEDICO- Llene la categoría adecuada- REQUISITO

Turquoise Care/Medicaid: ☐ Blue Cross Blue Shield ☐ Presbyterian ☐ Molina ☐ United Healthcare
Póliza/# de miembro: # de Medicaid Turquoise Care #: # de grupo:
Medicare Part B:
# de Id. del suscriptor: Responsable: Fecha de nacimiento del titular de la póliza:
☐ No tiene seguro médico ☐ Seguro médico privado

*MEDICAL SCREENING QUESTIONS – REQUIRED

# Test for UPS Auto-Pickup process for EcoFlex Cooler

- CDC provided information about a one-time test that took place this week
- McKesson conducted a one-time test of the UPS Auto-Pickup process for EcoFlex cooler returns with shipments departing on this Monday 8/3/26 and expected to be delivered on Tuesday 8/4/26
- UPS will automatically schedule pickup of selected empty EcoFlex coolers that were delivered on 8/4/26 within 1-2 business days, eliminating the need for providers to request a pickup manually
- These test shipments will not include the usual return labels that are typically included EcoFlex coolers. Instead, these are the return instructions that will be included with each test shipment

DISTRIBUTION UPDATES

# Another reminder about cooler returns (Part 1 of 2)

- Two types of qualified coolers are currently being used:
  - **EcoFlex coolers**, used for all frozen and most medium, large and extra-large refrigerated shipments, need to be returned for recycling/re-use.
  - **KoolTemp (EPS) coolers**, used for most small refrigerated shipments, should not be returned.

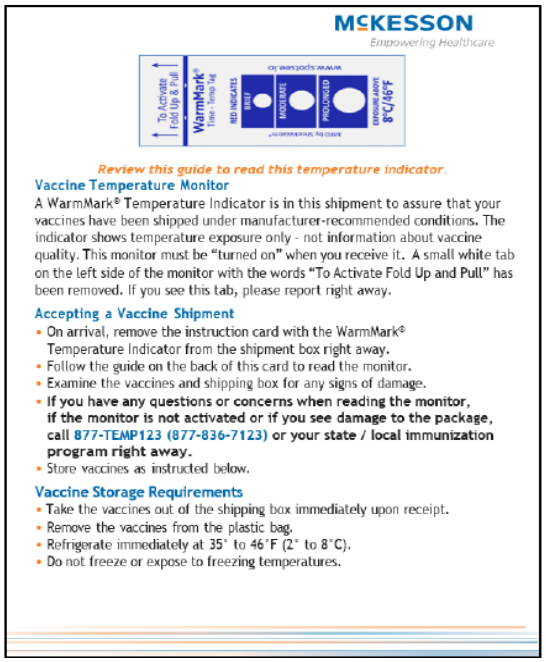

DISTRIBUTION UPDATES

# Another reminder about cooler returns (Part 2 of 2)

- Each cooler contains a flyer for the provider about which coolers should be returned and steps for doing so.

# Instructions included in your vaccine packages

## Warm Indicator



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Empowering Healthcare

*Review this guide to read this temperature indicator.*

**Vaccine Temperature Monitor**

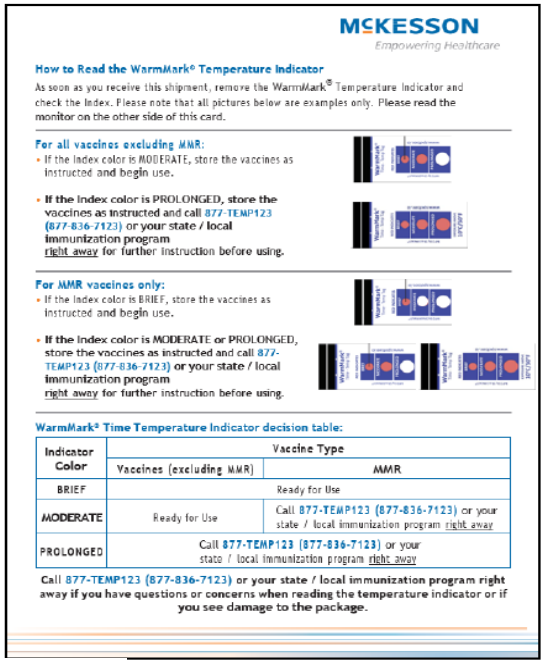
A WarmMark® Temperature Indicator is in this shipment to assure that your vaccines have been shipped under manufacturer-recommended conditions. The indicator shows temperature exposure only - not information about vaccine quality. This monitor must be "turned on" when you receive it. A small white tab on the left side of the monitor with the words "To Activate Fold Up and Pull" has been removed. If you see this tab, please report right away.

**Accepting a Vaccine Shipment**

- On arrival, remove the instruction card with the WarmMark® Temperature Indicator from the shipment box right away.
- Follow the guide on the back of this card to read the monitor.
- Examine the vaccines and shipping box for any signs of damage.
- **If you have any questions or concerns when reading the monitor, if the monitor is not activated or if you see damage to the package, call 877-TEMP123 (877-836-7123) or your state / local immunization program right away.**
- Store vaccines as instructed below.

**Vaccine Storage Requirements**

- Take the vaccines out of the shipping box immediately upon receipt.
- Remove the vaccines from the plastic bag.
- Refrigerate immediately at 35° to 46°F (2° to 8°C).
- Do not freeze or expose to freezing temperatures.



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Empowering Healthcare

**How to Read the WarmMark® Temperature Indicator**

As soon as you receive this shipment, remove the WarmMark® Temperature Indicator and check the Index. Please note that all pictures below are examples only. Please read the monitor on the other side of this card.

**For all vaccines excluding MMR:**

- If the Index color is MODERATE, store the vaccines as instructed and begin use.
- **If the Index color is PROLONGED, store the vaccines as instructed and call 877-TEMP123 (877-836-7123) or your state / local immunization program right away for further instruction before using.**

**For MMR vaccines only:**

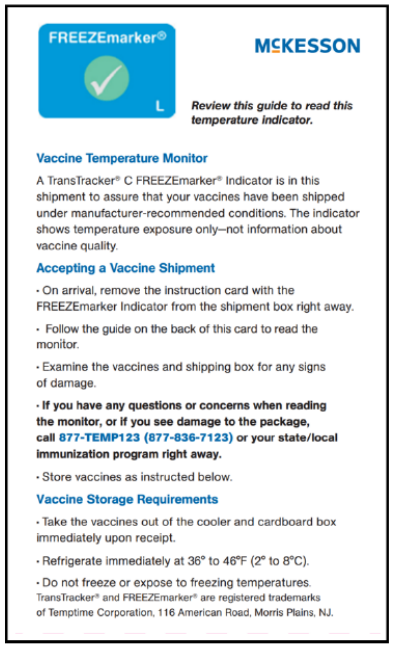
- If the Index color is BRIEF, store the vaccines as instructed and begin use.
- **If the Index color is MODERATE or PROLONGED, store the vaccines as instructed and call 877-TEMP123 (877-836-7123) or your state / local immunization program right away for further instruction before using.**

**WarmMark® Time Temperature Indicator decision table:**

| Indicator Color | Vaccine Type | |
|---|---|---|
| | Vaccines (excluding MMR) | MMR |
| BRIEF | Ready for Use | |
| MODERATE | Ready for Use | Call 877-TEMP123 (877-836-7123) or your state / local immunization program right away |
| PROLONGED | Call 877-TEMP123 (877-836-7123) or your state / local immunization program right away | |

**Call 877-TEMP123 (877-836-7123) or your state / local immunization program right away if you have questions or concerns when reading the temperature indicator or if you see damage to the package.**

## Cold Indicators



FREEZEmarker®
L

McKESSON

*Review this guide to read this temperature indicator.*

**Vaccine Temperature Monitor**

A TransTracker® C FREEZEmarker® Indicator is in this shipment to assure that your vaccines have been shipped under manufacturer-recommended conditions. The indicator shows temperature exposure only—not information about vaccine quality.

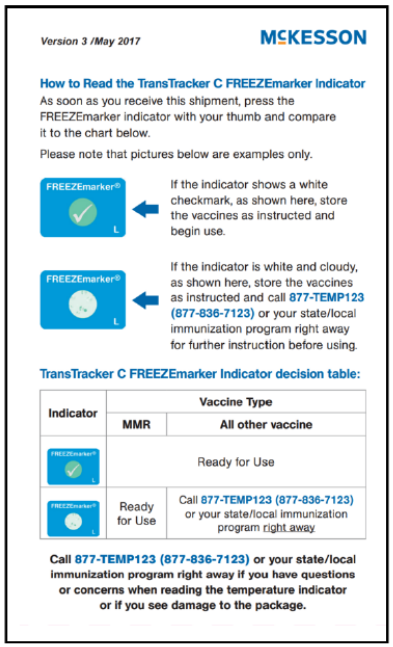
**Accepting a Vaccine Shipment**

- On arrival, remove the instruction card with the FREEZEmarker Indicator from the shipment box right away.
- Follow the guide on the back of this card to read the monitor.
- Examine the vaccines and shipping box for any signs of damage.
- **If you have any questions or concerns when reading the monitor, or if you see damage to the package, call 877-TEMP123 (877-836-7123) or your state/local immunization program right away.**
- Store vaccines as instructed below.

**Vaccine Storage Requirements**

- Take the vaccines out of the cooler and cardboard box immediately upon receipt.
- Refrigerate immediately at 36° to 46°F (2° to 8°C).
- Do not freeze or expose to freezing temperatures.

TransTracker® and FREEZEmarker® are registered trademarks of Temptime Corporation, 116 American Road, Morris Plains, NJ.



*Version 3 /May 2017*

McKESSON

**How to Read the TransTracker C FREEZEmarker Indicator**

As soon as you receive this shipment, press the FREEZEmarker indicator with your thumb and compare it to the chart below.

Please note that pictures below are examples only.




If the indicator shows a white checkmark, as shown here, store the vaccines as instructed and begin use.




If the indicator is white and cloudy, as shown here, store the vaccines as instructed and call 877-TEMP123 (877-836-7123) or your state/local immunization program right away for further instruction before using.

**TransTracker C FREEZEmarker Indicator decision table:**

| Indicator | Vaccine Type | |
|---|---|---|
| | MMR | All other vaccine |
|  | Ready for Use | |
|  | Ready for Use | Call 877-TEMP123 (877-836-7123) or your state/local immunization program right away |

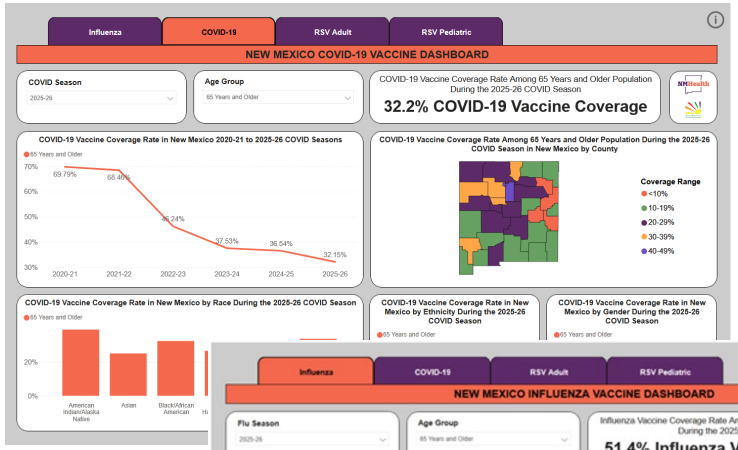
**Call 877-TEMP123 (877-836-7123) or your state/local immunization program right away if you have questions or concerns when reading the temperature indicator or if you see damage to the package.**

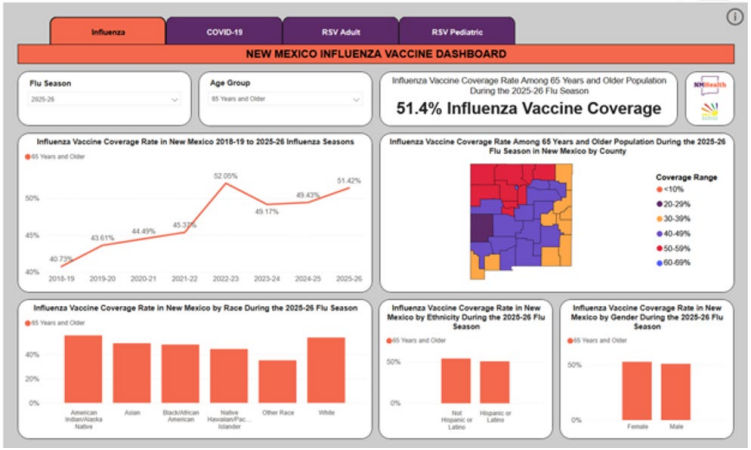

Figure B

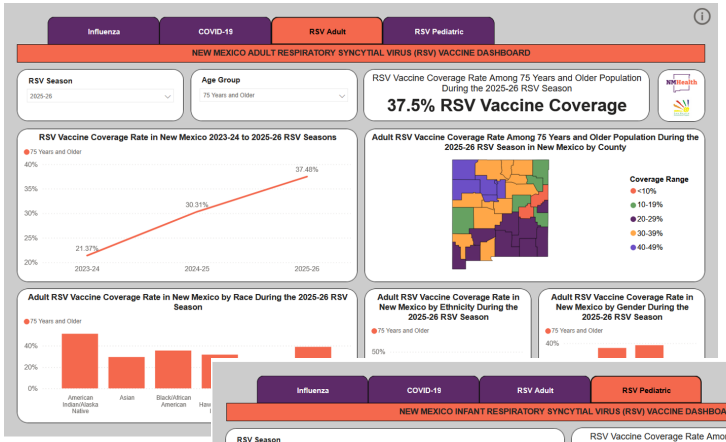
Figure C

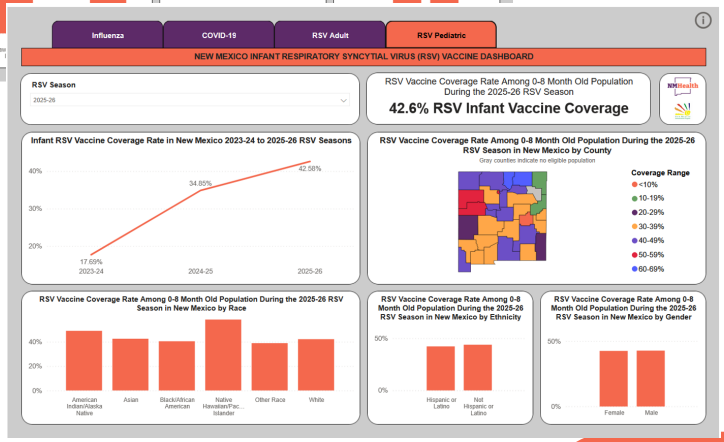
# NM Respiratory Vaccine Coverage Rate Dashboards

- With respiratory vaccine season approaching, a reminder the NMDOH vaccination dashboards will be dynamic
- Providers and the public will be able to gauge activity within the state throughout the season




https://www.nmhealth.org/about/phd/idb/imp/imdas/

# Emergency Vax Storage & Handling- Summer

During the spring and summer months health care facilities may experience higher rates of temperature excursions in their vaccine storage units due to fire, high winds, extreme temperatures or other events causing power outages. Here are steps you can take to safeguard your vaccine supply:

- If your vaccine storage unit is experiencing frequent temperature excursions, the temperature MAY need to be adjusted. Temperature adjustments actions:
- Confirm that the unit is securely plugged directly into a dedicated wall outlet power source.
- Check the temperature inside the storage unit.
- If possible, continue to monitor temperatures of the storage unit, but DO NOT OPEN THE UNITS to do this. If this is not possible, then record the temperature as soon as possible after power is restored.
- Do not discard any vaccine.
- If the temperature went out of range during the power outage, when power has been restored, clearly mark these vaccines, and do not use them until you are able to consult with the vaccine manufacturers or NMIP.
- Complete a Vaccine for Children (VFC) and/or Adult Vaccine Troubleshooting Report found on NM Statewide Immunization Information Systems (NMSIIS) Reports page, inform the appropriate Regional Immunization Coordinator

# Emergency Vax Storage & Handling- Summer

- Call the New Mexico Department of Health (NMDOH) Helpdesk at 1-833-882-6454 and inform the Immunization Program of the determination made by the vaccine manufacturers about the viability of the affected vaccine.
- Complete a Troubleshooting Report (TSR) and send it to the NMIP appropriate for the funding source email (indicated above), along with supporting documentation from the vaccine manufacturer(s).
  - Once reported, your site will receive a return label to use for your vaccine return.
- If alternate storage with a reliable power source is available (e.g., hospital with generator power), transfer to that facility can be considered.
  - If transporting vaccine, measure the temperature of the refrigerator(s) and freezer(s) when the vaccines are removed.
  - If possible, transport the vaccine following proper cold chain procedures for storage and handling or try to record the temperature the vaccine is exposed to during transport.

**Inventory control is high priority to prevent vaccine wastage. Reach out to us for guidance and tips to avoid mass vaccine loss.**

# Vaccine Finders

- NMDOH
  - https://vaccinereg.doh.nm.gov/
- Pfizer
  - https://www.vaxassist.com/schedule/results
- Novavax
  - https://www.novavaxcovidvaccine.com/
- Moderna
  - https://products.modernatx.com/finder

# COVID-19

# COVID-19 Vaccine Plans for 2026-27

- Manufacturers accepted FDA advisement for the approved COVID-19 vaccines to closely match currently circulating SARS-CoV-2 viruses
- The COVID-19 vaccines (2026-2027 Formula) for use in the United States beginning in fall 2026 is a monovalent JN.1 lineage XFG variant vaccine
- In past years, the Advisory Committee on Immunization Practices(ACIP) would convene to recommend who should receive COVID, as well as influenza, vaccines.
  - This guidance directly affects the Vaccines for Children (VFC) program, which covers more than half of American kids
- No information about when 2026-2027 formulation COVID-19 vaccines will be approved
- There is currently no functioning ACIP
  - Last fall COVID-19 vaccine guidance issued by the ACIP was delayed
- As it stands, experts are issuing warnings of concern that a similar situation is very possible this fall

# 2025-26 COVID-19 Vaccine Availability

NMHealth

Update about the availability of the 2025-2026 formulation COVID-19 vaccines for the remainder of the 2025-2026 season

- **Moderna**: 2025-2026 vaccines will continue to be available for provider ordering until the 2026-2027 formulation is approved. This includes vaccines for children 6m-11 years ( 80777-0113-80) and vaccines for those 12 years+ (80777-0112-96)
- **Pfizer**: 2025-2026 vaccines will be open for provider ordering until 5 pm Eastern Standard Time on Thursday, August 6. This includes vaccines for children 5 – 11 years (00069-2501-10) and vaccines for those aged 12 years+ (00069-2528-10)
- **Sanofi**: 2025-2026 vaccines are no longer available

# COVID-19 Pediatric Vaccines 2026-27

| Manufacturer | Brand Name | Unit of Sale NDC | Presentation/Product description: e.g., MDV10, MDV5, MDV3, SDV, PFS | Package size/Doses per carton: e.g., 10-pack, 5-pack, 1-pack | Does this product have a diluent? | Age indication | Minimum order quantity (for drop shipped vaccine only) | Shelf life at delivery (# of months) | How long is vaccine refrigerator-stable? (for frozen and ultracold vaccines |
|---|---|---|---|---|---|---|---|---|---|
| | Pediatric | | | | | | | | |
| Moderna | Spikevax® (COVID-19 Vaccine, mRNA) 2026-2027 | 80777-0115-80 | Single Dose PFS 0.25ML | 10-pack | No | 6M-11Y | | 7 | 60 days |
| Moderna | Spikevax® (COVID-19 Vaccine, mRNA) 2026-2027 | 80777-0114-96 | Single Dose PFS 0.5ML | 10-pack | No | 12Y+ | | 7 | 60 days |
| Moderna | mNEXSPIKE® (COVID-19 Vaccine, mRNA) 2026-2027 | 80777-0401-60 | Single Dose PFS 0.2ML | 10-pack | No | 12Y+ | | 7 | |
| Pfizer | Comirnaty® | 00069-2609-10 | Comirnaty 10mcg/0.3mL | 10-pack | No | 5Y-11Y | 10 doses | At least 3 months ULT | 10 weeks |
| Pfizer | Comirnaty® | 00069-2631-10 | Comirnaty 0.1mg/mL, 0.3mL PFS | 10-pack | No | 12Y+ | 10 doses | at least 12 weeks | 12 months from manufacturing date |
| Sanofi | Nuvaxovid™ COVID-19 Vaccine, Adjuvanted-SARS-CoV-2 Recombinant Spike Protein Nanoparticle Vaccine (SARS-CoV-2 rS) with | 49281-0026-50 | PFS | 10-pack | No | 12Y+ | | Minimum of 10-weeks remaining shelf life | |

# COVID-19 Adult Vaccines 2026-27

| Manufacturer | Brand Name | Unit of Sale NDC | Presentation/Product description: e.g., MDV10, MDV5, MDV3, SDV, PFS | Package size/Doses per carton: e.g., 10-pack, 5-pack, 1-pack | Does this product have a diluent? | Age indication | Minimum order quantity (for drop shipped vaccine only) | Shelf life at delivery (# of months) | How long is vaccine refrigerator-stable? (for frozen and ultracold vaccines |
|---|---|---|---|---|---|---|---|---|---|
| | Adult | | | | | | | | |
| Moderna | Spikevax® (COVID-19 Vaccine, mRNA) 2026-2027 | 80777-0114-96 | Single Dose PFS 0.5ML | 10-pack | No | 12Y+ | | 7 | 60 days |
| Moderna | mNEXSPIKE® (COVID-19 Vaccine, mRNA) 2026-2027 | 80777-0401-60 | Single Dose PFS 0.2ML | 10-pack | No | 12Y+ | | 7 | NA |
| Pfizer | Comirnaty® | 00069-2631-10 | Comirnaty 0.1mg/mL, 0.3mL PFS | 10-pack | No | 12Y+ | 10 doses | at least 12 weeks | 12 months from manufacturing date |
| Sanofi | Nuvaxovid™ COVID-19 Vaccine, Adjuvanted-SARS-CoV-2 Recombinant Spike Protein Nanoparticle Vaccine (SARS-CoV-2 rS) with | 49281-0026-50 | PFS | 10-pack | No | 12Y+ | | Minimum of 10-weeks remaining shelf life | |

# COVID-19 Vaccine Contact Information

NMHealth

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

# Influenza

# Pediatric Flu Vaccines from the 2025-2026 Flu Season

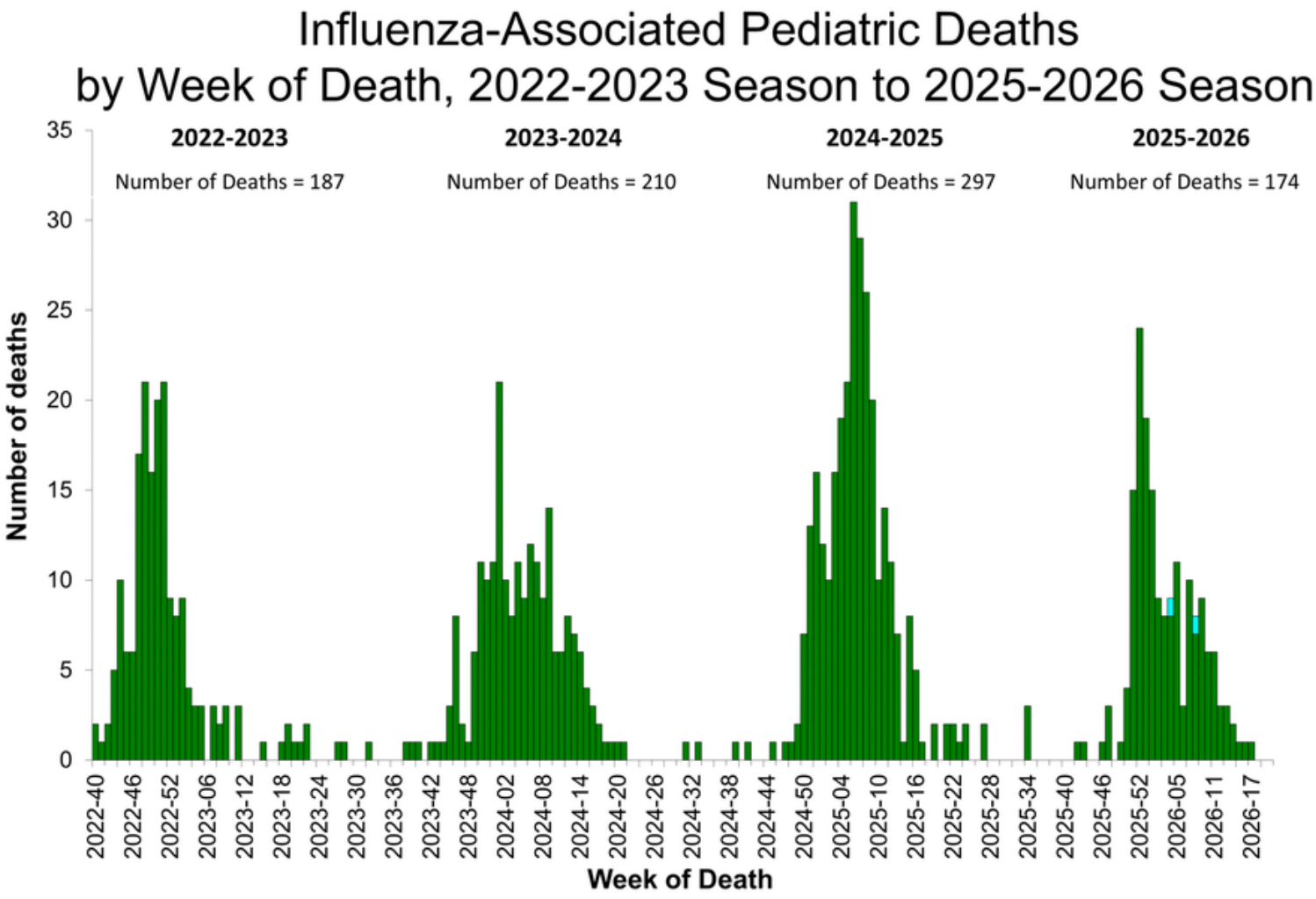
- Flulaval expired on June 2, 2026, and June 30, 2026, and Fluzone expired on June 30, 2026.
  - See presentations below
- CDC mandates that providers return expired vaccine within six months of the expiration date
- Flu vaccine returns should be submitted in NMSIIS
- Instructions for creating returns for expired vaccines can be found in NMSIIS > Reports > New Mexico Forms and Documents > VFC Returns – Expired Vaccine Instructions.

| Vaccine | Brandname/ Tradename | NDC | Packaging |
|---|---|---|---|
| InfluenzaF (Age 6 months and older) | Fluzone® TIV | 49281-0425-50 | 10 pack – 1 dose syringe< |
| Influenza F (Age 6 months and older) | FluLaval® TIV | 19515-0904-52 | 10 pack – 1 dose syringe |

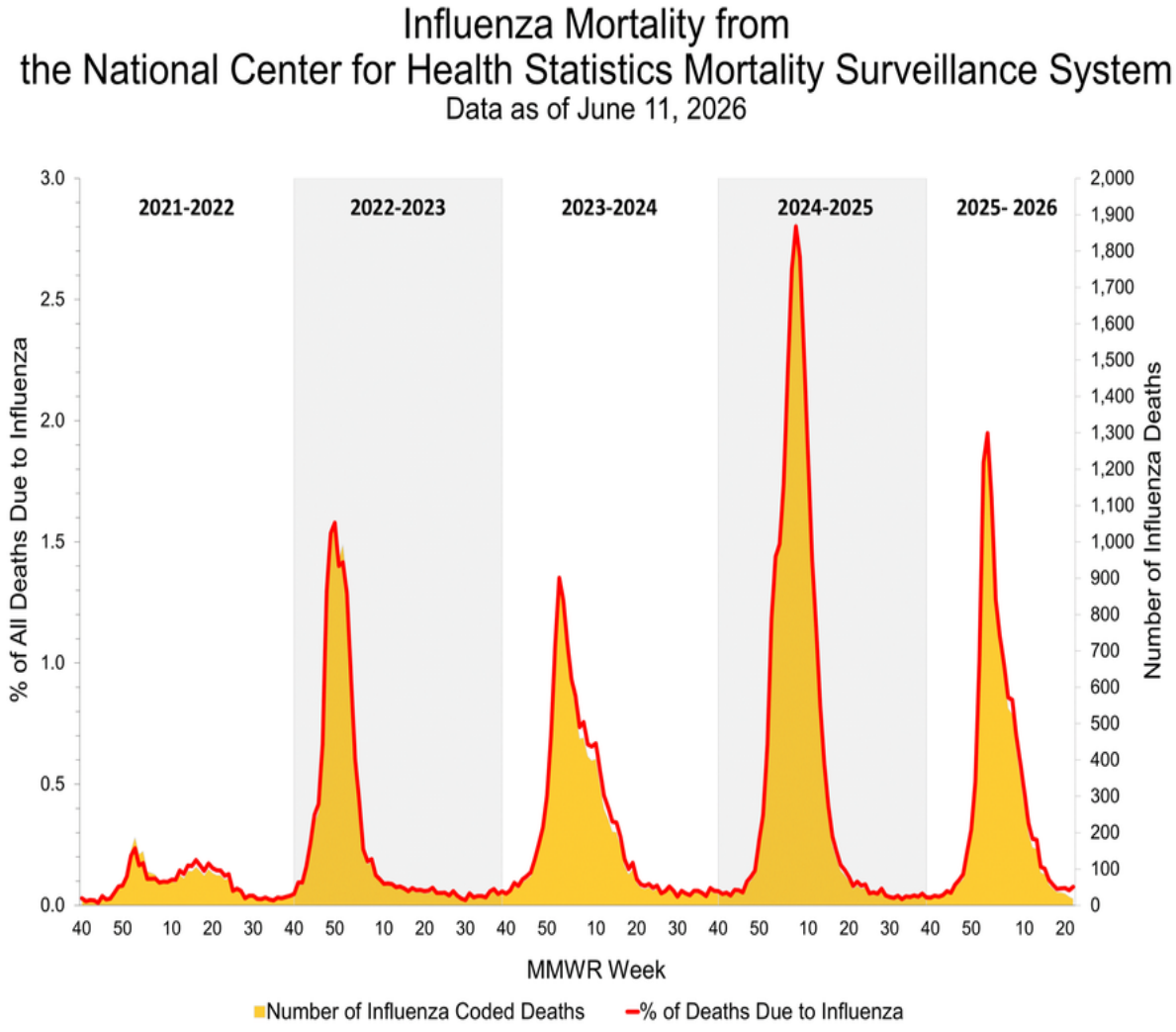
# 2026-2027 Flu Allocations

- Allocation surveys for the 2026-2027 season will be sent to enrolled VFA and VFC providers on August 17, 2026
  - VFA providers: adult.vaccines@doh.nm.gov
  - VFC providers: vaccine.orders@doh.nm.gov
- Providers who are dually enrolled in VFA and VFC must complete both surveys
- **NMIP cannot guarantee when you will receive flu vaccines, so please *DO NOT SCHEDULE PATIENTS OR EVENTS UNTIL YOU HAVE DOSES IN HAND.***

# Influenza-Associated Pediatric Mortality

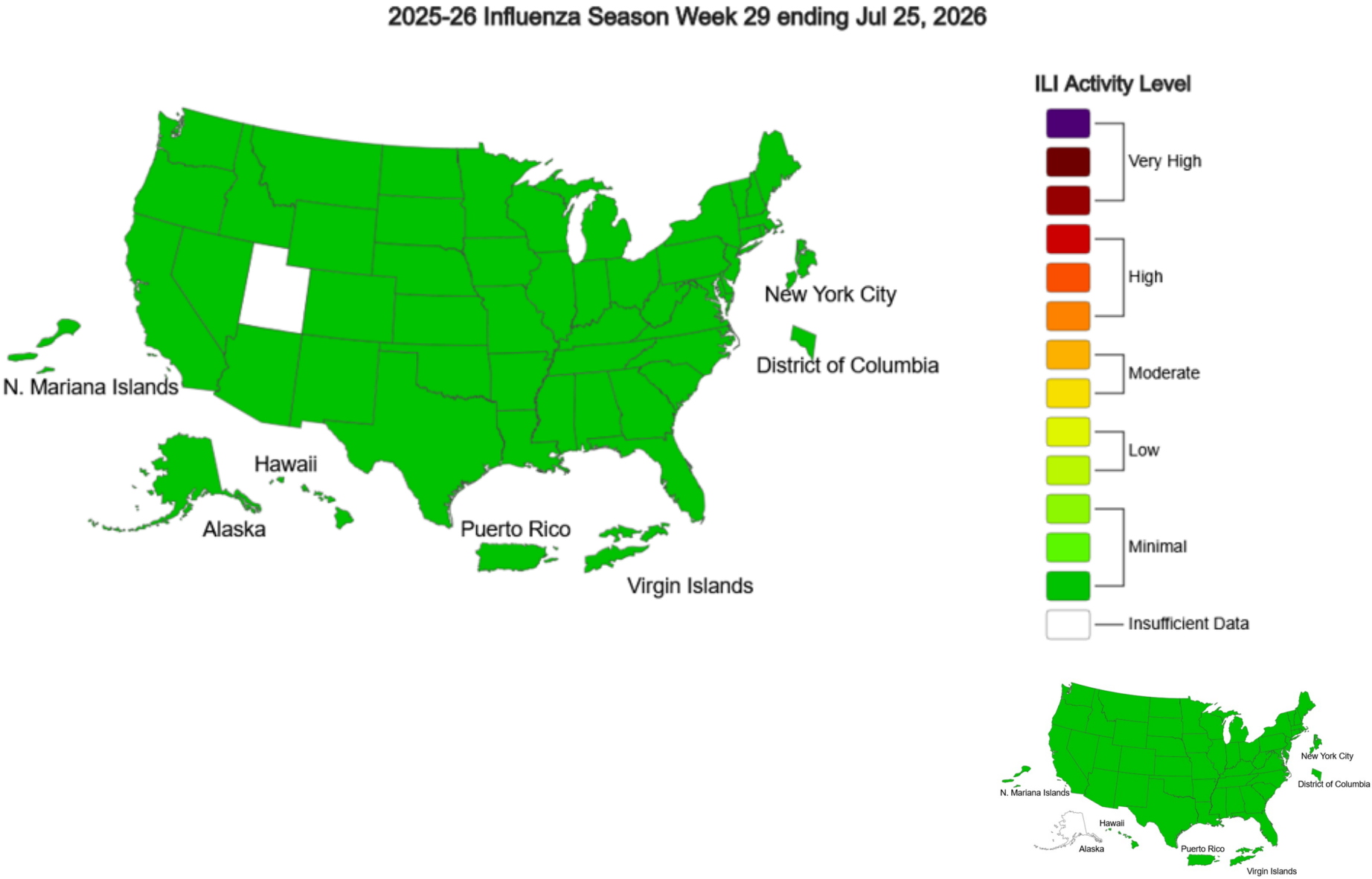


# National Center for Health Statistics (NCHS) Mortality Surveillance

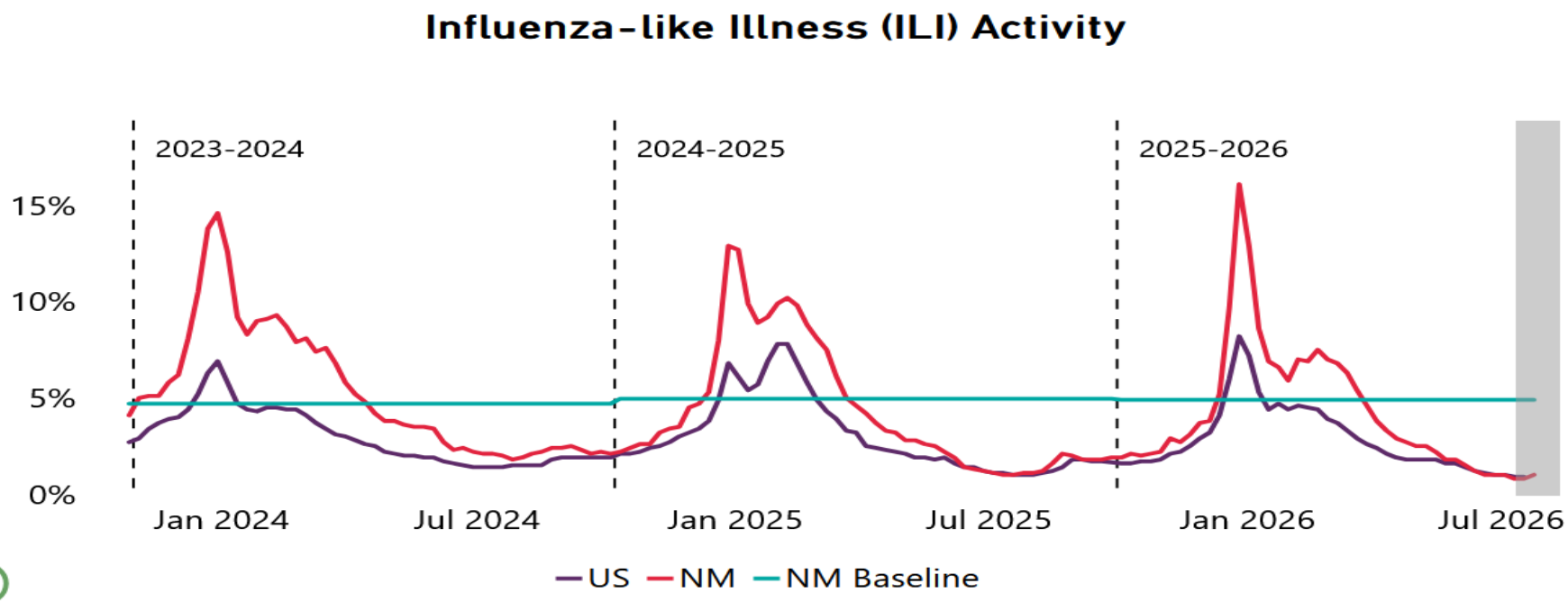



10,471 Deaths
Week 24

# US Influenza-Like Illness Map 7/25 - 6/20



# NM ILI 7/29


Influenza-like Illness (ILI) Activity
2023-2024
2024-2025
2025-2026
15%
10%
5%
0%
Jan 2024
Jul 2024
Jan 2025
Jul 2025
Jan 2026
Jul 2026
US
NM
NM Baseline

# Influenza Vaccine Recommendations, CDC

- 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 later 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

# Study: High-Risk Conditions Linked to Greater RSV Lower Respiratory Disease Burden

- Adults aged 18 to 64 who have high-risk medical conditions experience higher rates of respiratory syncytial virus (RSV)-associated illness compared with adults without these conditions, especially among adults aged 18 to 49
- In a large, 2-year community-based cohort study conducted among Mayo Clinic primary care practices in Minnesota, Wisconsin, Florida comprising more than 7500 adults, those with high-risk conditions—such as asthma, chronic kidney disease, cancer, diabetes, and immunosuppressive medication use—showed increased incidence of both RSV-associated acute respiratory infection (RSV-ARI) and lower respiratory tract disease (RSV-LRTD)
- RSV-LRTD demonstrated the strongest associations, with adults who had high-risk conditions experiencing nearly double the rate seen in those without such conditions.
- Adults with high-risk conditions were also more likely to seek medical care during RSV illness
- The researchers concluded that it may be justified from a public health perspective to expand CDC ACIP recommendations for RSV vaccination to adults aged 18 to 49 years who have high-risk medical conditions

https://www.infectiousdiseaseadvisor.com/news/rsv-lrtd-high-risk-younger-adults/?utm_source=eloqua&utm_medium=email&utm_campaign=NWLTR_IDA_UPDT_SS-LIC-DI-PP-10688_072026_AF&hmemail=&sha256email=960773bc7725d3c8584c0cb092ff77f8e039636e9f24dbe7297ae80617ef140e&hmsubid=&nid=&elqtrack=True

# RSV Product Ordering Info for American Indian and Alaska Native Populations

- American Indian and Alaska Native (AI/AN) children are eligible for all ACIP-recommended vaccines as an entitlement at no cost through a VFC-enrolled provider
- VFC guidance allows for early ordering of the RSV monoclonal antibody, nirsevimab before the start of RSV season, especially to support planning and access for:
  - IHS operated clinics
  - Tribal Health Clinics
  - Urban Indian Organizations
  - High-risk populations within jurisdictions
- AI/AN infants are prioritized for early access due to:
  - Higher RSV-related hospitalization and mortality rates
  - Geographic and infrastructural challenges

# RSV Product Ordering for American Indian and Alaska Native Populations

Ordering Timeline

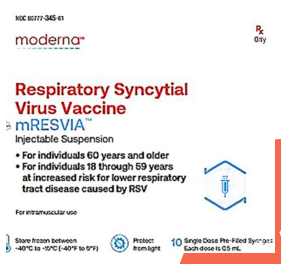
- Supply for the 2026-2027 season is anticipated to be sufficient. CDC will be implementing ordering caps at the jurisdiction level to ensure that all jurisdictions have equitable access to product for their providers
- IIHS direct-care facilities, Tribal Health Programs, and Urban Indian Organizations should order VFC-supplied nirsevimab
- Providers can start pre-positioning appointments for the season
- Ordering is open as of August 5, 2026 for:
  - Nirsevimab 50mg & 100mg
  - Enflonsia 1pk & 10pk

# RSV Vaccine Considerations

- RSV vaccination is recommended for:
  - Adults 75+, at-risk adults 50-74 (chronic conditions, immunocompromised, nursing home residents)
  - Pregnant people (32-36 weeks) for infant protection using seasonal administration (meaning from September–January)
  - Babies/toddlers (8-19 months) via antibody treatments, protecting vulnerable populations from severe illness during the RSV season (typically October through March)







# Immunizations to Protect Against Severe RSV

| Who Does It Protect? | Type of Product | Who Is It Recommended For? | When Is It Available? |
|---|---|---|---|
|  Adults 50 and over | RSV vaccine | Adults ages 50-74 who are at increased risk of severe RSV<br>AND<br>Everyone ages 75 and older | Available any time, but best time to get vaccinated is late summer and early fall |
|  Babies | RSV antibody given to baby | All infants whose mother did not receive RSV vaccine during pregnancy, and some children ages 8-19 months who are at increased risk for severe RSV | October through March* |
| | OR | | |
|  Babies | RSV vaccine (Pfizer's ABRYSVO) given to mother during pregnancy | All pregnant women during weeks 32-36 of their pregnancy | September through January |

www.cdc.gov/rsv

*Recommended timing of administration in most of the continental United States. Recommended timing of administration may differ in some areas, based on state, local, or territorial guidance.

CDC

# Measles in NM and Beyond


NMHealth

- **Measles: What to Do If You Get Sick or Exposed**
  - https://www.cdc.gov/measles/if-sick-exposed/index.html

# Measles: What to Do If You Get Sick or Exposed

For Everyone
AUG. 5, 2026

WHAT TO KNOW

- If you get sick with measles symptoms, call a doctor or hospital right away to let them know so that they can guide your treatment.
- To prevent spreading measles, stay home until the fifth day after you develop the rash, and stay away from people at home who aren't sick.
- If you have emergency warning signs of measles sickness, go to the emergency room. Have someone call before you arrive and let the hospital know a person with measles is coming.
- If you've been exposed to someone who has measles, immediately call your healthcare provider. There may be steps you can take to help reduce your risk of measles.

Measles (Rubeola)

EXPLORE THIS TOPIC

- **Measles Symptoms and Complications**
  - https://www.cdc.gov/measles/signs-symptoms/index.html?revision_id=13577#cdc_symptoms_seek_help-complications

# Measles Symptoms and Complications

For Everyone

AUG. 5, 2026 • ESPAÑOL

KEY POINTS

- Measles is a highly contagious disease that can lead to serious complications.
- Symptoms usually begin 7 to 14 days after infection.
- Measles can be dangerous, especially for babies and young children.


- **Questions About Measles**
  - https://www.cdc.gov/measles/about/questions.html

For Everyone

AUG. 5, 2026 • ESPAÑOL

**AT A GLANCE**

Get answers to frequently asked questions about measles and the measles, mumps, and rubella (MMR) vaccine used to prevent it.

Measles (Rubeola)

EXPLORE THIS TOPIC

# Clinical Overview of Measles

- https://www.cdc.gov/measles/hcp/clinical-overview/index.html#cdc_clinical_overview_comp-complications

For Health Care Providers

AUG. 5, 2026

## KEY POINTS

- Measles is one of the most contagious diseases. MMR vaccine provides the best protection.
- Isolate infected patients for 4 days after they develop a rash and follow airborne precautions in healthcare settings.
- Report suspected measles cases to your local health department.
- Laboratory confirmation is essential for all sporadic measles cases and all outbreaks.


- **Clinical Questions about Measles**
  - https://www.cdc.gov/measles/hcp/clinical-overview/questions.html#cdc_generic_section_3-clinical-features

# Clinical Questions about Measles

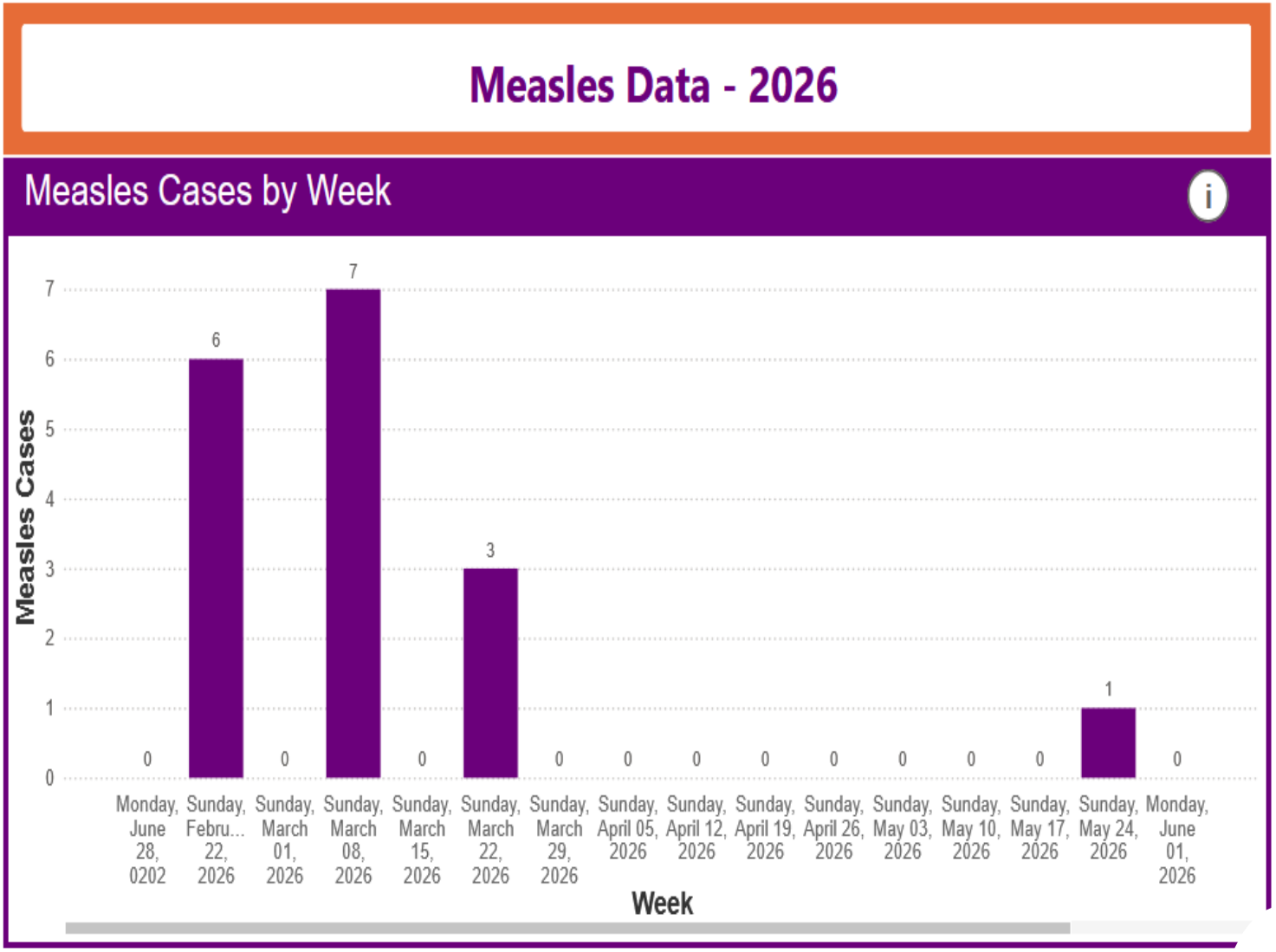
For Health Care Providers

AUG. 5, 2026

ABOUT

Find answers to frequently asked questions about protecting your patients against measles with the MMR vaccination, clinical features of measles, and when patients should be isolated.

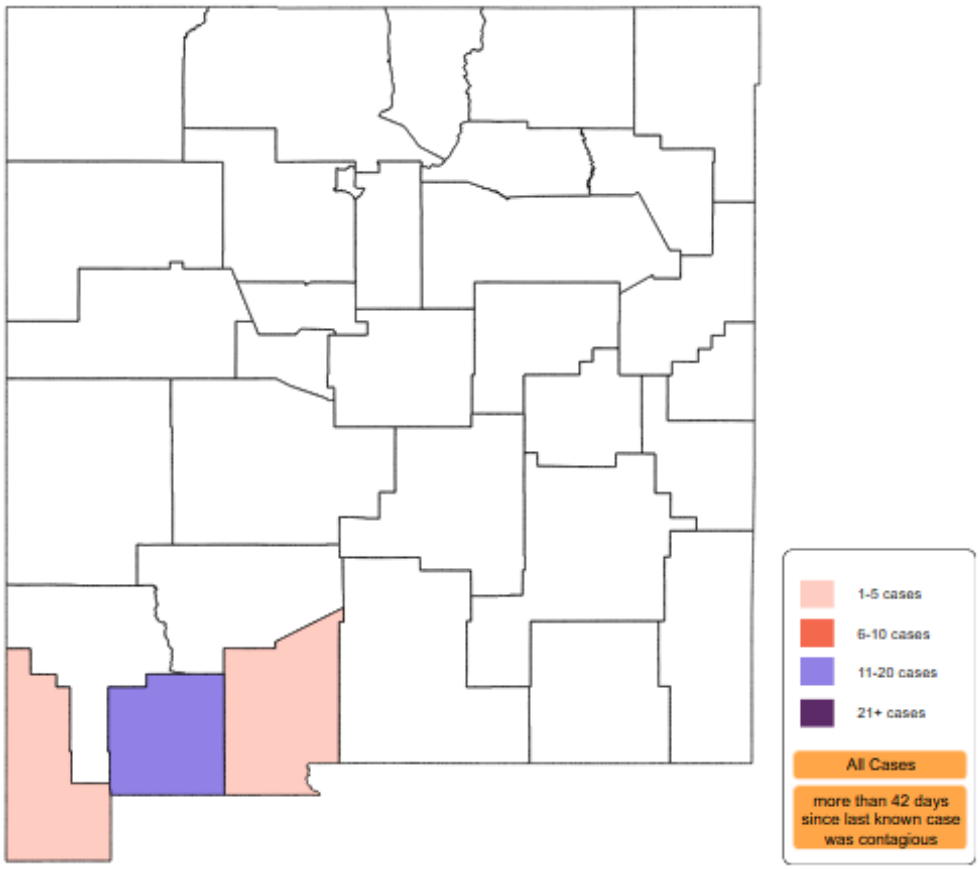
# Measles Cases in NM, 2026



# Measles Cases in NM, 2026

## Map - Cases by County

Cases | Wastewater




## Data Table - Cases by County

County | Age Group | Vaccination

| County | Cases | Hospitalizations | Deaths | Last Case Detected |
|---|---|---|---|---|
| DONA ANA | 3 | 0 | 0 | Thursday, March 12, 2026 |
| HIDALGO | 2 | 0 | 0 | Monday, February 23, 2026 |
| LUNA | 12 | 0 | | Tuesday, May 26, 2026 |
| **Total** | **17** | **0** | **0** | |

# Measles Vaccine Dashboard, through July 2026

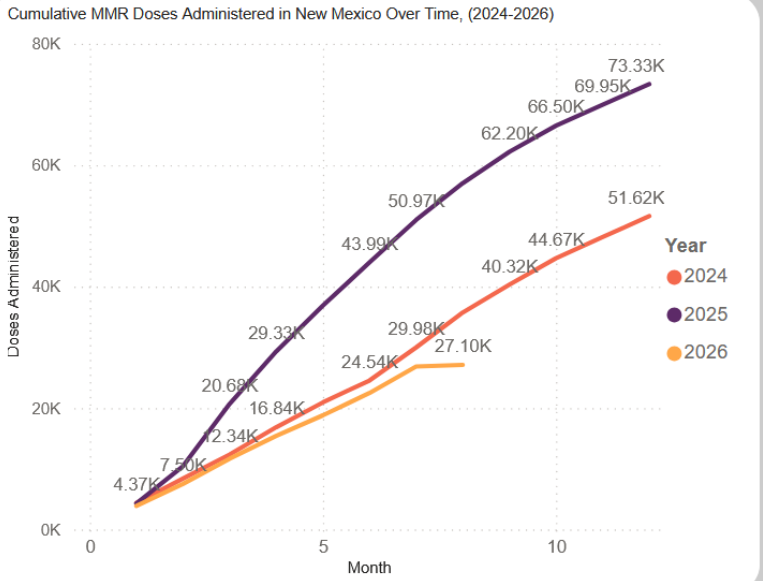
**New Mexico MMR Doses Administered Dashboard**

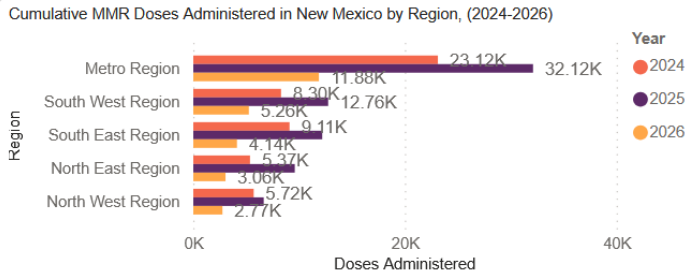
New Mexico Statewide Immunization Information System (NMSIIS)

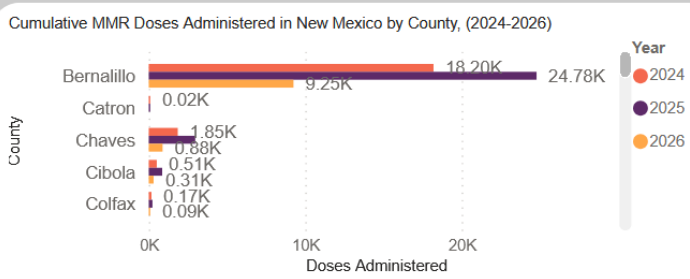
Filter by Dose Type: All

Filter by Region: All

Filter by County: All



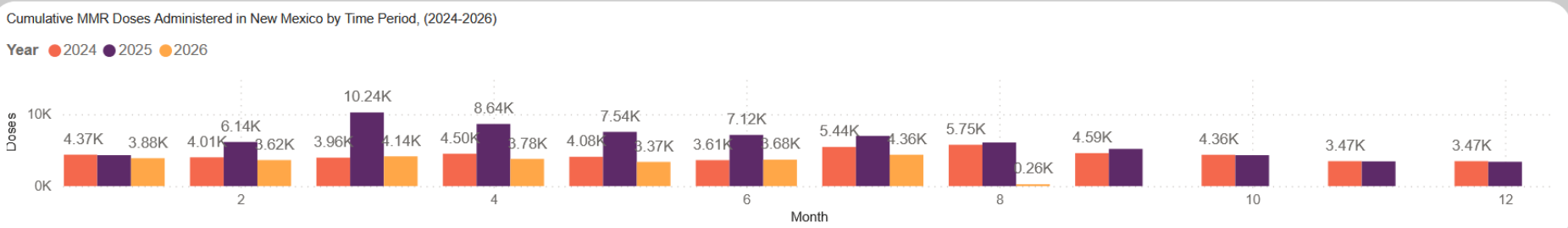

NMHealth

Cumulative MMR Doses Administered in New Mexico, 2025

**73,331**

Percent Difference in Total MMR Doses Administered in New Mexico in 2025 Compared to 2024

**42%**




https://www.nmhealth.org/about/phd/idb/imp/imdas/

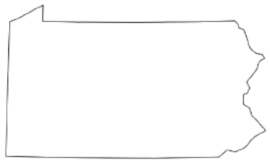
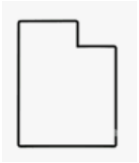
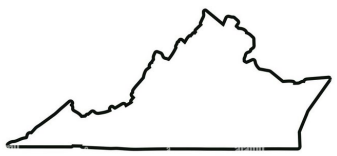
# US Measles Cases Reported By Week 7/30

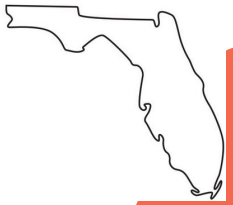
- As of July 30, 2026, 2,371 confirmed* measles cases were reported in the United States in 2026. Among these, 2,355 measles cases were reported by 45 jurisdictions: Alabama, Alaska, Arizona, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Idaho, Illinois, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Montana, Nebraska, New Jersey, New Mexico, New York City, New York State, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, Wisconsin, and Wyoming. A total of 16 measles cases were reported among international visitors to the United States.
- There have been 37 new outbreaks reported in 2026, and 94% of confirmed cases (2,219 of 2,371) are outbreak-associated (846 from outbreaks starting in 2026 and 1,373 from outbreaks that started in 2025).

https://www.cdc.gov/measles/data-research/index.html

# Other Measles Hotspot Updates - US

- **Arizona**
  - 342 measles cases since August of 2025
- **Pennsylvania**
  - 176 cases as of 8/3
- **Utah**:
  - Number of Utah residents who have been diagnosed with measles in current outbreak: 711, 514 in 2026
- **Virginia**
  - 177 cases, 5% hospitalized as of July 30
- **Texas**
  - As of 7/22, Texas has reported 190 measles cases, 136 in Hudspeth County
- **Florida**
  - Reported 141-155 measles cases in 2026

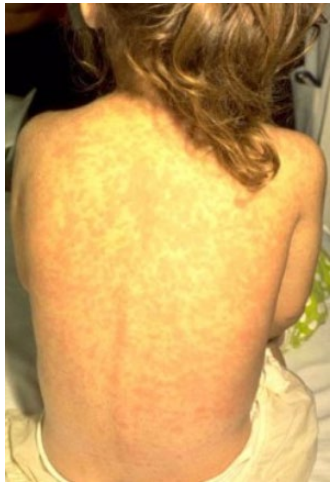







# Measles Case Summary – US – 7/31

U.S. Cases

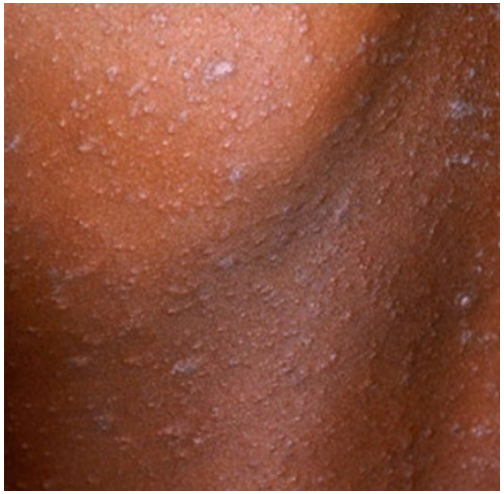
| | 2026<br>To date | 2025<br>Full year |
|---|---|---|
| **Total Cases** | **2,371** | **2,289** |
| **Age** | | |
| Under 5 years | 469 (20%) | 584 (26%) |
| 5-19 years | 1,161 (49%) | 1,017 (44%) |
| 20+ years | 734 (31%) | 675 (29%) |
| Age unknown | 7 (less than 1%) | 13 (1%) |
| **Vaccination Status** | | |
| Unvaccinated or Unknown | 93% | 93% |
| One MMR dose | 3% | 3% |
| Two MMR doses | 4% | 4% |



# Measles Hospitalizations US 7/31

U.S. Hospitalizations

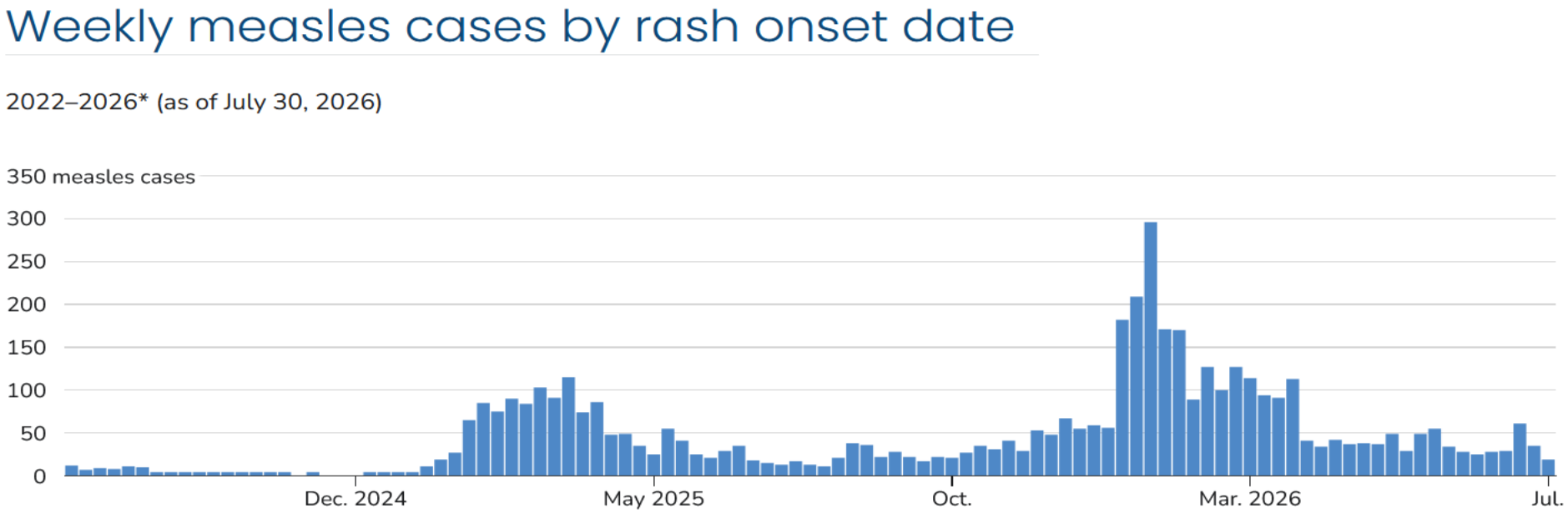
| | 2026 | 2025 |
|---|---|---|
| **Total Hospitalized** | **7%** (161 of 2,371 cases) | **11%** (243 of 2,289 cases) |
| **Percent of Age Group Hospitalized** | | |
| Under 5 years | 10% (49 of 469) | 18% (106 of 584) |
| 5-19 years | 3% (40 of 1,161) | 6% (58 of 1,017) |
| 20+ years | 10% (72 of 734) | 12% (79 of 675) |
| Age unknown | 0% (0 of 7) | 0% (0 of 13) |



U.S. Deaths

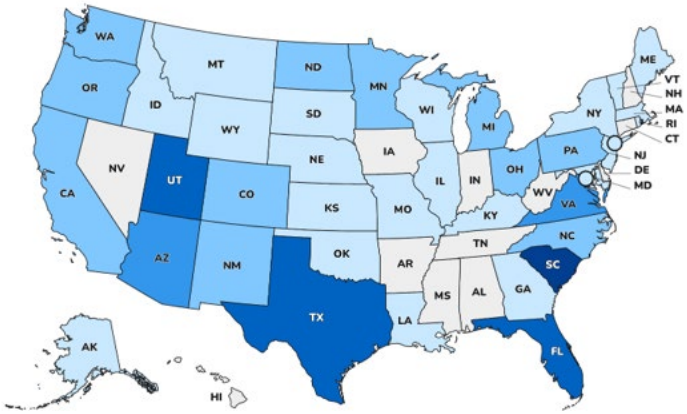
| | 2026 | 2025 |
|---|---|---|
| **Total Deaths** | **0** | **3** |

# US Weekly Measles Cases by Rash Onset Date

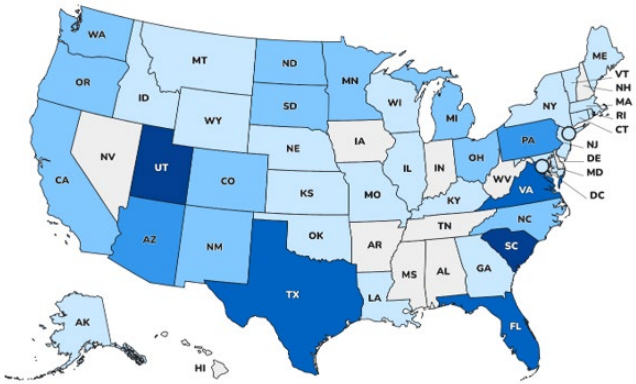


# Measles Last Three Months - US

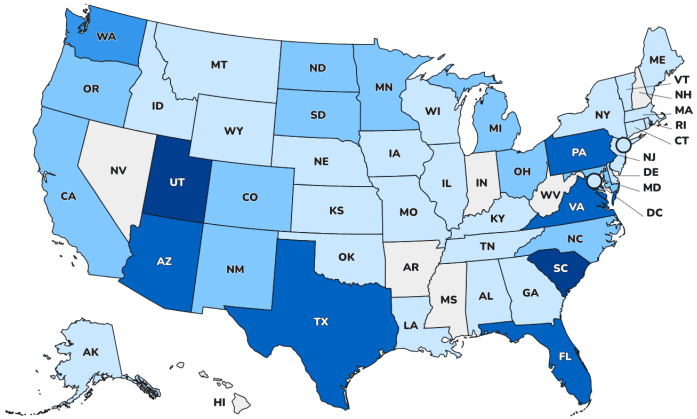

May 2026



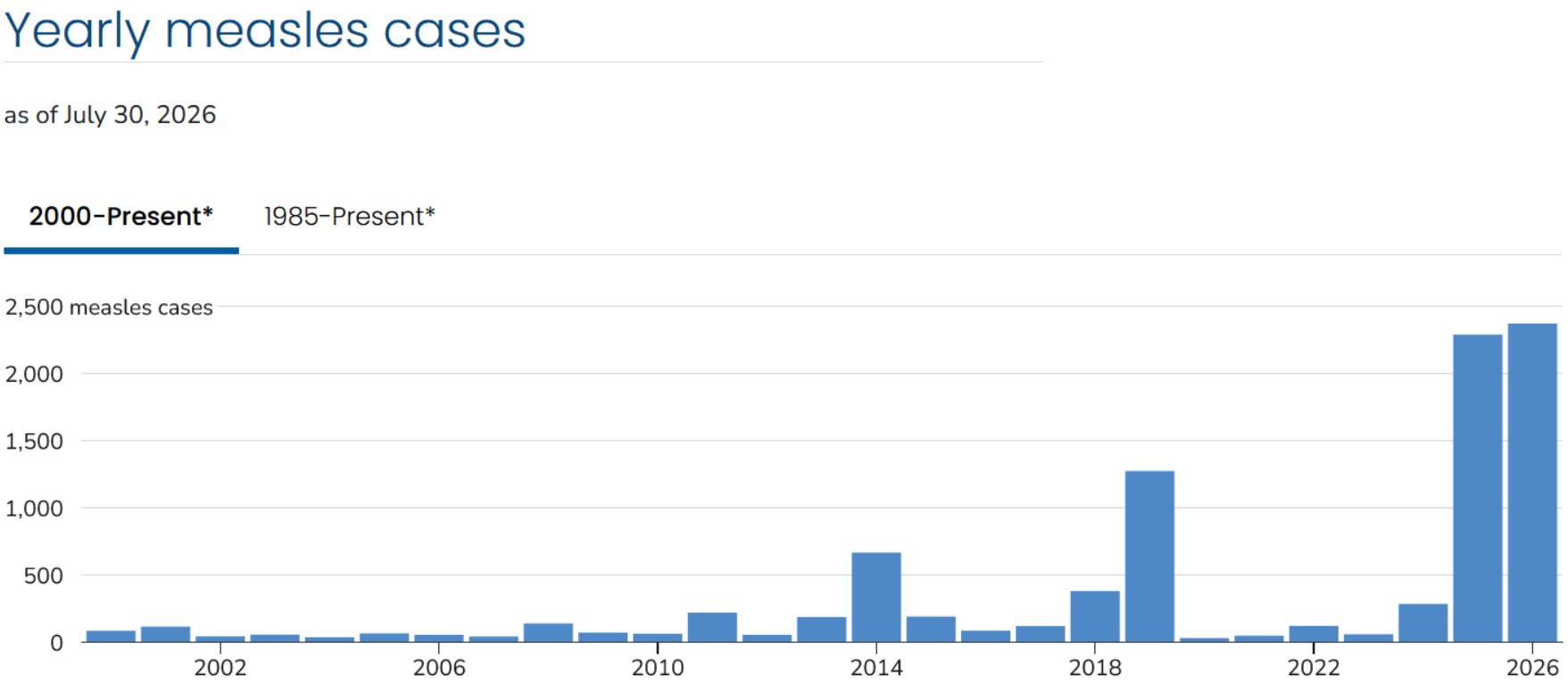

June 2026




July 2026



# Yearly Measles Cases - US



# Measles – Worldwide (December 25- May 26)

## Top 10 countries with measles outbreaks

| Country | Number of Cases |
|---|---|
| Bangladesh | 42,174 |
| India | 26,607 |
| Yemen | 14,521 |
| Mexico | 12,495 |
| Pakistan | 11,037 |
| Cameroon | 9,653 |
| Kazakhstan | 7,730 |
| Guatemala | 6,832 |
| Angola | 6,815 |
| Sudan | 5,766 |

Source: World Health Organization

https://www.cdc.gov/global-measles-vaccination/data-research/global-measles-outbreaks/index.html

# Procedure for Notifications for Measles Cases in NM

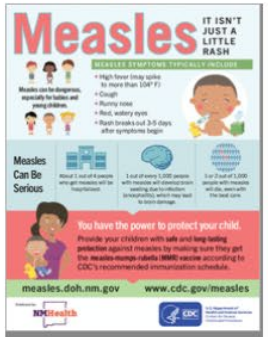
- Investigation initiated within 15 minutes – this requires immediate reporting to central Epi.
- What is the timeframe for these next steps and who is responsible?
  - Provider Interview - Central
  - Case Interview - Regions
  - Contact Investigation –Regional Nurse Epidemiologists, Epi and Response 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)

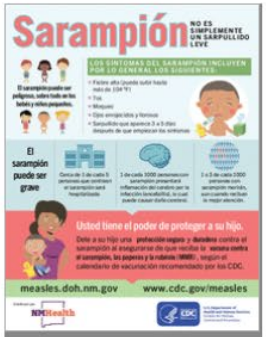
Complete protocol: https://www.nmhealth.org/publication/view/general/5153/

# NM Measles Infographics

## Infographics



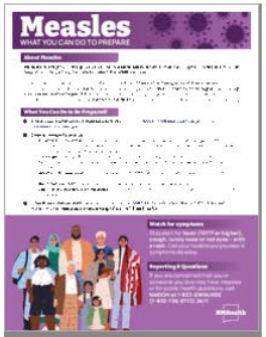

Measles Infographic – English



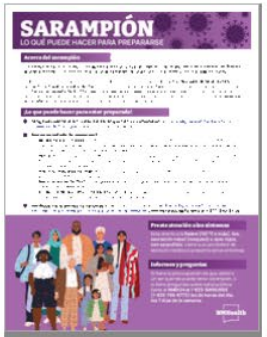

Infografía de Sarampión – Español


MMR Vaccines Infographic – English


Infografía sobre las vacunas MMR - Español




Measles: What You Can Do to Be Prepared




Sarampión: lo qué puede hacer para prepararse

## Signage


Measles- Call Before Entering/Fillable 8.5x11


Measles- Call Before Entering/Fillable 11x17


Measles- Call Before Entering/Fillable 18x24

# Avian Flu (H5)

# Influenza A (H5) Situation (CDC)

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-to-person 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.

**2** deaths

# VFC Program/Pediatric

# RSV Infant Doses Available for Prepositioning

- Beyfortus and Enflonsia monoclonal doses are available for ordering through NMSIIS including:
  - Nirsevimab
  - Enflonsia
- When ordering, always include clinic comments on orders outside of your normal ordering cadence
  - For these orders, the comments “prepositioning RSV” is appropriate
- Providers who have inventory with September 2027 expiration dates, please plan to use first for the October 2026-March 2027 season
- NMIP issued email Aug 5

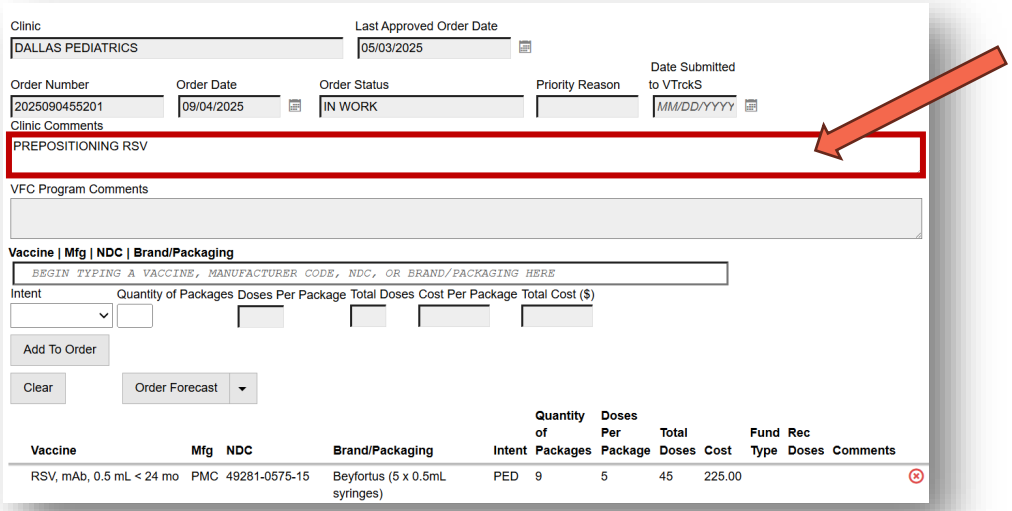
# RSV Infant Presentations Available for Ordering

- Nirsevimab (Beyfortus)
  - Two presentations available (5-dose packages):
    - 0.5 mL (50 mg) - For infants aged less than 8 months weighing <5 kg [<11 lbs.]
    - 1 mL (100 mg) - For infants aged less than 8 months weighing ≥ 5 kg [≥ 11 lbs.]
    - 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)

# 2026-2027 RSV Infant-Ordering




VFC providers that are able to store and utilize more than 30 doses on-hand for the start of the 2026-2027 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 Vaccine.Orders@doh.nm.gov to request an order opened

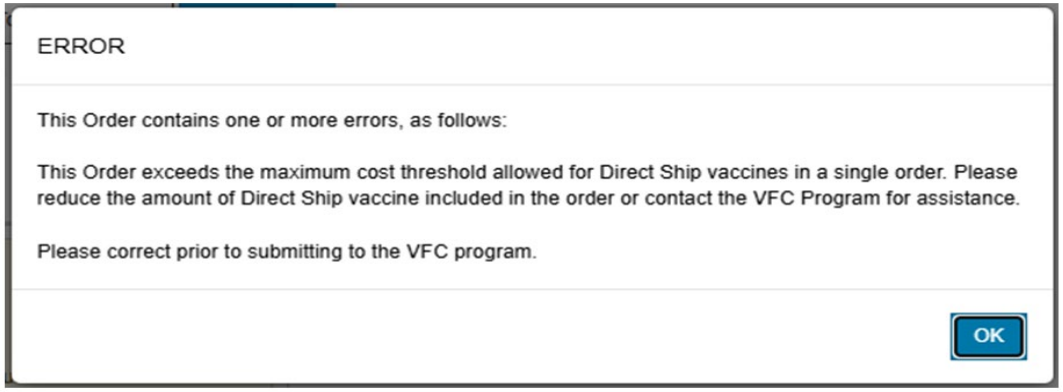
# Reminder: Important Ordering Notice-Frozen VFC Vaccines

- If you are needing to order more than 75 doses of each presentation (ProQuad and Varicella), split into multiple separate orders to prevent the error of exceeding the threshold of maximum doses ordered

***Example:***

| Vaccine | Mfg | NDC | Brand/Packaging | Intent | Quantity of Packages | Doses Per Package | Total Doses | Cost | Fund Type | Rec Doses | Comments | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| DTaP | SKB | 58160-0810-52 | Infanrix (0.5 mL x 10 syr) | PED | 2 | 10 | 20 | 323.40 | | | | ⊗ |
| MMRV | MSD | 00006-4171-00 | Proquad | PED | 10 | 10 | 100 | 17835.00 | | | | ⊗ |
| Varicella | MSD | 00006-4827-00 | Varivax (0.5 mL x 10 vials) | PED | 7 | 10 | 70 | 10098.90 | | | | ⊗ |

- If you exceed the amount of 75 doses, the error message below will pop up. Split them into multiple separate orders. We are seeing an increase in capacity due to outbreak and back-to-school clinics; this is a work around to avoid any delays.



# Adult Vaccines

# Vaccines for Adults Program (VFA) Funding Section 317b

- Orders for 317b vaccine can be placed in NMSIIS at any time (orders will be approved based on funding availability and to ensure statewide distribution)
  - If an order override is needed, please contact your Regional Coordinators
- We have received redistribution funding for 317b vaccines. With this additional funding, we have the following 317b funded vaccines available for ordering:

| Vaccine Brand Name | NDC |
|---|---|
| **Hep A/B Adult** TWINRIX® | 58160-0815-52 |
| **Hepatitis B Adult** HEPLISAV-B™ | 43528-0003-05 |
| **HPV** GARDASIL®9 | 00006-4121-02 |
| **Zoster** SHINGRIX® | 58160-0849-52 |

- We will be ensuring equitable distribution statewide based on funding availability.

# Reducing Wastage of Adult Vaccines

- If your site is not able to utilize all 317B or ASP funded vaccine, an adult attempt to transfer form should be submitted to your regional coordinators and Adult.Vaccines@doh.nm.gov at least 3 months prior to the expiration date of the vaccine.
- The requirement is for 10 or more doses, however due to the limitations of 317b and ASP funding, an attempt to transfer can be sent for any number of doses so we can utilize all adult doses you will not use.
- The Adult Attempt to Transfer Form can be found in NMSIIS > Reports > New Mexico Forms and Documents > Adult Vaccine Attempt to Transfer Form. Storage and handling guidelines should also continue to be followed to reduce wastage due to improper storage and handling of vaccines.

# Some Epi

# CDC COVID Surveillance and Data Analytics, 7/6

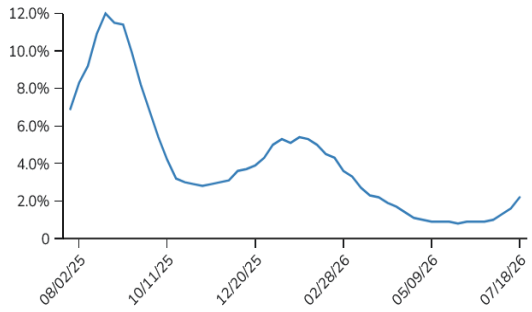
## Early Indicators

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

2.2%

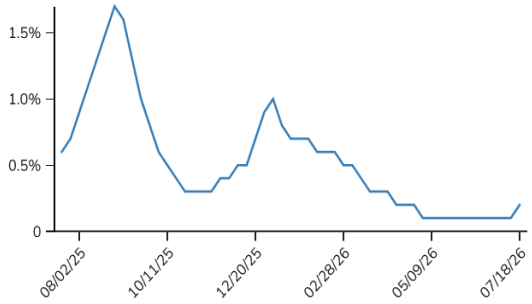
Week ending 2026-07-18
Previous Week 1.6%




% ED visits diagnosed as COVID-19

0.2%

Week ending 2026-07-18
Previous Week 0.1%



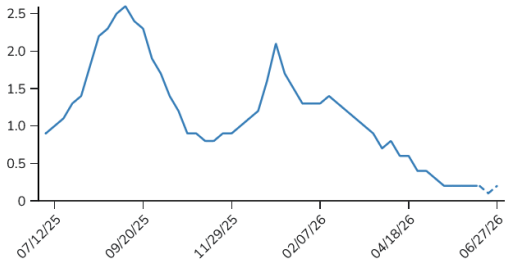

## Severity Indicators

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

0.2

Week ending 2026-06-27
Previous week 0.1

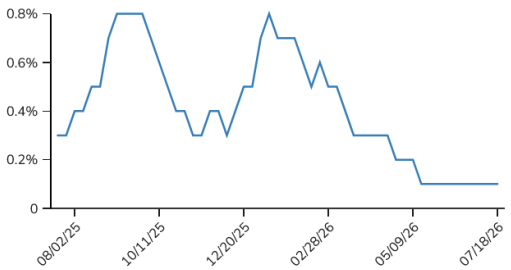



* Because reporting may be delayed, models estimate what rates would be if all data were complete. Modeled median estimates are shown with dashed lines.

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

0.1%

Week ending 2026-07-18
Previous Week 0.1%



# CDC COVID Surveillance and Data Analytics

## Provisional Weekly COVID-19 Deaths per 100,000 Population (Age-Adjusted), United States

January 03, 2026 - July 25, 2026

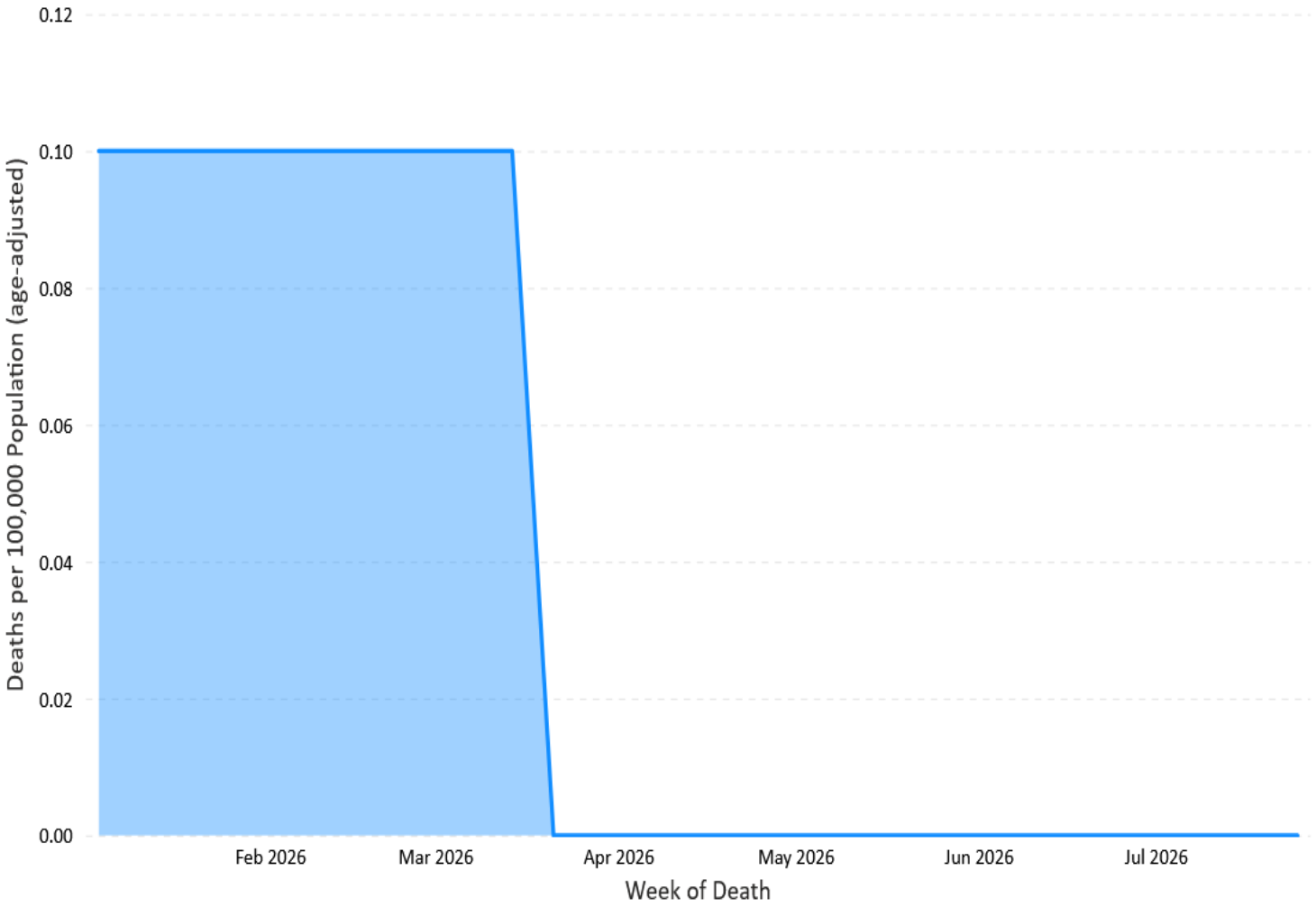
Jurisdiction

United States

1/1/2026 7/25/2026

**Deaths**

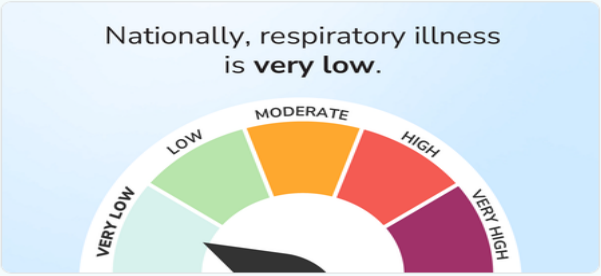
- Weekly Death Counts
- Weekly Death Rates (crude)
- Weekly Death Rates (age-adjusted)
- Cumulative Death Counts
- Cumulative Death Rates (crude)
- Cumulative Death Rates (age-adjusted)
- Monthly Death Rates by Age (crude)
- Monthly Death Rates by Sex (crude)
- Monthly Death Rates by Race & Ethnicity (crude)



# Respiratory Illnesses Data Channel-CDC

WHAT TO KNOW

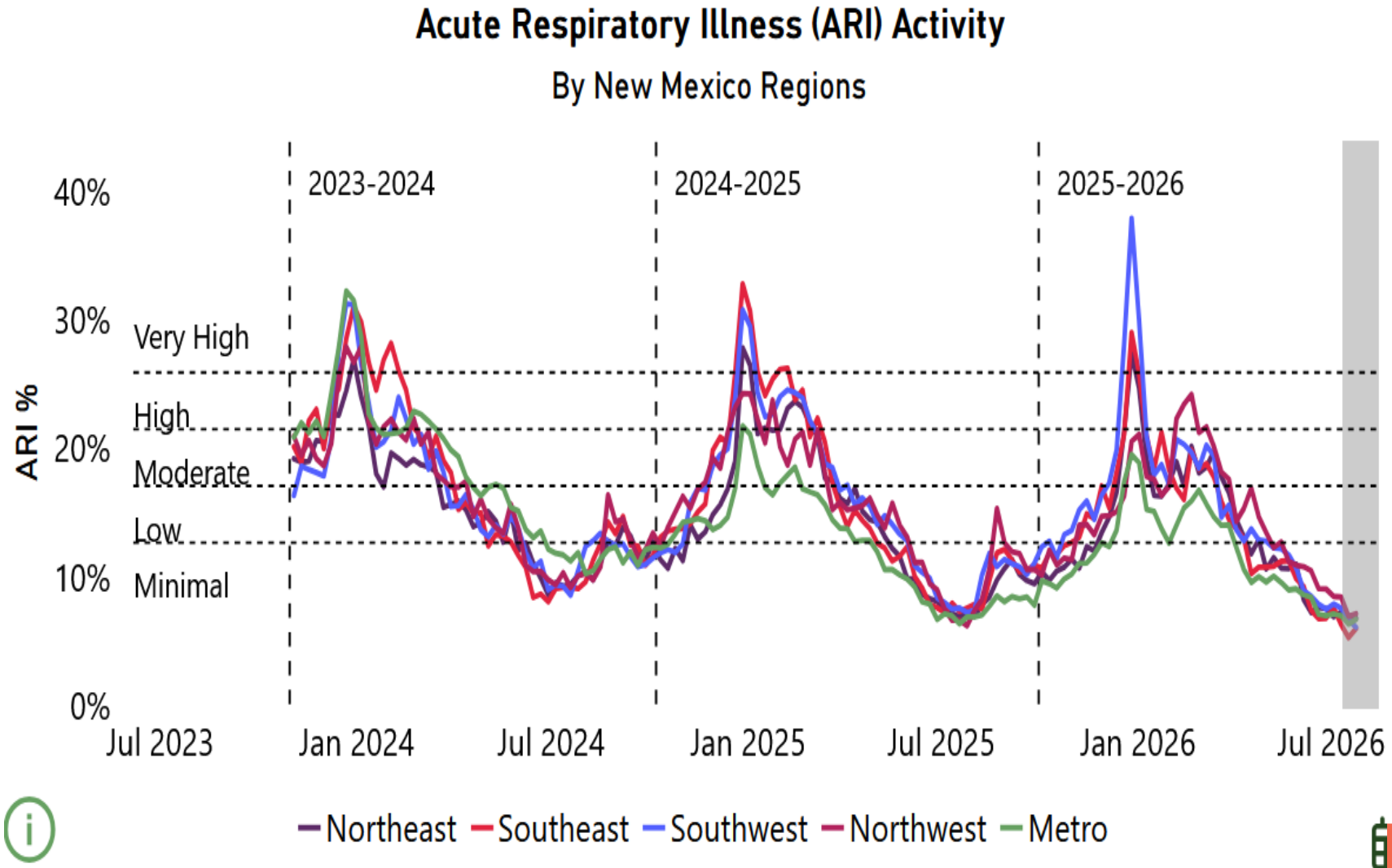
- As of July 31, 2026, the amount of acute respiratory illness causing people to seek health care is very low.
- Considering multiple data sources, COVID-19 activity is low and stable nationally but is beginning to show early signs of an increase in the West and South.
- RSV activity is very low in most areas of the country. Emergency department visits and hospitalizations for RSV are low but remain highest among infants and children younger than 4 years old.
- Seasonal influenza activity is low.
- Parainfluenza (PIV) and respiratory adenovirus are elevated nationally. Whooping cough (pertussis) continues to circulate at lower levels compared to post-pandemic peaks.




## Emergency department visits in the United States

| COVID-19 | Flu | RSV |
|---|---|---|
| **Very Low** Increasing ↗ | **Very Low** Decreasing ↘ | **Very Low** Decreasing ↘ |

# NM Respiratory VPD Epi Ending 7/25



# NM Respiratory Epi Ending 7/25- Deaths

| Season | Adult COVID-19 Deaths | Pediatric COVID-19 Deaths | Total COVID-19 Deaths |
|---|---|---|---|
| 2025-2026 | 31 | 1 | 32 |
| 2024-2025 | 149 | 0 | 149 |
| 2023-2024 | 317 | 1 | 318 |

| Season | Adult Influenza Deaths | Pediatric Influenza Deaths | Pneumonia Deaths | Total Pneumonia & Influenza Deaths |
|---|---|---|---|---|
| 2025-2026 | 49 | 2 | 235 | 286 |
| 2024-2025 | 98 | 3 | 259 | 360 |
| 2023-2024 | 74 | 4 | 356 | 434 |

| 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 |

# Campaigns, Trainings and Announcements

# 2026-2027 Vaccine for Adults Program Flu Vaccine Training

- We will be hosting our 2026-2027 VFA Flu vaccine training on Tuesday, August 18 from 12pm-1pm
- The training will be for all enrolled VFA providers who plan to order VFA flu vaccine during the 2026-2027 season
- The training will cover information on the 2026-2027 Adult Flu season as well compliance information and a billing refresher for NMDOH Public Health Offices

**Microsoft Teams meeting**
https://teams.microsoft.com/meet/276348613286813?p=8azpJOZFDZjvc3cd0v
Meeting ID: 276 348 613 286 813
Passcode: Hw3N3v55

# Calling All School Nurses and Administrators! Join us!

## School & Childcare Immunization Webinar

**SEPTEMBER 3, 2026 | 10:00 AM MST**

Join the New Mexico Immunization Program for an important webinar covering updates and resources for the 2026–2027 school year.

**TOPICS WILL INCLUDE:**

- 2026–27 NM Childcare\Pre-School\ School Entry Immunization Requirements
- Vaccine Exemptions
- 2026–27 School Survey
- Program Updates & Resources
- Questions and Answers

**SEPTEMBER 3, 2026**
**10:00 AM MST**

## Microsoft Teams meeting

**Join:** https://teams.microsoft.com/meet/219571283963590?p=8iBq8ngVPZyZx38oA5

Meeting ID: 219 571 283 963 590 and Passcode: fj2Ra25A

**Dial in by phone:** +1 505-312-4308,,630839001# United States, Albuquerque

# Got Shots-June 13-August 29, 2026

Got Shots efforts being held June 13 - August 29, 2026. These vaccine clinics provide opportunities for children to stay up to date on their immunizations, as providers open their doors for any child who presents for immunizations, regardless of whether they are a patient or whether they have insurance. **Got Shots started in 2007** and has been going strong with great partnership.


- Bernalillo
- Catron
- Chaves
- Cibola
- Colfax
- Curry
- De Baca
- Doña Ana
- Eddy
- Grant
- Guadalupe
- Harding
- Hidalgo
- Lea
- Lincoln
- Los Alamos
- Luna
- McKinley
- Mora
- Otero
- Quay
- Rio Arriba
- Roosevelt
- Sandoval
- San Juan
- San Miguel
- Santa Fe
- Sierra
- Socorro
- Taos
- Torrance
- Union
- Valencia

## Got Shots?

**This summer's "Got Shots?" events 2026.**

Providers, to register: Provider online signup,

# Find A Got Shots Event!

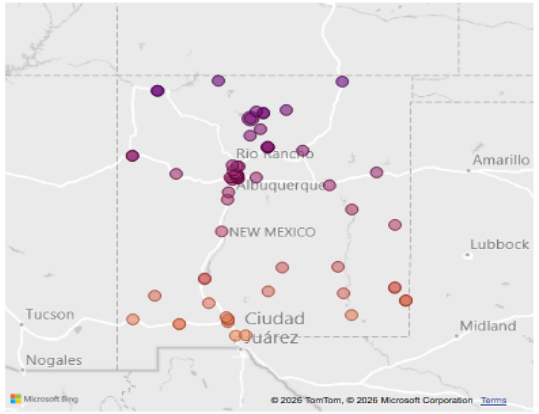
"Got Shots?" provides opportunities for children to stay up-to-date on their immunizations. During "Got Shots?" participating providers open their doors for any child who presents for immunizations, regardless of whether they are a patient or whether they have insurance.

If you require assistance, please call 1-833-SWNURSE

If you are a medical or healthcare provider and would like to participate in the Got Shots events, please register using the button below.

BECOME A GOT SHOTS PROVIDER

### Got Shots Provider Location




### Additional Information

| | Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|---|---|---|---|---|---|---|---|
| June | | 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 | | | | |
| July | | | | 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 | |
| August | | | | | | | 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 | | | | | |

Highlighted dates indicate when Got Shot's event is held.

| Clinic Name |
|---|
| Anthony Public Health Office |
| Artesia Public Health Office |
| Belen Public Health Office |
| Ben Archer Health Center |
| Ben Archer Health Center- Hatch |
| Ben Archer Health Center SBC Turth or Consequences |
| Ben Archer Health Center School Base |
| Carlsbad Public Health Office |
| CHAPARRAL PUBLIC HEALTH OFFICE |
| Christus St. Vincent Pediatrics |
| Cibola County Public Health Office |
| Clinica La Esperanza |
| De Baca Family Practice Clinic |
| El Pueblo Health Services |
| First Choice Community Healthcare Edgewood, NM location |
| First Nations Community HealthSource (Central Ave.) |
| First Nations Community HealthSource (Zuni Rd.) |
| Gallup Community Health |
| Hart and Mind Pediatrics |
| Hobbs Medical Clinic |
| Hobbs Public Health Office |
| Jicarilla Service Unit (JSU) |
| La Clinica De Familia, INC Pediatrics' |
| Las Clinicas Del Norte (Abiquiu) |
| Las Clinicas Del Norte (El Rito) |
| Las Clinicas Del Norte (Ojo Caliente) |
| Las Clinicas Del Norte (Ojo Calinete 2) |
| Las Cruces Public Health Office |
| LCDN-Pojoaque School Based Health Clinic |

- + 75%

Microsoft Power BI

https://vaccine.doh.nm.gov/?gad_source=1&gad_campaignid=23889896392

# GOT SHOTS 2026 Provider Registration Form

## June 13th - August 29th

Thank you for participating in this year's "Got Shots" back to school event. This year, Got Shots is being extended to 11 weeks—**Saturday, 6/13 through Saturday, 8/29.** All providers are invited to participate. To be eligible for incentives, please complete this online form no later than **Friday May 29th.**

*Please note,* we cannot guarantee that we will be able to deliver incentives bags to all areas of the state. We will do our best! During this event, we ask providers to open their doors to vaccinate all children at no cost to the parent, regardless of the child's insurance status or if the child is a current patient of the clinic. Working together we can ensure that no child will suffer from a vaccine-preventable disease because they did not receive vaccinations.

If you have any questions, please contact *NMDOH* at *dohmobile.vaccines@doh.nm.gov*, *Christie McAuley* at *CMcAuley@salud.unm.edu* or *Elise Clemens* at the NM PrimaryCare Association, 505-515-5341.
If you would like assistance with providing on-site MOSAA (Medicaid On Site Application Assistance) contact *Claudia Vigil* at least 2 weeks before your event, 505-880-8882 or cvigil@nmpca.org

https://forms.office.com/pages/responsepage.aspx?id=9GuqBDbUb0K_pAS3pw5g_8WFpqsQCrJJrZrttXUlBqNUQzFaVVFKRUVZN1k0QVZLNERSQ1YxUVBFTS4u&route=shorturl

# Be a Health Hero Campaign

NMIP's NMHealth web page has been updated https://vaccine.doh.nm.gov/


# Immunization Program SnapSHOT

AUGUST 2026

As part of enhancing our communication efforts please be on the lookout for our new monthly SnapSHOT email that has updates consisting of:

-Tips and Reminders
-Ordering updates
-Trainings
-Save the dates
-Vaccine Coverage Data
-Celebrations and accomplishments

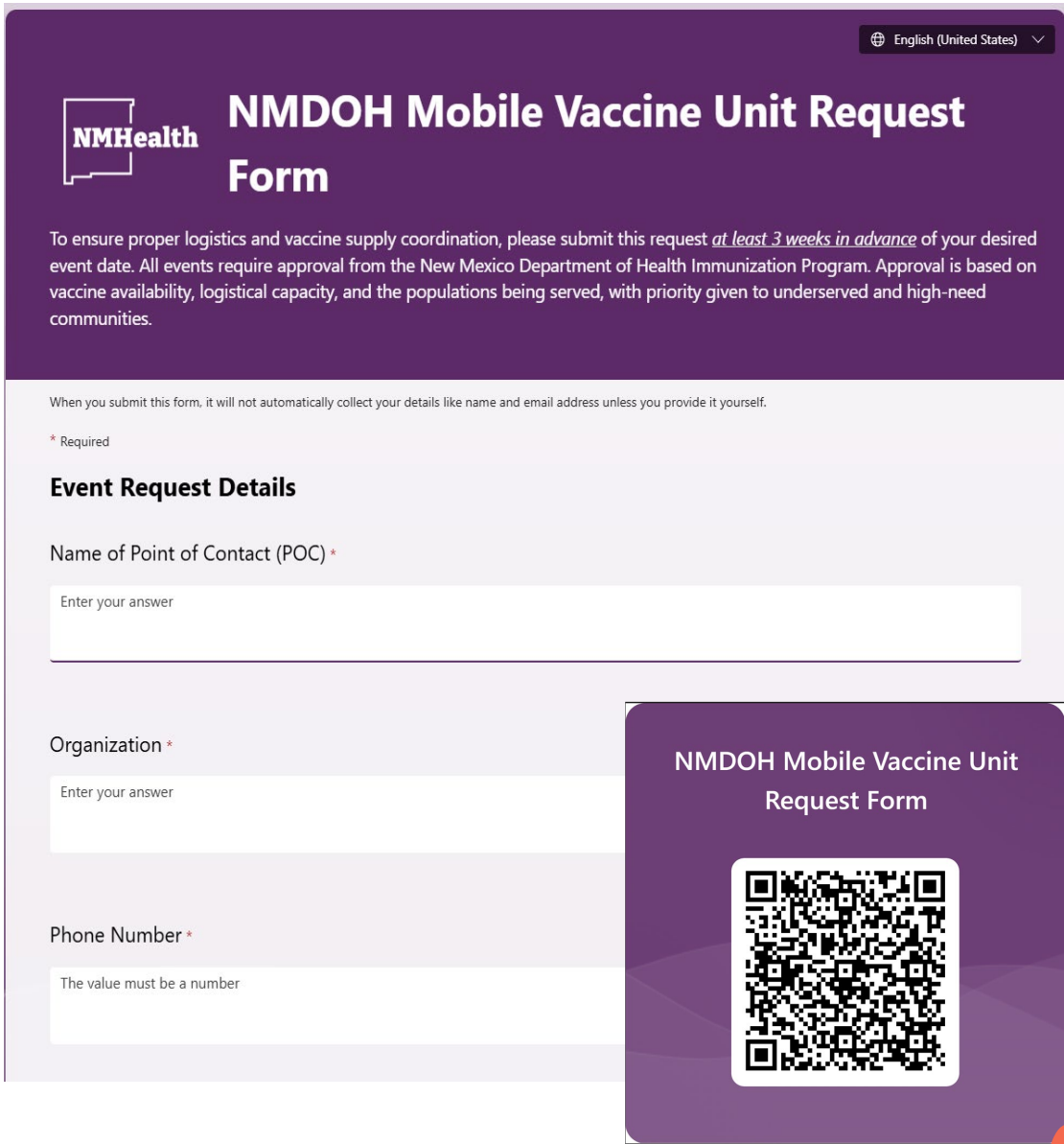
If you would like to share any planned vaccine clinics, accomplishments, and staff recognition happening in your community, please share and we can add to the SnapSHOT

This is a great opportunity to stay connected with each other Contact NMIP if you are not receiving the newsletter

# Vaccines To Go- NMDOH Mobile Unit

Use the Request Form https://forms.office.com/g/FvV63M6B7M 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.



# Vaccine Providers' Office Hours Call

1st Thursdays

Next Office Hours Call: September 3, Noon

# New Mexico Vaccines for Children (VFC) Program Staff

| | | |
|---|---|---|
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## REGIONAL OFFICES

| Metro | Northwest | Northeast | Southeast (a) (b) | Southwest |
|---|---|---|---|---|
| Bernalillo, Sandoval, Valencia, Torrance | Cibola, McKinley, San Juan | Colfax, Guadalupe, Los Alamos, Mora, Rio Arriba, San Miguel, Santa Fe, Taos, Union, Harding | A-Eddy, Lea, Lincoln, Chaves, B-Quay, Roosevelt, Curry, De Baca | Catron, Doña Ana, Grant, Hidalgo, Luna Otero, Sierra, Socorro |
| **Immunization Coordinators:**<br><br>Erica Flores, RN<br>**505-709-7866**<br>Erica.Flores@doh.nm.gov<br><br>Crystal Trujillo, RN<br>**505-709-7811**<br>Crystal.Trujillo@doh.nm.gov<br><br>Melissa Padilla<br>**505-670-0153**<br>Melissa.Padilla@doh.nm.gov | **Health Educator:**<br><br>Angelica Torres<br>**505-534-0865**<br>Angelica.Torres@doh.nm.gov | **Immunization Coordinator:**<br><br>Vacant<br><br>**Health Educator:**<br><br>Debra Wagner<br>**505-476-2619**<br>Debra.Wagner@doh.nm.gov<br><br>**Immunization Clerk:**<br><br>Renee Encinias<br>**505-476-2622**<br>Renee.Encinias@doh.nm.gov | **Immunization Coordinator:**<br><br>Kelly Bassett, RN<br>**575-288-9618**<br>Kelly.Bassett@doh.nm.gov<br><br>**Immunization Coordinator:**<br><br>Zach Washington, RN<br>**505-222-9011**<br>Zachariah.Washington@doh.nm.gov<br><br>**Immunization Clerk:**<br><br>Theresa Rubio<br>**575-288-9463**<br>Theresa.Rubio@doh.nm.gov | **Immunization Coordinators:**<br><br>Catalina Hood, RN<br>**575-528-5150**<br>catalina.hood@doh.nm.gov<br><br>Kimberly Orozco, RN<br>**575-528-5186**<br>Kimberly.Orozco@doh.nm.gov<br><br>**Immunization Clerk:**<br><br>Erica Nieto<br>**575-528-5113**<br>Erica.Nieto@doh.nm.gov |

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# NEW MEXICO DEPARTMENT OF HEALTH IMMUNIZATION PROGRAM
# ADULT AND ADOLESCENT VACCINE PROGRAM STAFF

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| **Immunization Coordinators**<br><br>Erica Flores, BSN, RN<br>(505) 709-7866<br>Erica.Flores@doh.nm.gov<br><br>Crystal Trujillo, RN<br>(505) 709-7811<br>Crystal.Trujillo@doh.nm.gov<br><br>Melissa Padilla<br>(505) 670-0153<br>Melissa.Padilla@doh.nm.gov | **Health Educator**<br><br>Angelica Torres<br>(505) 534-0865<br>Angelica.Torres@doh.nm.gov | **Immunization Coordinator**<br><br>**VACANT**<br><br>**Health Educator**<br>Debra Wagner, CCMA<br>(505) 476-2619<br>Debra.Wagner@doh.nm.gov<br><br>**Immunization Clerk**<br>Renee Encinas<br>(505) 476-2622<br>Renee.Encinias@doh.nm.gov | **Immunization Coordinators**<br><br>Kelly Bassett, BSN, RN<br>(575) 288-9618<br>Kelly.Bassett@doh.nm.gov<br><br>Zach Washington, BSN, RN<br>(505) 222-9011<br>Zachariah.Washington@doh.nm.gov<br><br>**Immunization Clerk**<br>Theresa Rubio<br>(575) 288-9463<br>Theresa.Rubio@doh.nm.gov | **Immunization Coordinators**<br><br>Kimberly Orozco, BSN, RN<br>(575) 528-5186<br>Kimberly.Orozco@doh.nm.gov<br><br>Catalina Hood, BSN, RN<br>(575) 528-5150<br>Catalina.Hood@doh.nm.gov<br><br>**Immunization Clerk**<br>Erica Nieto<br>(575) 528-5113<br>Erica.Nieto@doh.nm.gov |

# ✔ Attention healthcare providers and public health stakeholders!

- The New Mexico Immunization Coalition is actively recruiting new individual members and partner organizations to strengthen our collective impact.
- Join NMIC: Learn about membership opportunities and upcoming meetings.
- Stay Informed: Subscribe to NMIC Immunization Update emails.
- Get Involved: Discover current activities and strategic initiatives you can support.
- By becoming a member, you will collaborate on vital public health initiatives, share best practices, and help drive positive health outcomes across New Mexico. Reach out to NMIC Program Liaison Christie McAuley: CMcAuley@salud.unm.edu

# Remembrance and Reflection Week - CDC


As we approach the one-year anniversary of the August 8, 2025, targeted attack on CDC's Roybal Campus, we invite the CDC community to join us during Remembrance and Reflection Week as we honor the life, service, and sacrifice of DeKalb County Police Officer David Rose.

Officer Rose was killed in the line of duty while responding to the attack and protecting the CDC community. A United States Marine Corps veteran and dedicated member of the DeKalb County Police Department, he is remembered for his courage, professionalism, integrity, and unwavering commitment to serving others.

# Questions, Comments, Dialogues, Missives and Negotiations