10-6-2025 Weekly Clinical Update

There is a LOT of confusion and misunderstanding about current COVID-19 vaccine. To begin, F887 says, "**§483.80(d)(3) COVID-19 immunizations. The LTC facility must develop and implement policies and procedures to ensure all the following:**

**(i) When COVID-19 vaccine is available to the facility, each resident and staff member is offered the COVID-19 vaccine unless the immunization is medically contraindicated or the resident or staff member has already been immunized;**

**(ii) Before offering COVID-19 vaccine, all staff members are provided with education regarding the benefits and risks and potential side effects associated with the vaccine;**

**(iii) Before offering COVID-19 vaccine, each resident or the resident representative receives education regarding the benefits and risks and potential side effects associated with the COVID-19 vaccine;**

**(iv) In situations where COVID-19 vaccination requires multiple doses, the resident, resident representative, or staff member is provided with current information regarding those additional doses, including any changes in the benefits or risks and potential side effects, associated with the COVID-19 vaccine, before requesting consent for administration of any additional doses.**

**(v) The resident or resident representative, has the opportunity to accept or refuse a COVID-19 vaccine, and change their decision; and**

**(vi) The resident's medical record includes documentation that indicates, at a minimum, the following:**

**(A) That the resident or resident representative was provided education regarding the benefits and potential risks associated with COVID-19 vaccine; and**

**(B) Each dose of COVID-19 vaccine administered to the resident, or**

**(C) If the resident did not receive the COVID-19 vaccine due to medical contraindications or refusal.**

Per the AHCA LTC Infection Control Forum discussion this week, some pharmacies now have access to the 2025-2026 COVID-19 vaccinations. There was discussion of whether to begin having vaccination clinics. The following is Dr. David Gifford, MD, MPH, Chief Medical Officer at AHCA, responded with the following:

“I would not wait to order or start your vaccine clinics. As you note the vaccine is approved by the FDA for anyone 65 and over as well as adults under 65 who have a high risk condition (note: FDA does not specify what constitutes a high risk condition and the CDC website notes that "*The list of underlying medical conditions is not exhaustive and will be updated as the science evolves. This list should not be used to exclude people with underlying conditions from recommended measures for prevention or treatment of COVID-19*." As Larry noted a number of states are making statements as to what constitutes high risk condition or who they recommend receive the vaccine.

While CDC has not formally endorsed the ACIP recommendations; the ACIP recommendations say any adult can get the vaccine with shared decision making but that those with high risk conditions are most likely to benefit. We already per CMS regulations are required to educate and offer the vaccine, which is basically "shared decision making" since we need to educate them on the risk and benefits. If you provide them with the CDC VIS for COVID-19 vaccine you are also advising them on the risks.

HHS release of ACIP recommendations: (Bold added) "*ATLANTA - SEPTEMBER 19, 2025 - The Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP) today unanimously recommended that vaccination for COVID-19 be determined by individual decision-making. ACIP's recommendation applies to all individuals six months and older. It includes an emphasis that the risk-benefit of vaccination in individuals under age 65 is most favorable for those who are at an increased risk for severe COVID-19 and lowest for individuals who are not at an increased risk, according to the CDC list of COVID-19 risk factors. Individual decision-making is referred to on the CDC's adult and child immunization schedules as vaccination based on shared clinical decision-making, which references providers including physicians, nurses, and pharmacists. It allows for immunization coverage through all payment mechanisms including entitlement programs such as the Vaccines for Children Program, Children's Health Insurance Program, Medicaid, and Medicare, as well as insurance plans through the federal Health Insurance Marketplace.*"

The impact of CDC endorsing ACIP recommendations is not on who can or can not receive the vaccine but mainly on insurance coverage, outreach and promotional efforts, reporting requirements and measurement.

I would not let the delay in CDC's endorsement of the ACIP recommendation hold up your vaccine ordering or administration.”

No further CDC or CMS recommendations are anticipated until the government shutdown is over and there has been time to get “caught up” from the shutdown. That being said, it would be prudent to not wait on your vaccination clinic schedules.