



Federal Retail Pharmacy Program Updates

Booster guidance

Providers should follow CDC guidance vs. ACIP

The HHS Secretarial Directive states that as of September 25, 2021, all CDC COVID-19 Vaccination Program enrolled providers shall make immediately available and administer a booster dose of Pfizer-BioNTech COVID-19 vaccine to any and all individuals seeking such a dose who have completed their primary series of Pfizer-BioNTech COVID-19 vaccine at least six months ago and (1) who are 65 years or older; (2) who are 18 years or older and are residents in long term care settings; (3) who are 18 years or older with underlying medical conditions as described in [CDC clinical guidance and in accordance with the CDCs recommendation](#); or (4) who are 18 years or older with increased risk of getting COVID-19 disease [due to occupational or institutional exposure](#), such as frontline essential workers and healthcare workers, as described in and in accordance with CDC's recommendation. [Read the directive](#)

CDC guidance

The CDC has updated guidance regarding Pfizer booster doses, including additional guidance regarding occupational or institution settings. [Read more](#)

Requesting vaccines

We understand the anticipation that there may be an increase in vaccine demand as boosters are encouraged for certain populations. However, please only request vaccine that you need, and use the product that you have on hand first.

Billing information

Billing codes for boosters

NCPA has the billing codes you need for boosters. See the most recent NCPDP guidance, and the recommended claims for COVID-19 boosters. Read more here. You can also download the NCPDP user guide, where section 10.5 outlines the additional dose. [Download](#)

Flu and Pneumococcal vaccines

“To help to efficiently administer influenza vaccines or pneumococcal vaccines to SNF residents during the COVID-19 PHE, effective as of September 20, 2021, CMS will exercise enforcement discretion with respect to the SNF Consolidated Billing Provisions.

Through the exercise of that discretion, CMS will allow Medicare-enrolled immunizers, including but not limited to pharmacies working with the United States, to bill directly and receive direct reimbursement from the Medicare program for vaccinating SNF residents with the seasonal influenza vaccine and pneumococcal vaccine (including for vaccine administration and product) whether these vaccines are administered at the same time (co-administered) with a COVID-19 vaccine or if they are administered at different times.”

- More information in the [CMS toolkit](#)
- Flu shot [billing page](#)

Are all your inventories up-to-date?

Please continue to check your vaccine inventories, as you may have some that expire soon. Check your inventory, dispose of expired vaccine in accordance with state and federal regulations, update vaccine inventory records, and submit vaccine wastage reports.

- Determining when a vaccine or diluent expires is a critical step in proper storage and handling. Expired vaccines and diluents must be removed immediately from storage units to avoid inadvertently administering them.
- Johnson & Johnson expiration date look up [website](#).
- Moderna expiration date look up [website](#).
 - This product line may announce shelf-life extensions as early as next week (Sept 27 – Oct 1). **Do not dispose of expired Moderna until there is decision made about extension.** We recommend checking the website at the beginning of October.
- The COVID-19 Vaccine Lot Number report, available via CDC’s Vaccine Code Set Management Service, can help identify expired inventory. The report is updated daily with COVID-19 vaccine lot numbers and expiration dates provided to CDC by vaccine manufacturers.
 - If you have not yet registered for the report, visit [CDC's Vaccine Lot Number and Expiration Date webpage](#) and complete the registration form to request access.
- Do not return vaccines. Dispose of expired vaccine in accordance with local regulations and practice protocols for disposing of regulated medical waste to minimize chances that counterfeit products may be sold online or abroad.
- Pfizer, Moderna, and Janssen vaccines may be disposed of in a pharmaceutical waste container, or a comingled pharmaceutical/Sharps waste container. (See [Reporting Doses Spoiled, Expired, or Wasted](#) for details.)
- Submit vaccine wastage reports.
 - In-depth guidance can be found in the [Identification, Disposal, and Reporting of COVID-19 Vaccine Wastage operational summary](#).
 - Please report your waste via ABCOrder. Review procedure [here](#).

- Please continue to monitor expiration dates of vaccine inventory and follow a first in, first out inventory management practice to ensure that vaccines soon to expire are used first.

Check Johnson & Johnson expiration dates

Please be advised that Johnson & Johnson/Janssen (J&J) COVID-19 vaccine lot 206A21A expired September 21, 2021. The Centers for Disease Control and Prevention has not extended the expiration for this lot. Do not administer this vaccine and please discard any remaining doses as medical waste. Open the vials and mark them as expired before discarding them.

Important! VaccineFinder required reporting reminder

The CDC has notified us that there are several hundred program participants who have not updated VaccineFinder recently. Remember that VaccineFinder inventory reporting is a CDC requirement for participation in the COVID-19 vaccine program. Reporting should be done under your FEDERAL login. You no longer need to report inventory on your VaccineFinder state login. Also, take time to make sure your VaccineFinder listing is accurate. Email vaccinefinder@castlighthhealth.com for assistance, or call 855-886-4317

Vaccinating in LTC

You and your staff should prepare yourselves prior to vaccinating LTC staff and residents.

- [Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes | CDC](#)
- [Infection Control: Severe acute respiratory syndrome coronavirus 2 \(SARS-CoV-2\) | CDC](#)
- Per CDC guidance, asymptomatic fully vaccinated pharmacy staff would not need to undergo screening testing regardless of the community transmission rates.
 - Symptomatic staff should be tested and not participate in an onsite clinic.
 - As discussed on the call, state/local jurisdictions may have additional testing requirements beyond what is in CDC guidance.
- Pharmacy staff should be wearing source control as recommended for HCP, with the addition of eye protection if conducting clinics for facilities located in counties with substantial or high transmission.
 - Residents and staff receiving the vaccine should also wear source control.
 - *Source control options for HCP include:*
 - *A NIOSH-approved N95 or equivalent or higher-level respirator*
 - OR*

- *A respirator approved under standards used in other countries that are similar to NIOSH-approved N95 filtering facepiece respirators (note: these should not be used instead of a NIOSH-approved respirator when respiratory protection is indicated) OR*
- *A well-fitting facemask.*
- If pharmacy staff and recipients of the vaccine are following appropriate source control practices, this will reduce the likelihood of experiencing a high-risk exposure, even if someone in the facility subsequently is confirmed to have SARS-CoV-2.
 - If a high-risk exposure to a confirmed person does occur, then pharmacy staff should undergo testing should be performed, regardless of vaccination status.
- When coordinating and scheduling an onsite clinic, it will be important to discuss with the facilities any information re: testing for personnel entering the facility as well as access to available testing, either onsite, or if staff would need to obtain testing prior to conducting the onsite clinic.

Questions? Continue to work with your Business Coach or Sales Executive if you have questions. Questions can also be sent to COVIDVaccines@amerisourcebergen.com.