

# Vaccine Preventable Disease Control Program

[ph.lacounty.gov/vaccines](http://ph.lacounty.gov/vaccines)

The Latest Immunization Updates & Announcements.

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## Quarterly Vaccine Provider Newsletter

As a valued member of our Vaccine Provider Network, we appreciate your continued commitment to protecting public health through immunization. Together, we can raise awareness, support one another, and encourage community members to talk with trusted messengers about staying up to date on their vaccinations.

This newsletter aims to keep our partners informed and prepared and includes important immunization updates and resources for all vaccine partners/providers.

# LA County Public Health Reaffirms: No Modifications to Immunization Schedules or Vaccine Availability in Los Angeles County

On January 5, 2026, U.S. Department of Health and Human Services released a memo stating that the CDC's recommendations on childhood vaccines will be updated to align more closely with those of other high-income countries. The CDC will now routinely recommend vaccines for 11 diseases rather than 17, and the remaining vaccines are now recommended under "shared clinical decision making." The Los Angeles County Department of Public Health reaffirms that Los Angeles County is following existing [California Department of Public Health \(CDPH\)](#) vaccination guidelines for children that align with recommendations from the American Academy of Pediatrics. There are no modifications to immunization schedules or vaccine availability for people living in Los Angeles County, at this time. There is no change in vaccine financing or availability through the Vaccine for Children's Program.

For more information, please see our [press release](#) or refer to our [webpage](#).

# A Message from the Vaccine Preventable Disease Control Program Director

As we ring in the New Year, I am filled with gratitude reflecting on the incredible work we have accomplished together to improve the lives of residents across Los Angeles County through expanded access to immunization services.

While 2025 presented significant challenges to the integrity of the federal immunization infrastructure that has informed our immunization policies for decades, it also highlighted the remarkable resilience and ingenuity of our provider community to rally around evidence-based policy decisions at the state and local-level to ensure that all residents in LA County are safe from vaccine-preventable diseases and outbreaks.

I want to extend my deepest gratitude to each of you. Your commitment to ensuring our residents have access to life-saving vaccinations—especially our most vulnerable communities —remains the heartbeat of our program. You haven't just delivered immunizations; you have delivered life-saving vaccine information, protection, and a healthier future for the millions of people in our County.

As we look towards 2026, the County's Vaccine Preventable Disease Control Program will continue to have a steadfast commitment to science-based strategies to improve immunization coverage. Every policy we implement and every recommendation we share will be rooted in rigorous data and evidence-based clinical practices. By letting the best available science inform our decision-making, we ensure that our efforts effectively address the unique needs of Los Angeles County's diverse populations.

As we look forward to 2026, we are committed to supporting you with the resources and guidance that will help your practices foster trust and reach even more families with ease. We welcome any feedback you have to help us improve our Program to better support you and the communities you serve.

Thank you for your partnership, your resilience, and dedication to public health. I wish you, your staff, and your families a joyous and healthy New Year!

With sincere appreciation,

**Andrea Kim, PhD, MPH**

Director Vaccine Preventable Disease Control Program  
Los Angeles County Department of Public Health

# 2025-2026 Respiratory Season

## Influenza

Flu activity is rising in LA County ([RESPWatch](#)). Influenza A(H3N2) subclade K emerged in August 2025 and is now the most detected H3N2 virus in the U.S. This strain has genetic changes in the hemagglutinin protein that have been antigenically characterized as “antigenically drifted” or slightly different from the H3N2 strain used to make the U.S. 2025-26 seasonal flu vaccine.

Seasons dominated by H3N2 viruses are often associated with more severe illness and higher rates of hospitalization, particularly in young children and older adults.

*The following are important steps to take to protect your patients:*

- **Annual influenza vaccination is recommended for everyone 6 months and older and may be given at any point during the flu season (October to May).** Although vaccine effectiveness against subclade K may be somewhat reduced, studies show that flu vaccination still provides important protection against severe illness and hospitalization in children.
- Encourage your patients to stay home when ill and to consider wearing a mask in crowded or poorly ventilated spaces, and
- **Test any patient with flu-like symptoms and offer with prompt antivirals.** Influenza antivirals are still effective against subclade K and prevent severe outcomes in high-risk populations. Antiviral options may include oral oseltamivir, inhaled zanamivir, intravenous peramivir or oral baloxavir depending on age and other factors.

For more information on respiratory vaccine coverage across Los Angeles County, please visit LA County [DPH Respiratory Vaccines Dashboard](#)



# Hepatitis B Birth Dose Updates



LA County Public Health strongly recommends that all infants receive a dose of the hepatitis B vaccine in the first 24 hours of life, following [California Department of Public Health \(CDPH\) guidance](#), in line with the Western Health Alliance and the American Academy of Pediatrics (AAP). For pregnant people who test positive for hepatitis B surface antigen (i.e. HBsAg positive), their infant(s) should receive both hepatitis B vaccine and hepatitis B immunoglobulin within 12 hours of life. Additional doses should be administered per the [AAP vaccination schedule](#).

## Background

On December 5, 2025, the Advisory Committee on Immunization Practices (ACIP) voted to change the current recommendation that all infants get hepatitis B vaccine after birth to a shared clinical decision-making model. There was no new data presented suggesting that the current strategy of universal birth dose is ineffective or not safe. In fact, the current strategy that has reduced pediatric hepatitis B infections in the United States by 99 percent. All the scientific evidence available to date suggests that delaying the first dose of the hepatitis B series increases the risk of infection and jeopardizes completion of the full vaccine series, which is required for long-lasting protection. Many with chronic hepatitis B do not know they are infected, and infants may unknowingly be infected by household and other contacts following birth. The birth dose acts as a critical safety net to protect newborns from infection and LAC DPH encourages all providers to strongly recommend this vaccine for all infants in the first 24 hours of life.

The updated ACIP recommendation on the hepatitis b birth dose will NOT impact insurance reimbursement for the birth dose. For more information, please see the materials below.

## Resources

- [News Release](#) – Published December 5, 2025 (LACDPH)
- [Vaccine Integrity Project \(PDF 1.2MB\)](#)
- [Perinatal Hepatitis B: Information for Public and Providers](#) (LACDPH)
- [Hepatitis B Birth Dose: FAQ for Providers](#) (LACDPH)
- [Preventing Perinatal Hepatitis B: Guidelines for Prenatal Care Providers](#) (CDPH)
- [Preventing Perinatal Hepatitis B: Guidelines for Labor and Delivery Hospitals](#) (CDPH)
- [Preventing Perinatal Hepatitis B: Guidelines for Pediatric Providers](#) (CDPH)

# Addressing False Information & Building Vaccine Confidence

Check out our [Addressing False Information & Building Vaccine Confidence](#) webpage! This resource was developed in response to feedback from providers and community partners.

This webpage is designed to:

- Provide the public with accurate, trustworthy vaccine information.
- Equip healthcare professionals with tools to counter misinformation.
- Build vaccine confidence.



Vaccine confidence is essential to protecting communities from vaccine-preventable diseases such as measles and whooping cough. Misinformation can create confusion and uncertainty for families, contributing to lower vaccination rates and increased health risks. Healthcare providers remain trusted sources of information and play an important role in supporting informed decision-making.

The [Los Angeles County Department of Public Health](#) is aware of recent changes to the CDC's "Autism and Vaccines" webpage. Language suggesting that scientific studies have not ruled out a link between infant vaccines and autism may give people the impression that there is meaningful scientific uncertainty on this topic. There is no new evidence supporting a connection between vaccines and autism, and extensive research continues to demonstrate that vaccines are safe and effective.

Increases in autism diagnoses are attributed to improved screening, expanded diagnostic criteria, and greater awareness—not vaccination. This webpage resource provides evidence-based information and tools for providers to address vaccine misinformation and share with patients and communities. Families are encouraged to discuss questions with their healthcare provider and consult trusted sources such as the [American Academy of Pediatrics](#), [California Department of Public Health](#), and the [local health department](#).

## We want to hear from you!

[Click here](#) to submit vaccine-related questions you have or to share false information you may have encountered. A staff member of the LAC DPH Vaccine Preventable Disease Control Program will address your feedback.

# Vaccine Program Management

## Recertification for the VFC, VFA, and LHD 317 Programs

- Annual Recertification opened on Friday, December 19, 2025. Recertification is a federal requirement that must be completed annually by enrolled providers to continue receiving publicly funded vaccines. **The Recertification deadline will be January 30, 2026.**
- Visit [this page](#) for helpful Recertification resources and frequently asked questions. The Recertification worksheet is a helpful way to gather all of the information you'll need ahead of accessing the Recertification form in myCAvax.
- New providers that enrolled prior to recertification launch are also expected to complete 2026 Recertification.
- Not completing Recertification by the deadline will lead to immediate suspension of vaccine ordering privileges and may lead to eventual termination from the program.
- A training test-out option is now available for users who have previously passed the lessons and receive a passing score on the pre-lesson quiz.
- If you have completed lessons before December 1, 2025, ensure you reset lessons before taking the lessons or testing-out to receive credit for lesson completion towards 2026 Recertification.
- The new EZIZ training page in myCAvax allows providers to view staff training status for their location. Since myCAvax is connected to validate EZIZ training lessons, the name (first and last) and email listed on myCAvax must match the name and email on the EZIZ training account used to complete the required lessons. Each key practice staff must have a unique email and EZIZ user ID.
- The Provider of Record, Provider of Record Designee, Primary Vaccine Coordinator and Backup Coordinator must take the EZIZ trainings. If your clinic has an Additional Vaccine Coordinator or Organization Vaccine Coordinator, they are required to take the same lessons as the Primary Vaccine Coordinator as well. Other staff involved in vaccine management are encouraged to take training lessons.
- For locations that participate in multiple programs, Recertification will be required for each individual program. There is no option to recertify all of your programs at once.
- Additional details can be found in the Recertification email sent to providers on 12/10/25 and 12/11/25.

Continued on next page

# Continued: Vaccine Program Management

## Storage & Handling Best Practices Tips: Inventory Management

- Do a physical inventory at least monthly and before you place an order to ensure you have enough vaccine on-hand and to keep track of expired and soon-to-expire vaccine.
- Keeping storage unit doors open for extended periods while conducting physical inventory may expose vaccines to out-of-range temperatures that can damage vaccines.
- When you find expired vaccines or diluents, put them in a container marked "Do Not Use" to avoid administration errors.
- See CDPH's [How To Do A Physical Inventory job aid](#) for more information.

## VFC Flu Pre-book

- VFC Flu Pre-book opens mid to late January and will be due in early February.
- Start discussing with your organization the flu products you anticipate needing for 2026 – 2027 season and the number of doses.
- Providers that don't pre-book are allocated doses based on remaining supply and will not have brand preference.

## Vaccine Program Management Resources

- The LAC DPH Vaccine Program Management email is [vaccinereq@ph.lacounty.gov](mailto:vaccinereq@ph.lacounty.gov) and the inbox name is 'DPH-VaccineReq'
- CDPH Immunization Branch email sign-up [registration](#)
- CDPH Immunization Updates for Providers Webinar (occurs once a month)
  - [Register](#) for the next session: Friday, January 23, 2025, 9:00 am – 10:30 am (PT)
- EZIZ website address change in early 2026 to [eziz.cdph.ca.gov](http://eziz.cdph.ca.gov)

# Webinars

## Prenatal Immunization Webinar

### Webinar Overview

The session reviews current prenatal immunization recommendations for Tdap, RSV, influenza, and COVID-19 and shares practical, evidence-based strategies to increase uptake among people who are pregnant. Featured speaker and vaccine champion Oluwatosin “Tosin” Goje, MD, MSCR clarifies evolving guidance and offers actionable best practices for counseling patients.

In addition, the session includes key updates from the Los Angeles County Department of Public Health (DPH). Priya Batra, MD, MS, FACOG, addresses and debunks recent statements issued by the U.S. Department of Health and Human Services (HHS) regarding acetaminophen use during pregnancy. Melanie Barr, MSN, RN, presents the latest information on AB 144 implementation and current respiratory vaccine recommendations.



[Click here to view webinar](#)

or paste in browser:

<http://publichealth.lacounty.gov/cme/PrenatalImmunization>

*Missed the webinar on 10/12/2025? Available now on demand with free CME credits!*

## Pediatric Immunization Webinar

### Webinar Overview

The session featured key updates from the Los Angeles County Department of Public Health and a special guest presentation, providing participants with timely information and practical guidance to support immunization efforts across Los Angeles County. The webinar covered several pressing pediatric topics, including the latest respiratory virus trends, brief ACIP updates, the infant botulism outbreak linked to formula, and evidence-based strategies for addressing autism-related vaccine concerns.

**When available, find access to the [webinar here](#).**

*Missed the webinar on 12/10/2025? Coming soon on demand with free CME credits!*

## LA County DPH: Monthly Vaccine Provider Office Hours

### First Wednesday of Each Month (9:00-10:00am PT)

Monthly Office Hours provide vaccine providers and immunization partners with timely updates on immunizations. Each session covers rotating topics relevant to Los Angeles County, offering guidance, resources, and opportunities for discussion with VPDPCP staff.

[Register Here](#)