

September 7, 2023

OFFICE OF IMMUNIZATION

Washington State Department of Health

Dear Immunization Partners,

This is an update on the Washington State Department of Health's work to plan for nirsevimab release.

Nirsevimab is a new long-acting monoclonal antibody injection that is expected to be available starting in October. It is now recommended for routine use to prevent respiratory syncytial virus (RSV) lower respiratory tract infection (LRTI) in

- All infants younger than age 8 months during their first RSV season.
- Children ages 8-19 months entering their second RSV season who are American Indian, Alaska Native, or at an increased risk for severe disease.

The Washington State Department of Health is taking steps in collaboration with the Washington Vaccine Association to include nirsevimab-alip (trade name Beyfortus) as part of the state's [Childhood Vaccine Program](#) so it is available for all eligible babies in Washington. The Childhood Vaccine Program increases vaccine access by providing publicly-purchased vaccines to enrolled providers. This allows providers to offer childhood vaccines at no cost to the patient.

We do have a technical challenge with the state law that is the foundation for the Washington Vaccine Association public/private partnership that supports our state universal purchase system. We are working collaboratively on both short- and long-term solutions and hope to have more specific information to share by late September.

While nirsevimab is not yet available through the Childhood Vaccine Program, we have the following updates to share:

- Nirsevimab is a monoclonal antibody injection and not a vaccine. ACIP voted to include this product on the routine childhood vaccine schedule on August 3.
- We've had discussions with Washington State Association of Local Public Health Officials, the Washington State Hospital Association, Washington Chapter of the American Academy of Pediatrics, and other partners to share updates and identify barriers.
- CDC is still developing its contract with the manufacturer of nirsevimab. We anticipate the availability of product from the contract as early as October.
- We're collaborating with the CDC and our immunization information system vendor to incorporate nirsevimab into the Washington Immunization Information System (WAIS). As our team gathers more information, we will provide guidance on reporting to the WAIS.
- We will have more information to share in late September.

Actions providers can take now:

- Prepare to have conversations with parents/guardians about nirsevimab. A direct recommendation from a trusted health care provider remains one of the most effective ways to increase acceptance and immunization rates.
- Ensure your facility is [enrolled with the Childhood Vaccine Program](#) now so that you are ready to order nirsevimab for eligible babies and children when it becomes available.
- Hospitals and birthing centers can establish procedures for administering nirsevimab to babies prior to discharge. They should document the dose given and coordinate with the infant’s primary care provider for continuity of care.
- Update Electronic Medical or Health Record (EMR/EHR) applications to add NDC, CVX, and CPT codes for nirsevimab. There may be challenges for partners currently exchanging data with the WAIS based on how their triggers are configured to send data. We recommend starting conversations with your system vendor on nirsevimab.
- Read clinical guidance for nirsevimab: [Use of Nirsevimab for the Prevention of Respiratory Syncytial Virus Disease Among Infants and Young Children: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023 | MMWR \(cdc.gov\)](#)

We understand the urgency and importance of having access to nirsevimab this respiratory disease season. We are working diligently through solutions and finalizing details.

We appreciate your patience and partnership. Please reach out to WAChildhoodVaccines@doh.wa.gov if you have questions.

Sincerely,

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Health



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