Iowa's
Vaccines for
Children
Program

SUMMER UPDATE WEBINAR

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VFC & Assessment Manager / Epidemiologist

July 23, 2025





Housekeeping

- ► All attendees are in "Listen Only" Mode
- ► Want to ask a question?
 - Type your question into the "Q&A" in the top area of your screen
 - Additional questions can be sent to <u>lowaVFC@hhs.iowa.gov</u>
- ► This webinar is being recorded. The recording and slides will be made available on https://hhs.iowa.gov/immunization/vfc
- ▶ Questions regarding the VFA Program?
 - Email <u>lowaVFA@hhs.iowa.gov</u>



Presentation Outline

- ▶ Programmatic Updates & Reminders
 - Upcoming Delivery Holds
 - Reminder: Children insured by Hawki are Not VFC Eligible
 - Changes to VFC Program and Operations Guide
 - 2024-25 and 2025-26 Respiratory Season Updates
 - VFC Re-Enrollment Due July 25, 2025!
- ► Improving Vaccination Rates
- ► Tips & Tricks to Avoid Common VFC Program Noncompliance Issues
 - 2024-25 Fiscal Year Summary
- ► Q&A Ask Your Questions!



Programmatic Updates & Reminders



Upcoming Delivery Holds

- Deliveries made by UPS & FedEx
- Review and update delivery hours with each order
 - Required to have at least one four-hour consecutive period on a day other than a Monday to receive shipments
 - Hours do not update in IRIS unless included on a submitted order
- Upcoming delivery holds this quarter:
 - August 29 and September 1
- McKesson may place temporary holds due to severe weather conditions in Iowa or at the warehouse site



Reminder: Children insured by Hawki are not VFC eligible

- Healthy and Well Kids in Iowa (Hawki) is a full coverage insurance plan
 - Health Plan: Wellpoint, Iowa Total Care, Molina Healthcare of Iowa
- Children insured by Hawki are NOT eligible to receive VFC vaccine





Update to Underinsured Definition

- ▶ **Underinsured**: the child has health insurance, but the insurance policy:
 - does not cover any ACIP-recommended vaccines,
 - does not cover all ACIP-recommended vaccines (i.e., underinsured for vaccines not covered),
 - (UPDATE) does not provide first dollar coverage for ACIPrecommended vaccines, which includes copays, coinsurance, or deductibles for vaccines and excludes co-pay for office visit or other services, or
 - covers ACIP-recommended vaccines but has a fixed dollar limit (or cap) for payment
 - The child is considered underinsured once the family's policy reaches the fixed dollar amount
- Eligible to receive vaccines only if they are served by a Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC) or Local Public Health Agency (LPHA)
- Matches VFA Program definition



Update to Separating Pediatric Vaccine Stock

- ▶ If a VFC Program provider serves and plans to vaccinate privately insured (non-VFC-eligible) populations, they should stock a separate vaccine supply for the specific vaccines they plan to offer non-VFC-eligible patients.
- ▶ CDC is not requiring VFC Program providers to maintain a full stock of all ACIP-recommended vaccines for non-VFC-eligible patients if they do not plan to offer all ACIP-recommended vaccines to this population. This guidance includes, but is not limited to, RSV monoclonal antibody products.
 - **Example:** VFC Program providers, including birthing hospitals, that serve both VFC-eligible and non-VFC-eligible patients indicated to receive RSV monoclonal antibody products are not required to maintain a separate stock of this product for any non-VFC-eligible patient they do not plan to immunize with this product.



Update to Separating Pediatric Vaccine Stock, Cont.

- ▶ Providers that plan to vaccinate any non-VFC-eligible patients should have a separate private inventory of vaccines for
 - Fully insured children
 - Children who are enrolled in Hawki
 - Other underinsured children (i.e., served by provider or facility that is not a federally qualified health center, rural health center, or LPHA)
- ► If a VFC provider does not carry privately purchased stock, they are not permitted to use VFC Program stock on non-VFC-eligible patients
- ► If a VFC provider does have privately purchased vaccines in addition to public vaccines, they must clearly separate these two stocks of vaccines



Advisory Committee on Immunization Practices (ACIP) – April 2025 Meeting

- GSK's MenABCWY vaccine (PENMENVY) may be used when both MenACWY and MenB are indicated at the same visit
 - Healthy person aged 16-23 (routine schedule) when shared clinical decision-making favors administration of MenB vaccine and
 - Persons aged ≥10 years who are at increased risk for meningococcal disease (e.g. because of persistent complement deficiencies, complement inhibitor use, or functional or anatomic asplenia)
- ► ACIP recommendation adopted by the HHS Secretary on June 25, 2025, and is now an official recommendation of the CDC.



Penmenvy Not Yet Available for VFC Program

- Penmenvy is not yet available to VFC Program providers
 - MenB component is Bexsero (GSK)
 - Iowa VFC Program will notify providers when it is available
- Penbraya is the only MenABCWY product currently available through the VFC Program
 - MenB component is Trumenba (Pfizer)
 - Existing inventory of Penbraya should continue to be administered according to ACIP recommendations



2024-25 & 2025-26 Respiratory Season Updates



Return 2024-25 Expired Influenza Vaccines

- ► Seasonal influenza VFC Program vaccines expired by June 30, 2025.
- ►VFC Providers are expected to return **all spoiled and expired VFC Program vaccines** as soon as possible within the first 30 days but not to exceed six months after expiration date
 - Return single dose syringes, unopened single dose vials, and unopened multi-dose vials to McKesson
 - Products in open boxes can be returned
- ► Nonviable Vaccine Return Instructions: IRIS contains functionality to manage nonviable vaccine returns, including notifications prompting providers to return nonviable VFC vaccines to McKesson
 - •All McKesson return label communications will come from UPS Quantum View pkginfo@ups.com



ACIP June 2025 Meeting: 2025-26 Influenza Vaccine Recommendations

- ►ACIP recommends individuals aged 6 months and older be vaccinated against flu each year, except for those who have contraindications.
 - Recommends updated vaccine strains for the 2025-26 season, as recommended by the FDA in March.
 - Recommendations include the live attenuated influenza vaccine (FluMist) for self- or caregiver administration (Not included in VFC Program)
 - Wider age indication for the Flublok cell-based vaccine for use in children as young as 9 years old. (Not included in VFC Program)



FluMist- Self/Caregiver Administrations Program

- ► AstraZeneca will launch FluMist with a self/ caregiver administration option for the 2025-2026 flu season
 - ► FluMist self/caregiver option will only be available through an online pharmacy
 - FluMist will continue to be available for administration by a healthcare provider
- ► FluMist prebooked through lowa HHS cannot be self/caregiver administered and must be administered for in-office use
 - ► CDC flu contracts with AstraZeneca for the 2025-26 season will not provide the option for self/caregiver administered vaccine



Return Expired 2024-25 COVID-19 Vaccines

- ►VFC Providers are expected to return all spoiled and expired VFC vaccines, including 2024-2025 COVID-19 vaccines, as soon as possible within the first 30 days but not to exceed six months after expiration date
 - Return single dose syringes, unopened single dose vials, and unopened multi-dose vials to McKesson
 - Products in open boxes can be returned, however opened multi-dose vials cannot be returned
 - Shipping label is only valid for 30 days
- ► Nonviable Vaccine Return Instructions



2025-26 COVID-19 Vaccine Strains

- ► FDA's Vaccines and Related Biological Products Advisory Committee met May 22nd and recommended continuation of with monovalent JN.1 lineage vaccine for 2025-2026 COVID-19 vaccines for use in the United States
- ▶ 2025-26 seasonal recommendations expected to be discussed during August/September ACIP meeting

2025-26 COVID-19 Vaccines VFC Program Policy

- ► COVID-19 vaccine has been added to the list of non-routine vaccines with updated guidance for stocking inventory of non-routine vaccines
- ► Given the unique considerations of COVID-19 vaccination, it may not be practical for all VFC providers to stock this vaccine for VFC-eligible patients
- ► Iowa VFC Program will identify accessible locations where VFC-eligible children can be referred
 - Locations and additional information will be communicated to VFC Program
 - VFC Program providers are still encouraged to carry COVID-19 vaccines to vaccinate their patient populations



Abrysvo (Pfizer) RSV Vaccine

- ► Abrysvo vaccine is now available through the VFC Program by request only for administration to VFC-eligible patients to protect infants from RSV
 - VFC eligibility criteria still apply
 - Specialty vaccine, most VFC Providers do not need to carry
 - To order: Add note in IRIS order requesting doses for eligible patients

▶ Recommendations:

- American College of Obstetricians and Gynecologists, CDC, and the Society for Maternal-Fetal Medicine recommend prenatal vaccination from September 2025 through January 31, 2026, of all pregnant women between 32 weeks and 36 weeks and 6 days of gestation with a single dose of RSV vaccine (Abrysvo, Pfizer)
- RSV vaccine can be co-administered with other recommended vaccines



New RSV Monoclonal Antibody Product - Enflonsia (Clesrovimab)

- ► Enflonsia (Clesrovimab), a long-acting monoclonal antibody, manufactured by Merck, for the prevention of RSV-associated lower respiratory tract disease
- ▶ Recommendations:
 - ACIP recommends 1 dose of Clesrovimab as an option for RSV protection in infants aged <8 months born during or entering their first RSV season
 - Can be co-administered with other recommended vaccines
- ► Enflonsia is not yet available to VFC Program providers
- ▶ lowa VFC Program will notify providers when it is available



Anticipated* Upcoming Respiratory Season Summary

- ► Influenza Vaccine:
 - First distribution scheduled August 11
 - Allocation model from CDC may not receive all prebooked doses at once
- ► COVID-19 Vaccine:
 - Ordering to start in fall (TBD)
 - More information from ACIP August/September meeting
 - Anticipate allocation model from CDC
- ► Maternal RSV Vaccine:
 - Ordering started in July, can use unexpired vaccine from previous seasons
 - Administration to start September 1
 - Anticipate allocation model from CDC, must request doses from VFC Program
- ► RSV monoclonal antibody products (Nirsevimab, potentially Clesrovimab)
 - Ordering to start in early August, can use unexpired vaccine from previous seasons
 - Administration to start October 1
 - Anticipate allocation model from CDC



VFC Re-Enrollment



VFC Program Re-Enrollment Due by July 25, 2025

- ► Each VFC Program provider is **required** to re-enroll in the VFC Program on an annual basis, which will occur July 7-25, 2025
- ▶ Part 1: Training:
 - Primary and back-up vaccine coordinators are required to complete two of CDC's "You Call the Shots" modules:
 - Vaccine Storage and Handling Jan 2025
 - Vaccines for Children (VFC) Jan 2025
- ▶ Part 2: Update IRIS Contacts & Complete Re-enrollment page:
 - In IRIS under "Edit Organization," review the generated VFC Patient Activity chart
 - Review and update the organization's contacts, including address and email, and providers practicing at the facility
 - Last step is to complete the VFC Re-enrollment form



VFC Program Re-Enrollment Due by July 25, 2025 con't

- Enrollment occurs in IRIS
 - Iowa VFC Program does not accept any paper forms
 - Do not fax or email forms to the lowa VFC Program
- Only IRIS Admin users have access to complete the VFC reenrollment:
 - To add additional Admin Users, complete the <u>IRIS Site</u> <u>Enrollment Form</u> and send to <u>IRISenrollment@hhs.iowa.gov</u>
- Failure to complete the re-enrollment process by July 25 will result in suspension and the inability to place VFC vaccine orders in IRIS
- Action: Complete Re-enrollment by July 25, 2025



Ensure Key Staff Have IRIS Admin Access

Recommendation:

▶ Primary & Back-up vaccine coordinators recommended to have IRIS Admin Access to complete VFC related activities

Action Step:

- ► Verify IRIS Admin Access
- ► Complete IRIS Authorized Site Agreement-Organization if primary or back-up coordinators do not have IRIS Admin Access

Key Staff Training

Requirement: Primary & Back-up vaccine coordinators required to complete two You Call the Shots Modules

- Vaccines For Children (VFC)
- Vaccine Storage and Handling

Action Steps:

- Ensure Primary & Back-up vaccine coordinators complete trainings
- Other clinic staff can complete the trainings, but not required



You Call the Shots

Now Available

Diphtheria, Tetanus, and Pertussis (DTaP) Mar 2024

Haemophilus influenzae type b (Hib) Jul 2023

Hepatitis A May 2023

Hepatitis B Feb 2024

Human Papillomavirus Jan 2024

Influenza Sept 2023

Meningococcal Jun 2024

MMR Jan 2023

Pneumococcal Jun 2024

Polio Sept 2023

Rotavirus Mar 2024

Tetanus, Diphtheria, and Pertussis (Tdap) Apr 2024

Understanding the Basics: General Best Practice Guidelines on Immunization Feb 2023

Vaccine Administration Mar 2023

Vaccines For Children (VFC) Jan 2025

Vaccine Storage and Handling Jan 2025

*VFC Program requirement

Varicella Oct 2024

Zoster Aug 2024





YOU CALL_THE

https://www.cdc.gov/immunization-training/hcp/you-call-the-shots/index.html



Updated Key Staff Contacts

Requirement: All changes in key staff must be communicated to Iowa Immunization Program

- ▶ IRIS Admin users can update Edit Organization Page
 - Primary, back-up, and vaccine delivery contacts

Action Steps:

Review contacts in IRIS Edit Organization page



VFC Program Re-Enrollment

VFC Program re-enrollment demonstration

- 1) Primary and back-up vaccine coordinators are required to complete two of CDC's "You Call the Shots" modules:
 - Vaccine Storage and Handling Jan 2025
 - Vaccines for Children (VFC) Jan 2025
- 2) IRIS: https://iris.iowa.gov/



Clinic Status Changes Must Be Reported

Clinic Status Reporting Requirement:

- ▶ VFC providers must communicate clinic status changes to the lowa VFC Program, including, but not limited to:
 - Permanent closures
 - Temporary closures
 - Moving locations
 - Anything that would affect delivery, storage or monitoring VFC vaccine

Action Steps:

Send email to <u>lowaVFC@hhs.iowa.gov</u> before clinic changes occur



Improving Vaccination Rates



CDC RSV Learning Collaborative for 2025–2026 Season Planning

- ► CDC RSV Learning Collaborative for 2025–2026 Season Planning: Preventing RSV Infection in AI/AN Children Through Partnerships and Early Planning.
- ► Session 1: RSV Vaccine Ordering and Planning for Nirsevimab Distribution
 - July 24, 2025 | 1:00 2:30 p.m. CT
 - Register here: RSV Learning Collaborative Session 1
- ► Session 2: Implementation Lessons and Best Practices for Increasing Uptake
 - July 30, 2025 | 1:30 3:00 p.m. CT
 - Register here: RSV Learning Collaborative Session 2



Measles Resources

- ► Action item: Healthcare providers should ensure children are current on routine immunizations, including MMR
- ► Measles Immunization Toolkit:
 - Post Copy with images
 - Social media image post 1
 - Social media image post 2
 - Social media image post 3
- ► Cases: Report Immediately by phone to Iowa HHS Division of Public Health, Center for Acute Disease Epidemiology (CADE) at (800) 362-2736 or after hours (515) 323-4360



ACOG's Maternal Immunization Social Media Toolkit

► ACOG's <u>Social Media Toolkit</u> is designed to provide health care professionals with ready-to-use social media messaging to promote the COVID-19, flu, RSV, and Tdap vaccines for pregnant patients, with messages that target both patient and clinician audiences.





LetsGetReal.org from Immunize.org

- Personal stories to convey important facts and plain language to debunk misinformation
- Information that is real, balanced, and unbiased
- Content in English and Spanish (Hablemos en serio)





Tips & Tricks to Avoid Common VFC Program Noncompliance Issues

Summer 2025 Activities



2024-25 Fiscal Year Summary

Ended Year with 598 Enrolled VFC Providers

- ► Completed 340 Provider Visits
 - 297 Compliance Site Visits
 - 30 Unannounced S&H Visits
 - 13 New Enrollment Site Visits



Complete the Annual Re-Enrollment!

Action Step: Complete your annual VFC Program re-enrollment today!



VFC Storage & Handling Plan

Requirement:

- Vaccine S&H Plan must be reviewed, signed, and updated at least annually
- Updated changes in standard operating procedures
 - Whenever S&H recommendations of vaccines are updated
 - New vaccines are added to inventory
- Update when change in staff that has responsibilities specified in the plan
- Update review date and signature on document

Action Step: Review clinic S&H Plan today with all immunization staff



Vaccine Administration Fee

Requirement:

- Maximum administration fee is \$19.68 per injection
- Non-Medicaid VFC-eligible patients who have no health insurance, are American Indian/Alaskan Native, or are underinsured (seen only at FQHC, RHC or LPHA)
- A vaccine administration fee shall not be charged to Medicaid eligible patient
- If patients unable to pay vaccine administration fee, administer vaccines and waive fee (do not bill after the date of service)

Action Step: Verify with clinic billing department the organization does not charge a vaccine administration fee exceeding \$19.68 per vaccine dose



Vaccine Wastage Reports



Health and Human Services

2024 Iowa VFC Program Highlights

Sample Clinic - A123456

Number of VFC Program Doses Administered (0-18Y)	6,500
Number of VFC Program Vaccine Doses Ordered	12,000
Monetary Value of Wasted ¹ VFC Program Vaccine	\$6,000

2024 Statewide VFC Program Totals

Doses Distributed	667,929
Doses Administered	538,717
VFC Program Vaccine Wastage - All Providers (Excluding COVID	4.38%
and Influenza Vaccine)	4.0070

- As of December 31, 2024, the Iowa VFC Program had 598 enrolled provider locations.
- All counties in Iowa have at least one VFC Program provider.
- 378,820 VFC-eligible patients were served by Iowa VFC Program providers in the 2024 calendar year.
- More than 47% of children in Iowa are VFC Program-eligible.

Thank you for your participation in lowa's VFC Program!

Provider-Specific Orders, Wastage & Returns Data (2024 Calendar Year)

Routine VFC Program Vaccines				
(Excluding COVID & Influenza Vaccine)				
6,000	Vaccine Order Total (Doses)			
40	Vaccine Wastage and Returns			
40	Total (Doses)			
	Percent Wastage Based on			
0.7%	Waste Reported and Doses			
	Ordered			
\$3,000	Estimated Cost of Wasted			
	Vaccines			

Seasonal VFC Program Vaccines			
(COVID & Influenza)			
6,000	Vaccine Order Total (Doses)		
40	Vaccine Wastage and Returns		
	Total (Doses)		
0.7%	Percent Wastage Based on		
	Waste Reported and Doses		
	Ordered		
\$3,000	Estimated Cost of Wasted		
	Vaccines		

 Wasted vaccine totals are the sum of all doses reported through IRIS using a vaccine waste or return code

Data through 1/1/2025



2025 Program Goals and Call to Action

CALL TO ACTION: Reduce VFC Program Vaccine Wastage

CDC sets the maximum vaccine wastage and returns threshold of no more than 5 percent per year.

Tips to reduce vaccine wastage:

Avoid Over-Ordering Vaccine

- Inventory on hand should not exceed two months' anticipated demand
- Use Doses Administered Reports to determine vaccine order quantities

Safeguard Vaccines

- In the event of a vaccine temperature excursion, follow the emergency vaccine storage and handling plan
- Do not discard or waste vaccine doses until viability guidance is received from vaccine manufacturers

Monitor Vaccine Inventory Expiration Dates

 If vaccine in inventory is due to expire in less than four months, contact the VFC Program at IowaVFC@hhs.iowa.gov to work on transferring vaccine doses

Review Influenza Vaccine Prebook

 Review doses administered data from the current season and patient population to forecast vaccine need

VFC Program Provider Goals

Report and Return Spoiled and Expired Vaccines to CDC

- Nonviable VFC Program vaccines should be returned for federal excise tax credit
- Consult the <u>Nonviable Vaccine Return</u> <u>Instructions</u> for guidance

Update Organizational Contact Information in IRIS

- Ensure Vaccine Delivery, Primary VFC Coordinator, Back-up VFC Coordinator and Medical Director information is updated when changes occur
- For assistance updating contact information on the IRIS Edit Organization Page, contact the IRIS helpdesk at 800-374-3958

Participate in Quarterly VFC Program Webinars

 Register for the remaining webinars in <u>May</u>, <u>July</u>, and <u>December</u> 2025

CDC requires the lowa VFC Program maintain a vaccine restitution policy to address instances of on-going provider negligence resulting in the wastage of VFC Program vaccines. lowa's <u>VFC Vaccine Restitution Policy</u> describes what is considered negligent behavior and situations that may require vaccine restitution.

Questions regarding provider level data may be directed to lowaVFC@hhs.iowa.gov.

Thank you for your continued support of the Iowa Vaccines for Children Program.



- Wastage reports sent to more than 560 VFC providers!
- Contact lowaVFC@hhs.iowa.gov with questions

Upcoming Data Quality Dashboard

Health and Human Services Public Health

IRIS Data at Rest Dashboard

Iowa Immunization Program

Test Facility A123456

1.2 - Patient middle name is present

83.0% Good 1.22 - Vaccine lot expiration date is present

99.0% Good

1.12 - Patient ethnicity is present

100.0% Good 1.23 - Vaccine eligibility code is present

95.0% Needs Improvement

1.13 - Patient phone number is present

85.0% Needs Improvement 2.10 - Vaccine administration code was administered at an improbable age

> 0.0% Good

3.1 - Administered vaccinations are entered into IRIS within one calendar day from administration date

100.0% Good 3.2 - Patient entry into IRIS less than 30 days from birth

98.0% Good

3.5 - Patient entry into IRIS > 60 days from birth

3.0% Good 3.8 - Administered dose entry into IRIS > 14 days from admin date

0.0% Good

Data from Iowa Immunization Registry (IRIS)

Cohort includes all children in IRIS 2 years of age or younger as of December 31, 2024



General Reminders & Resources



TagAlert Temperature Monitors in Refrigerated Coolers

- ► New temperature monitors (TagAlert) in shipments from McKesson
- ► TagAlert temperature monitors should be discarded and do not need to be returned to McKesson
- ► Each shipment includes a flyer with unpacking steps, TagAlert instructions, and cooler return instructions to assist staff responsible for receiving vaccine shipments



Action item: Upon opening the box, providers should IMMEDIATELY press the blue Stop and Start Button until the Stop Icon appears and then read the indicator status to determine if the appropriate temperature was maintained during transit



McKesson Vaccine Coolers

- ► Two types of qualified coolers are used:
 - EcoFlex96 reusable coolers are sent with all frozen and most medium, large, and extra-large refrigerated vaccine
 - KoolTemp coolers for most small refrigerated shipments

Action item:

- ► Refer to flyer provided in each cooler about whether and how to return the cooler for recycling/re-use
- ▶ Return all EcoFlex shippers and discard KoolTemp Cooler
- ▶ Do not included non-viable vaccines in these returns



EcoFlex Cooler
Must be returned
(label on inner flap of the box)

KoolTemp Cooler
Discard



2025 VFC Program Webinar Series

- ▶ Webinar from 12:00 -1:00 p.m. on
 - November19: https://events.gcc.teams.microsoft.com/event/574f4
 fb7-62f4-48e2-a07f-37b35b484023@8d2c7b4d-085a-4617-8536-38a76d19b0da
- Attendance is not required, but highly recommended, even for experienced VFC Program providers
- Webinars are recorded and can be found on Iowa VFC Program website: https://hhs.iowa.gov/immunization/vfc



2025 IRIS Webinars

- Topics will include:
 - IRIS inventory management
 - Mass vaccination
 - Reminder recall
 - Vaccine transfers
 - Document vaccine doses administered
 - Documentation of vaccine wastage
 - Patient search tips
 - How to unlock user accounts and reset user passwords
- Registration is required for each session via Teams
- 2025 IRIS Webinar Schedule
- Contact the IRIS Help Desk at 800-374-3958 with any questions

Tuesday, August 12, 12:00-1:00 p.m. Meeting ID: 267 109 516 465; Passcode: TR9gN7u9

Register here



VFC Program Resources

- ► Iowa HHS Immunization Program: https://hhs.iowa.gov/immunization
- ► VFC Program: https://hhs.iowa.gov/public-health/immunization/vfc
- Iowa HHS Immunization Materials: Online order form
- Iowa Public Health Tracking Portal Immunization Data: https://hhs.iowa.gov/data-reports/health-disease/immunization



New Iowa HHS Emails & Staff Directory

Immunization Program Directory					
Don Callaghan	Bureau Chief	515-473-8344	Don.Callaghan@hhs.iowa.gov		
Bethany Kintigh	Immunization Program Manager	515-201-4614	Bethany.Kintigh@hhs.iowa.gov		
Shelly Jensen	Immunization Nurse Consultant	515-423-3341	Shelly.Jensen@hhs.iowa.gov		
Emma Gelman	CDC Public Health Advisor	515-229-5080	Emma.Gelman@hhs.iowa.gov		
Hannah Reynolds	Epidemiologist	515-419-1142	Hannah.Reynolds@hhs.iowa.gov		
Karen Quinn	Immunization Services Contracts/Fiscal Liaison	515-537-8401	Karen.Quinn@hhs.iowa.gov		
IRIS Help Desk: 1-800-374-3958					
Kim Tichy	IRIS Coordinator	515-322-7780	Kim.Tichy@hhs.iowa.gov		
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Joseph Zehner	IRIS Trainer/Data Exchange Specialist	515-322-7797	Joseph.Zehner@hhs.iowa.gov		
Vaccines for Children Program: lowaVFC@hhs.iowa.gov					
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Matt Sharp	VFC Program Coordinator	515-201-3935	Matt.Sharp@hhs.iowa.gov		
Jenni Newton	VFC Program Vaccine Distribution Coordinator	515-601-1777	Jenni.Newton@hhs.iowa.gov		
Immunization Assessments					
Kelly Rooney-Kozak	Assessments/Adolescent Program Coordinator	515-201-6730	Kelly.Rooney-Kozak@hhs.iowa.gov		
John Fiedler	VFC Program/Nurse Consultant	515-954-9859	John.Fiedler@hhs.iowa.gov		
Brandy Rushing	VFC Program/Nurse Consultant	515-322-9704	Brandy.Rushing@hhs.iowa.gov		
Lindsey Dawson	VFC Program/Nurse Consultant	515-805-7964	Lindsey.Dawson@hhs.iowa.gov		
Kelli Smith	IQIP Assessments/Nurse Consultant	515-318-9530	Kelli.Smith@hhs.iowa.gov		
Phone: 1-800-831-6293 https://hhs.iowa.gov/immunization		Fax: 1-800-831-6292			



