STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

New Hampshire Medicaid Program

To: NH Medicaid Enrolled Providers

From: NH Division of Medicaid Services

Date: September 5, 2025

Subject: Respiratory Virus Immunization Health Alert Network Notification

Please see the attached notice of Respiratory Virus Immunization Updates from the New Hampshire Health Alert Network.

For additional information, please refer to the DHHS NH Health Alert Network website.

Thank you,

NH Medicaid Provider Relations

THIS IS AN OFFICIAL NH DHHS HEALTH ALERT

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DHHS.Health.Alert@dhhs.nh.gov
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Department of HEALTH & HUMAN SERVICES

Respiratory Virus Immunization Updates

Key Points and Recommendations:

- Discuss risks and benefits of respiratory virus immunizations with patients and parents/guardians, and recommend immunizations based on risk and shared clinical decision making – immunizations are particularly important for persons at greater risk of severe disease.

- Be aware of recent changes to CDC's Advisory Committee on Immunization Practices (ACIP) which may impact the U.S. childhood and adult immunization schedules.

- Reference and utilize evidence-based recommendations from professional and expert medical organizations, such as the recently released American Academy of Pediatrics (AAP) immunization schedule.

COVID-19 Vaccines:

- Discuss risks and benefits of COVID-19 vaccination with all patients 6 months of age and older (or their parents/guardians), and recommend vaccination with the updated 2025-2026 COVID-19 vaccine based on risk and shared clinical decision making (including patient preference for vaccination). Vaccination is particularly important for persons at greater risk of severe disease including:
  - Children 6 – 23 months old who may have low/no pre-existing immunity
    - See data presented by CDC
    - See recent publication (Free et al. Pediatrics 2025) showing that 58% of children 6 – 23 months of age hospitalized for COVID-19 had no underlying medical conditions
  - Adults ≥65 years old
  - Persons 2-64 years old who have a medical condition that places them at higher risk of severe COVID-19

- Federal HHS/CDC currently has no recommendation for COVID-19 vaccination during pregnancy, but providers should continue to recommend COVID-19 vaccination for pregnant women based on national guidance from the American College of Obstetricians and Gynecologists (ACOG) and the Society for Maternal Fetal Medicine (SMFM).
  - Data supports COVID-19 vaccination during pregnancy as safe and effective at protecting mothers and infants in the first few months of life due to passive transfer of maternal antibodies.

  - Numerous observational studies have found no associations between mRNA COVID-19 vaccination during pregnancy and adverse maternal, fetal, or neonatal outcomes.[1-33]
  - Safety is also supported by multiple systematic reviews and meta-analyses.[34-38]
  - Vaccination during pregnancy is associated with a lower risk of neonatal death, severe neonatal morbidity, and other adverse pregnancy and maternal outcomes.[8,11,19,21,23,25,26,30]

- COVID-19 vaccines for the 2025-2026 season will be based on monovalent JN.1 lineage, and FDA advised manufacturers to preferentially use the LP.8.1 strain.

- Multiple FDA-licensed COVID-19 vaccine products continue to be available.
  - Moderna has released a new mRNA COVID-19 vaccine (mNEXSPIKE) in addition to their original SPIKEVAX formulation.
    - mNEXSPIKE contains modified spike protein mRNA that elicits a similar or greater immune response compared with SPIKEVAX but is given at one-fifth the mRNA dose compared to SPIKEVAX in persons 12 years of age and older (10 mcg vs. 50 mcg) – see recent publication by Chalkias et al. Lancet Infect Dis 2025.

Respiratory Syncytial Virus (RSV) Immunizations:

- Three RSV vaccines are currently available for use in older adults:
  - GSK's Arexvy
  - Pfizer's Abrysvo
  - Moderna's mResvia

- The following persons are recommended to receive a single lifetime dose of one of the RSV vaccines:
  - Adults ≥75 years old (based on age alone)
  - Adults 50-74 years old who are at increased risk of severe disease

- Infants are recommended to be protected against RSV through:
  - Maternal vaccination during weeks 32 through 36 of pregnancy using Pfizer's Abrysvo vaccine, which is the only RSV vaccine approved and recommended for use during pregnancy

    OR
  - Infant administration of a long-acting RSV monoclonal antibody (nirsevimab or clesrovimab) in infants <8 months old born during or entering their first RSV season

- Maternal RSV vaccination during pregnancy and infant administration of a monoclonal antibody are not both typically recommended, but there are a few exceptions.

- Clesrovimab is a new long-acting monoclonal antibody for use in infants <8 months old and is similar to nirsevimab.
  - Only nirsevimab is also recommended for children 8-19 months old who are at increased risk of severe RSV disease and entering their second RSV season; clesrovimab is not approved or recommended for this indication.

- For more information, see CDC's Clinical Guidance for RSV Immunizations and Vaccines and MMWR publication about Use of Clesrovimab for Prevention of Severe RSV-Associated Lower Respiratory Tract Infections in Infants.

Influenza Vaccines:

- All persons ≥6 months old who do not have a contraindication are recommended to receive the annual updated influenza vaccine.

- The influenza vaccine for the upcoming 2025-2026 respiratory virus season will be trivalent and include protection against H1N1, H3N2 (updated component), and B/Victoria strains.

- The high-dose inactivated, recombinant, and adjuvanted inactivated influenza vaccines continue to be preferentially recommended for persons ≥65 years old.

- Persons 18-64 years old who are solid organ transplant recipients and who are taking immunosuppressive medications may receive either high-dose or adjuvanted inactivated vaccines as acceptable options.

- For more information, see CDC's MMWR publication about Prevention and Control of Seasonal Influenza with Vaccines.

Monthly Healthcare Provider Webinar:

- NH Division of Public Health (DPH) continues to host a healthcare provider webinar on the 2nd Thursday of each month from 12:00–1:00 pm EST. The next webinar is on **Thursday, September 11th**. Login information can be accessed online.

References:

1. Shimabukuro TT, Kim SY, Myers TR, et al. Preliminary Findings of mRNA Covid-19 Vaccine Safety in Pregnant Persons. N Engl J Med. 2021 Jun;384(24):2273-82. [PubMed link]
2. Kharbanda EO, Haapala J, DeSilva M, et al. Spontaneous Abortion Following COVID-19 Vaccination During Pregnancy. JAMA. 2021 Oct;326(16):1629-31. [PubMed link]
3. Wainstock T, Yoles I, Sergienko R, et al. Prenatal maternal COVID-19 vaccination and pregnancy outcomes. Vaccine. 2021 Oct;39(41):6037-40. [PubMed link]
4. Zauche LH, Wallace B, Smoots AN, et al. Receipt of mRNA Covid-19 Vaccines and Risk of Spontaneous Abortion. N Engl J Med. 2021 Oct;385(16):1533-35. [PubMed link]
5. Magnus MC, Gjessing HK, Eide HN, et al. Covid-19 Vaccination during Pregnancy and First-Trimester Miscarriage. N Engl J Med. 2021 Nov;385(21):2008-10. [PubMed link]
6. Theiler RN, Wick M, Mehta R, et al. Pregnancy and birth outcomes after SARS-CoV-2 vaccination in pregnancy. Am J Obstet Gynecol MFM. 2021 Nov;3(6):100467. [PubMed link]
7. Lipkind HS, Vazquez-Benitez G, DeSilva M, et al. Receipt of COVID-19 Vaccine During Pregnancy and Preterm or Small-for-Gestational-Age at Birth - Eight Integrated Health Care Organizations, United States, December 15, 2020-July 22, 2021. MMWR Morb Mortal Wkly Rep. 2022 Jan;71(1):26-30. [PubMed link]
8. Rottenstreich M, Sela HY, Roten R, et al. Covid-19 vaccination during the third trimester of pregnancy: rate of vaccination and maternal and neonatal outcomes, a multicentre retrospective cohort study. BJOG. 2022 Jan;129(2):248-55. [PubMed link]
9. Blakeway H, Prasad S, Kalafat E, et al. COVID-19 vaccination during pregnancy: coverage and safety. Am J Obstet Gynecol. 2022 Feb;226(2):236.e1-e14. [PubMed link]
10. Dick A, Rosenbloom JI, Gutman-Ido E, et al. Safety of SARS-CoV-2 vaccination during pregnancy- obstetric outcomes from a large cohort study. BMC Pregnancy Childbirth. 2022 Feb;22(1):166. [PubMed link]
11. Fell DB, Dhinsa T, Alton GD, et al. Association of COVID-19 Vaccination in Pregnancy With Adverse Peripartum Outcomes. JAMA. 2022 Apr;327(15):1478-87. [PubMed link]
12. Magnus MC, Örtqvist AK, Dahlqwist E, et al. Association of SARS-CoV-2 Vaccination During Pregnancy With Pregnancy Outcomes. JAMA. 2022 Apr;327(15):1469-77. [PubMed link]
13. Goldshtein I, Steinberg DM, Kuint J, et al. Association of BNT162b2 COVID-19 Vaccination During Pregnancy With Neonatal and Early Infant Outcomes. JAMA Pediatr. 2022 May;176(5):470-7. [PubMed link]
14. DeSilva M, Haapala J, Vazquez-Benitez G, et al. Evaluation of Acute Adverse Events after Covid-19 Vaccination during Pregnancy. N Engl J Med. 2022 Jul;387(2):187-9. [PubMed link]
15. Ruderman RS, Mormol J, Trawick E, et al. Association of COVID-19 Vaccination During Early Pregnancy With Risk of Congenital Fetal Anomalies. JAMA Pediatr. 2022 Jul;176(7):717-19. [PubMed link]
16. Fell DB, Dimanlig-Cruz S, Regan AK, et al. Risk of preterm birth, small for gestational age at birth, and stillbirth after covid-19 vaccination during pregnancy: population based retrospective cohort study. BMJ. 2022 Aug:378:e071416. [PubMed link]
17. Calvert C, Carruthers J, Denny C, et al. A population-based matched cohort study of major congenital anomalies following COVID-19 vaccination and SARS-CoV-2 infection. Nat Commun. 2023 Jan;14(1):107. [PubMed link]

18. Ibroci E, Liu X, Lieb W, et al. Impact of prenatal COVID-19 vaccination on delivery and neonatal outcomes: Results from a New York City cohort. Vaccine. 2023 Jan;41(3):649-56. [PubMed link]
19. Hui L, Marzan MB, Rolnik DL, et al. Reductions in stillbirths and preterm birth in COVID-19-vaccinated women: a multicenter cohort study of vaccination uptake and perinatal outcomes. Am J Obstet Gynecol. 2023 May;228(5):585.e1-e16. [PubMed link]
20. Kharbanda EO, Haapala J, Lipkind HS, et al. COVID-19 Booster Vaccination in Early Pregnancy and Surveillance for Spontaneous Abortion. JAMA Netw Open. 2023 May;6(5):e2314350. [PubMed link]
21. Piekos SN, Hwang YM, Roper RT, et al. Effect of COVID-19 vaccination and booster on maternal-fetal outcomes: a retrospective cohort study. Lancet Digit Health. 2023 Sep;5(9):e594-e606. [PubMed link]
22. Favre G, Maisonneuve E, Pomar L, et al. Risk of congenital malformation after first trimester mRNA COVID-19 vaccine exposure in pregnancy: the COVI-PREG prospective cohort. Clin Microbiol Infect. 2023 Oct;29(10):1306-12. [PubMed link]
23. Rottenstreich M, Rotem R, Wiener-Well Y, et al. Covid-19 third vaccination during pregnancy: maternal and neonatal outcomes-a retrospective study. Arch Gynecol Obstet. 2023 Oct;308(4):1197-1205. [PubMed link]
24. Woestenberg P, de Feijter M, Bergman JEH, et al. Maternal first trimester COVID-19 vaccination and risk of major non-genetic congenital anomalies. Birth Defects Res. 2023 Nov;115(18):1746-57. [PubMed link]
25. Jorgensen SCJ, Drover SSM, Fell DB, et al. Newborn and Early Infant Outcomes Following Maternal COVID-19 Vaccination During Pregnancy. JAMA Pediatr. 2023 Dec;177(12):1314-23. [PubMed link]
26. Norman M, Magnus MC, Söderling J, et al. Neonatal Outcomes After COVID-19 Vaccination in Pregnancy. JAMA. 2024 Feb;331(5):396-407. [PubMed link]
27. Jaswa EG, Cedars MI, Lindquist KJ, et al. In Utero Exposure to Maternal COVID-19 Vaccination and Offspring Neurodevelopment at 12 and 18 Months. JAMA Pediatr. 2024 Mar;178(3):258-65. [PubMed link]
28. Velez MP, Fell DB, Shellenberger JP, et al. Miscarriage after SARS-CoV-2 vaccination: A population-based cohort study. BJOG. 2024 Mar;131(4):415-22. [PubMed link]
29. Kharbanda EO, DeSilva MB, Lipkind HS, et al. COVID-19 Vaccination in the First Trimester and Major Structural Birth Defects Among Live Births. JAMA Pediatr. 2024 Aug;178(8):823-9. [PubMed link]
30. Barros FC, Gunier RB, Rego A, et al. Maternal vaccination against COVID-19 and neonatal outcomes during Omicron: INTERCOVID-2022 study. Am J Obstet Gynecol. 2024 Oct;231(4):460.e1-e17. [PubMed link]
31. Rowe SL, Sullivan SG, Muñoz FM, et al. COVID-19 Vaccination During Pregnancy and Major Structural Birth Defects. Pediatrics. 2025 Apr;155(4):e2024069778. [PubMed link]
32. Kayser A, Lohse L, Padberg S, et al. First trimester mRNA COVID-19 vaccination and risk of congenital malformation: a prospective observational Embryotox cohort study. Clin Microbiol Infect. 2025 Jun:S1198-743X(25)00291-5. [PubMed link]
33. Woestenberg PJ, Terpstra AW, van Hunsel F, et al. Comparison of Perceived Adverse Events After COVID-19 Vaccination Between Pregnant and NonPregnant Women Using Two Cohort Studies in the Netherlands. Birth Defects Res. 2025 Jun;117(6):e2490. [PubMed link]

34. Uta M, Craina M, Marc F, et al. Assessing the Impact of COVID-19 Vaccination on Preterm Birth: A Systematic Review with Meta-Analysis. Vaccines (Basel). 2024 Jan;12(1):102. [PubMed link]

35. Buekens P, Berrueta M, Ciapponi A, et al. Safe in pregnancy: A global living systematic review and meta-analysis of COVID-19 vaccines in pregnancy. Vaccine. 2024 Mar;42(7):1414-1416. [PubMed link]

36. Fernández-García S, Del Campo-Albendea L, Sambamoorthi D, et al. Effectiveness and safety of COVID-19 vaccines on maternal and perinatal outcomes: a systematic review and meta-analysis. BMJ Glob Health. 2024 Apr;9(4):e014247. [PubMed link]

37. Wang J, Deng Y, and W Wang. COVID-19 vaccination during pregnancy and adverse perinatal outcomes: a systematic review and meta-analysis. Trans R Soc Trop Med Hyg. 2024 Jul;118(7):405-425. [PubMed link]

38. Ciapponi A, Berrueta M, Argento FJ, et al. Safety and Effectiveness of COVID-19 Vaccines During Pregnancy: A Living Systematic Review and Meta-analysis. Drug Saf. 2024 Oct;47(10):991-1010. [PubMed link]

- For any questions regarding this notification, please call the NH DHHS, DPHS, Bureau of Infectious Disease Control at (603) 271-4496 during business hours (8:00 a.m. – 4:00 p.m.).
- If you are calling after hours or on the weekend, please call the New Hampshire Hospital switchboard at (603) 271-5300 and request the Public Health Professional on-call.
- To change your contact information in the NH Health Alert Network, please send an email to DHHS.Health.Alert@dhhs.nh.gov or visit https://nhhan.org/.

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Attachments: None