DEPARTMENT OF HEALTH

MnVFC Announcement

Date: September 25, 2025

To: MnVFC Providers

From: MnVFC Program

Re: New MnVFC Products Available, Update to Nonviable Reporting in MIIC

Please route to:
- Clinical supervisor
- Medical director
- Clinic manager
- Clinic staff
- Pharmacy
- Vaccine staff

Clesrovimab ordering

MnVFC providers can now place requests for clesrovimab (Enflonsia), Merck's new respiratory syncytial virus (RSV) monoclonal antibody (RSV-mAb) product, in the "2025-26 RSV Monoclonal Antibodies Phase I" special event in MIIC. Doses will begin shipping on Oct. 2.

Submit requests for doses you expect to use through October in this event. We will have another event to capture doses needed later in the season. If you realize you need more doses than you initially requested, you can submit additional requests for more doses at any time. We will process orders as we are given access to doses from the Centers for Disease Control and Prevention (CDC), so sites might receive a few small shipments throughout the initial rollout period. You can check the status of your requests at any time in MIIC.

If you are considering switching from nirsevimab to clesrovimab, you must first use up existing 50mg doses of nirsevimab in your inventory. We expect clesrovimab supply will be less than nirsevimab supply this season, so product substitutions are possible. If you cannot accept a substitution, please indicate that in the "special delivery instructions" section when submitting your request.

Clesrovimab is only available in 105mg doses. A single dose is given regardless of weight. Keep in mind that clesrovimab is only recommended for infants in their first RSV season. Nirsevimab is the only RSV-mAb product recommended for children (ages 8–19 months) who are at increased risk for severe RSV disease and entering their second RSV season. Both RSV monoclonal antibody products are recommended to be administered October through March.

Penmenvy available on routine order form Oct. 1

Penmenvy, GSK's new MenABCWY (pentavalent meningococcal) vaccine, will be available through the MnVFC program starting Oct. 1. It is available in single dose vials, and it will be on the routine ordering form in MIIC starting Oct. 1.

Pentavalent or MenABCWY vaccines are a combination of MenACWY and MenB vaccines. The pentavalent vaccine can be used when BOTH MenACWY and MenB are due at the same visit. Generally, this would be given at the 16-year-old visit when they are getting their second MenACWY and their first MenB vaccines. A second dose of MenB should be given 6 months later.

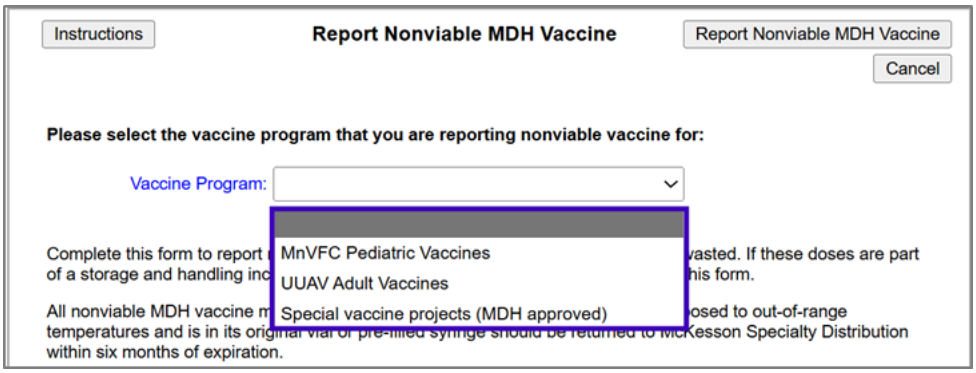
It is important to remember that the Men B vaccine series is manufacturer specific, and the MenB products are NOT interchangeable.

- If Penbraya (Pfizer's MenABCWY) was given at 16 years, Trumenba (Pfizer's MenB) should be given at least 6 months later.
- If Penmenvy (GSK's MenABCWY) was used, Bexsero (GSK's MenB) should be given at least 6 months later.

Update to nonviable reporting in MIIC

Sites will now select a MDH vaccine program (e.g., MnVFC or UUAV) when reporting nonviable vaccine in MIIC. Sites should select the program that supplied the nonviable vaccine. This change will help us better manage our vaccine programs and give us more insight into vaccine returns and wastage trends.

The new field is on the first screen of "report nonviable vaccine" in MIIC:



Field options include:

- MnVFC Pediatric Vaccines: use to report nonviable vaccine ordered through the MnVFC program.
- UUAV Adult Vaccines: use to report nonviable vaccine ordered through the UUAV program.
- Special vaccine projects (MDH approved): use to report nonviable vaccine ordered for a special project as directed by MDH, such as an outbreak response.

Going forward:

- **Select** a vaccine program for every nonviable form in MIIC.
- **Submit** separate nonviable forms for MnVFC vaccine and UUAV vaccine.
- **Separate** vaccine by program (MnVFC and UUAV) once you have deemed it nonviable. This will make it easier to fill out the form by vaccine program when you are reporting nonviable vaccine.

If you currently have nonviable vaccine that is not separated by vaccine program and you don't know how to report it in MIIC, reach out to us for guidance.

MnVFC Program
651-201-5522 or 1-800-657-3970
www.health.state.mn.us/vfc
health.mnvfc@state.mn.us