

Steering Committee Agenda

May 14, 2025 | 12:00pm-1:30pm

Welcome	Jim McPherson
Executive Update.....	James Washington
ADHS Update.....	Nicole Witt and Nicole Clapeck
ACIP Updates.....	Dr Joel Terriquez
County Updates	
• Maricopa County.....	Machrina Leach, RN
• Pima County.....	Crystal La Tour Rambaud MPH, RN
Legislative Wrap Up.....	Susie Cannata
Advocacy Update.....	Ashley Chambers
Communication Messaging	Karin Szymanski
TIPS Training.....	Karin Szymanski

NEXT MEETING DATE:

Steering Committee Meeting
Virtual only
July 9, 2025
12:00pm - 1:30pm

Steering Committee

May 14, 2025
12pm-1:30pm



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Welcome & Introductions

Jim McPherson
TAPI



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Executive Update

James Washington
TAPI



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TAPI Updates

Staffing update: Laura Smith, Program Manager

- Training Immunization Practice Strategies (TIPS)
- 10 Things trainings
- AZ School Immunization Coalition

Please contact us as needed: tapiadmin@tapi.org

Federal Administration changes

- Monitoring impact of HHS cuts on state and federal partners
- Coordinating resources: AAP, ACOG, NNIC
- TAPI messaging: back to basics, importance of vaccines



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Presidential Budget Proposal

- CDC**
 - Decreases CDC's budget by 48% going from \$7.6B to just \$4B.
 - Eliminates the:
 - National Center for Chronic Disease Prevention & Health Promotion
 - National Center for Environmental Health
 - National Center for Injury Prevention and Control
 - Global Health Center
 - Public Health Preparedness and Response
 - Preventive Health and Human Services Block Grant
- HRSA**
 - The budget decreases HRSA from \$7.6B to just \$6B.
 - The budget includes a:
 - \$74M decrease in funding for Ryan White HIV/AIDS program activities that do not focus on core health care and support services directly to patients, such as education and training.
 - \$274M decrease in funding for MCH.
 - \$115 decrease in funding for health workforce programs that provide scholarships and support for individuals to enter "high-paying medical careers."
 - \$285M decrease in funding for Title X Family Planning programs.
- ASPR**
 - Decreases funding by \$240 million for ASPR.
 - Eliminates funding for ASPR's Hospital Preparedness Program.
- Other HHS Programs**
 - Eliminates the Sexual Risk Avoidance Program.
 - Eliminates the Teen Pregnancy Prevention program.
 - Reduces funding levels for the HHS Office of Minority Health and Office on Women's Health.

For more information view the [FY26 budget proposal](#)

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TAPI Updates



EQUALITY HEALTH

Partnerships:

- Molina Health Care-Outreach
- Equality Health-CHWs
- STC-MyIR and VFC map



Multiple opportunities to collaborate

karins@whyimmunize.org

jamesw@tapi.org



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Big Shots for Arizona Awards Ceremony

30 years of Science, Education and Advocacy

- 110 Cloud Awards, representing 70 practices
- 20 Big Shot Awardees
- Approximately 250 attendees



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Big Shots for Arizona Awards Ceremony



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ADHS Update

Nicole Witt & Nicole Clapeck
ADHS



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ADHS Update

Joel Terriquez, MD
ADHS



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ARIZONA

Infectious diseases

ACIP updates

Joel A. Terriquez, MD, FIDSA, CIC, AL-CIP, SQIL
Northern Arizona Healthcare

ADHS- Bureau of Infectious Diseases Services/Bureau of Immunizations Services

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Measles outbreak

- As of 5/1/2025, a total of **935 confirmed measles cases** were reported by **30 jurisdictions**:
 - Alaska, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Missouri, Montana, New Jersey, New Mexico, New York City, New York State, Ohio, Oklahoma, Pennsylvania, Rhode Island, Tennessee, Texas, Vermont, Virginia, and Washington.
- There have been **12 outbreaks** (defined as 3 or more related cases) reported in 2025, and 93% of confirmed cases (869 of 935) are outbreak-associated.

U.S. Cases in 2025

Total cases

935

Age

Under 5 years: 285 (30%)

5-19 years: 353 (38%)

20+ years: 284 (30%)

Age unknown: 13 (1%)

Vaccination Status

Unvaccinated or Unknown: 96%

One MMR1 dose: 2%

Two MMR1 doses: 2%

U.S. Hospitalizations in 2025

13%

13% of cases hospitalized (121 of 935).

Percent of Age Group Hospitalized

Under 5 years: 23% (66 of 285)

5-19 years: 8% (30 of 353)

20+ years: 8% (23 of 284)

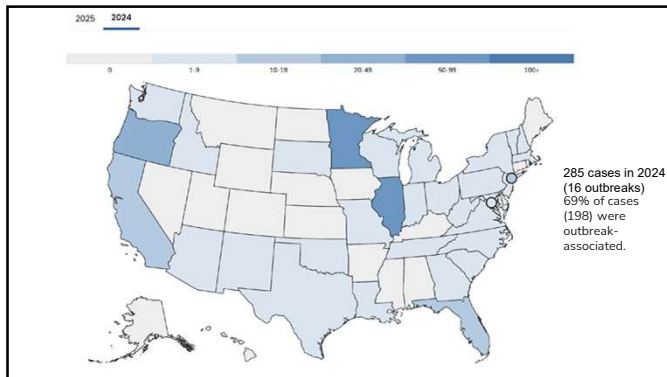
Age unknown: 15% (2 of 13)

U.S. Deaths in 2025

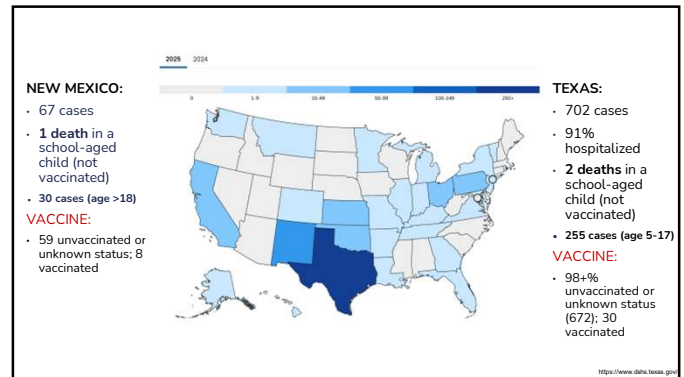
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There have been 3 confirmed deaths from measles.

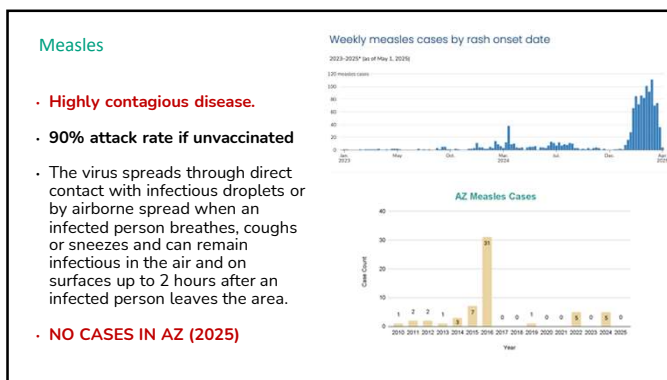
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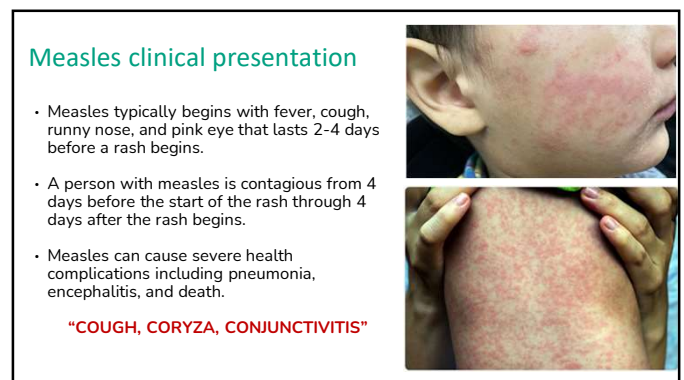
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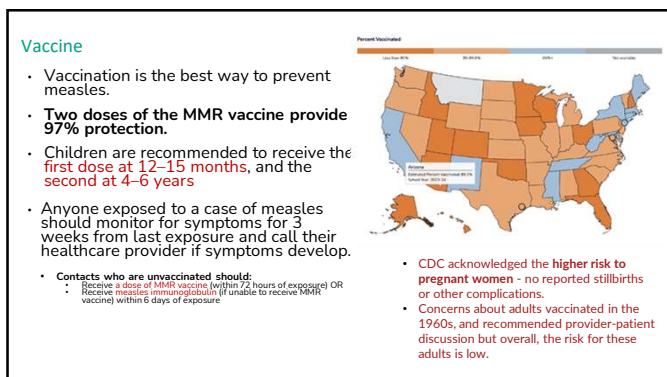
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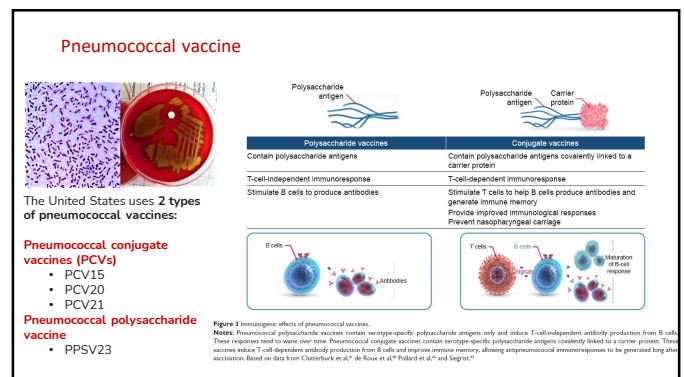
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Indications

Infants and Children

- **Routine vaccination:** All children younger than 5 years old.
- Administer a 4-dose PCV series (PCV15 or PCV20), **1 dose at each of the following ages:**
 - 2 months
 - 4 months
 - 6 months
 - 12 through 15 months



Adults

- **Routine vaccination:** PCV15, PCV20, or PCV21 for all adults 50 years or older
 - Who have never received any pneumococcal conjugate vaccine
 - Whose previous vaccination history is unknown
- If PCV15 is used, administer a dose of PPSV23 one year later.
 - 8 weeks in adults with: CSF leak, cochlear implant, immunocompromising conditions
- If PCV20 or PCV21 is used, a dose of PPSV23 isn't indicated (pneumococcal vaccinations are complete).
- Based on shared decision-making: Adults **65 years or older** have the option to get PCV20 or PCV21, or to not get additional pneumococcal vaccines.
- They can get PCV20 or PCV21 if they have received both:
 - PCV13 (but not PCV15, PCV20, or PCV21) at any age and
 - PPSV23 at or after the age of 65 years old

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Pneumococcal vaccine

- The workgroup plans to review evidence to inform use of **new pneumococcal conjugate vaccines in the US in both adults and children.**
- There is currently **no recommendation for pregnant women** who have underlying conditions that increase the risk for pneumonia.
- There is no clinical guidance for PCV21 in hematopoietic stem cell transplant recipients
- Plan to submit a summary of findings during the June ACIP meeting.

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Meningococcal vaccine

- ACIP recommends GSK's **MenABCWY vaccine** may be used when both MenACWY and MenB are indicated at the same visit
 - 1) Healthy person aged 16-23 (routine schedule) when shared clinical decision-making favors administration of MenB vaccine
 - 2) 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)

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RSV

- ACIP recommends adults **50-59 years of age who are at increased risk of severe RSV disease** **receive a single dose of RSV vaccine**
- CDC will publish Clinical Considerations that describe chronic medical conditions and other risk factors for severe RSV disease for use in this risk-based recommendation.
- RSV vaccination is currently recommended as a single dose only.
- Persons who have already received RSV vaccination – **no recommendation to receive another dose.**

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HPV vaccine

- HPV vaccination is recommended at age 11 or 12 years. Vaccination can be given starting at age 9 years. Catch-up vaccinations- through age 26 years. 2 doses if starting series before age 15; 3 doses if starting series >15 years old (or if immunocompromising condition).
- There is growing evidence on the efficacy of HPV vaccination with fewer doses (reviewing data to inform policy for two doses for persons aged 15 years and older and one dose for persons aged 9 years and older).
- Updated information on trials of interest → high efficacy against infection with one dose, including up to 92% after 12 years.
- A randomized trial (the KEN SHE Study) found that **the single dose HPV vaccination is highly efficacious, with 98% vaccine efficacy for HPV 16/18** (reduction of cervical cancer and HPV incidence) → Workgroup anticipates voting on a change to the recommendation to one-dose at the 6/2025 meeting.

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CMV vaccine

- The Cytomegalovirus (CMV) portion of ACIP opened
- The epidemiology of CMV and cCMV is complex, in the United States, nearly 75% of cCMV infections due to primary maternal infection, and an effective CMV vaccine could reduce cCMV disease burden
- **mRNA-1647:** Investigational CMV Vaccine → safe and immunogenic in phase 1 and 2 studies, efficacy data on prevention of primary CMV infection in CMV-seronegative women 16-40 years of age
- Ongoing phase 3 trial expected next year
- Need to ensure protection against CMV infection before pregnancy to reduce vertical transmission.



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Chikungunya

- ACIP recommends virus-like particle chikungunya vaccine (CHIK-VLP) for persons aged ≥ 12 years traveling to a country with a chikungunya outbreak.
- May be considered for a person aged ≥ 12 years traveling or taking up residence in a country or territory without an outbreak (but with elevated risk if traveling for 6 months or more).
- ACIP recommends virus-like particle chikungunya vaccine (CHIK-VLP) for laboratory workers with potential exposure to chikungunya virus.
- ACIP recommends live attenuated chikungunya vaccine (CHIK-LA) for persons aged ≥ 18 years traveling to a country with a chikungunya outbreak.
- Live attenuated chikungunya vaccine may be considered for persons aged ≥ 18 years traveling or taking up residence in a country or territory without an outbreak (but with elevated risk if traveling for an extended period of time) - 6 months or more.
- Age ≥ 65 is a precaution for use of CHIK-LA

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Mpox (Jynneos)

- Proposed recommendations would extend current recommendations to 12–17-year-old adolescents.
- Proposed Recommendation 1:** ACIP recommends the 2-dose JYNNEOS vaccine series for persons 12–17 years of age at risk of mpox during an mpox outbreak
- Proposed Recommendation 2:** ACIP recommends vaccination with the 2-dose JYNNEOS vaccine series for persons aged 12–17 years at risk for mpox; risk factors listed are the same as adult recommendation.
- Phase 2 randomized, open-label, multisite trial → Well tolerated and immunogenic: Local reactions were similar between adolescents and adults (injection site nodules -37% of adolescents, 59% of adults- and discoloration -17% of adolescents, 28% of adults-).
- Dizziness was reported more frequently in adolescents than adults. Almost all reports of dizziness were within one day of vaccination.
- The **adolescent antibody response on day 43 was non-inferior to adults** (seroconversion in adolescents=adults).

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Influenza

- FDA made recommendations for the composition for the influenza vaccine for the 2025–26 influenza season which included an update to the H3N2 component.
- Flu mist was given FDA approval on September 20, 2024, and it is expected to be available for the 2025–26 influenza season.

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Lyme disease

- Introduction on the Lyme disease vaccine work group.
- A multivalent recombinant protein vaccine, VLA15, is currently in Phase 3 clinical trials and mRNA vaccine candidates are in early clinical trials.
- The ACIP Lyme Disease workgroup will review the following: the burden of the disease, data about risk, safety, immunogenicity, efficacy data, and economic analysis. They will develop vaccination policy options and identify areas where additional data are needed.

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COVID-19

- Moderna provided an update on their next-generation COVID-19 vaccine, mRNA-1283. Risk factors for severe COVID infection, specifically advancing age and pre-existing conditions, is the basis for development of this new COVID-19 vaccine.
- 2025-2026 COVID-19 vaccine** → A multi-dose initial series is currently recommended for people ages 6 months–4 years and people with immunocompromise. The workgroup is considering 2 policy revisions:
 - Option 1:** Maintain a universal vaccine policy for everyone >6 months that includes the multi-dose initial series
 - Option 2:** Narrow current vaccine recommendations and only maintain this series for certain populations within these groups who we determine should be vaccinated
- Annual vaccines are currently recommended for everyone ages 6 months and older. The workgroup is considering 3 policy revisions:
 - Option 1:** Maintain a universal vaccine policy for everyone ages 6 months and older
 - Option 2:** Risk-based recommendation only for groups at increased risk of severe COVID-19
 - Option 3:** Combination of risk-based and universal vaccine recommendations (e.g., risk-based recommendation for 6 months–64 years and universal recommendations for ages 65 years or older)

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THANK YOU

Dr. Joel Terriquez | joel.terriquez@azdhs.gov
Bureau of Infectious Disease Services
Bureau of Immunizations Services



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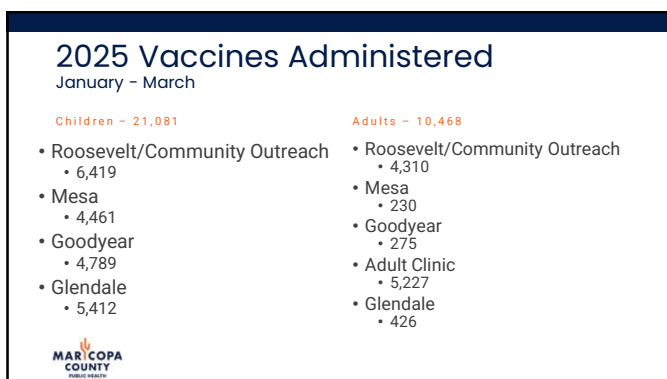
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Glendale Flyer



Glendale Public Health Center

The Maricopa County Department of Public Health is thrilled to bring new services to the Glendale community.

Location: 5141 W. Lamar Road, Glendale, AZ 85301

Services and Hours of Operation

	Monday	Tuesday	Wednesday	Thursday	Friday
Immunizations	8am-5pm	8am-5pm	8am-5pm	8am-5pm	8am-5pm
STI Services	8am-5pm	8am-5pm	8am-5pm	8am-5pm	8am-5pm
Closed daily 8pm-5pm					

For vaccine appointments please call (602) 508-6767.
For STI appointments please call (602) 508-6078 and choose option 3, walk-in welcome.

	Monday	Tuesday	Wednesday	Thursday	Friday
Vital Records	8am-4:30pm	8am-4:30pm	8am-4:30pm	8am-4:30pm	8am-4:30pm
WISC*	8am-6:30pm	7:30am-4pm	7:30am-4pm	7:30am-4pm	Closed

*Vital Records open from 8am-5pm
For vital records, certification/consentments by appointment only, please call (602) 508-6808.

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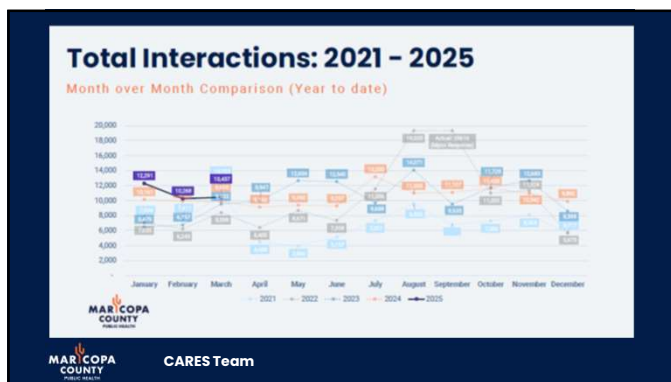
Mesa will be soon





- June 2025
- Full Service Public Health Clinic
- Immunizations
- STI
- WIV
- Vital Records

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Thank You!!

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County Update

Crystal Rambaud, RN

Pima County





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Pima County Immunization Program Highlights

Crystal La Tour Rambaud MPH, RN
VPD Program Manager

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5 years of Vaccine Equity

Small team, HUGE impact!!!



- Provided 4,629 COVID-19 vaccines
- Provided 1,147 flu vaccines in addition to Hep A, mpox, Tdap etc
- Attended 447 events
- Served over 12,700 community members
- Distributed over 17,700 COVID-19 test kits



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The team supported early COVID-19 testing, treatment, and vaccines, assisted clinics with documentation, staffed border operations, completed homebound vaccines, attended the Roots Conference 3 times, staffed the Cooltainer initiative, helped disseminate the Long COVID campaign, staffed back to school vax clinics, formed partnerships with countless community partners, and so much more!



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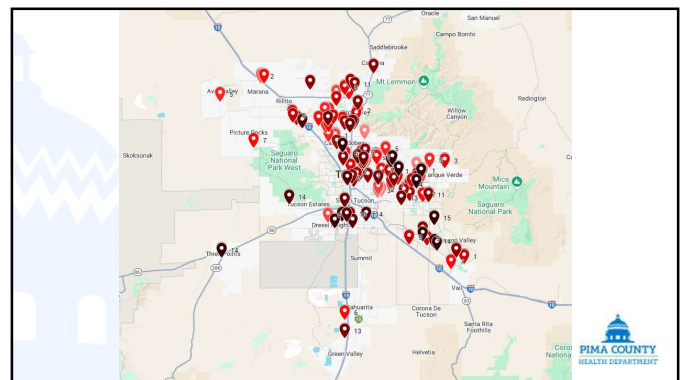
Measles Prevention

Planning for Protection

- Objective
 - To increase MMR (measles, mumps, and rubella) vaccination in school-aged children in Pima County (< 95% MMR uptake) by deploying PCHD mobile units preferentially to schools with the lowest rates of measles immunization and the lowest rates of vaccine exemptions.
- ~156 schools with less than 95% MMR coverage
- Schools will be divided amongst three PCHD offices and mobile services will be offered over several months



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Other VPD Updates

New addition to the team – Kacie Perez Jimenez

Move to Northwest Service Center set for mid-June

Emergency preparedness improvement efforts continue



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Questions?

Crystal.Rambaud@pima.gov

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Advocacy Update

Susie Cannata
Peters, Cannata & Moody, PLC



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Bills to watch ① EUA exemptions HB2012 ② Requirements for employers HB2055 ③ Parents rights vaccine HB2126 ④ College exemptions HB2058 ⑤ Notification exemptions HB2063 ⑥ DCS Vaccine placement HB2257 ⑦ Advertising requirements HB2199 ⑧ Refusal of care HB2707	Updates - 05/14/2025
Resources <ul style="list-style-type: none"> TAPI 2025 Bill list link TAPI SharePoint drive with talking points, bills, and weekly legislative updates link Sign up for TAPI's Advocacy Committee to follow immunization legislation link Arizona Families for Vaccines (grassroots advocacy) link How to guide for AZ's Request to Speak to enter support/opposed slips link AZ Legislature bill search link AZ Legislature 2025 Member Roster link AZ Legislature live feed schedule link 	Bills Not Moving Forward <ul style="list-style-type: none"> HB2055 Vaccine requirements/exemptions HB2199 Advertising; requirements HB2707 Refusal of care

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Bills to watch ① EUA exemptions HB2012 ② Requirements for employers HB2055 ③ Parents rights vaccine HB2126 ④ College exemptions HB2058 ⑤ Notification exemptions HB2063 ⑥ DCS Vaccine placement HB2257 ⑦ Advertising requirements HB2199 ⑧ Refusal of care HB2707	Updates - 05/14/2025
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Advocacy Update <p>Ashley Chambers Arizona Families for Vaccines</p>
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Communications

Karin Szymanski
TAPI



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Social Media and Messaging

National to local – Vaccinate Your Family, Voices for Vaccines and more...



Monthly Highlights

Tracking mis-information



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Social Media and Messaging

National to local – Vaccinate Your Family, Voices for Vaccines and more...



Keep an eye on our social and help us boost these important messages.



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Measles

Measles cases in 2025

Resources for Communities with a Measles Outbreak:

- [Sample Community Letter About Measles](#) [PDF]
- [Be Ready for Measles Toolkit](#) [PDF]
- [There's a Current Outbreak of Measles](#) [PDF]
- [Be Ready for Measles Toolkit](#) [PDF]
- [Be Ready for Measles Toolkit](#) [PDF]

For Providers: Caring for Patients with Measles Fact Sheet

As of May 8, 2025, a total of 1,001 confirmed¹ measles cases were reported by 33 jurisdictions: Alaska, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Missouri, Montana, New Jersey, New Mexico, New York City, New York State, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, Tennessee, Texas, Vermont, Virginia, and Washington.

There have been 14 outbreaks (defined as 3 or more related cases) reported in 2025, and 83% of confirmed cases (828 of 1,001) are outbreak-associated. For comparison, 16 outbreaks were reported during 2024 and 69% of cases (138 of 200) were outbreak-associated.

¹NOTE: CDC is aware of probable measles cases being reported by jurisdictions. However, the data on this page only includes confirmed cases [2].

On this page

Measles cases in 2025

What to know about measles

Weekly measles cases by week number

Map of measles cases in 2024 & 2025

Weekly measles cases

History of measles cases

MMWR vaccine coverage for kindergarten

Previous years

Learn more



Updated on May 9, 2025. The data on this page reflects confirmed measles cases reported to CDC as of noon on Thursdays.



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Measles

Map of measles cases in 2024 & 2025

as of May 8, 2025



Map of measles cases in 2024 & 2025

as of May 8, 2025



Measles Cases and Outbreaks | Measles (Rubella) | CDC



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Measles

OUTBREAK INFORMATION

MEASLES

Arizona Department of Health Services (ADHS)

- ADHS Measles Website
- Reporting Measles Cases
- Measles News Release

CDC:

- Measles cases and outbreak numbers
- Be Ready for Measles Toolkit
- Measles (Rubella)
- Measles Vaccine Recommendations

MEASLES RESOURCES FOR MEDICAL PROVIDERS:

- TAPI Measles Signs and Symptoms Page
- ADHS Measles Clinician Resources
- ADHS Measles Clinician FAQs
- NACCHO 2022 Measles Outbreaks: Resources and Updates for Local Health Departments
- ADHS Measles Surveillance Toolkit for Healthcare Settings
- CDC - Is that just a little rash - Testing for Clinicians
- CDC - Measles Clinical Diagnostic Fact Sheet

How to Spot Measles

How to Spot Measles

What Does the Rash Look Like?

A red, blotchy rash with bright red spots that spread from the face and upper body.

What Are Symptoms of Measles?

- Fever
- Cough
- Runny nose
- Red, watery eyes
- Rash

It's all of unvaccinated people exposed to measles who become infected.

Measles Information

Measles is a highly contagious virus that spreads through the air. You can catch it from someone who has the virus, even if they don't show any symptoms. The virus can also be found in saliva and urine. Measles is a leading cause of death in children under 5 years old in many countries.

Think you have measles?

If you have a fever, cough, runny nose, and a red, blotchy rash, you may have measles. Call your doctor or local health department for more information.



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Measles Webinars



Measles 2025: The State of the Outbreak

A slide from a webinar presentation.

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TIPS trainings

Karin Szymanski
TAPI



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Summer TIPS



Free Training!
TIPS 2025
 Training on Immunization Practice Standards, Immunization Programs & Vaccine Administration

Immunity Games:
 Play, Protect, Prevent

DATES & LOCATIONS
 Check-in at 8:30 AM | Training ends at 4:00 PM

YUMA - May 28
TUCSON - June 5
PHOENIX WEST - June 18
FLAGSTAFF - July 17
PHOENIX EAST - July 24

TAPI sponsors free trainings that improve immunization practices for public and private providers.

Participants will get useful insights into:

- Why we immunize
- Vaccine basics
- Understanding the ACP Schedule
- Vaccine administration
- Vaccine Best Practices
- Overcoming obstacles
- The state immunization registry
- and MUCH MORE!

REGISTER NOW!
 The Arizona Partnership for Immunization
WhyImmunize.org

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Summer TIPS



DATES & LOCATIONS
 Check-in at 8:30 AM | Training ends at 4:00 PM

YUMA - May 28
TUCSON - June 5
PHOENIX WEST - June 18
FLAGSTAFF - July 17
PHOENIX EAST - July 24

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LUNCH IS PROVIDED!

REGISTER NOW!
 The Arizona Partnership for Immunization
WhyImmunize.org

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Summer TIPS



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Summer TIPS

Please Help Support TIPS This Year!



SPREAD THE WORD TO
YOUR OWN ORGANIZATION



THINK ABOUT PARTNER
ORGANIZATIONS THAT HAVE
STAFF THAT COULD BENEFIT
FROM THIS TRAINING



SHARE THE FLYER



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Thank You!

Next Steering Committee Meeting Virtual only

July 9, 2025
12pm-1:30pm



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