



Dr. Charles Gardner, Medical Officer of Health Dr. Colin Lee, Associate Medical Officer of Health Dr. Lisa Simon, Associate Medical Officer of Health

2025/2026 COVID-19 Vaccine Program

Attention: Physicians, Nurse and Nurse Practitioners, Walk-In Clinics/Urgent Care Clinics, Infection

Prevention & Control Practitioners, Hospital Pharmacies, Hospital Occupational Health Nurses, Midwives, EMS, Community Health Centres, Family Health Teams, Ontario Health Central, Indigenous Health Care & Community, Corrections Facilities, Participating Health Care Agencies, Participating Community Pharmacies, Long-Term Care

Facilities, Retirement Homes

Date: September 19, 2025

Ontario's COVID-19 vaccine program has transitioned to an annual program, in alignment with the Universal Influenza Immunization Program (UIIP). To support this transition, the eligibility criteria for the COVID-19 vaccine program are now aligned with the UIIP (i.e., anyone 6 months of age and older who lives, works, or goes to school in Ontario).

The National Advisory Committee on Immunization (NACI) recommends individuals receive the updated COVID-19 vaccine annually. An annual updated COVID-19 vaccine will boost the immune response and provide an updated vaccine to protect against circulating strain.

The following COVID-19 vaccines will be available this Fall:

Age groups	Moderna Spikevax vaccine formats	Pfizer-BioNTech Comirnaty vaccine formats
6 months to 4 years	Multidose vial (MDV)	None
5 to 11 years	MDV	Single dose vial (SDV)
12 years of age and older	MDV and Prefilled syringe (PFS)	MDV and PFS

Not all vaccine brands and/or formats will be available at all times or at all locations. All publicly funded COVID-19 vaccines are considered to be equivalent and to provide the same protection against COVID-19 disease. Health care providers should use the vaccine (according to the products' age indications) that is available unless the patient has a medical contraindication toward a specific vaccine.

View all current Public Health Alerts by visiting the Health Professional Resources page at: http://www.smdhu.org/PHA

The following outlines the COVID-19 vaccine program high-risk and priority populations:

High-risk Population Group 1

The following individuals are at increased risk of COVID-19 disease and **should receive** COVID-19 vaccine dose(s) **as soon as it becomes available in the Fall** AND **should receive** an **additional dose** in the **Spring**:

- Adults 80 years and older
- Adult residents of long-term care homes and other congregate living settings for seniors.
- Individuals 6 months of age and older who are moderately to severely immunocompromised (due to specific underlying condition or treatment).
- Individuals 55 years and older who identify as First Nations, Inuit, or Metis and their non-Indigenous household members who are 55 years and older.

Adults aged 65 to 79 years **should receive** COVID-19 vaccine dose(s) **as soon as it becomes available in the Fall** AND **may receive** an **additional dose** in the **Spring**. Certain individuals in this age group are at increased risk of severe COVID-19 disease and would benefit from doses in the Fall and Spring.

High-risk Population Group 2

The following individuals are at increased risk of SARS-CoV-2 exposure or severe COVID-19 disease and should receive COVID-19 vaccine dose(s) as soon as it becomes available in the Fall:

- Residents in long-term care homes and other congregate living settings who are aged 17 years and under.
- Pregnant individuals.
- Individuals from First Nations, Métis and Inuit communities who are aged 54 years and under.
- Members of underserved communities.
- Health care workers and other care providers in facilities and community settings as per NACI.

Priority Populations

To optimize co-administration with influenza vaccine, the following individuals, **may receive** COVID-19 vaccine dose(s) **as soon as it becomes available in the Fall:**

- Children 6 months to 4 years of age
- Individuals with significant exposure to birds or mammals through interactions with birds or mammals (such as poultry, livestock, slaughterhouse and processing plant workers, wildlife officers/researchers, and veterinarians)

General Population

All individuals (6 months of age and older) who do not belong to the high-risk or priority populations described above **may receive** COVID-19 vaccine dose(s) in the Fall, **starting on October 27, 2025.**

The new LP.8.1 formulation of COVID-19 vaccine will start to become available in local pharmacies in early October noting it will take a couple of weeks before it is widely available. Ordering information for health care providers and facilities who order vaccine through public health is available below.

Immunization schedules

The following groups should receive **one annual dose** of COVID-19 vaccine, unless they have not completed their primary series:

- High-risk populations group 2
- Priority populations
- General population

Individuals belonging to high-risk population group 1 should receive **two doses per year**, unless they have not completed their primary series.

Timing of immunization	Population	Immunization status	# of eligible doses
Fall Doses 2025 (Sept to Jan¹)		Completed primary series	1 dose
	All	Primary series not completed	1 or more doses ²
Spring Doses 2026 (April to June ³)	High-risk populations group 1 (as outlined above)	Fall dose(s) were received	1 additional dose
		Fall dose(s) were not received	Receive fall dose(s) ⁴
	Individuals not part of the high-risk populations group 1	Fall dose(s) were received or not received	None ⁵

¹ High-risk populations groups 1 and 2 should, and priority populations may receive doses as soon as they are available. The general population may receive doses starting on October 27. Fall doses can continue to be received until March 31.

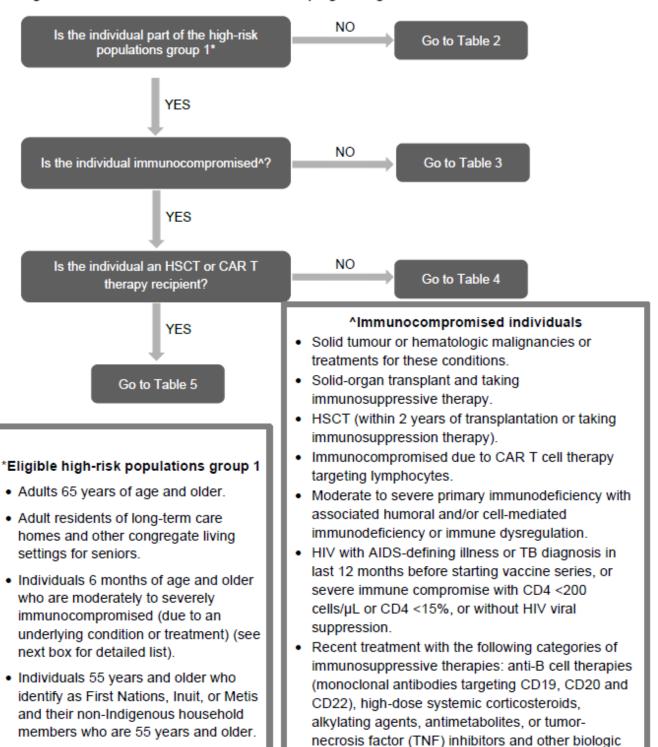
² To determine the appropriate immunization schedule, refer to <u>Figure 1: Immunization</u> <u>algorithm</u> and for detailed schedules refer to <u>Tables 2 to 5</u> in the Appendices.

³ Spring doses may continue to be given only to severely immunocompromised individuals until August 31. These individuals must be assessed by their healthcare provider to determine if immunization cannot wait until the next annual COVID-19 vaccine program (i.e., 2026/2027) and receipt of the updated formulation that will provide optimum protection against the circulating strains can be delayed.

⁴The additional dose (i.e. second dose per year) is not required.

⁵ Individuals not belonging to the high-risk populations group 1 are not eligible to receive dose(s) in the spring regardless of if dose(s) were received in the fall. These individuals are recommended to be vaccinated during the next annual COVID-19 vaccine program (i.e., 2025/2026) to ensure optimal protection against circulating strains.

Figure 1: COVID-19 2025/2026 immunization program algorithm



agents that are significantly immunosuppressive.

Chronic kidney disease on dialysis.

Table 2: Immunization schedule for those not part of the high-risk populations group 1

The immunization schedule reflects the eligible dose(s) that can be received in the **fall of 2025**. Regardless of whether the fall dose(s) (i.e., primary series or the 1 dose) are given, doses are **not** required in the **spring of 2026**. Individuals are recommended to be vaccinated during the next annual COVID-19 vaccine program (i.e., 2026/2027) to ensure optimal protection against circulating strains.

Current Age	Doses received prior to fall 2025	# of eligible doses for the 2025/2026 vaccine program in the fall	Intervals between doses
6 months	0 doses	2 doses*	8 weeks
to 4 years	1 dose Moderna Spikevax	1 dose*	8 weeks
	1 dose Pfizer-BioNTech Comirnaty	2 doses*	8 weeks
	2 doses with ≥1 doses Pfizer- BioNTech Comirnaty	1 dose*	8 weeks
	2 doses both Moderna Spikevax	1 dose	3 months^
	≥3 doses, Pfizer-BioNTech Comirnaty and/or Moderna Spikevax	1 dose	3 months^
≥5 years	0 doses	1 dose*	N/A
	1 dose at ≥5 years	1 dose	3 months^
	1 dose at <5 years	1 dose*	8 weeks
	≥2 doses	1 dose	3 months^

^{*} Dose(s) required to complete the primary series

[^] Minimum interval

Table 3: Immunization schedule for **high-risk populations group 1** who are not immunocompromised

The immunization schedule reflects the eligible dose(s) that should be received in the **fall** and the additional dose which is given in the **spring**. If the dose(s) (i.e., primary series or the 1 dose) are not given in the fall then the dose(s) should be given in the spring, however the additional dose would not be required.

Current Age	Doses received prior to fall 2025	# of eligible doses for 2025/2026 vaccine program	Intervals between doses
≥18 years	0 doses	1 dose* and 1 additional dose 3 month	
	1 dose	1 dose and 1 additional dose	
	≥2 doses	1 dose and 1 additional dose	3 months [^]

^{*} Dose(s) required to complete the primary series

Note: Spring doses may continue to be given only to severely immunocompromised individuals until August 31. These individuals must be assessed by their healthcare provider to determine if immunization cannot wait until the next annual COVID-19 vaccine program (i.e., 2026/2027) and receipt of the updated formulation that will provide optimum protection against the circulating strains can be delayed.

For those who are moderately or severely immunocompromised refer to Table 4 and for those who are post HSCT/CAR T-cell therapy refer to Table 5 in the Ministry of Health: Heaclth Care Provider Fact Sheet: 2025/2026 COVID-19 Vaccine Program.

Co-Administration

COVID-19 vaccines may be given at the same time with other vaccines, or at any time before or after other non-COVID-19 vaccines (live or non-live vaccines), including influenza vaccine, respiratory syncytial virus (RSV) vaccine and/or the RSV monoclonal antibody, Beyfortus.

Ordering Information for Health Care Providers and Facilities

All doses of COVID-19 vaccine in Ontario must be documented in the COVAXon system. If you have new staff in your facility or accounts that need to be reset, please email covaxsupport@smdhu.org. Existing users who forget their password can change their password in the system directly.

When documenting in COVAXon, please ensure all client information is up to date. This is especially important for residents for long-term care and retirement homes; update the reason for immunization to LTCH Rhome resident and include the institution name where the client is living.

[^] Minimum interval

To order COVID-19 vaccine, complete the <u>COVID-19 Vaccine order form</u>. We are anticipating delivery of COVID-19 vaccine in late September, so we anticipate orders received by Wednesday October 1st at 3:00 p.m. will be ready for pick up on Wednesday October 8th.

People can access COVID-19 vaccine from a local pharmacy, LTCH/Rhome/Hospital where applicable or their family doctor if they are providing the COVID-19 vaccine. The health unit will be supporting some outreach clinics for targeted groups and will have a limited number of appointments available for children under 5 years of age if they are unable to locate a pharmacy in their area that is providing the vaccine to young children. The COVID-19 Pharmacy locator tool on the Ministry website will be updated in early October.

COVID-19 vaccines for individuals 6 months to 11 years and 5 to 11 years			
Vaccine name	Moderna Spikevax	Pfizer-BioNTech Comimaty	
Protection against	LP.8.1 variant	LP.8.1 variant	
Manufacturer	Moderna Biopharma Canada	BioNTech Manufacturing	
Vaccine type	mRNA*	mRNA*	
Age indication	6 months to 11 years	5 to 11 years	
Dosage	25 ug / 0.25 mL	10 mcg / 0.3 mL	
Route	Intramuscular (IM)	Intramuscular (IM)	
Format	MDV	SDV	
Vial Volume	2.5 mL	0.3 mL	
# of doses per vial	10 doses	1 dose	
# of doses per package	100 doses	10 doses	
Shelf life of thawed vials (Do not refreeze)	50 days at +2°C to +8°C	10 weeks at +2°C to +8°C	
Post-puncture shelf life	24 hours at +2°C to +8°C	12 hours at +2°C to +25°C	
Package dimension	6.1 x 13.0 x 6.1 cm	3.7 x 3.9 x 8.9 cm	
DIN	02541270	02541858	
Product monograph	Product monograph	Product monograph	

^{*} Messenger ribonucleic acid (mRNA)



COVID-19 vaccines for individuals 12 years of age and older				
Vaccine name	Moderna Spikevax		Pfizer-BioNTech Comirnaty	
Protection against	LP.8.1 variant		LP.8.1 variant	
Manufacturer	Moderna Biopharma Canada		BioNTech Manufacturing	
Vaccine type	mRNA*		mRNA*	
Dosage	50 ug / 0.5 mL		30 mcg / 0.3 mL	
Route	Intramuscular (IM)		Intramuscular (IM)	
Format	MDV	PFS	MDV	PFS
Volume	2.5 mL	0.5 mL	1.8 mL	0.3 mL
# of doses per vial/syringe	5 doses	1 dose	6 doses	1 dose
# of doses per package	50 doses	10 doses	60 doses	10 doses
Package dimension (cm)	6.1 x 13.0 x 6.1	10.2 x 11.0 x 4.5	3.7 x 3.9 x 8.9	9.9 x 5.2 x 12.3
Shelf life of thawed vials (Do not refreeze)	50 days at +2°C to +8°C	50 days at +2°C to +8°C	10 weeks at +2°C to +8°C	+2°C to +8°C until vaccine expiry
Post-puncture shelf life	24 hours at +2°C to +8°C	n/a	12 hours at +2°C to +25°C	n/a
DIN	02541270	02557770	02541823	02552035
Product monograph	Product monograph		Product m	onograph_

^{*} Messenger ribonucleic acid (mRNA)

COVaxON Updates:

- The LP.8.1 formulation will be available to document in COVaxON starting on September 22, 2025.
- Clinical viewer will be updated on October 7th with LP.8.1 formulation administration data.
- HCPs should use COVaxON from September 22 and October 6 to view the most update to date COVID-19 immunization history for their clients.
- Vaccine certificates in COVaxON will reflect the LP.8.1 formulation starting October 7, 2025
- Clients who receive doses between September 22 and October 6 can access their updated vaccine certificate starting October 7.

Please note that the old formulation of COVID-19 (KP.2) has been withdrawn and should not be administered. If the KP.2 formulation is selected a warning will display in COVaxON. Healthcare providers can still make corrections to historical information pertaining to doses of KP.2 if required.



For more information refer to the <u>Ministry of Health for HCP Fact Sheet for COVID-19 Vaccine</u> or contact the Immunization Program:

- For questions regarding vaccine orders: ext. 8808 or vaccineorders@smdhu.org
- For all other HCP questions: ext. 8806 or hc.vpd@smdhu.org