

COVID Updates and Interim Guidance (9/9/2025)

The Connecticut Department of Health is issuing interim COVID-19 immunization guidance in preparation for the 2025–2026 respiratory virus season.

Key Points and Recommendations:

- Vaccination against COVID-19 remains the most effective defense to prevent severe COVID-19 disease outcomes.
- We urge providers to discuss vaccination with patients and parents/guardians and to encourage COVID-19 vaccine based on risk and shared clinical decision making – immunizations are particularly important for persons at greater risk of severe disease.

Interim 2025-2026 COVID-19 Vaccine Guidance:

The following interim guidance reference and utilize evidence-based recommendations from professional and expert medical organizations, such as the recently released guidance from [American Academy of Pediatrics \(AAP\)](#), [American College of Obstetricians and Gynecologists \(ACOG\)](#), and [American Academy of Family Physicians \(AAFP\)](#).

Previous doses of COVID-19 vaccine should be assessed before vaccinating. Individuals who had a recent COVID-19 infection should consider waiting 3 months before getting additional doses of vaccine. Additionally, individuals who recently completed an initial COVID-19 series or received a dose of the 2024-2025 formulation should consider waiting 8 weeks before receiving a dose of the updated 2025-2026 vaccine.

Age Group		Who Should Receive the Vaccine
Infants 6-23 months	Should receive 2 or more doses	<ul style="list-style-type: none"> - Previously unvaccinated children. - Children who are moderately to severely immunocompromised.¹ See the full AAP guidelines for additional information.
	Should receive 1 or more doses	Previously vaccinated children who did not complete the initial series.
	Should receive 1 dose	Previously vaccinated children who completed an initial series.
Children 2-18 years	Should receive 2 or more doses	Children who are moderately to severely immunocompromised. ¹ See the full AAP guidelines for additional information.
	Should receive 1 dose	Children <ul style="list-style-type: none"> - With underlying risk factors² for severe COVID-19 illness - Who have never been previously vaccinated - Who live in long-term care facilities or other group settings - Who are household contacts of high-risk individuals.
	Can receive 1 dose	All children not included in the above categories.
Adults 19-64 years	Should receive 2 or more doses	Adults who are moderately to severely immunocompromised. ¹

	Should receive 1 dose	Anyone <ul style="list-style-type: none"> - With underlying risk factors² for severe COVID-19 illness - Who have never been previously vaccinated - Who live in long-term care facilities or other group settings - Who work in healthcare settings - Who are household contacts of high-risk individuals - Who is pregnant, postpartum, lactating, or expecting to become pregnant. See the full ACOG guidelines for more information.
	Can receive 1 dose	All adults not included in the above categories.
Adults 65 years and older	Should receive 2 or more doses	All adults should be vaccinated with at least 2 doses separated by 6 months. Adults in this category who are moderately to severely immunocompromised may need additional doses. ¹

1. Individuals who are moderately to severely immunocompromised may receive additional doses based on shared clinical decision-making. Additional doses should be administered at least 2 months after the most recent dose.
2. See Appendix below for list of pediatric and adult populations at high risk.

Available 2025-2026 COVID-19 Vaccine Products

On August 27, 2025, the Food and Drug Administration (FDA) approved the following 2025-26 COVID-19 vaccines:

- Pfizer's [COMIRNATY](#) for those 5 years and older
- Moderna's [SPIKEVAX](#) for those 6 months and older
- Moderna's [MNEXSPIKE](#) for those 12 years and older
- Novavax's [NUVAXOVID](#) for those 12 years and older

Use of Previous Season 2024-2025 COVID-19 Vaccine Products

- EUA vaccines for children 6m–11y
 - Vaccines whose EUAs have been revoked should no longer be administered to patients.
- Licensed vaccines for persons aged 12y+
 - It is preferred that patients being vaccinated for the 2025–2026 season receive the updated 2025-2026 vaccine product to best provide protection against the COVID-19 strains currently circulating.
 - If COVID-19 vaccination is desired before the new formulation is available, providers may continue to administer the 2024-2025 vaccine, if the patient is eligible.
 - Individuals who have already received a 2024-2025 vaccine should not receive an additional dose of that formulation. They should receive the 2025-2026 formulation when it becomes available.

2025-2026 COVID-19 Vaccine Availability and Access

- Individuals seeking COVID-19 vaccination should confirm coverage with their health plan. We will provide updated information to providers as we continue to adapt to the evolving landscape of vaccine access in the United States.
- Pharmacies in Connecticut can administer vaccines to adults 18 and older. If needed, individuals can self-attest to any high-risk conditions. Many pharmacies have already received the updated COVID-19 vaccine formulation. Check [EasyVax.com](https://www.easylvax.com), your local pharmacy website, or call for availability.
- Vaccines will be available to providers through the universal pediatric Connecticut Vaccine Program (CVP) for children 6 months through 18 years soon. Additional communications to CVP providers will be sent once ordering information is available.

Appendix A:

Table 1: Populations Recommended for Vaccination Including Those at High Risk for Severe COVID-19 Among Children Ages 6 Months Through 18 Years [§]

Population Characteristics	
Infants and children 6 through 23 months of age	
Residents of long-term care facilities or other congregate settings ^a	
Children who have never been vaccinated against COVID-19	
Infants and children with household contacts who are at high risk for severe COVID-19	
Underlying Condition or Treatment With Common Examples ^b	
Chronic pulmonary disease	Asthma/reactive airway disease Chronic lung disease of prematurity Compromised respiratory function (e.g., abnormality of airway, tracheostomy, or ventilator dependent)
Cardiovascular disease	Congenital heart disease
Gastrointestinal Disorders	Feeding tube dependent Inflammatory bowel disease
Hepatic Disease	Chronic liver disease
Hematologic Disease	Sickle cell disease
Metabolic Disorders	Diabetes mellitus
Obesity	BMI \geq the 95 th percentile in children
Neurologic and neurodevelopmental conditions	Cerebral palsy Epilepsy Intellectual developmental disorder Compromised mobility (e.g., wheelchair dependent)
Immunosuppressive Conditions ^c	Receipt of immunosuppressive therapy Primary immunodeficiency HIV Infection Receipt of hematopoietic cell transplant or solid organ transplant
Rheumatologic, autoimmune disease	Systemic lupus erythematosus Juvenile idiopathic arthritis

a. Congregate care settings refer to places where individuals live together in structured environments outside of their home, including residential treatment facilities, group homes, emergency shelters, juvenile detention centers, etc.

b. List of examples is not exhaustive.

c. Children who are moderately or severely immunocompromised require 2 or more doses of COVID19 vaccine.

Additional doses may be administered at \geq 2-month intervals, informed by the clinical judgment of a health care provider and personal preference and circumstances. Refer to AAP Recommended Child and Adolescent Immunization Schedule for dosing guidance.

§ Adapted from Committee on Infectious Diseases. (2025, August 19). *Recommendations for COVID-19 Vaccines in Infants, Children, and Adolescents: Policy Statement. Pediatrics*. Advance online publication.

<https://doi.org/10.1542/peds.2025-073924>

Table 2: Populations Recommended for Vaccination Including Those at High Risk for Severe COVID-19 Among Adults 18 Years and Older[¥]

Population Characteristics
Adults ages 18-64 years at higher risk of exposure (e.g., healthcare workers, congregate care settings)
Adults ages 18-64 who are who are household contacts of persons at high risk of severe disease
Underlying Condition or Treatment With Common Examples^a
Cancer
Cerebrovascular disease (e.g., stroke)
Chronic kidney disease (any stage)
Chronic liver disease
Chronic lung disease (e.g., asthma, bronchiectasis, COPD, emphysema, chronic bronchitis, interstitial lung disease, pulmonary embolism, pulmonary hypertension)
Cystic fibrosis
Dementia and other neurologic conditions
Diabetes (Type 1 or Type 2)
Disabilities (e.g., Down syndrome, intellectual/developmental disabilities, cerebral palsy, spinal cord injury, learning disabilities, ADHD)
Heart conditions (e.g., heart failure, coronary artery disease, cardiomyopathies, possibly hypertension)
Hemoglobin disorders (e.g., sickle cell disease, thalassemia)
HIV infection
Immunocompromised state (e.g., due to cancer treatment, transplant, primary immunodeficiency, long-term corticosteroids)
Mental health conditions (e.g., mood disorders, schizophrenia spectrum)
Overweight or obesity (BMI ≥ 25 kg/m ² ; increasing risk with higher BMI)
Physical inactivity
Pregnancy ^b (pregnant, postpartum, lactating, or planning pregnancy)
Smoking (current or former)
Solid organ or blood stem cell transplant
Substance use disorders
Tuberculosis

a. List of examples is not exhaustive.

b. American College of Obstetricians and Gynecologists recommends that pregnant, postpartum, lactating individuals, and those planning pregnancy receive updated COVID-19 vaccination.

¥ Centers for Disease Control and Prevention. People with Certain Medical Conditions and COVID 19 Risk Factors. CDC.

Published June 11, 2025. Accessed September 5, 2025. <https://www.cdc.gov/covid/risk factors/index.html>