



Collaborative for
Public Health Research



University of California
San Francisco

Public Health for All Californians Together (PHACT) Coalition

Virtual Kickoff Meeting
September 26, 2025

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What's Next?

Today's Speakers

- **Secretary Kim Johnson**, California Health and Human Services Agency
- **Dr. Erica Pan**, State Health Officer & Director of California Department of Public Health
- **Dr. Priya Shete**, UCSF Physician-Scientist & Principal, CPR3
- **Dr. Rob Schechter**, CDPH Immunization Branch Chief; recently terminated ACIP member

The background is a solid teal color. On the right side, there is a graphic element consisting of several thin, dark teal lines that intersect at a central point, creating a star-like or web-like pattern. The lines extend towards the right edge of the frame.

California Stands Together

**California stands together with
our public health and medical
professional colleagues to
uphold integrity and protect the
health of our communities.**

West Coast Health Alliance (WCHA)

- Focus on evidence-based recommendations from respected national professional organizations
- Work together to ensure the public has access to credible information
- Coordinate programmatic and implementation efforts to reduce confusion and increase trust



Public Health for All

On September 17, 2025, [California updated state law](#) to ensure Californians have access to life-saving vaccines and screenings.

We want you to know there's a strong public health and medical community that'll continue to stand together to:

- Share the data and evidence people need to make healthy choices.
- Provide science-based recommendations.
- Protect our communities.

- New state law establishes CDPH as the source for immunizations and preventive services guidelines based on national medical organizations
- Baseline recommendations ACIP and USPSTF 1/1/25
- CDPH can issue updates as needed
 - Recent or future FDA or ACIP changes
 - USPSTF changes
- California regulated health plans are required to cover these immunizations and services
- Provide liability protection to providers who administer vaccines based on CDPH recommendations

Bookmark this page:

<https://www.cdph.ca.gov/Pages/public-health-for-all/publichealthforall.aspx>

Additional Vaccine Coverage Provisions Under AB 144

- A pharmacist may independently initiate and administer an immunization that was ACIP-recommended on January 1, 2025, or is currently recommended by CDPH, to persons age 3 years or older
- Aligns coverage requirements for commercial plans with ACIP recommendations as of January 1, 2025, or any subsequent modification by CDPH
- State law currently provides a pharmacist with the authority to administer immunizations pursuant to a protocol with a prescriber
- CDPH recommendations cover COVID vaccine for anyone who wants protection; state law does not require an attestation for pharmacists to administer to anyone 3+ years

Immunization Provider Liability Protections Under AB 144

- Persons prescribing, dispensing, ordering, furnishing, or administering vaccines shall not be liable for any injury, including residual effects of the vaccine if:
 - Vaccines are given in accordance with CDPH recommendations
 - Vaccines are given as part of a public health outreach program
- Sunsets January 1, 2030

AB 144 Health Plan Coverage Requirements

Apply to

- All health plans regulated by Department of Managed Health Care or Department of Insurance
- Medi-Cal Managed Care
- Most California residents

Do not apply to

- Self-insurance plans (regulated by federal ERISA law)
- Federal health systems (e.g., VA)
- Medicare plans

Coverage Specific Impacts

- Patients with insurance coverage that is not California-regulated
 - Example – PCP taking care of a large Medicare population
- Patients with coverage via self-insured plans or CalPERS plans
- Patients with Medi-Cal coverage
 - Medi-Cal plans and providers can find more information about vaccine coverage and the Vaccines For Children program: [Medi-Cal Coverage of Vaccines per Assembly Bill 144 Requirements](#)

Immunization Recommendations



CDPH/WCHA Recommendations

Age/Condition	COVID-19	Influenza	RSV
Children	<ul style="list-style-type: none"> All 6-23 months All 2-18 years with risk factors or never vaccinated against COVID-19 All who are in close contact with other with risk factors¹ All who choose protection² 	<ul style="list-style-type: none"> All 6 months and older 	<ul style="list-style-type: none"> All younger than 8 months² All 8-19 months with risk factors
Pregnancy	<ul style="list-style-type: none"> All who are planning pregnancy, pregnant, postpartum or lactating 	<ul style="list-style-type: none"> All who are planning pregnancy, pregnant, postpartum or lactating 	<ul style="list-style-type: none"> 32-36 gestational age²
Adults	<ul style="list-style-type: none"> All 65 years and older All younger than 65 years with risk factors All who are in close contact with others with risk factors All who choose protection 	<ul style="list-style-type: none"> All 	<ul style="list-style-type: none"> All 75 years and older All 50-74 years with risk factors

CDPH & WCHA Statement

- The ACIP did not employ standard scientific methods to evaluate information
- The ACIP recommendations on measles, mumps, rubella and varicella (MMRV) vaccine limit patient choice and access to vaccines with disproportionate impact on children receiving immunizations through Vaccines for Children (VFC). No new safety or efficacy data were presented to form the basis of these recommendations
- The WCHA affirms the pre-existing and [American Academy of Pediatrics](#) (AAP) recommendation that parents have an option to choose whether their child receives separate (MMR + V) or combined (MMRV) vaccines for children less than 4 years of age

Impacts of ACIP Votes

- Limited
- No impact on CDPH recommendations
- Impact of MMRV vote on VFC unclear. VFC will continue to cover MMRV for children 4 years and older
- No change to hepatitis B
- No change to VFC coverage for COVID-19



Public Health for All Californians Together: The PHACT Coalition

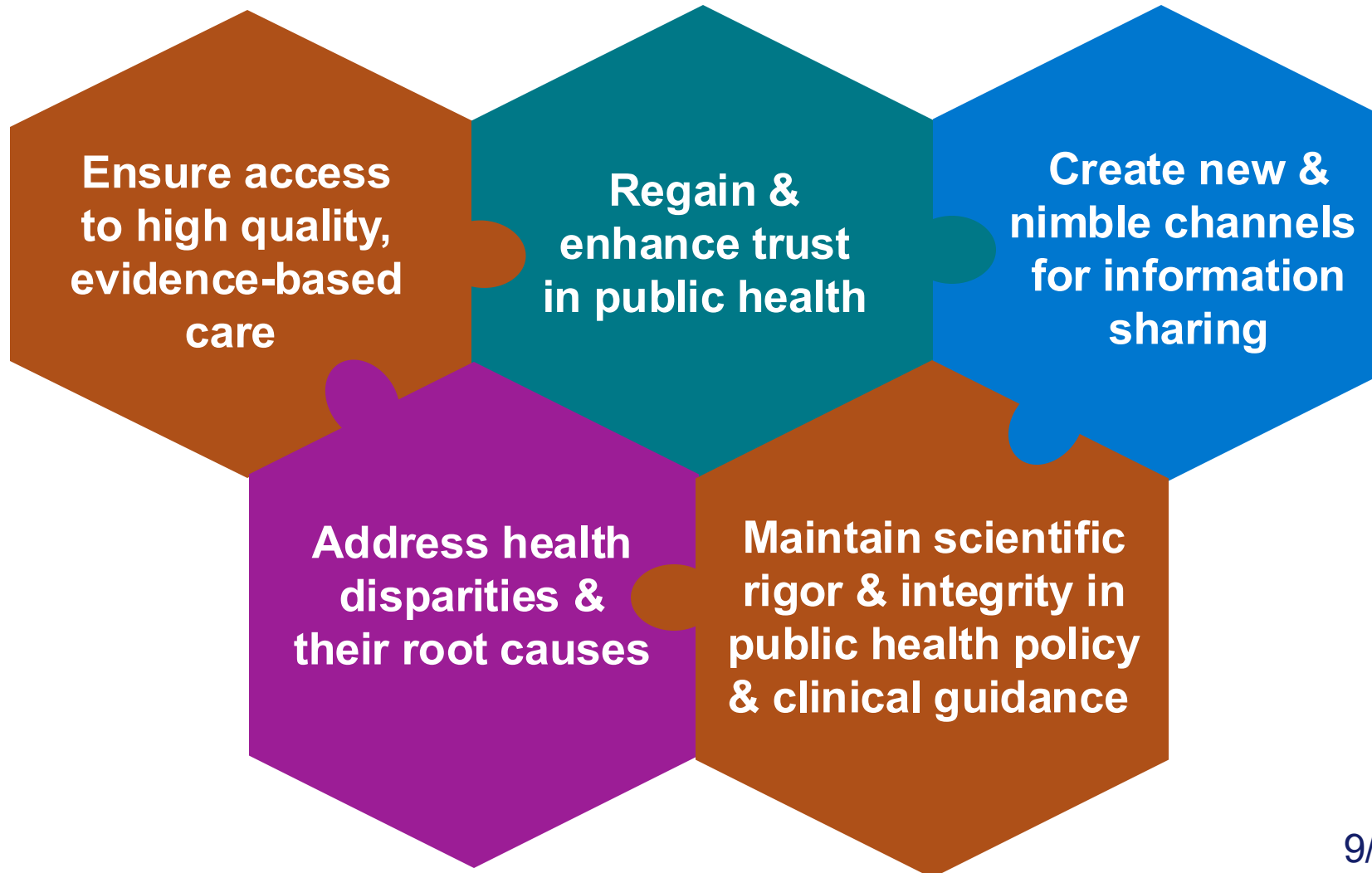
PHACT Coalition: Vision and Purpose

Our vision: To build trust and strengthen community well-being by improving health outcomes through transparent, evidence-informed services and care for all Californians.

Our common purpose: To bring together a network of multi-sectoral partners across the state of California to provide timely, evidence-based guidelines and culturally appropriate health messaging to protect the health and advance the well-being of all Californians.



New Tools Needed for New Times



PHACT Coalition: Objectives

- Strengthen and organize formal mechanisms for strategic collaboration across multiple sectors
- Align communication and dissemination strategies leveraging each partner's communication channels to maximize reach across California
- Identify gaps, challenges and opportunities for innovative solutions to promote health across California
- Identify critical assets and share resources (funding, expertise) where capacity exists
- Share challenges, learn together, pilot test innovative solutions, and scale and disseminate effective, evidence-based strategies

PHACT Coalition Structure



PHACT Coalition: Structure and Roles

Leads	<ul style="list-style-type: none">• Establish mission and priorities• Responsible for workplan and partner coordination
Advisory Council	<ul style="list-style-type: none">• Provide advice and strategic guidance informed by diverse perspectives
Core Partners	<ul style="list-style-type: none">• Disseminate key messages, share resources, advise on best practices• Participate in strategic activities based on expertise, fundraise• Identify gaps/challenges and collaborate on solutions• Lead working groups
Working Groups	<ul style="list-style-type: none">• Address key coalition questions and concerns through multidisciplinary approaches• Provide expertise, disseminate findings and solutions
General Membership	<ul style="list-style-type: none">• Receive communications and resources• Ask questions and share challenges

Proposed First Area of Focus: Vaccines



Acceptance & Uptake

Access & Provision

Supply Chain &
Logistics

Policy, Regulation &
Reimbursement

Interventions, messaging and best practices to support patients, communities, care teams in accessing and receiving evidence based, high quality preventive care

Policy decisions, guidelines, legislation, and payment concerns can be raised and funneled to existing responsible parties via the coalition; information from responsible parties will be shared via the coalition

The Future We Want



Meet the Times

We will be nimble and prepared to meet the times whether federal changes, funding changes, or other unanticipated changes come our way in California.



Protect Progress

We will have prevented erosion of the health and wellbeing that Californians have now while aspiring to do more.



Scaled Approach

We will identify reproducible California-wide approaches to effectively address challenges public health and preventive care in a coordinated way across health sectors.



What's Next? Join Us!

Let's Come Together



Establish and support the sharing of science and evidence with transparency and integrity



Leverage each others' assets, share resources, reduce duplicative work, and embolden creativity



In a time of information overload, learn from trusted experts outside of any one organization



Build networks and partnerships to solve public health challenges in our communities

Stay Informed & Share Information

Public Health for All



Complete the survey – tell us about:

- Your interest in the coalition
- What focus areas interest you
- What you can contribute
- What concerns you may have



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YouTube: [CA Public Health - YouTube](https://www.youtube.com/channel/UCaPbUcHtHtHtHtHtHtHtHtHt)



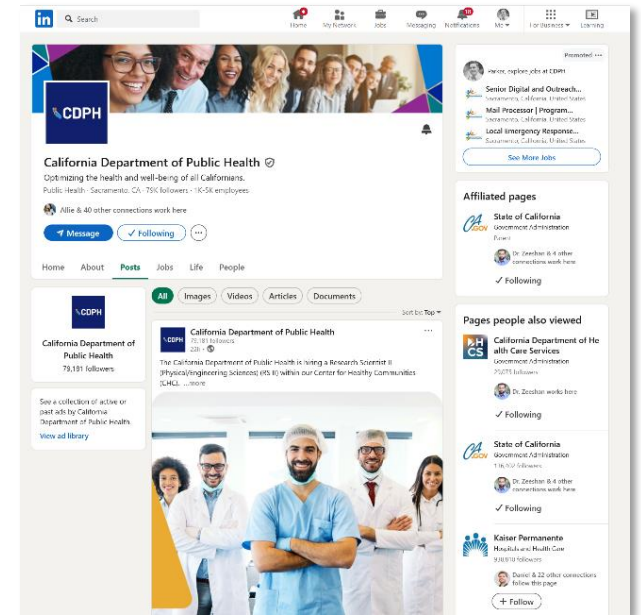
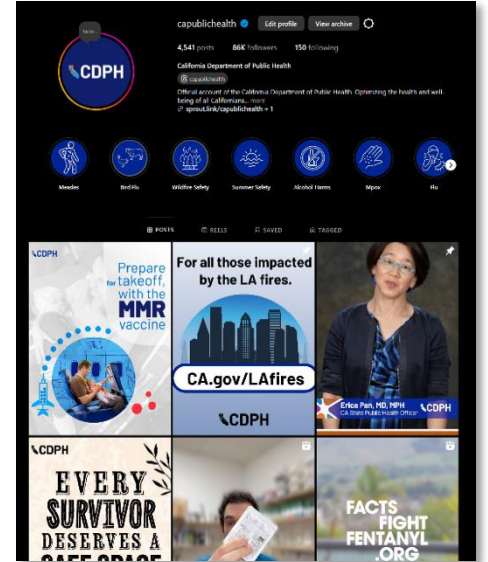
Threads: [@CAPublicHealth](https://www.threads.net/@CAPublicHealth)



BlueSky: [@capublichealth.bsky.social](https://bsky.app/profile/capublichealth.bsky.social)



TikTok: [@capublichealth](https://www.tiktok.com/@capublichealth) - **NEW!**





CDPH

California Department of
Public Health

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