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Date: August 6, 2026 BCD Numbered Memo 2026-07

To: Wisconsin Vaccinators

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Planning for Vaccination Ahead of the 2026–2027 Respiratory Virus Season: Sources and Expected Timelines for Operational and Clinical Guidance

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Summary

As preparations begin for the 2026–2027 respiratory virus season, the Wisconsin Department of Health Services (DHS) is sharing updated information to assist with your clinical and operational planning. While federal advisory committee processes are currently disrupted, DHS continues to provide clinical guidance for influenza, COVID-19, and RSV based on established evidence-based frameworks. Our priority is ensuring vaccination partners have the information needed to protect patients once vaccine formulations and clinical details are finalized. Our strategy can be summarized as follows:

- Updated influenza vaccines are expected to begin shipping in August, while COVID-19 vaccines are anticipated later, in September or October. No changes to RSV vaccine or monoclonal antibody products are expected during the next season.
- DHS will disseminate clinical guidance for each vaccine when professional organizations have synthesized available evidence for the 2026–2027 formulations and published consensus recommendations.
- Wisconsin Medicaid and major private insurers will continue to cover these essential vaccines without cost-sharing.

- DHS recommends that clinicians refer to the immunization schedules published by the American Academy of Pediatrics (AAP) when consulting with parents and caregivers regarding childhood vaccines; the American Academy of Family Physicians and American College of Obstetricians & Gynecologists (ACOG), American College of Physicians, the Infectious Diseases Society of America, and Post-acute and Long-Term Care Medical Association regarding adult vaccines.
- RSV monoclonal antibodies (for infants) and RSV vaccine (during pregnancy) are anticipated to be available commercially and through the Vaccines for Children program starting in August.

Background and clinical strategy

This year marks a departure from our traditional process of adopting recommendations from the federal Advisory Committee on Immunization Practices (ACIP). Due to the continued lack of a functioning ACIP, lack of a quorum, and changes to the committee's charter, Wisconsin is utilizing a professional consensus-based model. To maintain transparency, DHS reviews data alongside leading national medical organizations—including the American Academy of Pediatrics (AAP), American Academy of Family Physicians (AAFP), the American College of Obstetricians and Gynecologists (ACOG) and the Infectious Diseases Society of America (IDSA)—that utilize established frameworks like GRADE and Evidence-to-Recommendation (EtR). This is the same approach used in earlier clinical guidance memos for hepatitis B vaccination (BCD-2025-05) and the routine childhood vaccine schedule (BCD-2026-01).

While awaiting final details on formulation and regulatory approval, our planning follows the standard seasonal timeline. We anticipate that updated influenza vaccines will begin shipping in August, with clinical recommendations from the AAP expected early that month. COVID-19 vaccines and RSV products, including monoclonal antibodies for infants, are forecasted for broad availability in September and October. DHS will issue a comprehensive update as soon as professional society recommendations are finalized.

Anticipated timelines

Based on reviewing input from a variety of sources, we are sharing a plausible sequence of events related to vaccine planning in the coming months. These timelines are tentative and subject to change based on factors such as final regulatory approvals, manufacturing schedules, and the availability of clinical recommendations from professional organizations, but they reflect our best understanding of the 2026–2027 respiratory virus season at the present time.

- **Late summer and early fall:** The Vaccine Integrity Project will publish its independent review of existing and new scientific data for influenza, COVID-19, and RSV.
- **Early August and September:** Professional organizations (AAP, AAFP, ACOG, and IDSA) will release their 2026–2027 clinical recommendations following these evidence reviews.

Influenza vaccine

- **August 5:** Moderna mRNA influenza vaccine received FDA approval; other updated seasonal 2026-27 flu vaccines are anticipated later in the month.
- **August or early September:** Evidence-based recommendations from the American Academy of Pediatrics (AAP) are expected.
- **August or early September:** Vaccine shipping is anticipated to begin, though exact timing depends on the manufacturer.

COVID-19 vaccine

- **August:** FDA approval of updated formulations is anticipated.
- **August or early September:** Clinical recommendations from the AAP/AAFP are expected; DHS will disseminate updated respiratory season guidance with COVID-19 recommendations.
- **September:** Distribution of doses is forecasted to begin.

RSV products

- **August 17:** Providers may begin ordering monoclonal antibody products (Nirsevimab and Clesrovimab) and RSV vaccine (Abrysvo) through the Vaccines for Children (VFC) program.
- **September 1:** Administration of the maternal vaccine Abrysvo begins for pregnant women (running through January 31).
- **Early September:** Finalized AAP recommendations for RSV products are anticipated.
- **October 1:** Administration of monoclonal antibody products begins for eligible infants* and young children (running through March 31.

* Reminder: Infants should receive mAb if the mother did not receive RSV vaccine while pregnant with that infant, at 32–36 weeks gestation and >2 weeks prior to delivery.

Insurance coverage and patient reassurance

Financial barriers should not prevent Wisconsinites from receiving recommended respiratory vaccines. Wisconsin Medicaid and BadgerCare Plus will continue to cover influenza, COVID-19, and RSV vaccines for all eligible members. Furthermore, major private health insurers, through a statement by America's Health Insurance Plans (AHIP), have committed to covering the costs of these vaccines and their administration with no cost-sharing through at least the end of 2027.

Access remains available through the following state and federal programs:

- **Vaccines for Children (VFC):** Eligible infants, children, and adolescents will continue to receive these products at no cost.

- **Vaccines for Adults (VFA):** A limited supply of influenza and COVID-19 vaccines will be available through the VFA program to serve adults aged 19 and older who are uninsured or underinsured.

DHS is also working closely with the Pharmacy Society of Wisconsin (PSW) to ensure that pharmacists can continue to serve as accessible vaccination sites for flu and COVID-19 vaccines in accordance with state law. For pediatric patients, pharmacies in Wisconsin can vaccinate children aged 3 and older for influenza and COVID-19 without a prescription; however, a provider's prescription is currently required for children aged 6 months through 2 years. We encourage all clinicians to provide a strong recommendation for vaccination, as provider input remains one of the most significant predictors of vaccine uptake.

Resources

DHS maintains a dedicated webpage for recommended schedules and will ensure that the Wisconsin Immunization Registry (WIR) continues to forecast these recommendations for healthy individuals. For clinical or program-specific questions, please contact the Wisconsin Immunization Program at DHSImmProgram@dhs.wisconsin.gov.

- Wisconsin Department of Health Services Recommended Vaccination Schedule webpage
- AAP Recommended Child and Adolescent Immunization Schedule for Ages 18 Years or Younger