

COVID-19 Vaccines Information Sheet: Bivalent Booster

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Key Information

Following approval from Health Canada of the Pfizer-BioNTech and Moderna bivalent vaccines, all Ontarians aged 12 years and older are eligible to receive a bivalent vaccine if they have completed their primary series. Bivalent vaccines provide better protection against the most recently circulating COVID-19 variants in Ontario.

Individuals can receive the bivalent booster at the recommended interval of six months, or a minimum of three months since their previous dose or following symptom onset or a positive test for a COVID-19 infection. There is good evidence that longer intervals between doses of COVID-19 vaccines result in more robust and durable immune response and higher vaccine effectiveness.

In accordance with [NACI](#), for the fall season the following high-risk groups are strongly recommended to receive a bivalent booster dose at an interval of three months since their last dose or following symptom onset or a positive test of a COVID-19 infection, including:

- Individuals aged 65 years and older
- Residents of long-term care homes, retirement homes, Elder Care Lodges, and individuals living in other congregate settings that are aged 12 years and older
- Individuals aged 12 years and older with moderately to severely immunocompromising conditions
- Individuals aged 12 years and older with an underlying medical condition that places them at high risk of severe COVID-19
- Health care workers
- Pregnant individuals
- Adults who identify as First Nations, Inuit or Métis and their adult non-Indigenous household members
- Adults in racialized and/or marginalized communities disproportionately affected by COVID-19

High-risk populations are strongly recommended to receive their bivalent booster as soon as they are eligible after the minimum three-month interval since their last dose or following symptom onset or a positive COVID-19 infection to stay protected from the most serious effects of COVID-19 during this respiratory illness season, and as individuals spend more time indoors.

Considerations for vaccination

The following factors may be taken into consideration when discussing vaccination with patients:

- ❑ Personal circumstances, such as high-risk exposure including patient-facing health care workers who care for high-risk or upcoming travel
- ❑ Any known health conditions/syndromes that may put one at greater risk for severe disease or outcomes from COVID-19 including:
 - being [moderately to severely immunocompromised](#)
 - having a high-risk medical condition: e.g., those with cardiac or pulmonary disorders, diabetes mellitus and other metabolic diseases, cancer, renal disease, anemia or hemoglobinopathy, neurologic or neurodevelopmental conditions, Class 3 obesity (BMI of 40 and over)
- ❑ living with someone who is at higher risk of severe disease or outcomes from COVID-19

How to book an appointment:

Appointments can be booked [through all vaccine channels](#), including:

- at [participating pharmacies](#)
- through the [provincial](#) COVID-19 vaccination portal ([Ontario.ca/bookvaccine](https://ontario.ca/bookvaccine))
- by calling the Provincial Vaccine Contact Centre at [1-833-943-3900](tel:1-833-943-3900) (TTY for people who are deaf, hearing-impaired or speech-impaired: [1-866-797-0007](tel:1-866-797-0007))
- directly through [public health units](#)
- through Indigenous-led vaccination clinics
- at select primary care settings
- at hospital clinics (visit your local hospital or public health unit for booking details, if available in your region)
- through mobile or pop-up clinics (visit your local public health unit website for details, if available in your region)

Long-term care, retirement home and Elder Care Lodge residents may receive their bivalent booster dose directly through the congregate home where they live.

For individuals whose public health unit uses the provincial booking system and who wish to book an appointment at an interval of three months to less than six months, they must call the PVCC at **1-833-943-3900**.

General Questions

1. What are Bivalent booster vaccines?

Bivalent booster vaccines are vaccines that target two different viruses or two different strains of the same virus. The bivalent COVID-19 vaccine is an updated version of the COVID-19 vaccine that targets the original COVID-19 virus and the Omicron variant. Bivalent Moderna (50 mcg) targets the BA.1 Omicron subvariant, while bivalent Pfizer (30 mcg) targets the BA.4 and BA.5 Omicron subvariants.

Evidence shows that both of the Omicron-containing mRNA vaccines induce a stronger and more robust immune response and are expected to provide improved protection against the Omicron variant and subvariants compared to the original mRNA vaccines. They also help restore immune protection that has decreased since previous vaccination.

Health Canada has approved the use of Pfizer-BioNTech Bivalent COVID-19 vaccine and Moderna Spikevax bivalent COVID-19 vaccine as a booster dose. The Pfizer bivalent booster is the only authorized bivalent vaccine for individuals between 12 and 17 years of age. There is no preferential recommendation between Moderna or Pfizer bivalent vaccines as booster doses for individuals 18 years and older.

The bivalent vaccine provides better protection against the most recently circulating COVID-19 variants in Ontario.

Additional information for healthcare providers:

The bivalent Pfizer-BioNTech (30 mcg) booster dose is the only authorized bivalent product for individuals 12 to 17 years. As per NACI, bivalent Moderna (50 mcg) may be offered to immunocompromised individuals 12 to 17 years off label and with informed consent.

Bivalent vaccines are formulated to better protect against the currently circulating COVID-19 variants. They can also help restore protection that has decreased since previous vaccination.

2. Do I need to complete a full primary series to receive the bivalent COVID-19 vaccine?

Currently, the bivalent COVID-19 vaccine is only authorized for use as a booster dose. Eligible Ontarians need to have completed a full primary series with the original vaccine before being eligible to receive the bivalent vaccine as a booster.

Additional information for healthcare providers:

A primary series is the initial number of doses of a COVID-19 vaccine that a person needs to develop a strong initial immune response. Most people need two doses of an mRNA vaccine (Pfizer, Moderna) or Novavax (for those over 18 years of age) to complete their primary series. If you are [immunocompromised](#), you may need additional doses to complete the primary series.

Each dose in a primary series should be given at an interval of eight weeks between doses.

3. Which COVID-19 vaccine will I be given when I attend my booster dose appointment?

As of October 17, all individuals aged 12 and older are eligible to receive a bivalent COVID-19 booster dose.

All adult COVID-19 vaccine booster dose appointments are for the bivalent vaccine.

In accordance with [NACI](#), bivalent COVID-19 boosters are strongly recommended for the most vulnerable populations, including:

- Individuals aged 65 years and older
- Residents of long-term care homes, retirement homes, Elder Care Lodges, and individuals living in other congregate settings that are aged 12 years and older
- Individuals aged 12 years and older with moderately to severely immunocompromising conditions
- Individuals aged 12 years and older with an underlying medical condition that places them at high risk of severe COVID-19
- Health care workers
- Pregnant individuals
- Adults who identify as First Nations, Inuit or Métis and their adult non-Indigenous household members
- Adults in racialized and/or marginalized communities disproportionately affected by COVID-19

Additional information for healthcare providers:

The bivalent Pfizer-BioNTech booster dose is the only authorized bivalent product for individuals 12 to 17 years. In accordance with the National Advisory Committee on Immunization (NACI), there is no preference between Moderna or Pfizer bivalent vaccines as booster doses for individuals 18 years and older. However, if the

bivalent vaccine is not readily available, an original COVID-19 vaccine should be offered to ensure timely protection.

All Health Canada approved vaccines provide lasting protection against severe outcomes from COVID-19.

4. What if I don't want the bivalent booster, can I request the original vaccine?

All COVID-19 booster dose appointments for individuals aged 12 and older are for the bivalent vaccine, which is the recommended booster. The bivalent COVID-19 booster better protects against the most recently circulating COVID-19 variants in Ontario compared with the original vaccines that were developed to solely target the original COVID-19 virus.

Health Canada has one of the most rigorous scientific review systems in the world and only approves a vaccine if it is safe, works and meets the highest manufacturing and quality standards. After a thorough and independent scientific review of the evidence, Health Canada determined that the authorized Bivalent COVID-19 vaccines are safe and effective at providing a strong immune response against COVID-19.

However, individuals who wish to receive the original COVID-19 vaccine can request to do so at the vaccine site.

Dosages and Intervals

5. How long should I wait after receiving my last dose before I get the bivalent?

Individuals may get the bivalent COVID-19 vaccine at a recommended interval of six months, or at a minimum interval of three months, after receiving their last dose or following symptom onset or a positive test for a COVID-19 infection. A longer interval between doses may provide better immune responses, although individuals in high-risk populations are strongly recommended to get their booster at the minimum interval of three months.

6. I've already had COVID-19. Should I still get a booster dose? How long should I wait to get the booster dose?

Individuals who have had COVID-19 should still get a booster dose at a recommended interval of six months after symptom onset or a positive test, or may choose a minimum interval of three months; a six-month interval may provide better immune response regardless of the product given, based on clinical discretion.

Individuals who are part of high-risk populations are at high risk of severe outcomes and are strongly recommended to get their booster dose at an interval of three months after their last dose or last COVID-19 infection.

While a previous COVID-19 infection provides some immunity, it is unclear how long that immunity lasts, and individuals may be reinfected. Evidence shows that vaccination combined with infection provides stronger and longer-lasting protection from COVID-19 than infection alone.

With the spread of new and transmissible variants, it is important that everyone gets vaccinated to protect themselves and their loved ones from the most serious effects of COVID-19.

Additional information for healthcare providers:

In accordance with [NACI](#), high-risk populations are recommended to receive their bivalent booster as soon as they are eligible after the minimum three-month interval since their last dose. This includes:

- Individuals aged 65 years and older
- Residents of long-term care homes, retirement homes, Elder Care Lodges, and individuals living in other congregate settings that are aged 12 years and older
- Individuals aged 12 years and older with moderately to severely immunocompromising conditions
- Individuals aged 12 years and older with an underlying medical condition that places them at high risk of severe COVID-19^[1]
- Health care workers^[2]
- Pregnant individuals
- Adults who identify as First Nations, Inuit or Métis and their adult non-Indigenous household members
- Adults in racialized and/or marginalized communities disproportionately affected by COVID-19

^[1] Individuals with an underlying medical condition that places them at high risk of severe COVID-19 may include: those with cardiac or pulmonary disorders, diabetes mellitus and other metabolic diseases, cancer, renal disease, anemia or hemoglobinopathy, neurologic or neurodevelopmental conditions, Class 3 obesity (BMI of 40 and over).

^[2] Health care workers are not at a higher risk of severe outcomes, unless they belong to another high-risk group. However, patient-facing health care workers who care for high-risk patients are recommended to be vaccinated to protect their vulnerable patients and all health care workers are recommended to be vaccinated to ensure health system capacity.

7. Is the dose of the bivalent the same as the other COVID-19 vaccines?

Although all the COVID-19 vaccines have varying dosages, each COVID-19 vaccine has undergone rigorous scientific testing and approvals to ensure a strong protection and good safety profile.

Individuals who are eligible to receive the bivalent COVID-19 vaccine will receive either a 50mcg booster dose of the Moderna bivalent vaccine or a 30mcg booster dose of the Pfizer bivalent vaccine, as authorized by Health Canada.

A booster dose of 30mcg of the Pfizer-BioNTech Comirnaty bivalent COVID-19 vaccine may be administered to individuals aged 12 and over, and individuals aged 18 and over are eligible to receive a 50mcg dose of the Moderna Spikevax bivalent COVID-19 booster at a six-month interval, or a minimum interval of three months since their last dose or last COVID-19 infection.

Additional information for healthcare providers:

The 50mcg formulation of the Moderna Spikevax bivalent COVID-19 vaccine contains equal parts (25mcg each) of mRNA encoding for the original SARS-CoV-2 virus and the Omicron BA.1 variant.

The 30mcg formulation of the Pfizer-BioNTech Comirnaty bivalent COVID-19 vaccine contains equal parts (15 mcg) of mRNA encoding for the original SARS-CoV-2 virus and the Omicron BA.4 and BA.5 variant.

Vaccine Effectiveness and Recommendations

8. Is vaccination with the bivalent COVID-19 booster being strongly recommended?

Individuals are recommended to receive a bivalent booster dose to help restore protection that may have decreased since their last dose. The bivalent COVID-19 booster is a safe and effective way for people to better protect themselves and their loved ones against the most recently circulating COVID-19 variants in Ontario.

Eligible individuals may receive a bivalent booster after completion of their primary series and at a recommended interval of six months (168 days) or a minimum of three months (84 days) since their last dose or following symptom onset or a positive test for a COVID-19 infection.

All Ontarians aged 12 and over should receive a booster dose at a recommended interval of six months, or a minimum of three months since their last dose or following

symptom onset or a positive test for a COVID-19 infection. However, a six-month interval may provide better immune response.

In accordance with [NACI](#), individuals belonging to the following high-risk groups are strongly recommended to get their bivalent booster as soon as they are eligible (i.e., at an interval of three months):

- Individuals aged 65 years and older
- Residents of long-term care homes, retirement homes, Elder Care Lodges, and individuals living in other congregate settings that are aged 12 years and older
- Individuals aged 12 years and older with moderately to severely immunocompromising conditions
- Individuals aged 12 years and older with an underlying medical condition that places them at high risk of severe COVID-19
- Health care workers
- Pregnant individuals
- Adults who identify as First Nations, Inuit or Métis and their adult non-Indigenous household members
- Adults in racialized and/or marginalized communities disproportionately affected by COVID-19

9. How effective are the bivalent COVID-19 vaccines compared to the monovalent vaccines?

All Health Canada approved vaccines provide lasting protection against severe outcomes from COVID-19.

The bivalent COVID-19 vaccines better protect against the most recently circulating COVID-19 variants in Ontario. That is why the province offers bivalent COVID-19 boosters to all individuals aged 12 and over.

As evidence shows that vaccine protection decreases over time, all eligible Ontarians are recommended to receive a bivalent booster at an interval of six months, or may choose a minimum of three months, since their last dose or following symptom onset or a positive test for a COVID-19 infection. Individuals belonging to the high-risk groups are strongly recommended to get their bivalent booster at an interval of three months.

Additional information for healthcare providers:

The Moderna Spikevax bivalent (50mcg) contains 25 mcg of mRNA encoding for the original SARS-CoV-2 virus and 25 mcg of mRNA encoding the Omicron BA.1 variant. When given as a second booster dose, the bivalent Moderna (50 mcg) demonstrated a higher neutralizing antibody response against the original strain, Omicron BA.1 and Omicron BA.4 and BA.5 among individuals with and without prior

infection when compared to a second booster dose of the monovalent Moderna (50 mcg). This effect was consistent across individuals from various age groups (18 years and older).

The bivalent Pfizer-BioNTech (30mcg) contains 15 mcg of mRNA encoding for the original SARS-CoV-2 virus and 15 mcg of mRNA encoding the Omicron BA.4 and BA.5 variants. There is no current clinical data available for bivalent Pfizer-BioNTech (30 mcg), and the regulatory review process was centered around preclinical immunogenicity data from the BA.4 and BA.5 bivalent Pfizer-BioNTech (30 mcg) vaccine as well as indirect clinical data from the use of the BA.1 bivalent Pfizer-BioNTech (30 mcg) and the monovalent Pfizer-BioNTech (30 mcg) vaccine candidates in clinical trials.

10. Which bivalent booster is better or more effective in protecting me against new strains of the COVID-19 virus?

If you are aged 18 years and older, neither bivalent is better; the best bivalent dose is the first one offered to you.

If you are aged 12 to 17 years, you will receive the Pfizer bivalent vaccine as it is the only vaccine authorized for that age group. However, with informed consent you can receive the Moderna bivalent vaccine off-label.

Health Canada has one of the most rigorous scientific review systems in the world and only approves a vaccine if it is safe, works and meets the highest manufacturing and quality standards. Bivalent COVID-19 vaccines better protect against the most recently circulating COVID-19 variants in Ontario.

Regardless of which Omicron subvariant is targeted by the bivalent vaccine, people aged 18 and older should get the first bivalent booster vaccine that is offered.

11. How effective is the bivalent vaccine at protecting against Omicron and its variants?

The updated bivalent vaccines better protect against the currently circulating COVID-19 variants in Ontario compared with the original vaccines that were developed to solely target the original COVID-19 virus strain.

Additional information for healthcare providers:

When administered as a second booster dose, Moderna Spikevax bivalent (50 mcg) elicited higher neutralizing antibody responses against the original strain, Omicron BA.1 and Omicron BA.4 and BA.5 among individuals with and without prior infection when compared to a second booster dose of Moderna Spikevax original (50 mcg).

This effect was consistent across age groups studied, in individuals 18-65 years of age and individuals >65 years of age.

Clinical trial data showed that Moderna Spikevax bivalent (50 mcg) administered as a second booster dose to individuals ≥ 18 years of age had a similar reactogenicity profile to that of Moderna Spikevax original (50 mcg) given as a second booster dose.

There is no current clinical data available for bivalent Pfizer-BioNTech (30 mcg), and the regulatory review process was centered around preclinical immunogenicity data from the BA.4.4 and BA.5 bivalent Pfizer-BioNTech (30 mcg) vaccine as well as indirect clinical data from the use of the BA.1 bivalent Pfizer-BioNTech (30 mcg) and the monovalent Pfizer-BioNTech (30 mcg) vaccine candidates in clinical trials.

12. Is the bivalent vaccine being strongly recommended for individuals who are immunocompromised or have medical conditions?

Individuals aged 12 and older who are moderately to severely immunocompromised are strongly recommended to stay up to date on their vaccinations and receive their bivalent booster dose as soon as they are eligible after the minimum three-month interval since their last dose or following symptom onset or a positive test for a COVID-19 infection, to protect themselves and their loved ones from the most serious effects of COVID-19.

Vaccine Safety

13. Will I experience side effects or reactions?

The bivalent COVID-19 vaccine has a similar safety profile to the original vaccine, with the same mild adverse reactions that resolve quickly. Like any medication or vaccinations, the COVID-19 vaccine may cause side effects. However, these side effects are typically mild to moderate and on average do not last longer than three days. The most frequently reported short-term side effects following the COVID-19 vaccine include soreness, swelling or colour changes (for example red or purple) at the injection site, fatigue, headache, chills, muscle aches and loss of appetite. These side effects are part of the body's efforts to build immunity to COVID-19 following vaccination. Mild side effects and reactions will typically subside anywhere from a few hours to a few days after vaccination.

14. Have the long-term side effects of the bivalent COVID-19 vaccine been determined?

The bivalent vaccine has a similar safety profile to the original vaccine, with the same mild adverse reactions that resolve quickly.

The benefits of getting vaccinated and being protected against COVID-19 far outweigh the risks of any side effects from the vaccine. COVID-19 infection may cause longer-lasting symptoms and health problems for some people, which is why it is important that individuals stay up to date with their vaccinations.

Ontario constantly reviews new evidence regarding the COVID-19 vaccines and continues to ensure that we offer COVID-19 vaccines that are effective, safe and will protect you and your family.

Additional information for healthcare providers:

Like any medication or vaccinations, the COVID-19 vaccine may cause side effects. However, these side effects are typically mild to moderate and on average do not last longer than three days. The most frequently reported short-term side effects following the COVID-19 vaccine include soreness, swelling or colour changes (for example red or purple) at the injection site, fatigue, headache, chills, muscle aches and loss of appetite. These side effects are part of the body's efforts to build immunity to COVID-19 following vaccination. Mild side effects and reactions will typically subside anywhere from a few hours to a few days after vaccination.

The frequency of adverse events following immunization with Moderna Spikevax bivalent was similar or lower relative to that of a first booster dose of Moderna Spikevax original (50 mcg), and of the second dose of the Moderna Spikevax original primary series (100 mcg). No new safety signals were identified. Although the trial size was limited, there were no vaccine related cases of death, myocarditis and/or pericarditis reported during the study period.

While there are no safety data currently available for bivalent Pfizer-BioNTech (30 mcg), post-market safety data from the use of the monovalent Pfizer-BioNTech (30 mcg) vaccine suggest that when used as a booster dose, the BA.4 and BA.5 bivalent vaccine will be well tolerated with a similar safety profile to the monovalent Pfizer-BioNTech (30 mcg). NACI will continue to monitor post-market safety and surveillance data and update recommendations as needed.

15. Has the bivalent COVID-19 vaccine been thoroughly tested? How do I know it is safe?

Health Canada has one of the most rigorous scientific review systems in the world and only approves a vaccine if it is safe, works and meets the highest manufacturing and quality standards. After a thorough and independent scientific review of the evidence, Health Canada determined that the authorized bivalent COVID-19 vaccines are safe and effective at providing a strong immune response against COVID-19.

Additional information for healthcare providers:

The safety and reactogenicity of Moderna Spikevax bivalent (50 mcg) administered as a second booster dose was similar to Moderna Spikevax original (50 mcg), when given as a second booster dose. Also, the frequency of adverse events following immunization with Moderna Spikevax bivalent was similar or lower relative to that of a first booster dose of Moderna Spikevax original (50 mcg), and of the second dose of the Moderna Spikevax original primary series (100 mcg). No new safety signals were identified.

Although the trial size was limited, there were no reports of vaccine-related cases of myocarditis, pericarditis or deaths during the study period. No new safety signals were identified with the bivalent Moderna (50 mcg).

While there are no safety data currently available for bivalent Pfizer-BioNTech (30 mcg), post-market safety data from the use of the monovalent Pfizer-BioNTech (30 mcg) vaccine suggest that when used as a booster dose, the BA.4 and BA.5 bivalent vaccine will be well tolerated with a similar safety profile to the monovalent Pfizer-BioNTech (30 mcg).

We will monitor post-market safety surveillance data as it emerges and update the recommendations as needed.

16. What is the risk of myocarditis and/or pericarditis with the bivalent?

Myocarditis/pericarditis following COVID-19 mRNA vaccines remains a rare adverse event following immunization (AEFI), which is defined by the Canadian Immunization Guide as occurring at frequency of 0.01 per cent to less than 0.1 per cent. The risk of myocarditis/pericarditis from a booster dose is significantly lower than the risk from the primary series. Myocarditis and pericarditis are much more likely to occur after a COVID-19 infection than after receiving a COVID-19 vaccine

Additional information for healthcare providers:

Although the trial size was limited, there were no vaccine-related cases of myocarditis, pericarditis or deaths reported during the study period. No new safety signals were identified in the trials for Moderna Spikevax bivalent (50 mcg).

Post-market safety surveillance data to date indicate that the risk of myocarditis following a booster dose is lower compared to that following the second dose in the primary series, and current data do not show a product-specific difference in the risks of myocarditis and/or pericarditis after a booster dose of an mRNA COVID-19 vaccine. As a result, NACI has recommended that adults 18 to 29 years of age can receive a booster dose with any available mRNA COVID19 vaccine for which they are currently eligible.

We will continue to monitor post-market safety surveillance data as it emerges and update its recommendations as needed.

The use of Pfizer-BioNTech Comirnaty (30 mcg) is the only bivalent mRNA product authorized for use as a booster in individuals 12 to 17 years. As per NACI, bivalent Moderna (50 mcg) may be offered to immunocompromised individuals 12 to 17 years off label and with informed consent.

Additional Resources

17. I'm seeing a lot of vaccine hesitancy in my patient population. Where can I go for resources to support these conversations?

The [Centre for Effective Practice](#) website provides information on COVID-19 vaccines, including eligibility and administration.

18. My patient's vaccine hesitancy is persistent. Where can I refer them for additional support?

Visit the [Ontario COVID-19](#) website, which continues to be updated to reflect any changes to vaccine recommendations and eligibility.

You can refer your patients to the Provincial Vaccine Contact Centre to speak to an experienced agent or health specialist at 1-833-943-3900 (TTY for people who are deaf, hearing-impaired or speech-impaired: 1-866-797-0007), available in more than 300 languages, seven days a week from 8:00 a.m. to 8:00 p.m.

In addition, for children and youth, patients, parents or caregivers can book a confidential phone appointment with the SickKids COVID-19 Vaccine Consult Service. No referral is necessary, and the service is available to all residents of Ontario. The consult service provides expert guidance for children, youth and those who are pregnant, breastfeeding, or planning to conceive. Patients can book an appointment with a SickKids Registered Nurse online at sickkids.ca/vaccineconsult, or by calling toll-free 1-888-304-6558. This service is available in multiple languages using over-the-phone language interpretation.

Scarborough Health Network (SHN) is offering a service open to individuals across Ontario: The VaxFacts Clinic. The clinic provides individuals with a one-to-one phone consultation with qualified SHN doctors who understand you may have questions or concerns, or just want to learn more. VaxFacts has also partnered with the Black Physicians' Association of Ontario to provide a dedicated service for members Black communities who have questions about COVID-19 vaccines and would like to discuss them with a trusted healthcare provide also from the Black community.

To book an appointment, please visit www.shn.ca/vaxfacts or call 416-438-2911 ext. 5738. Appointments are available seven days a week, from 9 a.m. to 8 p.m. and is capable of providing assistance in over 200 languages.

For vaccine information related to accessibility:

If you need information about COVID-19 vaccines, please visit [Supporting Individuals, Families and Caregivers During COVID-19 and Beyond – ConnectABILITY](#). Here you will also find information on resources and support for caregivers, vaccine confidence support, watch videos from trusted sources, etc. You can also be transferred to the Provincial Testing Isolation and Information Line which connects those with questions related to the vaccine to health specialists.

For transportation related supports:

A number of public health units are offering options to provide transportation to clinics for those that do not have it, to inquire about these options, please visit their website.

The government has also partnered with the Ontario Community Support Association to provide accessible transportation for people with disabilities or chronic medical conditions, and seniors with mobility issues, to help them get to and from clinics so they can receive their COVID-19 vaccine.

For homebound residents needing a home visit:

In-home vaccinations may be arranged with the primary/home care provider or the PHU where available. Alternative options may be found on the [PHU's website](#).

Please visit your local public health unit's website to explore further options and/or contact the PHU directly.

COVID-19 vaccination and your practice

Billing

19. How do I bill for a bivalent COVID-19 vaccine given in my office?

Physicians administering COVID-19 vaccines in settings that are **not** designated by the ministry as COVID-19 Assessment Centres are eligible to claim G593A as described in [OHIP INFOBulletin 211201](#).

G593A is eligible for payment to the billing physician if they have personally rendered the COVID-19 immunization service, OR, if they have delegated the service in accordance with the payment rules and conditions described at pages GP62 and GP63 of the [Schedule of Benefits for Physician Services](#).

In scenarios where the patient's sole reason for the visit is to obtain the COVID-19 vaccine, G700 (or Q593 in blended models) is also eligible for payment.

In scenarios where the patient has attended the visit to obtain an insured service in addition to the vaccine, G593 is payable for the vaccination service in addition to the other applicable fee codes (assuming all Schedule of Benefits requirements have been met).

20. Can I bill for counselling patients about the bivalent COVID-19 vaccine?

The provision of routine information about the COVID-19 vaccine does not constitute a separately payable counselling service and is included in the vaccination service.

Other than routine education about the vaccination service, when a medically necessary counselling service is rendered that meets the payment requirements described within Schedule of Benefits, the applicable fee code may be claimed (e.g., K013).

Supply and Wastage

21. How do I order vaccine supply?

Each local public health unit has supply of the bivalent vaccine for their region's eligible population. If you are interested in receiving and administering the vaccine, please reach out to your local public health unit.

22. How many doses of the bivalent COVID-19 vaccine is Ontario expecting to receive from the federal government and when?

Ontario has received 3M doses of the bivalent COVID-19 vaccine from the federal government.

Ontario is expecting to receive enough doses of the bivalent vaccine for all Ontarians who want to receive a booster.

23. How does the vaccine need to be stored?

For more information please see the [General COVID-19: Vaccine Storage and Handling Guidance](#) document.

24. What should I do if I must waste doses of the vaccine?

It remains important to limit expiry of closed vials through proper inventory management and storage and handling, including fridge monitoring (e.g., temperature logs), stock rotation based on expiry and "must use by" dating, and recommended packing and transport per product specifications.

However, opening a vial to vaccinate one or a small number of individuals may be necessary to support vaccination efforts and reach provincial targets. This is especially important where a vial is reaching its “must use by” date.