



Timing of Vaccines to Protect Adults 50 Years and Older From Seasonal Illnesses

*Unvaccinated people can get a single dose of RSV vaccine, and either a single dose of PCV20 or PCV21, or PCV15 followed by PPSV23. Other pneumococcal vaccination options depend on prior vaccinations.

[†]For COVID-19 vaccine, give prior year's vaccine during summer months until updated vaccine available in fall (give updated vaccine at least 8 weeks after prior COVID-19 vaccination in accordance with updated guidance).

[‡]Continue influenza vaccination throughout influenza season. Continue RSV vaccination of eligible adults.

[§]People who may not return for influenza vaccination during later months may be vaccinated in July/August.

[¶]Influenza vaccine can continue to be given in the spring if flu viruses are circulating and unexpired vaccine is available.

- People 50-74 with high risk conditions and everyone ≥75 years are at risk of severe RSV and should get an RSV vaccine. People at highest risk of severe RSV disease include those with lung diseases; cardiovascular diseases; moderate or severe immune compromise; diabetes mellitus; neurologic or neuromuscular conditions; kidney disorders, liver disorders, and hematologic disorders; persons who are frail or who live in long-term care facilities; and persons with other conditions that the provider determines might increase the risk for severe RSV disease. See CDC's RSV vaccination guidelines for more details.^b
- For all people 50 years and older and those 19-49 years with high-risk conditions, recommend pneumococcal vaccine if not previously vaccinated. High-risk factors for adults 19-49 years include alcoholism, cerebrospinal fluid (CSF) leak, cochlear implant, heart disease, lung disease (including asthma), diabetes, immunocompromising conditions, and smoking. Check out CDC's [PneumoRecs VaxAdvisor Mobile App](#).
- Coadministering RSV vaccine with one or more other vaccines at the same visit is acceptable, but might increase local or systemic reactogenicity.^{a,b} Discuss concerns and preferences with patients regarding vaccine and coadministration.
- Updated influenza vaccines generally become available in late July/August and expire on June 30 of each year. Give prior year's vaccine during summer months until updated vaccine available in fall.

- Most private insurance cover all vaccines, but patients and providers should confirm their approved provider locations for vaccination.
- Medicare part B covers influenza, pneumococcal vaccine, hepatitis B and COVID-19 vaccines.
- Medicare part D covers RSV vaccines, and most other adult vaccines.
- Medicaid covers most adults for all approved vaccines beginning October 1, 2023.

^bAdditional information on RSV vaccination can be found at: <https://www.cdc.gov/vaccines/vpd/rsv/hcp/older-adults.html#vax-rec>.



American College of Physicians Endorsed [U.S. Vaccine Recommendations](#)

**American College of Obstetricians and Gynecologists Endorsed
U.S. Vaccine Recommendations**