Australian Government
Department of Health, Disability and Ageing

AUSTRALIAN TECHNICAL ADVISORY GROUP ON IMMUNISATION (ATAGI) CLINICAL ADVICE

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STATEMENT ON TRANSITION OF COVID-19 VACCINES TO THE NATIONAL IMMUNISATION PROGRAM

Key Points for 2026

- From 1 October 2026, COVID-19 vaccines will be provided via the National Immunisation Program (NIP). This will replace the stand-alone National COVID-19 Vaccine Program (NCVP).
- The NCVP was established under emergency arrangements to support broad access to COVID-19 vaccines during the pandemic response when most people had little or no immunity against the disease.
- COVID-19 is now endemic in Australia and continues to disproportionately affect certain populations.
- Vaccination remains an important measure to protect those at risk of severe disease from COVID-19.
- COVID-19 affects people of all ages, but older adults, older Aboriginal and Torres Strait Islander people, and people with severe immunocompromise or certain medical conditions have the highest risk of severe disease or death.
- The current COVID-19 vaccine available for use is Comirnaty LP.8.1.
- COVID-19 vaccines can be co-administered with any other vaccine for people aged ≥5 years.
- All vaccinations must be recorded on the Australian Immunisation Register (AIR).
- All 'recommended' doses of COVID-19 vaccine are funded under the NIP. All 'consider' doses of COVID-19 vaccine are not funded under the NIP. People who are not eligible for a funded COVID-19 vaccine may choose to purchase the vaccine privately based on a risk-benefit discussion with their healthcare provider.

NIP Eligibility

*Advice is summarised in **Table 1**. Updated details in the Australian Immunisation Handbook COVID-19 chapter will be available on 1 October 2026.*

From 1 October 2026, COVID-19 vaccines will be **funded** through the NIP for the following groups:

- all adults aged 75 years and over (two funded doses per year)
- adults aged 65–74 years (one funded dose per year)
- Aboriginal and Torres Strait Islander adults aged 50–74 years (one funded dose per year)
- adults aged 18-64 years with severe immunocompromise (one funded dose per year)

COVID-19 vaccine can be offered once or twice a year to eligible people, with doses spaced approximately 6 months apart. Although some seasonal patterns have emerged in the last two years with winter and summer peaks, seasonality of SARS-CoV-2 circulation is not yet well established, and vaccination should not be deferred solely based on the time of year. There is no recommended minimum interval between COVID-19 infection and vaccine dose.

Key Program Changes

Recommendations on the administration of COVID-19 vaccines have been updated to reflect the most current epidemiology and available evidence. All 'recommended' doses are funded under the NIP. All 'consider' doses can be purchased privately based on a risk-benefit discussion with a healthcare provider.

Key changes to previous recommendations include:

Adults aged 65-74 years

- Adults aged 65-74 years with medical risk conditions or severe immunocompromise are **recommended** to receive one dose of COVID-19 vaccine a year and can **consider** a second annual dose, given approximately 6 months apart.

- Adults aged 65–74 years with no medical risk conditions, who were previously advised to consider a second dose each year, are now only **recommended** to receive one dose per year, as the risk of serious illness or death is significantly lower than for adults aged ≥75 years.
- Australian data for the period of December 2024 to May 2025 showed the COVID-19 mortality rate for all adults aged ≥75 years is more than 8 times higher than for adults aged 65–74 years, inclusive of all COVID-19 vaccination status.

Aboriginal and Torres Strait Islander adults

- Aboriginal and Torres Strait Islander adults aged 50–74 years with medical risk conditions are now **recommended** to receive one dose every year and can **consider** a second annual dose, given approximately 6 months apart.
- Data from the Australian Bureau of Statistics (2022-2026) showed that Aboriginal and Torres Strait Islander people had 1.5 times higher mortality rate from COVID-19 compared to non-Indigenous populations across all age groups.

Pregnancy

- Throughout the COVID-19 pandemic, pregnancy recommendations evolved to align with the best available evidence and epidemiology. A dose of COVID-19 vaccine may now be **considered** from 20 weeks gestation in each pregnancy.
- Maternal vaccination provides passive protection against COVID-19 in infants, with higher estimated vaccine antibody levels transferred to the infant when maternal vaccination occurs from 20 weeks gestation compared with earlier pregnancy, although the optimal timing of vaccination has not been established.
- For those with risk factors for severe COVID-19, it is safe to receive the vaccine dose at any time during pregnancy.
- COVID-19 vaccines can be safely given at the same time as pertussis, RSV, Influenza or other vaccines indicated during pregnancy.

Table 1. COVID-19 recommendations by cohort and risk in Australia

<table>
<tr><th>Cohort</th><th>No medical risk conditions</th><th>Medical risk conditions*</th><th>Severe immunocompromise*</th></tr>
<tr><td>≥75 years</td><td colspan="3">Recommend 2 doses each year</td></tr>
<tr><td>≥65–74 years</td><td>Recommend 1 dose each year</td><td colspan="2">Recommend 1 dose each year and consider a second annual dose</td></tr>
<tr><td>Aboriginal and Torres Strait Islander people aged ≥50–74 years</td><td>Recommend 1 dose each year</td><td colspan="2">Recommend 1 dose each year and consider a second annual dose</td></tr>
<tr><td>≥18–64 years</td><td colspan="2">Consider 1 dose each year</td><td>Recommend 1 dose each year and consider a second annual dose</td></tr>
<tr><td>6 months^–17 years</td><td>Not recommended</td><td colspan="2">Consider 1 dose each year</td></tr>
<tr><td>Pregnant women</td><td colspan="3">Consider 1 dose from 20 weeks of gestation in each pregnancy</td></tr>
</table>

* Medical risk conditions and severe immunocompromise as specified the Australian Immunisation Handbook COVID-19 Chapter (Available 1 October 2026).

^Children aged 6m to <5y with severe immunocompromise receiving COVID-19 vaccine for the first time or people being revaccinated after haematopoietic stem cell transplant or CAR-T cell therapy should receive 2 ‘priming’ doses, 8 weeks apart.