

Overview

Maintaining an up-to-date influenza (flu) vaccination status is essential for a safe and healthy workplace. Below is important information to assist you in smoothly submitting your vaccination documentation.

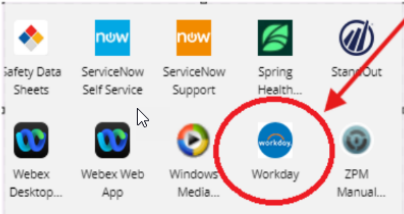
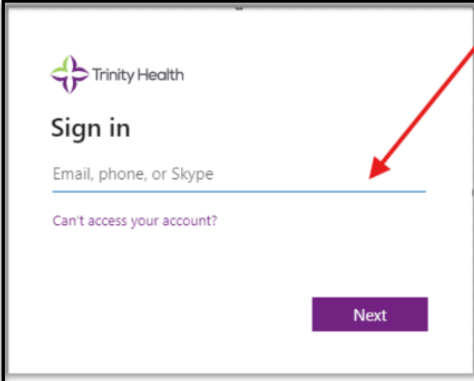
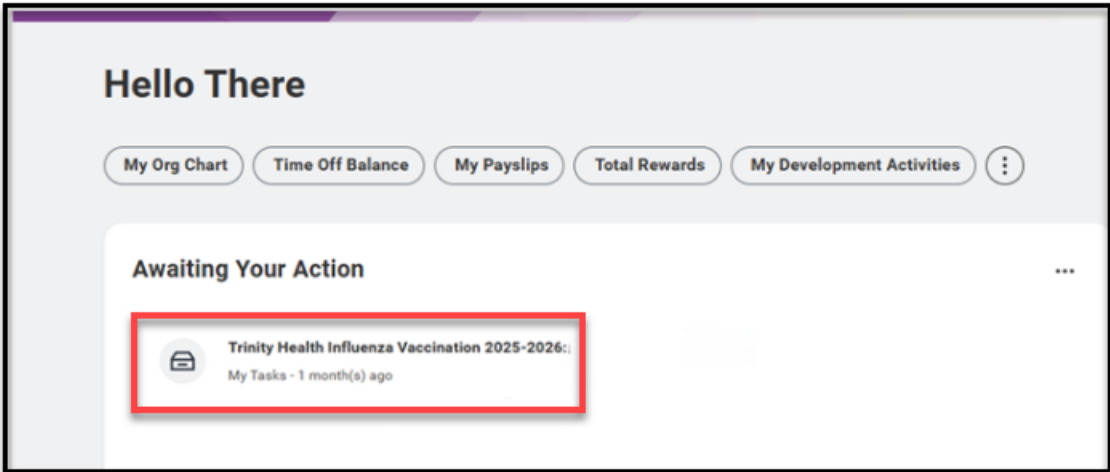
What are the vaccination requirements?

- All colleagues are required to report their 2025-2026 flu vaccination status through Workday starting Oct 1st.
 - Colleagues who **do not** have a work location in Illinois will be required to provide one of the following:
 - Proof of updated 2025-2026 flu vaccine, or completion of a Vaccine Declination.
 - Colleagues with a **work location in Illinois** will be required to provide one of the following:
 - Proof of updated 2025-2026 flu vaccine, or completion of a Religious or Medical Exemption.
- Acceptable proof of flu vaccination documentation includes vaccination cards and statements from medical providers confirming receipt of the vaccine on or after August 1, 2025.
- **For Illinois colleagues only:** Medical exemption must be completed by a treating physician (M.D. or D.O.) or treating advanced practice professional (nurse practitioner, physician assistant, and clinical nurse specialist). Health care providers cannot sign their own exemption/certification request.

Is there a cost for the vaccine?

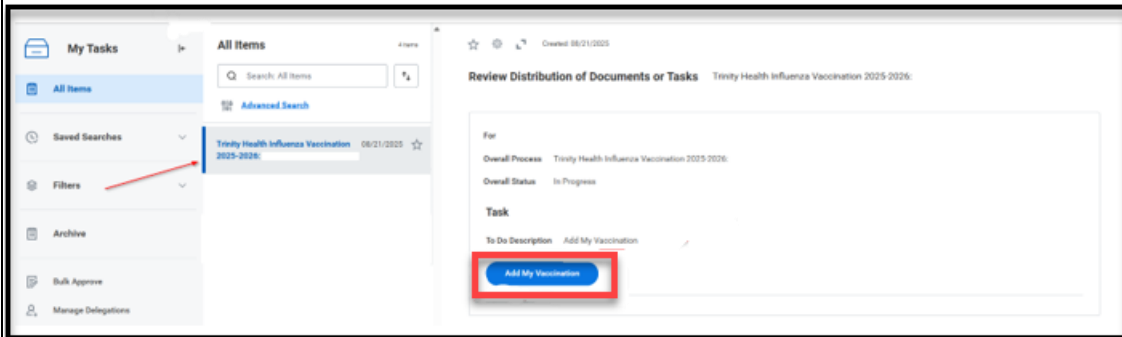
- Colleagues and their family members who are enrolled in a Trinity Health medical plan with OptumRx as their pharmacy benefit manager have the option to use their pharmacy card to receive a flu vaccine at a Health Ministry pharmacy or an OptumRx network pharmacy with a \$0 copay.
- Colleagues enrolled in non-Trinity Health medical plans should contact their medical plan for vaccination coverage information.

Where do I submit my vaccination documentation?

Step	Action
1	Colleagues will need to log in to Workday.  Step #1: While at work, you can launch the Workday application on ZenWorks window  Step #2: Log in using your Trinity Health email address and network password if single sign on does not populate.
2	On the Workday homepage, click “Trinity Health Influenza Vaccination 2025-2026” under “Awaiting Your Action.” 

3

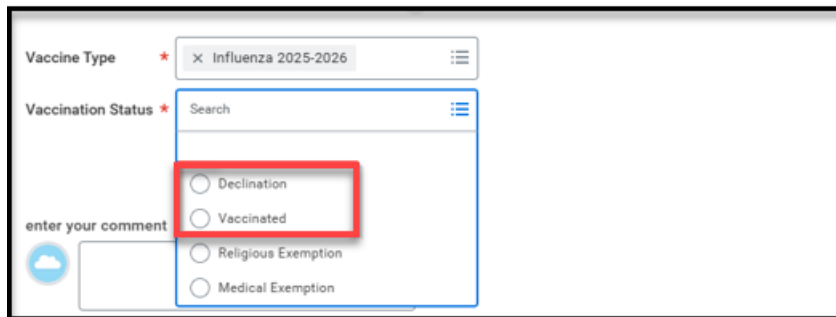
In “My Tasks,” open “Trinity Health Influenza Vaccination 2025-2026” and click “Add My Vaccination” on the right.



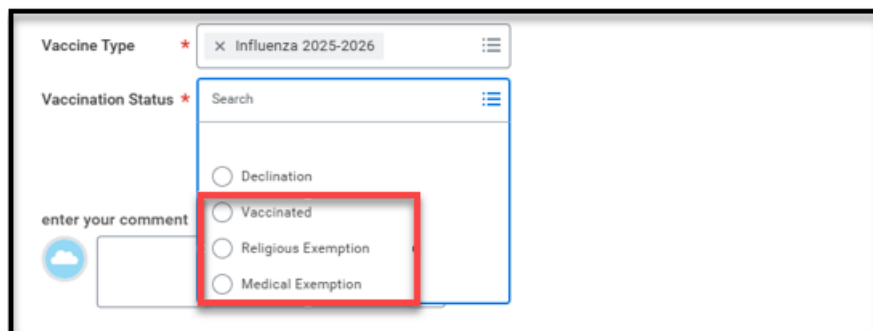
4

Depending on your work location, some vaccination status options may not be available and will result in an error message in Workday.

- For colleagues who **do not** have a work location in Illinois, you may select “**Vaccinated**” or “**Declination**” under the vaccination status box.



- For colleagues who have a work location in **Illinois**, you may select “**Vaccinated**,” “**Religious Exemption**,” or “**Medical Exemption**” under the vaccination status box.



Only one vaccination status may be selected and cannot be changed after submission. Please ensure the available options align with your work location before proceeding.

- **Declinations:** If your work location is outside Illinois, you may select “**Declination.**” Review the attestation before selecting “**Confirm,**” then submit the task.

Attestation I have reviewed and elected not to receive the 2025-2026 annual influenza vaccination. I have read the information provided to me on the risks, benefits, and side effects of the influenza vaccine <https://www.cdc.gov/flu/season/2025-2026.html>. In submitting this form to decline the flu vaccine, I acknowledge I am aware of the following:

Trinity Health strongly supports annual flu vaccine as the best way to prevent serious illness, hospitalization, and death from the flu.

The flu vaccine may result in a reduction of flu symptoms or may even prevent contracting the flu completely.

If I do contract the flu, I may not be able to work.

Depending on community levels of influenza, I may have to wear a mask to work in accordance with State, Local, and/or Trinity Health policy if I choose not to be vaccinated against flu.

If I change my mind, I can receive the flu vaccine for free from Colleague/Employee Health and update my flu vaccine record later.

Confirm ☒

enter your comment

Attachments

Drop files here

or

Submit Save for Later Cancel

- **Vaccinated:** Colleagues at all locations may record their flu vaccination. Enter the vaccination date (not before 08/01/25 or in the future), review the attestation, check “**Confirm,**” upload supporting documentation, and select “**Vaccination**” under category section before submitting your vaccination task.

Vaccination Details

Vaccination Event Date * 09/01/2025

Attestation

I understand that if I do not provide complete and sufficient documentation of my 2025–2026 flu vaccination, I may be required to locate and submit proof later to meet audit and regulatory compliance requirements.

Confirm *

☒

enter your comment

Attachments

Drop files here

or

Select files

Attachments

DOC

2025-2026 Flu Vaccination Record.docx

✓ Successfully Uploaded!

Description

Category *

×

Vaccination

Upload

Submit

Save for Later

Cancel

- Religious Exemption:** If your work location is Illinois, you may select “**Religious Exemption.**” Please review the attestation carefully to ensure it applies before selecting “**Confirm**” and submitting the vaccination task.

Vaccination Status * X Religious Exemption

Attestation You may indicate your request for a religious exemption to the influenza vaccination requirement by marking the statement below. In this analysis, "religious belief, practice, or observance" includes moral or ethical beliefs as to what is right and wrong which are sincerely held with the strength of traditional religious views. Social, political, or economic philosophies, as well as personal preferences, do not constitute sincerely held religious beliefs.

By signing this form, I declare that I have a sincerely held religious belief, practice, or observance that conflicts with and prohibits the influenza vaccination. Approved requests may be revised or revoked at any time to comply with state law, federal law, and/or employer policy. By submitting this form, I attest that my statement above is true and accurate and that I hold a sincerely held religious belief that conflicts with and prohibits influenza vaccination.

Confirm ☒

enter your comment

Attachments

Drop files here

or

Select files

Submit Save for Later Cancel

- **Medical Exemption:** Before selecting this status, ensure your medical exemption form is completed and signed by your healthcare provider. Supporting documentation is required to submit this vaccination status in Workday.

Vaccination Status *

Medical Exemption

Attestation

I have completed the colleague section, and the healthcare provider section has been completed by a treating physician (M.D. or D.O.) or treating advanced practice professional (nurse practitioner, physician assistant, and clinical nurse specialist). Health Care Providers cannot sign their own exemption/certification request.

I understand that failure to provide a complete and sufficient copy of my medical exemption may require me to locate and submit the form later for audit and regulatory compliance purposes. In the event I fail to provide documentation, I understand that I may be subject to disciplinary action up to and including termination.

Confirm *

☒

enter your comment

Attachments

Drop files here

or

Select files

Attachments

DOC

Medical Exemption 2025-2026.docx

✓ Successfully Uploaded!

Description

Category *

Vaccination

Upload

Submit

Save for Later

Cancel

Additional Resources

[Colleague FAQs](#)

[Medical Exemption Form](#)

[Clinical Effectiveness](#)