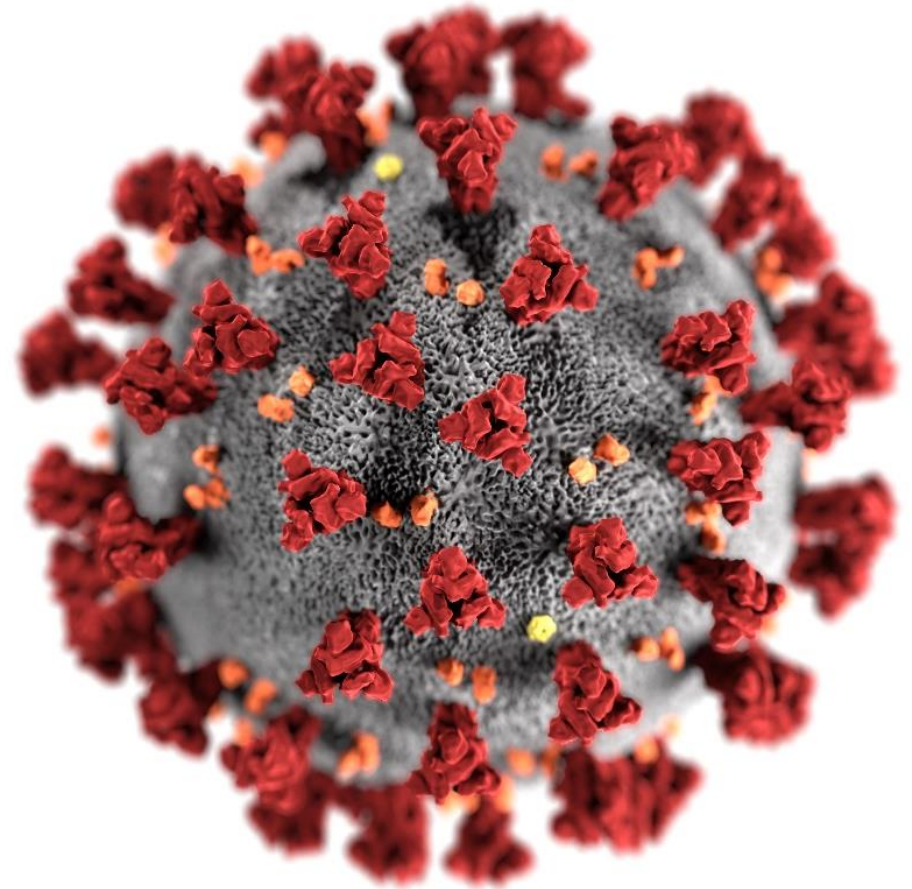


COVID-19 Vaccine Implementation Planning Update

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CAPT, USPHS
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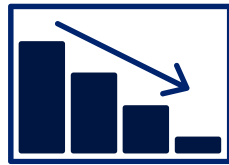
October 30, 2020



Overarching objectives for COVID-19 vaccination program



Ensure safety and effectiveness of COVID-19 vaccines



Reduce mortality, morbidity, and incidence of COVID-19 disease

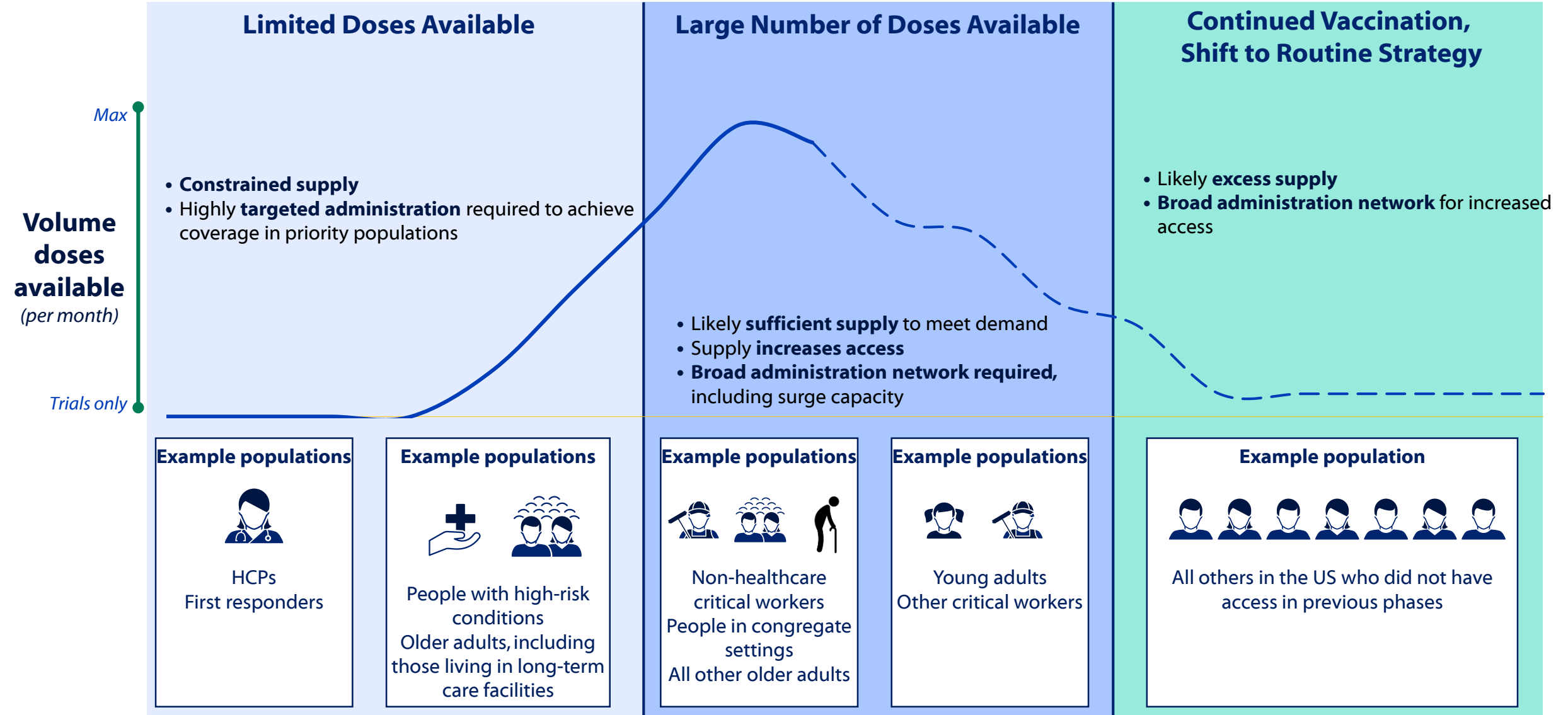


Help minimize disruption to society and economy, including maintaining healthcare capacity



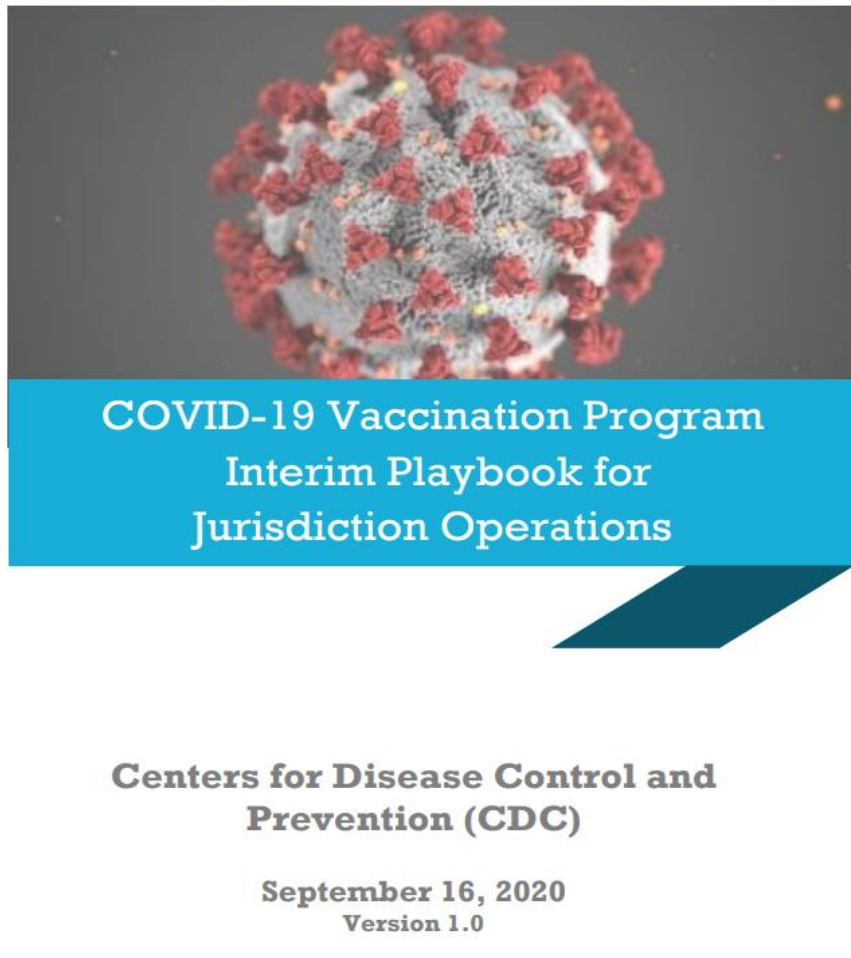
Ensure equity in vaccine allocation and distribution

Distribution will adjust as volume of vaccine doses increases



Illustrative example populations; final prioritization to be decided by ACIP

Jurisdictional COVID-19 vaccination plan summary



- All 64 jurisdictions returned a COVID-19 vaccination plan.
 - Federal agency plans received (VA, IHS, DOD, DOS, BOP)
- Plans reviewed by at least three CDC subject matter experts.
- Feedback returned by Oct 26, 2020
- Executive summaries requested by Oct 26, 2020
- Will update information about plans on CDC website

https://www.cdc.gov/vaccines/imz-managers/downloads/COVID-19-Vaccination-Program-Interim_Playbook.pdf



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10/30/20

Jurisdictional plans showed strengths and challenges

Strengths

- **Phased approach to vaccination:** Jurisdictions have organized their planning around the allocation phasing assumptions
- **Adverse Event Reporting:** Jurisdictions have set out clear plans to train and equip providers on VAERS
- **Second-dose reminders:** Jurisdictions have laid out deep operational detail for second-dose reminders (e.g., via text, email, automated call), which, in many cases, is already live

Challenges

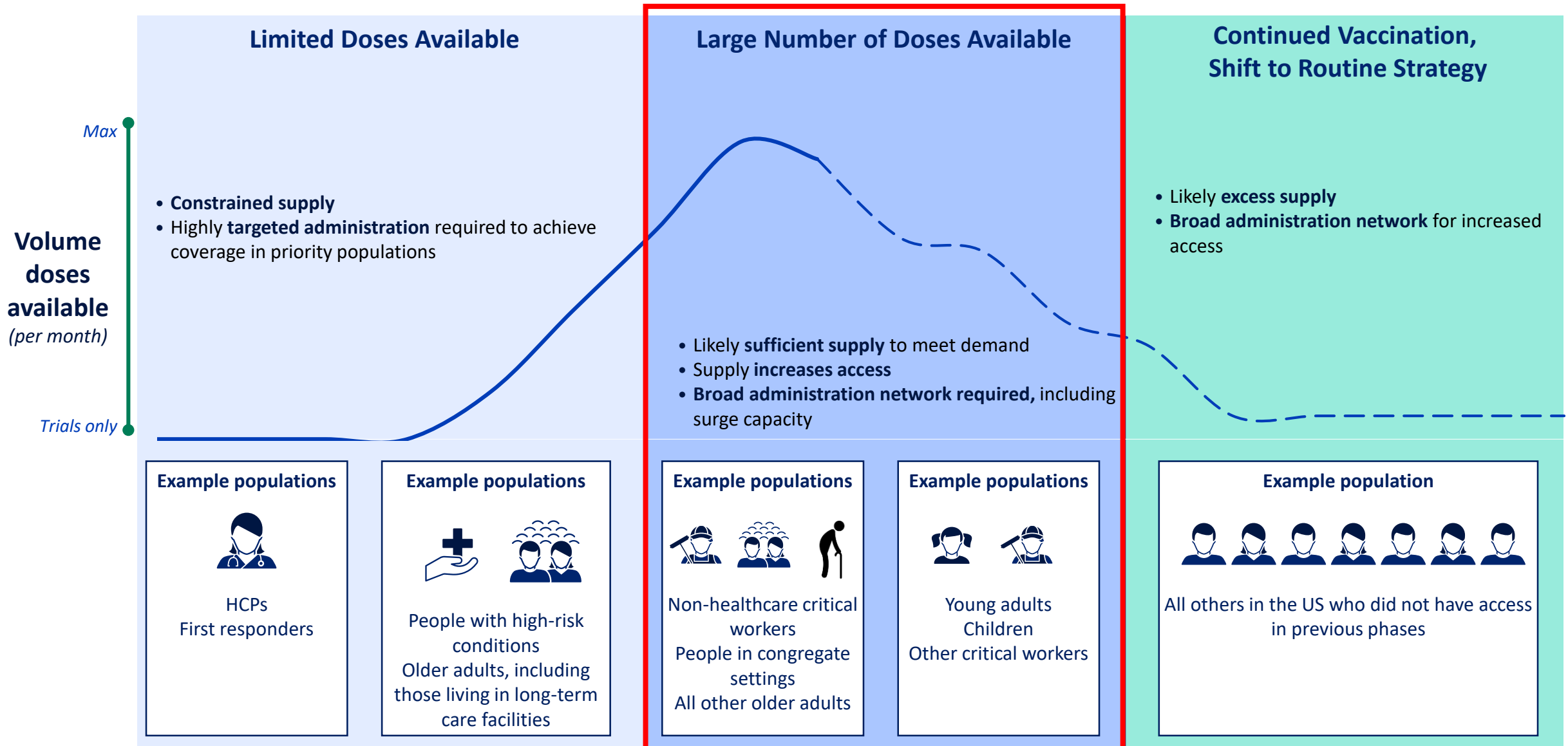
- **Program communications:** Public health messaging plan and expedited procedures for emergency communications
- **Program monitoring:** Ensuring all data systems to administer and track vaccine identified
- **Provider recruitment and enrollment:** Need additional planning around equitable access to vaccine distribution in later phases



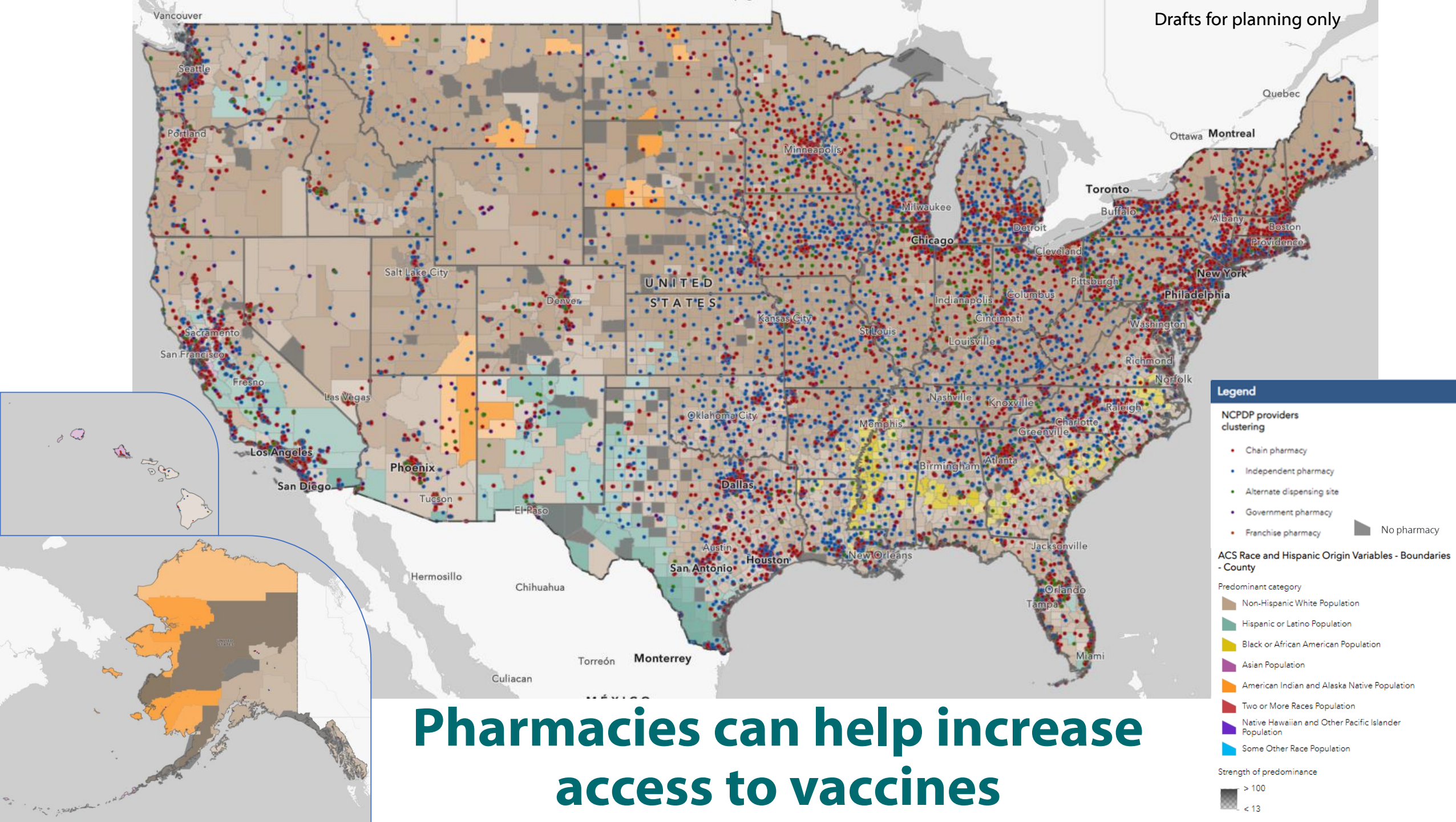
From planning to readiness: next steps for vaccine implementation

- Working toward a **jurisdictional readiness date** of November 15, 2020
- Emphasize need for **signed Data Use Agreement** to ensure tracking of uptake, identifying pockets of low vaccination, identifying and intervening in coverage disparities, and allocating vaccine product.
- Identify and enroll vaccination provider sites, particularly **sites that can administer vaccine product to Phase 1** populations.
 - Select 1-5 facilities for positioning of ultra-cold product after possible EUA to ensure once ACIP recommendations are released, product can be rapidly administered.
 - Confirm facilities are enrolled in VTrckS to order and receive product
 - Augmenting state capacity through federal pharmacy partnerships to support vaccination in long-term care facilities
- Continue to move forward with microplanning using various products and allocations to **ensure readiness across different scenarios.**

Distribution will adjust as volume of vaccine doses increases



Drafts for planning only



Phase 2: Federal Pharmacy Partnership Strategy for COVID-19 Vaccination Program

- **Once we have an adequate supply of COVID-19 vaccine to support broader vaccination efforts, it will be important to help jurisdictions increase access to COVID-19 vaccine for the general population.**
- **USG is partnering with pharmacies nationwide to increase access to vaccine.**
 - Partners who enroll in this program will receive a direct allocation of COVID-19 vaccine when supply is sufficient and vaccine is recommended for use beyond the initial critical populations.
 - Pharmacy partners under consideration include national chains, large regional chains, and networks of independent pharmacies and regional chains.
 - 55% of the eligible US pharmacies have already enrolled. List of partners will be shared with jurisdictions shortly.

Leveraging all resources and partners will allow for the successful administration of the COVID-19 vaccination program

Public partners



Public health clinics
/ FQHCs



Federal entities
(e.g., BOP, IHS)



Mass vaccination
clinics



Mobile vaccination
clinics

Private partners



Pharmacies



Home Health
providers



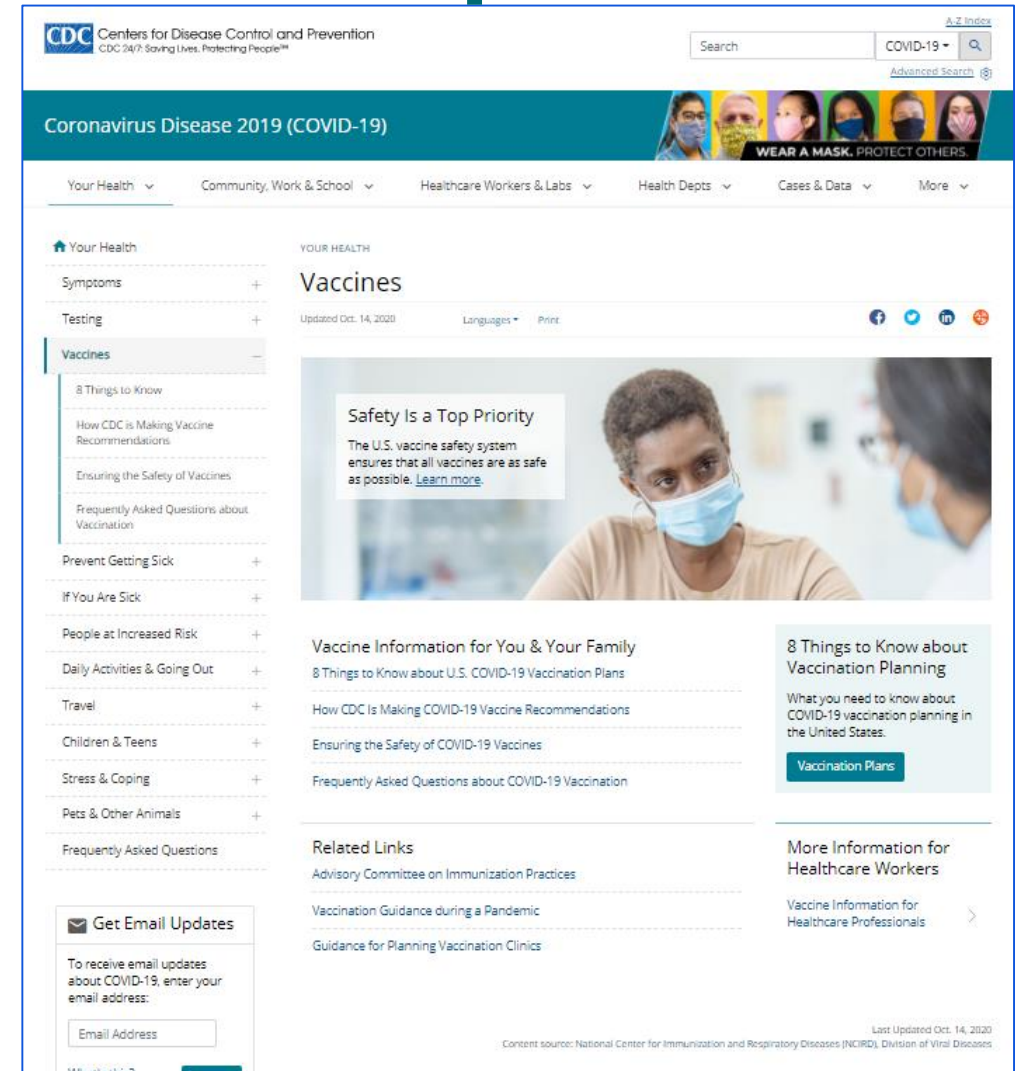
Hospitals



Doctor's offices

CDC Vaccine Web Content-current and planned

- **For General Public:**
 - About COVID-19 Vaccines (New)
 - How COVID-19 Vaccines Work (New)
 - What Are the Benefits of COVID-19 Vaccination? (New)
 - Busting Myths and Misconceptions about COVID-19 Vaccination (New)
 - Frequently Asked Questions about COVID-19 Vaccination (Updated)
- **For Providers:**
 - Provider Resources for COVID-19 Vaccine Conversations with Patients (New)
 - Frequently Asked Questions about the Pharmacy Partnership for LTC Program (Updated)
- **For Jurisdictions:**
 - Interim Playbook for Jurisdictional Operations version 2.0 (Updated)

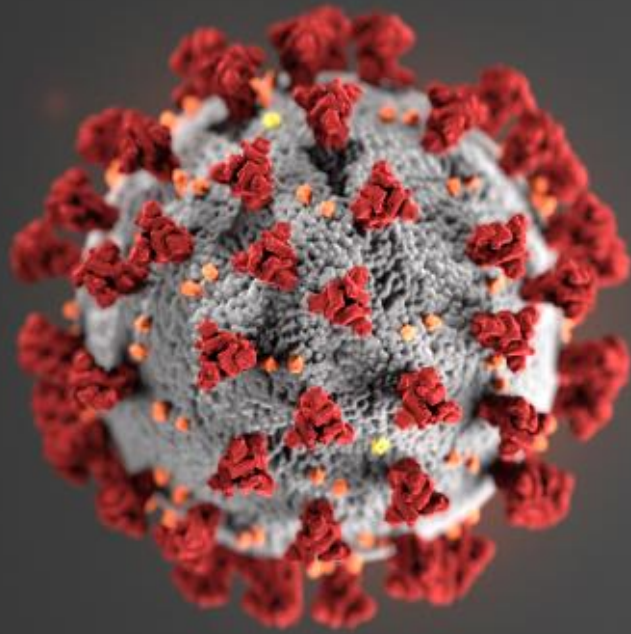


Thank you



For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



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Cost and reimbursement update

- COVID-19 vaccine will be procured and distributed by the federal government at no cost to enrolled COVID-19 vaccination providers or recipients. Vaccine providers will be able to charge an administration fee. However, the CDC Provider Agreement states that participating providers must administer COVID-19 vaccine regardless of the vaccine recipient's ability to pay COVID-19 vaccine administration fees or coverage status.
- Vaccine providers may seek appropriate reimbursement from a program or plan that covers COVID-19 vaccine administration fees for the vaccine recipient. For uninsured patients, the vaccine provider can seek reimbursement for an administration fee from the HRSA Provider Relief Fund.