

ASTHO CONGRESSIONAL BRIEFING

January 7, 2021

BRIEFING REMARKS

Good afternoon everyone, and thank you for all your support and hard work on behalf of the country.

I want to quickly review what is happening with the vaccine rollout, including successes and challenges, and what to expect in the coming weeks.

Jurisdictions have been working collaboratively with CDC and Operation Warp speed for months to set up an infrastructure of private and public providers to accept, store and administer COVID vaccine; as well as build a nationally connected data system to capture each dose administered within 72 hours, transmit doses administered to CDC, and provider reminder/recall notifications for second doses.

Tens of thousands of private physicians, hospitals, health systems, urgent care centers, pharmacies, and local health departments, FQHCs, community health centers, and other providers have been enrolled in the program in every state and trained to store, administer and report doses of COVD vaccine.

The plan for Phase 1a is to prioritize health care workers and long term care facility residents. Vaccine allocations are being directed, as planned, by state public health agencies to enrolled providers, mostly hospitals and other sites where healthcare workers repot daily for work. In addition, states have allocated a large number of doses into the federal pharmacy partnership program, and CVS/Walgreens are vaccinating in LTCF on a rolling basis throughout the month of January and into February. Shipments are going to hospitals and other healthcare sites as well as to CVS and Walgreens. The infrastructure is there, the groundwork is laid, and the system is working to spread doses across enrolled providers. But getting every dose into an arm IS and will continue to be, a challenge. This is a new vaccine, in short supply, targeted to specific populations, and its being distributed through both the private and public sector.

State and local public health and immunization programs are working to increase uptake and demand among healthcare workers, spread distribution to healthcare workers who don't affiliate with a hospital system, and will be working with CVS/Walgreens to identify barriers and challenges to vaccination in LTCF. Some states are expanding beyond healthcare workers to push more vaccine into arms more quickly. All states are continuing to plan expansion to phase 1b and 1c, which will include more involvement from public health, more large scale clinics, and additional partnership with retail pharmacies.

Consistent and accurate vaccine allocations and projections are needed for planning, and strong communication with the public about what is happening and what they can expect. And continued efforts to build confidence in the vaccine, especially in communities, healthcare workers, and essential workers of color. Funding, staffing and resources are critically important for to meet these needs, so I again want to thank you for the funding you have provided.

Thank you.