Vaccine Planning Work Group

In order to keep an accurate roll call, we ask that everyone joining this meeting rename themselves to include the following information:

- First Name
- Last Name
- Organization

Please type all questions into the chat box.

Presentations slides will be posted on the Maine Immunization Program website at: https://www.maine.gov/dhhs/mecdc/infectious-disease/immunization/covid-19-providers/communications.shtml

We appreciate the time and effort taken by everyone joining to help the Maine CDC with COVID-19 vaccine planning.

Vaccine Planning Work Group

Tonya Philbrick
Maine Immunization Program
April 1, 2021

Disclaimer

All information in this presentation is subject to change.

Information shared in these slides are assumptions as of 3/31/2021.

Agenda

- General Updates
- Vaccination Dashboard
- Improving COVID-19 Vaccine Equity

General Updates

Maine Doses administered 3/31/2021

- 712,798 total doses administered
- 435,700 first doses
- 277,098 final doses
- 32.41% of population that have received their first doses
- 20.61% of population that have received their final doses

Maine's Allotment Week #17 distribution

- Vaccine begins to arrive in Maine 4/5/2021
- 19,890 doses of Pfizer
- 14,300 doses of Moderna
- 20,600 doses of J+J

Vaccine Allocations

CDC is working through existing U.S. jurisdiction programs to coordinate the distribution and administration of multiple COVID-19 vaccines.

Jurisdictions are provided with a weekly ordering cap from which they place their orders for each available vaccine.

- This ordering is conducted via CDC's Vaccine Tracking System (VTrckS).
- Information about any variations in ordering cadence (e.g., impacts of new products, weather delays) will be communicated via email.
- Jurisdictions and commercial or federal partners place orders through VTrckS on behalf of providers.

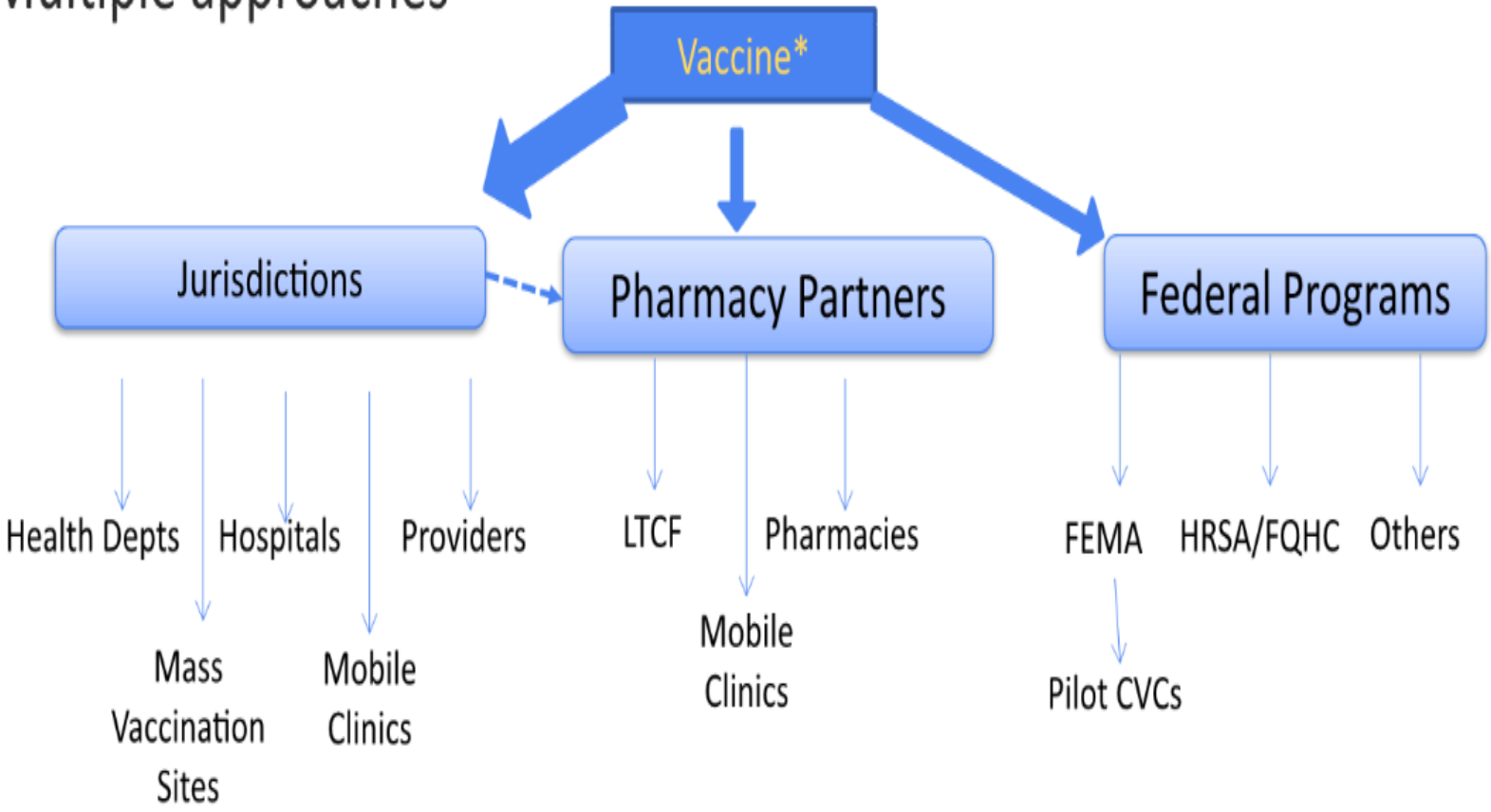
Jurisdictions must ensure that providers report vaccine administration data so the jurisdiction can then send data to the CDC COVID-19 Clearinghouse.

Multiple federal programs have been initiated to support administration at the jurisdiction level.

- Federal Pharmacy Long-Term Care Facility Program
- Federal Retail Pharmacy Program
- HRSA/CDC partnership to strategically engage federally qualified health centers (FQHCs)
- Partnership with FEMA to augment local vaccination activities

Vaccine Allotment

- Multiple approaches



Reporting Requirements

Reporting Reminders

Vaccines administered must be reported to the IIS (ImmPact) no later than 24 hours after being administered.

Inventory reconciliation must be performed at the minimum every 14 days. This is a function of counting your inventory, reporting any wasted doses and validating that your inventory in ImmPact matched vaccine doses within your storage unit.

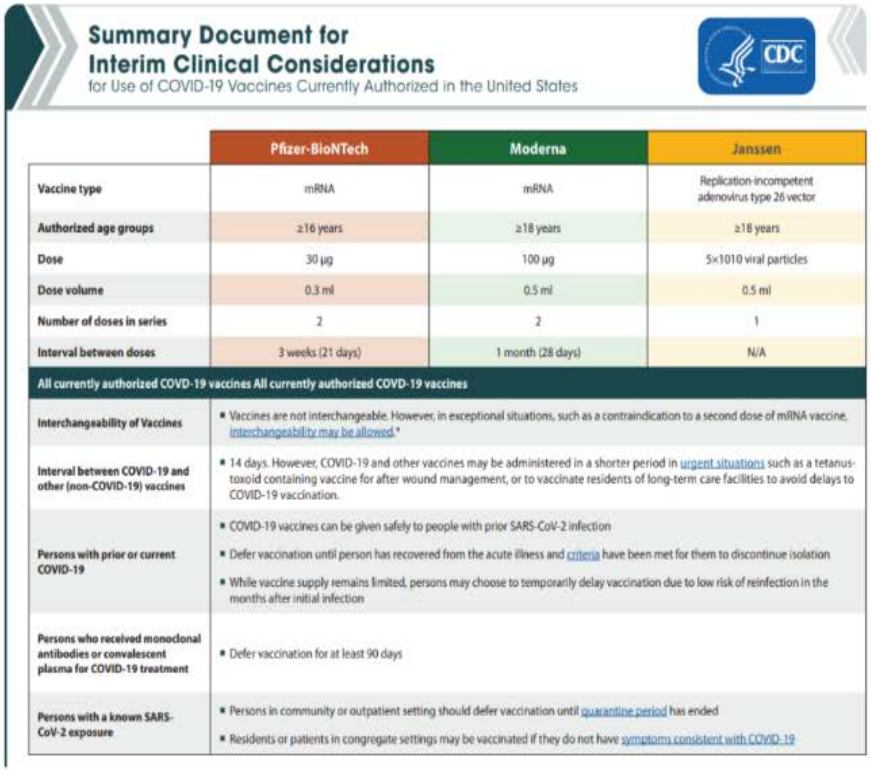
Wastage Rates

The amount of wastage reported across the campaign continues to be far lower than the expected rates. The goal was to maintain wastage below 2% of the total doses delivered. As of March 25, a total of 173,855,030 doses delivered resulted in 165,231 wasted doses; a rate of 0.095%. This is a rate similar to the Vaccine For Children Program.

Clinical Summar Guide

Clinical Considerations Summary

- New! A printable summary includes:
  - Basic information on all currently authorized vaccine products
  - Clinical guidance, including interchangeability of vaccine products, scheduling intervals, persons with underlying conditions, pregnant and lactating persons
  - 2 sizes: standard paper (8.5x11) and poster (11x17)



Summary Document for Interim Clinical Considerations
for Use of COVID-19 Vaccines Currently Authorized in the United States

	Pfizer-BioNTech	Moderna	Janssen
Vaccine type	mRNA	mRNA	Replication-incompetent adenovirus type 26 vector
Authorized age groups	≥16 years	≥18 years	≥18 years
Dose	30 µg	100 µg	5×1010 viral particles
Dose volume	0.3 ml	0.5 ml	0.5 ml
Number of doses in series	2	2	1
Interval between doses	3 weeks (21 days)	1 month (28 days)	N/A
All currently authorized COVD-19 vaccines All currently authorized COVD-19 vaccines			
Interchangeability of Vaccines	• Vaccines are not interchangeable. However, in exceptional situations, such as a contraindication to a second dose of mRNA vaccine, interchangeability may be allowed.*		
Interval between COVID-19 and other (non-COVID-19) vaccines	• 14 days. However, COVID-19 and other vaccines may be administered in a shorter period in urgent situations such as a tetanus-toxoid containing vaccine for after wound management, or to vaccinate residents of long-term care facilities to avoid delays to COVID-19 vaccination.		
Persons with prior or current COVID-19	• COVID-19 vaccines can be given safely to people with prior SARS-CoV-2 infection • Defer vaccination until person has recovered from the acute illness and criteria have been met for them to discontinue isolation • While vaccine supply remains limited, persons may choose to temporarily delay vaccination due to low risk of reinfection in the months after initial infection		
Persons who received monoclonal antibodies or convalescent plasma for COVID-19 treatment	• Defer vaccination for at least 90 days		
Persons with a known SARS-CoV-2 exposure	• Persons in community or outpatient setting should defer vaccination until quarantine period has ended • Residents or patients in congregate settings may be vaccinated if they do not have symptoms consistent with COVID-19		

COVID-19 Cases after Vaccination

- There have been some reports of COVID-19 among people who were fully vaccinated against COVID-19.

- It is expected that some people who are vaccinated against COVID-19 will still get COVID-19.

- Clinical studies showed currently authorized COVID-19 vaccines are highly effective but not 100% effective against COVID-19 illness. Since the vaccines are not 100% effective, some people who are fully vaccinated against COVID-19 will still get sick.

- It typically takes two weeks for the body to build protection after vaccination. That means it is possible you could still get COVID-19 soon after vaccination. This is because your body has not had enough time to build full protection.

COVID-19 Cases after Vaccination

• Some cases occurred during the 1–2 weeks after vaccination because the people were infected just before vaccination, or because their bodies did not have enough time after vaccination to develop the antibodies to protect them from the virus.

• CDC is studying reports of COVID-19 that occur after vaccination to better understand the reasons these cases occurred.

• Currently, there is no evidence that COVID-19 after vaccination is occurring because of changes in the virus.

COVID-19 Cases after Vaccination

- Based on what we know about vaccines for other diseases and early data from clinical trials, experts believe that getting a COVID-19 vaccine might also help keep you from getting seriously ill, even if you do get COVID-19.
- A growing body of evidence suggests that fully vaccinated people are less likely to have asymptomatic infection and potentially less likely to transmit SARS-CoV-2 to others. However, further investigation is ongoing.
- We're still learning how effective the vaccines are against variants of the virus that causes COVID-19. Early data show the vaccines may work against some variants but could be less effective against others.
- COVID-19 vaccines continue to be an essential tool to protect people against COVID-19, including against new variants.

COVID Vaccination Dashboard

- https://www.maine.gov/covid19/vaccines/dashboard

Ensuring Racial/Ethnic Equity

Weekly updates from partners

Dyan M. Walsh, MSW

Executive Director

Eastern Area Agency on Aging

Contact Information

C19Vaccine.MECDC@maine.gov

For questions regarding vaccine planning for COVID-19:

- Vaccine planning logistics – enrolled providers only
- Any follow-up questions to these weekly Vaccine Planning Work Group Meetings

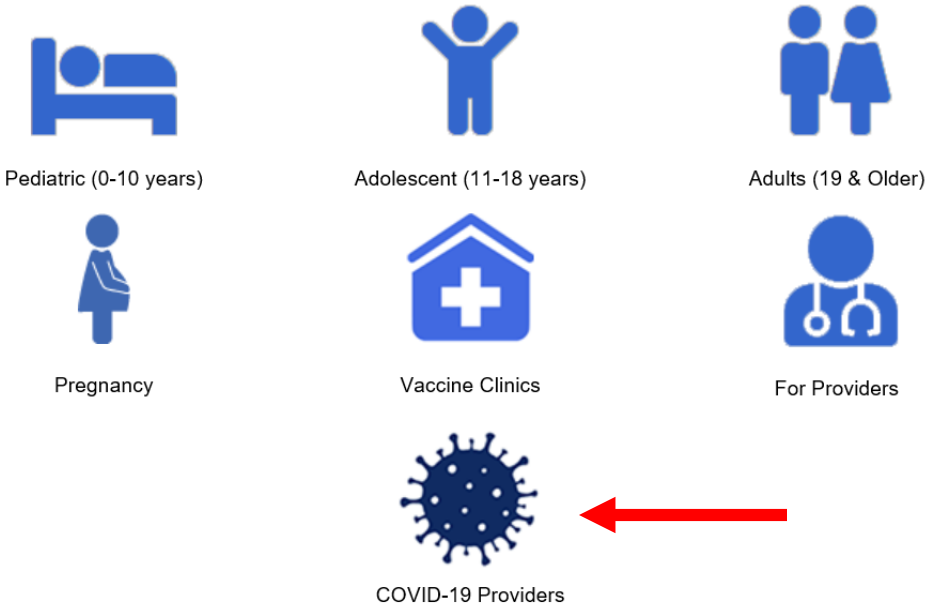
C19PA.MECDC@maine.gov

To submit documents for COVID-19 vaccine enrollment:

- CDC COVID-19 Vaccination Program Provider Agreement
- Storage & handling documentation if required

Website Information

ImmunizeME.org



Questions?

Tonya Philbrick
Director
Maine Immunization Program