



## Preparing for a COVID-19 Vaccine IDPH Planning & Distribution Update

The Iowa Department of Public Health (IDPH) has convened a stakeholder workgroup, comprised of IMS and other leaders within the provider and public health community, to assist with planning and distribution of an anticipated COVID-19 vaccine. IMS has prepared this update to quickly convey the latest updates and will continue to provide these regular updates as they become available. Please note, this information is rapidly evolving and may change. Practices are encouraged to contact IMS with any questions about this information.

**October 28, 2020**

The workgroup met today to discuss ongoing provider enrollment efforts as the state seeks to finalize the initial list of providers authorized to administer the anticipated COVID-19 vaccine. State officials provided updates on recently-announced federal programs to utilize chain pharmacies to administer the vaccine to long-term care patients and provided additional detail on some of the plans outlined in Iowa's [COVID-19 Vaccination Strategy Interim Plan](#).

### Provider Enrollment Update

To date, 873 Organizational [COVID-19 Vaccination Program Provider Agreements](#) have been submitted to the state. State officials are processing 50-60 agreements daily, reconciling information such as on-site cold storage capacity and professional licensing information for individual practitioners within each practice that submits an application. 712 provider agreements have been approved as of this morning. State officials are in the process of mapping out approved providers, administration capacity, and distribution of priority patient populations to begin identifying where gaps exist in provider capacity. IDPH will not be closing the provider enrollment process throughout the COVID-19 vaccination campaign and practices will have the ability to enroll at any time.

### Long-Term Care Patient Vaccine Administration

HHS recently announced a new [federal agreement](#) with Walgreens and CVS to allow individual branches of the chain pharmacies to partner with local long-term care (LTC) facilities to handle administration of the anticipated vaccine to this priority patient population. Enrollment for the program, which is being facilitated on the federal level, has been extended through November 6. Shortly thereafter, IDPH will receive a list of participating pharmacies and LTC facilities in Iowa that will be participating in this program.

All patients who receive a COVID-19 vaccine will have this noted in their IRIS record within 24 hours, which will then be fed into patients' medical records if your practice has established bidirectional communication between IRIS and your EHR system. Approximately 80% of IRIS-enrolled providers have established bidirectional functionality; state officials will be reaching out to the remaining providers to discuss establishing this functionality to ensure sufficient patient tracking regardless of where they receive their COVID-19 vaccine.

*This report is intended for informational purposes only and does not constitute legal guidance. Practices are encouraged to contact their legal counsel and medical liability carrier as they prepare for participation in the COVID-19 vaccine distribution program.*

## Vaccine Cold Storage & Distribution

State officials have identified 18 locations across the state that have on-site ultra-cold capabilities to store those anticipated vaccines, which will require lower temperature storage. Federal officials are finalizing further cold storage guidance, but have indicated that vaccine doses will be able to be properly stored in their shipping containers for a period of a few days. Initial indications are that the Pfizer vaccine candidate, which is among those requiring ultra-cold storage and expected to be the first candidate ready for Emergency Use Authorization (EUA), will be shipped in containers whose storage capabilities can be recharged utilizing approximately 50 pounds of dry ice. These containers will be outfitted with temperature monitoring equipment, contain trays of serum that are approximately the size of a personal pan pizza box, and in total weigh 70-80 pounds. State officials are investigating additional dry ice purchasing options to aid statewide efforts.

Pfizer anticipates it will be in a position to apply for an EUA on its vaccine candidate in early December. Federal officials are determining final distribution plans, but have indicated that they may allow states to preposition vaccine doses so they are already on-site or en route to clinics before the EUA has been formally approved.

## Vaccine Administration Planning Update

The state is in the process of finalizing a number of legal documents including the statewide standing order they plan to issue to allow for more widespread provider administration of the COVID-19 vaccine. IDPH officials are not planning to dramatically expand the provider types authorized to administer the COVID-19 vaccine via this order. They instead plan to utilize the order to streamline administration by existing immunization providers such as pharmacists and are considering imposing restrictions such as limiting administration of the anticipated vaccine to children by only a traditional vaccine provider.

Federal officials are currently working to establish an administration rate for the COVID-19 vaccine. They have indicated that the rate may be in line with the \$19.68 administration cap allowed under the Vaccines for Children program. Administration of the vaccine will be covered under Medicare and Medicaid, and it is anticipated that it will also be a covered benefit under commercial insurance.

As we have noted, IRIS will be utilized to track dose administration and ensure providers receive notifications when it is time to recall patients to receive their second dose if they are receiving one of the vaccines that requires dual dosing. IDPH is assembling more information on options for IRIS to automatically issue patient reminders for practices. In addition, patients will be issued brand-specific vaccine tracking cards so they ensure they receive a second dose of the same vaccine type as the initial vaccines will not be interchangeable. While federal guidance is still very fluid, state officials have indicated that at this time they do not anticipate that individual practices will be responsible for holding back a stock of vaccines to ensure sufficient supply of second doses for their patients. Federal officials expect sufficient supply will be in manufacturing to ensure that clinics are able to receive additional doses of the same type in time to administer their patients' second doses on schedule.

## Additional Questions

IMS has posed a number of additional questions to state officials, including clarification regarding the forthcoming vaccine shortage order and additional details regarding the vaccine transfer authorization process. As this information becomes available, we will post it to the IMS Resource page and in our regular publications

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