



COVID-19 Provider Update

Every other Wednesday @ 9am



Agenda

Data updates

Bulletin updates

Booster planning

Q&A

First dose weekly volumes

	Week of 7/5/2021		Week of 7/12/2021		Week of 7/19/2021		Week of 7/26/2021		Week of 8/2/2021		Week of 8/9/2021		Week of 8/16/2021	
Day of Week	Volume	Change Last	Volume	Change Last	Volume	Change Last	Volume	Change Last	Volume	Change Last	Volume	Change Last	Volume	Change Last
Monday	1,849	-33%	2,756	49%	3,299	20%	3,780	15%	4,397	16%	4,090	-7%	3,788	-7%
Tuesday	2,824	-8%	2,784	-1%	3,544	27%	3,954	12%	4,745	20%	4,337	-9%	4,067	-6%
Wednesday	2,914	1%	2,974	2%	3,711	25%	4,260	15%	4,888	15%	4,258	-13%	4,037	-5%
Thursday	2,715	-2%	2,685	-1%	3,486	30%	3,881	11%	4,638	20%	3,779	-19%	3,960	5%
Friday	2,856	-1%	3,082	8%	3,916	27%	4,653	19%	4,493	-3%	4,038	-10%	4,140	3%
Saturday	2,221	6%	2,280	3%	2,610	14%	3,023	16%	3,294	9%	3,022	-8%	2,795	-8%
Sunday	1,425	468%	1,564	10%	2,198	41%	2,200	0%	2,026	-8%	1,869	-8%	915	-51%
Total	16,804	0%	18,125	8%	22,764	26%	25,751	13%	28,481	11%	25,393	-11%	23,702	-7%

Key figures – as of August 3rd

>95%

Coverage among 65+

~80%

Coverage among 18+

~79%

Coverage among 12+

4.5M

Total doses administered

~2.4M first doses & ~2.2M second doses

~10k *third doses*

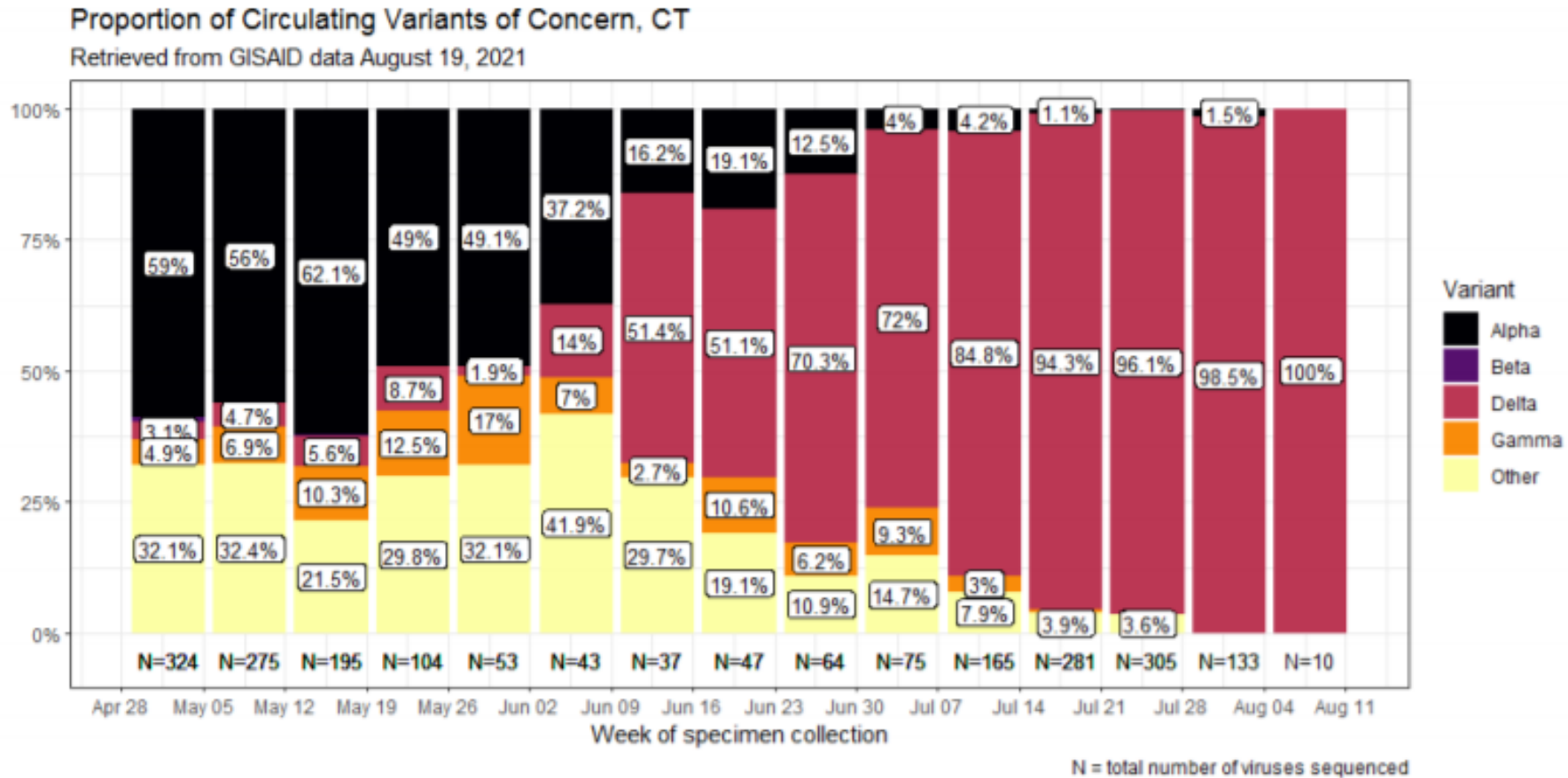


Key figures – as of August 3rd

Age Range	% of Population	CT Population	At least one dose*	% Coverage with at Least One Dose*	Fully vaccinated**	% Fully Vaccinated	Total Doses Administered
12-15	5%	176,600	109,845	62.2%	87,814	49.7%	197,649
16-17	3%	91,500	67,678	74.0%	59,599	65.1%	127,232
18-24	10%	342,073	221,970	64.9%	192,815	56.4%	394,915
25-34	13%	448,029	306,485	68.4%	271,154	60.5%	547,971
35-44	12%	427,141	327,864	76.8%	296,539	69.4%	591,695
45-54	13%	476,905	374,757	78.6%	348,560	73.1%	695,163
55-64	14%	513,455	451,652	88.0%	428,337	83.4%	840,902
65-74	10%	352,819	330,737	93.7%	317,483	90.0%	636,931
75-84	5%	186,095	174,416	93.7%	167,623	90.1%	338,297
85+	3%	91,330	73,146	80.1%	69,663	76.3%	140,726
Grand Total		3,565,287	2,438,692	68.4%	2,239,666	62.8%	4,511,692

SARS-CoV-2 Variant Surveillance

Data extracted from GISAID on 8/19/2021



Data include sequences from specimens with dates of collection through 8/10/2021.

Click [here](#) for an archive of PDF reports on COVID-19 from the CT Department of Public Health, including detailed reports released every Thursday.



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Bulletin Updates

CT WiZ Immunization Public Portal is now live

- Vaccine recipients can now access immunization records through the secure CT WiZ Public Portal, a free service provided by the CT DPH Immunization Program. A press release can be found [here](#).
- Vaccine recipients and legal guardians can access official immunization records for themselves and their children if they are under the age of 18 using the CT WiZ Public Portal with ‘two-factor authentication’ to verify identity.
- Recipients won’t find the record if the contact information does not match what the provider reported to CT WIZ. If they are unable to locate their record in the portal, they can contact the DPH Immunization Program for assistance ([helpdesk](#) or phone: 860-509-7929 during business hours Mon-Fri 8:30am-4:30pm).

Public portal access

<https://portal.ct.gov/DPH/Immunizations/CT-WiZ-Access-My-Immunization-Record>

CT WiZ: Access My Immunization Record



Get your immunization record through the CT WiZ Public Portal, a free service provided by the Connecticut Department of Public Health Immunization Program.

Patients and legal guardians can access official immunization records for themselves and their children using the CT WiZ Public Portal.

[GO TO CT WiZ PUBLIC PORTAL](#)

How to access a record on CT WiZ

1. Go to [CT WiZ Public Portal](#) (you must be using Google Chrome, Microsoft Edge, or Mozilla Firefox)
2. Enter your or your child's name, date of birth, and gender

Bulletin Updates cont.

Pfizer COVID-19 Vaccine is Approved

The U.S. Food and Drug Administration approved the Pfizer-BioNTech COVID-19 Vaccine, the first COVID-19 vaccine to gain full approval. The vaccine will now be marketed as “Comirnaty” for the prevention of COVID-19 disease in individuals 16 years of age and older. The vaccine also continues to be available under emergency use authorization (EUA), including for individuals 12 through 15 years of age and for the administration of a third dose in certain immunocompromised individuals.

Pfizer shelf-life update

The FDA has approved an amendment to the Emergency Use Authorization for Pfizer-BioNTech, extending the expiration dates of COVID-19 vaccine from six to nine months. Cartons and vials of Pfizer-BioNTech COVID-19 Vaccine may remain in use for 3 months beyond the expiry date printed on the label as long as authorized storage conditions between -90°C to -60°C (-130°F to -76°F) have been maintained. Please note: the ultra-cold temperature range has been broadened to include -90° C (-130°F). **Frozen vials stored at -25°C to -15°C and refrigerated vials (2°C to 8°C) are NOT eligible for extension.**

Vaccine mandates

Last Thursday, Governor Lamont announced that he has issued an executive order requiring that all Connecticut state employees and staff of all childcare facilities and preK-12 schools statewide must have received at least one dose of a COVID-19 vaccine by September 27, 2021. Those who do not get vaccinated due to certain exemptions will be required to be tested for COVID-19 on a weekly basis. However, state hospital and long-term care employees will not have the option of being tested in lieu of vaccination.

Bulletin Updates

Clinics using VAMS must take the following [steps to enable recipients to schedule an additional dose](#) per the ACIP recommendation for the immune compromised.

- Go to the Clinic Setup tab and scroll to the Clinic Location window
- Click Clinic Name hyperlink and click Edit and scroll to Vaccine Products Carried window
- Check the Additional Dose box

CMS Expands Medicare Payments for At-Home COVID-19 Vaccinations

Vaccine providers can receive the in-home vaccination payment up to five times when fewer than ten Medicare beneficiaries get the vaccine on the same day in the same home or communal setting. This policy is designed to support vaccination of at-risk patients in smaller settings (e.g., group homes, congregate sites, smaller LTCFs)

Updated Standing Order for Pfizer Vaccine

Is available from the CDC: <https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/downloads/standing-orders.pdf>

Message from Centers for Disease Control and Prevention (CDC) About Off-Label Usage of COVID-19 Vaccines

Providers are responsible for adhering to all requirements outlined in the CDC's COVID-19 Provider Agreement. Specifically, providers must administer COVID-19 vaccines in accordance with all program requirements and recommendations of CDC, the Advisory Committee on Immunization Practices, and the U.S Food and Drug Administration (FDA). This applies to both EUA and FDA approved COVID-19 vaccines. Accordingly, use of these products outside of those that have been approved and authorized by FDA (often referred to as “off-label use”) is not recommended. It would violate the provider agreement and could expose providers to the following risks:

- Administration of the product off label may not be covered under the PREP Act or the PREP Act declaration; therefore, providers may not have immunity from claims.
- Individuals who receive an off-label dose may not be eligible for compensation under the Countermeasures Injury Compensation Program after a possible adverse event.
- CDC has defined the scope of the CDC COVID-19 Vaccination Program in terms of how the USG-provided vaccines may be used in the program. Providers giving off-label doses would be in violation of the CDC Program provider agreement potentially impacting their ability to remain a provider in the CDC program.
- Administration fees may not be reimbursable by payers.



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Everything is subject to change, but we are getting ready. We will await FDA and CDC/ACIP recommendations. ACIP is meeting Monday 8/30 and Tuesday 8/31, 10-4pm ET. Agenda is not yet available. [Webcast Link.](#)

Key differences from initial roll-out: There are several key differences between this roll out and the initial roll-out:

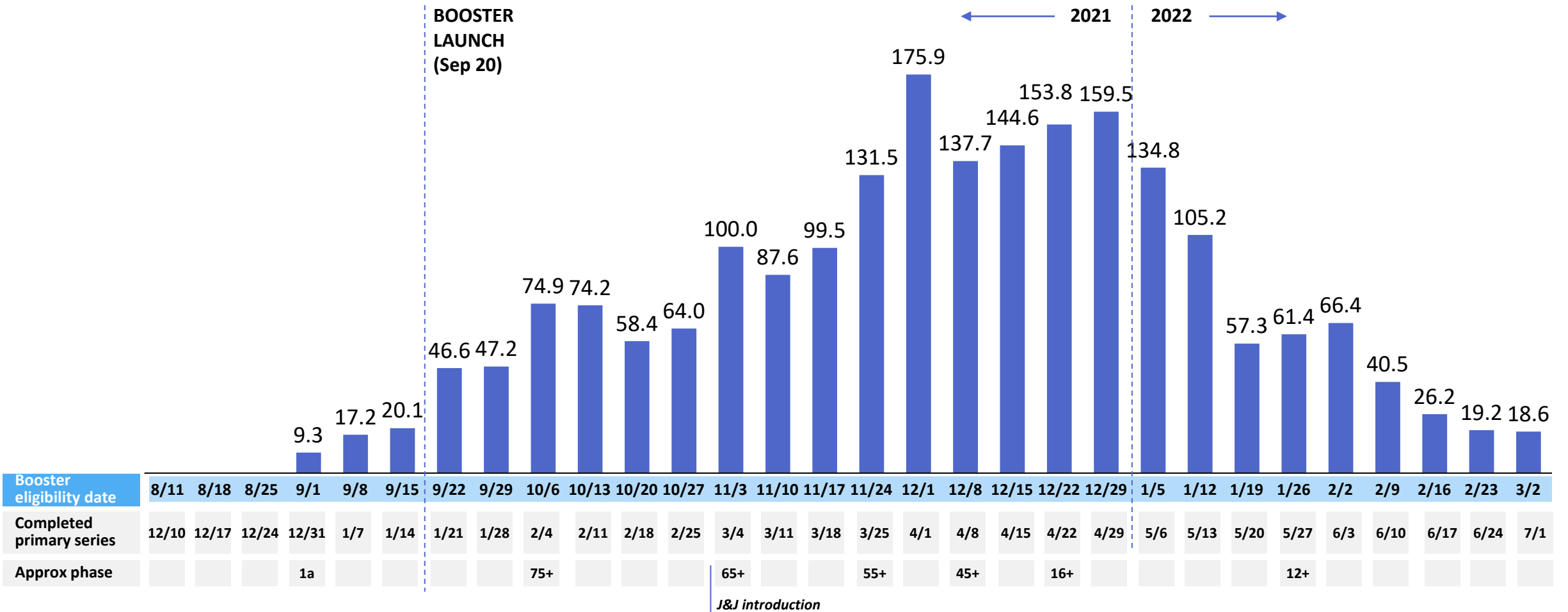
- We anticipate that vaccine supply will not be constrained – provider orders to be filled in full
- We have a broader network, including >400 pharmacy locations and >200 provider offices ready to offer boosters
- This has been partially enabled by storage & handling changes – Pfizer no longer needs to be kept at ultracold
- We will be encouraging co-administration of flu and COVID vaccines

We expect Pfizer eligibility extended down to children as young as 5 this winter. We are working with our pediatricians across the State to make sure they are ready – please enroll all pediatric settings in the COVID Vaccine Program. Timing is uncertain.

Planning assumption: Individuals become eligible to receive boosters 8 months after they received their second dose of an mRNA vaccine (and likely J&J too). White House quote: “The rule will be simple, everyone should get a booster 8 months after they got their second dose.”

Boosters: Volume of eligible individuals at 8 months

Thousands of individuals eligible for booster doses by week, assuming interval of 8 months after completing primary series (2nd dose of mRNA or dose of J&J)



Also anticipate a roll-out to approximately 278k children between the ages of 5-11 during this same window of time – not reflected in chart

Additional details

Long-term care facilities

- Ensuring an effective booster roll out in nursing homes, assisted living facilities, and residential care homes is a top priority for booster introduction
- Nursing home vaccination will primary be carried out by long-term care pharmacies that are in place – we may supplement with targeted, on-site clinics, but this is a gap-filling measure
- Our engagement with the nursing home industry suggests LTCF pharmacies are well positioned to administer COVID vaccines at this time – not concerned about gaps

Congregate settings:

- We encourage on-site clinics at congregate settings in order to enable easy access
- Will have more information soon – but providers who previously worked with congregate sites are encouraged to make plans to return
- Contact Katie Rock-Burns (Kathryn.Rock-Burns@ct.gov) for any questions about this effort

Homebound vaccination:

- We will maintain the homebound request intake form
- LHDs that are not able to provide homebound vaccinations should work with us to develop alternative plans

Additional details

Plan to increase capacity:

- Review when your patients will be coming due for boosters and plan accordingly
- We will not need the throughput of the first mass vaccination effort, but supplemental capacity in the form of dedicated clinics will likely be needed – especially in November, December, and January

Plan to do outreach – and maintain our focus on equity:

- Even if you are not vaccinating at the same level of intensity, we ask all providers to conduct outreach to individuals to whom they administered the primary series and encourage them to receive a booster
- Maintain approaches that have shown success on correcting for inequities: Engage trusted messengers; Have clinic hours, access profiles, and locations that work for the community you are serving
- Be aware of multiple clinic options in your community: If you are not vaccinating, know where vaccine administering pharmacies are located and be able to direct your patients

Ensure readiness of pediatric providers

Evaluate how you can co-administer flu vaccines in your clinics



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Question and Answers

To ask a question, please raise your hand using the hand icon on your screen, type your question in the chat box or if you are on the phone press *6 to unmute yourself.

If you have additional questions after the meeting, please feel free to email them to DPH.Immunizations@ct.gov

You can fill out a help desk ticket by visiting <https://dph-cthelpdesk.ct.gov/Ticket>