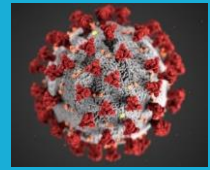


NEW YORK STATE INTERIM COVID-19 VACCINATION PLAN



Executive Summary - DRAFT

October 26, 2020

Introduction

The New York State COVID-19 Vaccination Plan describes the steps that are being taken and protocols being put in place to ensure the safe and efficient distribution and administration of COVID-19 vaccine to New York residents. The Program is drafted on the advice and recommendation of clinical and public health experts, and its success is contingent on partnership and collaboration with local departments of health, community partners and organizations. New York State based its COVID-19 vaccine distribution and administration process on ten guiding principles: safety, effectiveness, expert approved, equitable & clinically driven distribution, transparency, use of data, privacy and patient safety, partnership, coordination & public outreach, state leadership and New York TOUGH.

COVID-19 Vaccination Planning Sections:

Section 3: Phased Approach to COVID-19 Vaccination

New York State's plan for phased vaccine prioritization includes sub-prioritization based on the likelihood that initial vaccine supplies may not meet the needs within each phase. The state will ensure vaccine is available to complete the anticipated two-dose series as recommended before progressing to subsequent phases. The early phases will utilize hospital partners and local health departments as well as long-term care facilities and their partners before including a wide array of providers in the later phases of the vaccination response.

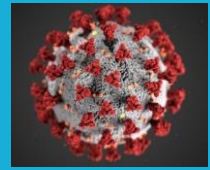
Section 4: Critical Populations

New York State's prioritization of population groups will be based on risk, maintenance of essential services, and community prevalence of COVID-19. Based on the current recommendations of the Advisory Committee on Immunization Practices (with input from the National Academies of Sciences, Engineering, and Medicine), more than 800,000 critical health care workers in hospitals, long term care facilities (LTCFs), emergency medical services, and home care and approximately 83,000 LTCF residents will be targeted during the initial phase of limited vaccine supply. As more vaccine becomes available, other frontline essential workers, medically high-risk individuals, and individuals over 65 will be targeted. Within each priority group, New York State will engage providers, community-based organizations, and religious and community leaders to address health equity and access to vulnerable populations. Tribal Nations in New York State will also be engaged to ensure this population has adequate access to vaccine.

Section 5: COVID-19 Vaccination Provider Recruitment and Enrollment

New York State has an established network of health care providers, including hospitals, long term care facilities, Federally Qualified Health Centers, Community Health Centers, Rural Health Clinics, private provider offices, local health departments, and other entities to recruit and enroll in the COVID-19 Vaccination Program that will serve as Vaccine Administration Sites (VAS). Other VASs include schools, colleges and universities, homeless shelters, correction facilities, and sites where target populations gather. Commercial and independent

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pharmacies, businesses, and other organizations to enable on-site vaccination will also be enrolled in the Program.

Section 8: COVID-19 Vaccine Storage and Handling

New York State will work with local jurisdictions to identify and operationalize appropriate regionally based storage locations that comply with CDC and manufacturer recommendations for storage. Capacity to store and handle vaccines across the full cold-chain spectrum will be assessed as part of the provider enrollment process.

Section 10: COVID-19 Vaccination Second-Dose Reminders

New York State COVID-19 vaccination providers can generate reminder notices within the New York State Immunization Information System (NYSIIS) specific for their patient population. NYSIIS can also support centralized reminders that can be blasted out to scale via postcards, robocalls, and/or text messaging. Second-dose reminders for vaccine recipients will be critical to ensure compliance with vaccine dosing intervals and achieve optimal vaccine effectiveness.

Section 12: COVID-19 Vaccination Program Communication

New York will coordinate communication efforts with appropriate stakeholders to build public trust regarding vaccine safety and efficacy. Public education and community engagement efforts will include dedicated efforts to connect with underserved, hard to reach, vulnerable, and vaccine hesitant populations, and focused outreach approaches to communities at highest risk of COVID-19. Public communication will be done in a way to ensure that those with health inequities are represented and that underserved have access to vaccine. Communication methods will include targeted media campaigns; public events; promotion of website and call center; and promotion of tools for determining vaccine eligibility, location of vaccine provider, and appointment scheduling.

Section 14: COVID-19 Vaccine Safety Monitoring

New York State will establish internal and external clinical advisory groups on vaccine safety and promote the Vaccine Adverse Event Reporting System (VAERS) to vaccinators and the public as an integral component of safety monitoring. The NYS DOH and the Clinical Advisory Task Force will monitor VAERS data and work with insurance companies and Medicaid to evaluate data on potential vaccine adverse events.

Section 15: COVID-19 Vaccination Program Monitoring

NYSIIS will be the core system used to track vaccine administration and monitor priority groups. The state will provide information to the CDC and other federal agencies as required. Further infrastructure will be created to support all aspects of the vaccination program including program monitoring, scheduling of patient appointments, ongoing surveillance monitoring to guide clinical and geographic prioritization decisions. The state will launch an ongoing public education campaign to ensure New Yorkers have the latest, and most accurate, information related to the facts about the vaccine itself, the progress and success of the program and all critical information needed regarding access to vaccination. Overall management of New York's vaccination program will be overseen by Vaccine Central Command Center (VC3). The VC3 will operate within the existing New York State Incident Command structure following sound emergency response principles, in concert with the ongoing broader pandemic response to ensure that all partners clearly understand each other's roles and responsibilities.