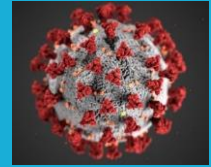


# STATE OF NEW MEXICO INTERIM COVID-19 VACCINATION PLAN EXECUTIVE SUMMARY – DRAFT October 26, 2020



## Introduction

The New Mexico Department of Health (NMDOH) is leading the State of New Mexico's COVID-19 Vaccination Preparedness Planning in close collaboration with other state agencies, public, private and tribal partners throughout the state. The purpose of the Draft Plan is to define the activities, roles, and resources necessary to provide a coordinated COVID-19 vaccine response throughout the State of New Mexico. NMDOH created a public-private COVID-19 Vaccine Advisory Group, several sector-specific work groups and an Internal Vaccine Planning Team, all of which will continue to work on planning and implementation.

## COVID-19 Vaccination Planning Sections:

### Section 3: Phased Approach to COVID-19 Vaccination

For initial distribution during early Phase 1, NMDOH will primarily rely on experienced large vaccine providers with existing infrastructure. Phase 1a ("kick-start") will focus on personnel of key "vaccinator" entities throughout the state, including hospitals. Phase 1b (expanded but still very limited supplies) will expand to first responders, EMS and other healthcare providers and staff and service providers who have direct contact with people with COVID-19 or work in congregate care settings (such as long-term care facilities) where the risk of spread to vulnerable populations is high. During Phase 1b, vaccine will also be provided to residents of long-term care facilities. Later Phase 1 will include residents of other congregate care facilities and other healthcare workers. As we transition from Phase 1 to Phase 2, when supply significantly increases, DOH anticipates offering vaccine to other older patients, those with underlying conditions, and multiple groups of vulnerable populations and essential workers; more expansive vaccine clinics may be used to include multiple groups of vulnerable populations and essential workers, especially in smaller communities.

### Section 4: Critical Populations

NMDOH will build on successful public-private collaborations across multiple departments and stakeholders that oversee COVID-19 testing and rapid responses in priority populations and essential workforces. NMDOH will also work closely with Indian Health Service, local emergency managers, healthcare providers, and community-based organizations, including churches, service providers and advocates to discuss appropriate strategies and approaches to vaccination efforts in their communities. New Mexico is also conducting outreach to individual tribal partners as each addresses the unique needs and priorities of its own community. NMDOH distributed surveys to hospitals, community health centers, other healthcare practices, and long-term care facilities to obtain current information on the target populations for Phases 1a and 1b. NMDOH will also use numerous data sources, including the CDC's Social Vulnerability Index to identify populations at highest risk.

### Section 5: COVID-19 Vaccination Provider Recruitment and Enrollment

NMDOH conducts weekly COVID-19 response calls with several statewide healthcare provider associations. These individualized calls now include discussions of vaccine planning. These associations helped distribute the provider surveys which addresses facilities' capacity to vaccinate staff and community members. NMDOH also created a pharmacy working group devoted entirely to COVID-19 vaccine planning. NMDOH opened its COVID-19 provider enrollment portal the week of October 19<sup>th</sup> and has begun collecting provider agreements.

### Section 8: COVID-19 Vaccine Storage and Handling

Provider training will include the storage and handling requirements outlined in the Provider Agreement. Storage and handling indicators including wastage, ordering frequency and quantities, and vaccine transfers will

be monitored. Temperature log spot checks for vaccine storage units at provider sites will be conducted. It is likely that the first available COVID-19 vaccine will require ultra-cold temperature storage, which presents many challenges, particularly for small, rural providers. NMDOH and our partners are concerned about obtaining the necessary supplies (such as dry ice) and covering the cost of these additional vaccine handling requirements.

#### **Section 10: COVID-19 Vaccination Second-Dose Reminders**

The primary method of reminding COVID-19 vaccine recipients of the need for a second dose will be through the existing Reminder/Recall reports located within the immunization registry. The New Mexico Statewide Immunization Information System (NMSIIS) is capable of running multiple Reminder/Recall report options. For patients seen by the NMDOH Public Health Division (PHD), NMDOH will use the messaging platform that was developed to deliver negative COVID-19 test results to people tested at PHD test sites.

#### **Section 12: COVID-19 Vaccination Program Communication**

New Mexico has already embarked on a coordinated media strategy across agencies and externally to promote the influenza vaccine. These new innovations to our flu campaign will be used, and modified to fit the circumstances, in our COVID-19 vaccine media strategy. Communications plans are being developed to use multiple methods of communication to different audiences which will include education on the safety and efficacy of particular vaccines once that information is available.

#### **Section 14: COVID-19 Vaccine Safety Monitoring**

NMDOH will utilize written educational materials, weekly email reminders, and the adverse events reporting module in the Immunization Information System (IIS) to ensure enrolled COVID-19 vaccination providers understand the requirement and process for reporting adverse events, following vaccination. A Health Alert will also go to all healthcare providers in the state whether they administer vaccine or not.

#### **Section 15: COVID-19 Vaccination Program Monitoring**

Initial COVID-19 provider enrollments will be monitored on a daily basis and vaccine providers will be tracked throughout all phases of vaccine delivery. Daily reports will be run in the IIS to track provider enrollment, administered doses, coverage rates in vulnerable population areas and inventory tracking. Data quality reports will be run daily, and data exchange monitoring will also be conducted daily.

#### **Additional Information**

Distribution and administration of safe and effective vaccines is essential to bringing an end to this deadly and destructive pandemic. But preparing this Plan has also highlighted many unknowns that make it difficult to run tabletop exercises and engage in the full planning that is required to operate a successful vaccination campaign. There are three major categories of information that will help us further develop this Plan:

- 1. What criteria will CDC use to make initial allocation decisions and approximately how many doses will New Mexico receive during the initial “kickstart phase” and during the first weeks and months of distribution of each vaccine?**
- 2. What are the cold chain requirements associated with each vaccine and how will CDC provide jurisdictions and providers vaccine-specific training and protocols that address deep-cold transportation and storage requirements and resources for handling containers, monitoring temperatures, and ordering additional dry ice and related PPE?**
- 3. When will CMS publish reimbursement rates for vaccine administration and provide further guidance on covering additional vaccination expenses and vaccinating the uninsured?**