Welcome to Provider Office Hours

Thank you for joining our call. Please stand by; we will begin momentarily. During the session, please use the Q&A panel to comment or ask a question:

Q&A Panel

Open the Q&A panel Select Ask: All Panelists Enter Text, Click Send Weren in the to device in the intervence in the intervence in





Housekeeping

Reminder to Panelists:

Please mute yourself when not speaking.

Please monitor the Q&A panel for questions you may be able to answer.

Reminder to Participants:

Please access today's slides and archived presentations at: https://eziz.org/covid/education/





Guest Speakers

- Achieving & Monitoring Equity Kimberley Goode, Senior Vice President, External Affairs, Blue Shield of California
- Allocations Jeff Merritt, Director of Product Transformation, Blue Shield of California

Q&A

Announcements

- Resources Amy Pine
- SB 95 Amy Pine

Vaccine Updates

- Janssen Pause
- Administration & Allocation Amy Pine
- Provider Call Center Brenton Louie
- myCAvax Claudia Aguiluz
- My Turn Eric Norton
- Prioritization & Eligibility Louise McNitt, MD
- Clinical Louise McNitt, MD
- Storage & Handling Kate McHugh
- Communications Asbury Jones







Achieving & Monitoring Equity

Kimberley Goode, Senior Vice President, External Affairs Blue Shield of California



The TPA supports California's 5-point Plan for Vaccination Equity

		State's five-point plan on equity	How the TPA will support
000	Allocation	Provide ultimate determination and approval of all vaccine allocation with a focus on equity	Develop and recommend for adoption by the state an appointment prioritization approach for State Vaccine Network sites
	Network	Ensure that the State Vaccine Network includes appropriate access in disproportionally impacted communities (may include extended hours, translation and / or transportation services)	Provide reports to the State on performance of the network overall and by provider
KI	Community Partners	Invest in special programs to support community-based organizations that are critical to reaching target communities	Support state efforts, including promoting outreach to disproportionately affected groups
	Data analytics	Use real-time data analytics to adjust and intensify targeted efforts and resource allocation to meet equity goals	Perform timely data analytics to adjust and intensify targeted efforts and resource allocation to meet equity goals
			Provide weekly Vaccine Allocation Reports to the state, which include identifying high performing geographies and providers
	Public Education	Provide consistent messaging and meet Californians where they are in order to reach California's diverse populations	Support state initiatives on public education
Vacci	acto		Source: TPA equity workstream Apr 8, 2021

LL 58

Here's How the TPA Network Supports Equity



The TPA network is designed to rapidly scale vaccine provider capacity to efficiently and equitably vaccinate Californians

Network waves are designed to reach the most vulnerable and disproportionately impacted. The network will:

- Utilize various types of providers, with specific focus on HPI Quartile1 geographies via mobile solutions and FQHCs
- Continue to build out in additional geographies, phased by disease burden

TPA will support the State's efforts to expand access through identification of providers and sites that offer support services, including extended hours, translation, and transportation.

Access: Individuals with access to in-network sites based on adequacy requirements^{2,3} Percent of 16+ population⁴

Overall access

Access in 1st quartile HPI areas 99%

1. Pending additional focus on Wave 3 LHJs to identify additional local partners 2. Based on input from TPA Network workstream and existing Core + Wave 1 network. Access based on adequacy requirements of 10 miles in urban areas and 30 miles in rural areas assuming all engaged providers sign contracts to join the network 3. FEMA sites included for access analysis and will not be operated under the TPA 4. Network scenario modeling uses age bracket 15+ at the census track level from U.S Census track data (2020 total population, 2010 distribution at census track level)

Sources: U.S. Census Bureau population statistics, 2010, 2020; my CAvax Provider Locations Applications 2.19.21; CDC Federal Pharmacy Partnership for COVID-19 Vaccination Program: Appendix 1; Optum locations from 20-10917 Logistics Health Vaccination (shared February 4) and including 111 LA Fitness Sites (as of 2/10/21); COVID-19 Vaccine Task Force; Kaiser (COVID-19 SCAL Vaccination Sites – Updated 2.4.21 – Submitted 2-5-21.xlsx, COVID-19 NCAL Vaccination Sites – Updated 2.5.21 – Submitted 2-5-21.xlsx; LHJ mass vaccination survey received 2/19/2021); TPA Provider contracts



Approach for first dose allocations

1	Assess the total doses available for allocation	 Begin with the total first doses allocated by the Federal government to CA Adjust for allocations reserved to State bodies (e.g., DSH, CDCR) and other urgent issues (e.g., unmet second dose needs)
2	Apply a geographical weighting	 For 80% of the remaining vaccine, calculate the share of vaccine each zip code should receive based on eligible population in the zip code Currently, eligible population is weighted by age (16 and older) Before week of 03/22, eligible population was weighted as 70/30 by age (65+) and sector (first responders, food/agriculture sector, education & childcare) respectively
3	Perform an equity weighting to reflect the State's equity priorities	 To double weight to those areas of highest need, allocate remaining 20% of vaccine to lowest quartile HPI zips only, based on share of eligible population
4	Allocate vaccine to network sites based on their geographical service and their performance	 TPA considers input from LHJs and MCEs plus other factors such as zip codes served, performance including success in vaccinating target populations, inventory-on hand, compliance to network requirements to recommend final allocation by provider



The current allocation approach doubles the weight of COVID-19 vaccine allocation to zip codes HPI quartile 1 (least healthy quartile), to reflect the disproportionate disease burden experienced by individuals in these areas

All provider types are expected to support equity goals

Contracted provider sites, by HPI quartile of site location as of 3/22¹



1. Includes Core, Wave 1, Wave 2, Wave 3 providers w ho have completed or are ready for onboarding. Excludes Optum sites and correctional services.

Source: TPA Allocation Workstream, TPA contracting team, Master Provider List



Where Access Challenges Exist, the TPA is Proactively Identifying and Augmenting Mobile and Pop-Up Solutions to Support Equity

The TPA will follow a two-pronged approach for mobile vaccination...

Proactively identify

geographic areas where expanded capacity or access is needed, and mobile units are the most convenient and cost-efficient solution

Respond to LHJ requests

for mobile vaccination sites within their jurisdictions based on local knowledge





Supporting the existing mobile infrastructure

Several contracted LHJs, MCEs and providers have existing mobile capabilities in place

TPA is working with providers with existing mobile capabilities to scale mobile services where needed

Developing new partnerships with organizations

TPA is collaborating with OptumServe to launch vaccination solutions in rural and remote areas

TPA may engage other partners who are already working with the state to provide mobile testing for state employees and retirees





The TPA and State are Using Data to Assess Progress and Respond to the Greatest Needs



Source: TPA Netw ork Equity dashboard



Real time data feed to help providers and LHJs understand performance toward equity goals

Data helps us see where we may need to extend coverage

In which HPI quartiles are extended hours available?

Contracted provider vaccination hours, by HPI quartile, number of sites as of 4/5



Source: TPA contracting team, TPA Master Provider List, Provider Surveys



We are Making Progress Toward Reaching HPI Quartile 1 Individuals and More Must be Done





Next Step: Pilot Programs in LHJs with Low HPI Quartile 1 Vaccine Coverage

Pilot Increase vaccination rates among HPI Quartile 1 population by identifying and supporting needs of counties with low HPI Quartile 1 vaccination coverage objective

Approach Deep dive on the following equity levers:

Detential averations

Equity levers	Potential questions
Allocation	Are the appropriate amount of doses being allocated to the appropriate LHJs and providers?

Network	What additional provider types are needed (e.g., mobile clinics)?
	What support needs have providers expressed (e.g., staffing)?

Community Which CBOs should be engaged to help reach target populations? Partners What administrative and financial support is needed?

Public	How can vaccine willingness be improved?
Education	What messaging/collateral support is needed?

1. Does not include all LHJs below statewide average. Mix of LHJs were selected to represent geographic diversity

Source: CA COVID-19 Vaccine Task Force



E

We are moving in the right direction together

California's Statewide Vaccine Network is designed to save more lives.

Delivering an improved and connected experience



More options to vaccinate Californians faster	 Statewide network of providers Geographically diverse sites Mobile providers Pharmacies
More resources to reach diverse communities	 Network designed to reach the most vulnerable and those disproportionately affected by COVID-19 infection and death Support to providers and local health jurisdictions for FEMA-eligible costs associated with supporting the transition to a new system and workflow Support services, including extended hours, language capacity, accommodations for physical accessibility and mobile clinics
	A more consistent and reliable user experience for all Californian

More user data and reporting for transparency

- A more consistent and reliable user experience for all Californians
- Timely data sharing
- Detailed reporting to ensure equity, efficiency, and speed of network
- Ongoing community and stakeholder engagement



Allocations

Jeff Merritt, Director of Product Transformation Blue Shield of California



Announcements



Resources on eziz.org/covid

Constantly Updating Resources!

New!

Patient Safety Checklist for Vaccination Clinics Held ٠ at Satellite, Temporary or Off-Site Locations under Vaccine Administration, at the bottom under Vaccination During a Pandemic



Program Updates

Program Enrollment

My Turn Onboarding

Vaccine Management

Vaccine Administration

Reporting Requirements

Archived Communications

Provider Support

Patient Resources

COVID Call Center Email: For Program Info

myCAvax

option 2

Vaccines

My Turn

Phone: (833) 502-1245 Hours: Mon-Fri, 8AM-8PM

Email: For Technical Support

Phone: (833) 502-1245,

Manufacturer Contacts

California COVID-19 Vaccination Program

Program Updates

The state of California has signed a new Third Party Administrator (TPA) contract with Blue Shield of California to help the state optimize and accelerate COVID-19 vaccine allocation and distribution equitably, efficiently, and safely throughout the state. The TPA will be working closely with local health departments to identify facilities that have the capacity to properly maintain COVID-19 vaccine and meet additional federal and state requirements.

Providers currently enrolled or in the process of enrolling in the California COVID-19 Vaccination Program can access program-related resources and communications on this website.

Program Education and Support

- Provider Office Hours and mvCAvax Training Sessions
- COVID Call Center and Vaccine Manufacturers' Contact Info
- Guide to Other COVID-19 Vaccine Related Websites
- Frequently Asked Questions Updated 4/7



Alerts:

- Pause Use of Johnson & Johnson COVID-19: Program Email | CDPH Statement April 13
- Cases of Cerebral Venous Sinus Thrombosis with Thrombocytopenia after Receipt of the Johnson & Johnson COVID-19 Vaccine April 13
- COVID-19 Vaccination Record Cards: Please remember to ask patients to verify their personal information and keep the card as their official record of vaccination.
- Never Refuse Vaccine Shipments! 1. Accept, 2. Verify shipment, & contents 3. Store in appropriate units 4. Report any discrepancies immediately. Refer to Reporting Shipment Incidents job aid.

Email: For Onboarding, **Technical Support** Help Desk: (415) 621-9494 Sun-Sat, 7AM-7PM

Third Party Administrator

Email: For Allocations, TPA Agreement, **General Questions**

Process 3/26

News

New Resources:

VanishPoint® Syringe video

Recording and Slides 4/2

- COVID-19 Vaccine Product Information Guide
- Low Dead-Volume Syringes/Needles: Optimizing Preparation and Safety

Coming Soon: Third Party Administrator (TPA) Site-Level Direct Allocation

- Vaccinating Dialysis Patients and Healthcare Personnel
- Federal Allocations for Dialysis Patients Fact Sheet for LHDs

Moderna's Approved EUA Amendment and Reference Guide 4/6

TPA and My Turn Presentations at Provider Office Hours:



ENHANCED BY Google

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Together we can end the pandemic



California COVID-19 Vaccination Program Provider FAQs For Prospective, Newly Enrolled, and Current California COVID-19 Vaccine Providers. Providers may also visit California COVID-19 Vaccination Program for information and updates.

Vaccine Program Management.....

Directions: Click on a category to be directed to related FAQs.

Contents

Provider Enrollment

FAQs – Updated Weekly!

- **Frequently Asked Questions for Providers** •
- Answers to questions or \bullet
- For providers & LHJs
- Updated weekly: last updated 4/14/2021

Currently in its • 15th iteration!

			<u>Enronnene</u>		
o questions on the hottest topics			<u>1</u>		8
			Ordering		10
		<u>Distributi</u>	on/Redistribution		13
ers & LHJs		Vaccine S	torage & Handling		14
			<u>iers</u>		15
eekly:	 ** 1.1 Q: Who can Providers contact if they don't know their My Turn Clinic Ops Lead for coded clinic support? A: Providers who are currently active in My Turn may contact <u>codeczars@accenture.com</u> to be 				
ed 4/14/2021					
	connected with their My Turn Clinic Ops Lead. All coded clinic requests must be roo through a Provider's assigned My Turn Clinic Ops Lead.				
n its	1.2 Q: How do I change contacts in VaccineFinder?		<u> </u>		
on!	Organization Coordinators and Location Coordinators can be	A: Because VaccineFinder pulls contacts from the myCAvax provider agreement data, Organization Coordinators and Location Coordinators can be edited once the enrollment application has been approved. To make changes, contact myCAvax Technical Support 833.502.1245, option 2 for assistance.			
	8.3 Q: Is it permissible for parents o they are not accompanying minors b				
	A: Yes. Providers may accept written an unable to accompany the non-emand vaccine.	-			
https://eziz.org/	assets/docs/COVID19/Vax58ProviderFAQs.p	odf			



5

SB 95 - Law allowing 2 weeks paid sick leave

- SB 95 creates California Labor Code Sections 248.2 and 248.3. It went into effect on March 19, 2021 and *applies retroactively* to January 1, 2021. This new COVID-19 Supplemental Paid Sick Leave law allows covered employees to take up to an *additional* 80 hours of paid COVID-19 related sick leave.
- CA Labor Commissioner recently posted a <u>frequently asked questions</u> <u>list addressing SB 95</u>.
- Provide this <u>poster</u> -- all employers with 25 or more employees *must* display in a conspicuous place in the workplace or must disseminate to the workforce through electronic means if employees are telecommuting and do not physically report to work.
- All public or private employers with 25 or more employees are covered.
- Includes time spent at vaccination appointments and any lost time due to symptoms post-vaccination.

2021 COVID-19 Supplemental Paid Sick Leave

Effective March 29, 2021

Covered Employees in the <u>public or private sectors</u> who <u>work for employers with more than 25 employees</u> are entitled to up to 80 hours of COVID-19 related sick leave from January 1, 2021 through September 30, 2021, immediately upon an oral or written request to their employer. If an employee took leave for the reasons below prior to March 29, 2021, the employee should make an oral or written request to the employee for payment.

A covered employee may take leave if the employee is unable to work or telework for any of the following reasons:

- Caring for Yourself: The employee is subject to quarantine or isolation period related to COVID-19 as defined by an order or guidelines of the California Department of Public Health, the federal Centers for Disease Control and Prevention, or a local health officer with jurisdiction over the workplace, has been advised by a healthcare provider to quarantine, or is experiencing COVID-19 symptoms and seeking a medical diagnosis.
- Caring for a Family Member: The covered employee is caring for a family member who is subject to a COVID-19 quarantine or isolation period or has been advised by a healthcare provided to quarantine due to COVID-19, or is caring for a child whose school or place of care is closed or unavailable due to COVID-19 on the premises.
- Vaccine-Related: The covered employee is attending a vaccine appointment or cannot work or telework due to vaccine-related symptoms.

Paid Leave for Covered Employees

- 80 hours for those considered full-time employees. Full-time firefighters may be entitled to more than 80 hours, caps below apply.
 - For part-time employees with a regular weekly schedule, the number of hours the employee is normally scheduled to work over two weeks.
 - For part-time employees with variable schedules, 14 times the average number of hours worked per day over the past 6 months.
- Rate of Pay for COVID-19 Supplemental Paid Sick Leave: Non-exempt employees must be paid the highest of the following for each hour of leave:
 - Regular rate of pay for the workweek in which leave is taken
 - State minimum wage
 - Local minimum wage
 - Average hourly pay for preceding 90 days (not including overtime pay)

Exempt employees must be paid the same rate of pay as wages calculated for other paid leave time.

Not to exceed \$511 per day and \$5,110 in total for 2021 COVID-19 Supplemental Paid Sick leave.

Retaliation or discrimination against a covered employee requesting or using COVID-19 supplemental paid sick leave is strictly prohibited. A covered employee who experiences such retaliation or discrimination can file a claim with the Labor Commissioner's Office. Locate the office by looking at the <u>list</u> of <u>offices on our website</u> (http://www.dir.ca.gov/dlse/DistrictOffices.htm) using the alphabetical listing of cities, locations, and communities or by calling 1-833-526-4636.

This poster must be displayed where employees can easily read it. If employees do not frequent a physical workplace, it may be disseminated to employees electronically.



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Vaccine Updates



Janssen Vaccine Pause

California Department of Public Health



Janssen (J & J) Vaccine Pause – April 13, 2021

- Out of an abundance of caution, CDC and FDA have recommended a pause in use of the Janssen vaccine as of 4/13/21
 - \circ 6 cases of cerebral venous sinus thrombosis (CSVT) in combination with low platelets in vaccine recipients reported to VAERS
 - $_{\odot}$ All 6 cases occurred in women ages 18-48, within 6 to 13 days after vaccination
 - o CSVT is an extremely rare event; CSVT with thrombocytopenia even more rare
 - Highlights the ability of vaccine safety monitoring system to detect very rare adverse events
- Emergency ACIP meeting held Wednesday 4/14/21 to review the cases

 Not enough data to make recommendations on the use of the vaccine
 - \circ Pause will continue until ACIP reconvenes to review more data in 1-2 weeks



//www.cdc.gov/media/releases/2021/s0413-JJ-vaccine.html

Janssen Pause – for Providers

- Maintain high index of suspicion for symptoms of thrombotic events or thrombocytopenia in recently vaccinated patients
 - \circ Severe headache
 - \circ Backache
 - \circ New neurologic symptoms
 - ${\scriptstyle \odot}$ Severe abdominal pain
 - ${\scriptstyle \odot}$ Shortness of breath
 - \circ Leg swelling
 - \odot Petechiae, or new or easy bruising

HAN Archive - 00442 | Health Alert Network (HAN) (cdc.gov)



Janssen Pause – for Providers

- In patients with a thrombotic event
 - \odot Screen for thrombocytopenia
 - Screen for heparin-induced thrombocytopenia (HIT) with a screening PF4 enzyme-linked immunosorbent (ELISA) assay
 - $_{\odot}$ Do not treat patients with heparin, unless HIT testing is negative
 - If HIT testing is positive or unavailable, non-heparin anticoagulants and high-dose intravenous immune globulin should be strongly considered
 - Consultation with a hematologist is strongly recommended

Vaccine-induced Immune Thrombotic Thrombocytopenia - Hematology.org



Janssen Pause – for Patients

If you have received the J&J COVID-19 vaccine and develop severe headache, abdominal pain, leg pain, or shortness of breath within three weeks after vaccination, contact your healthcare provider, or seek medical care.



Report Adverse Events to VAERS



- CDC was able to respond rapidly to this safety signal because of reports that were entered into VAERS
- Demonstrates the effectiveness of vaccine safety monitoring system
- Serious adverse events are required to be reported to VAERS per the FDA EUA authorization:

https://vaers.hhs.gov/reportevent.html



Operational Guidance

- Please immediately implement the following guidance:
 - $_{\odot}$ Mark any Janssen vaccine in your inventory "Do not use. Awaiting guidance."
 - Continue to store the vaccine in the refrigerator between 2°-8°C (36°-46°F)
 - Follow <u>vaccine storage practices</u> and continue to monitor and document storage unit temperatures
 - Keep doses on hand. Do not transfer or redistribute Janssen COVID-19 doses at this time.
- Please do not reject any Janssen shipments. Receive them and then follow the above guidance.
- Federal government is currently holding unfilled orders submitted prior to the new guidance and is not currently accepting new orders.



Provider Office Hours Q&A

Please use the Q&A panel to comment or ask a question:

Q&A Panel





Administration & Allocation

Amy Pine, CDPH



Doses Administered to Date (4/15)

24,163,906 doses administered!!

49% of our 16+ population that has received at least one dose!

29.4% of our 16+ population is <u>fully protected</u>.





California's Allocations (as of 4/15)

Week of 4/12/21	Doses	Boxes		
Janssen	paused			
Pfizer	575,640	492		
Moderna	428,600	4,286		
Total	1,004,240	4,778		
30,450,640 doses delivered to date!				



Dose/Allocation Source	Program State or Pharmacy	Doses Shipped	Doses Delivered
Direct Federal Allocation	Dialysis Partnership	4,680	4,680
Direct Federal Allocation	FEMA	776,490	776,490
Direct Federal Allocation	HRSA-Funded Health Centers	1,418,540	1,418,340
Direct Federal Allocation	Pharmacy Partnership	5,780,660	5,503,800
Federal Doses	Federal Entity	986,470	976,410
State Allocation	Jurisdiction	23,036,225	22,747,330
Totals		32,003,065	31,427,050
Totals Minus Fed		31,016,595	30,450,640

Posted on <u>COVID19.CA.Gov/Vaccine</u> website:

•Doses on-hand by provider

•Weekly allocations of vaccine by health jurisdiction and multi-county-entity (MCE)



Provider Call Center

Brenton Louie, CDPH



myCAvax Profile Information

- Submitted application but not yet approved
 - In Review An enrollment team member is reviewing the account for completeness and accuracy.
 - Follow Up An enrollment team member sent an email to the Location Coordinator for clarification before the account can be approved. Please respond directly to that email for quickest resolution.
- Approved Accounts

 $_{\odot}$ Edits are made in the Section B Form.

- Unable to edit a field? Contact the myCAvax Help Desk at myCAvax.HD@accenture.com, or 833-502-1245, option 2.
- If you are changing your Shipping Street Address, verify it's a valid address using the USPS ZIP Code lookup tool.



Provider Call Center: Contact Us!

COVID-19 Provider Call Center

Email: covidcallcenter@cdph.ca.gov

Phone: (833) 502-1245, M-F 8 AM-8 PM

For questions from providers/LHJs regarding the COVID-19 Vaccine Program



myCAvax

Claudia Aguiluz, CDPH



myCAvax 7.0.0 Release

System updates introduced last night include:

- Shipping hours field enhancements
- System E-mail notifications to include provider name
- Added new order status

LHDs/TPA rejected status (order unable to be approved)




Shipping Hours

Section enhanced to make sure correct shipping hours for morning and afternoon are correctly entered.

> Users should not be able to enter in PM time for the AM fields and/or enter in AM time for the PM fields

Coordinator Availabil		Monday AM To	
Monday AM From		Monday AM ID	
05:30 AM	•	08:30 AM	•
Monday PM From		Monday PM To	
10:30 AM	•	05:00 PM	•
Tuesday AM From		Tuesday AM To	
None	•	None	•
Tuesday PM From		Tuesday PM To	
None	Review the following errors	Review the following errors	
Wednesday AM From	Please Enter appropriate Shipping Hours, the FROM time should be less than the TO time		
None			
	Cancel	Save III	



System Notification e-mails

System e-mail notifications to include provider name

 Approval of location application
 Vaccine transfers (acceptance/rejection)
 Vaccine order processed
 Pended vaccine requests







Submit

Communication

More 🗸

Vaccine Orders

Previous

Act...

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Transfers Vaccine Transfer New Transfer/Redistribution Imagency transfers should be used for unplanned vaccine transfers only. Routine transfers should be handled as redistributions. If your location plans to routinely. transfer vaccines, please contact us to apply to become a redistributor. Need help? Review our job aids for emergency transfers, redistribution transfers and COVID-19 Vaccine Transport Log. Transfers All Transfers/Redistributions **Review Transfer** 33 items -- Sorted by Date and Time Confirm details of receipt of the transfer. Transfer Id Type Status Product Lot Number Number of Doses Tra... Sending Provider Receiving Provider Date and Time 1 Pfizer-BioNTech COV... Queen Clinics 00002767 In Progress 12325 1750 Queen's Dialysis Unit... 2021-02-03T00:00:0. Emergency / unplan... Product Transfer Type 00002960 Moderna COVID-19 ... 12325 1750 2021-02-05T00:00:0... Redistribution transfer In Progress Queen1 Queen1 Pfizer-BioNTech COVID-19 Vaccine Emergency / unplanned transfer Moderna COVID-19 ... 147 00003035 Redistribution transfer In Progress 100 Queen1 Queen1 2021-02-06T00:00:0. Transfer Date Lot Number 00003034 Redistribution transfer Accepted Pfizer-BioNTech COV... 123 22 test 19 Queen1 2021-02-06T00:00:0. 12325 2021-02-02 00003031 Emergency / unplan... In Progress Pfizer-BioNTech COV... 147 1750 Queen1 Queen1 2021-02-06T00:00:0.. Transfer Time Number of Doses Transferred 00003030 Moderna COVID-19 ... 123 100 Queen1 2021-02-06T00:00:0. Emergency / unplan... In Progress location3 1760 00003029 Redistribution transfer In Progress Moderna COVID-19 ... 12325 100 Queen1 location1 2021-02-06T00:00:0. *Doses Received? 00003028 Redistribution transfer In Progress Moderna COVID-19 ... 123 100 Queen1 location3 2021-02-06T00:00:0. "New beyond use date) Yes 00003027 100 首 Emergency / unplan... In Progress Moderna COVID-19 ... 12325 Queen1 location1 2021-02-06T00:00:0.) No 00003028 Emergency / unplan... In Progress Moderna COVID-19 ... 12325 100 Queen1 location1 2021-02-06T00:00:0... * Indicate if you are accepting or rejecting this shipment *Were vaccines exposed to out-of-range temperature? Next > Ves Select an Option /) No Transfer Status



Cancel

Tip for Transfers

Complete this form to report each vaccine tra corresponding amounts of vaccine diluents, and al	Transfer nafer event within 24 hours. If applicable, transfer ncillary supplies (needles, syringes, alconol prep pads, inal protective equipment).	Must enter receiving provider account name!
Sending Provider Constrained and the storage method for transport? -None Sending Provider X X Constrained and the storage method for transport? -None Transfer Time Constrained and the storage method for transport? -None Transfer Time Constrained and the storage method for transport? -None Transfer Time Constrained and the storage method for transport? Constrained and the storage method for transport?	* Receiving Provider Q: safeway 16 Image: SafeWay 1648 Address: 2449 W Kattleman Ln; City: Loal Zip: 96242 County: San Joaquin Highreind Low Alemns) to monitor temperatures	
Vaccine Details If you are transferring multiple vaccine products you will need to submit separate forms for each product. *Product Search Products Q * Number of Doses Transferred Only un-opened multi-dose viais can be transferred Cancel Cancel	*Lot Number *Vaccines previously redistributed to or transferred from another location? Yes No Submit	



Vaccine shipments

Never refuse shipments!

- Accept 1.
- **Verify** shipment & contents 2.
- 3. **Store** in appropriate units
- **Report** any discrepancies 4. immediately (see <u>Reporting Shipment Incidents</u>)

Vaccine Inventor

Orders cannot be cancelled. Contact our Provider Call Center (833-502-1245) or your LHD contact for help transferring to another Provider who can use them.





Username Change for Providers



USERNAME CHANGE IMPACT

Your myCAvax username suffix will change from "CalVax" to "myCAvax" during your assigned wave (below). If you login to myCAvax with the incorrect username, you will not have access to the system.





- On your assigned date, login to myCAvax with your new username
 - For example, if your current username is john.doe@domain.com.CalVax, your new username will become john.doe@domain.com.myCAvax.
- Check your email! We have sent notifications and reminders for each wave that provide details on next steps to retain access.
- You do NOT need to change your password unless it has expired.



My Turn Update Provider Office Hours April 16, 2021

Today's topics:

- Meeting our Commitment to You for April 14
- Master Code Experience









COMPLETED

- **Geofencing** This deployed April 9. Although the default is one LHJ per Geofenced Clinic, Clinic Managers can contact their Clinic Operations Pod Lead to geofence multiple LHJs together. Allowing multiple counties to be grouped together will need to be a request that the functional team handles.
- LHJ-level eligibility LHJs may relax eligibility criteria ahead of the State until April 15, when the state opens eligibility to everyone 16 and older. The My Turn team worked with LHJs to configure eligibility to their specific needs within 24 to 48 hours of receiving requests.
- Bulk Upload of Registrants LHJs can upload lists of patients into My Turn for system-generated notifications.
- **Expanded Clinic Self-Service** LHJs can create their own clinics as well as batch cancellation for multiple reasons.
- Streamline the creation of coded clinics The process is now streamlined to 24 hours (from 72 hours) including TPA approval and My Turn setup time.
- Enhanced User Visibility to Multiple Clinics Clinic managers can set up and manage clinics across the LHJ. This reduces multiple logins and facilitates easier clinic management for the LHJ.

IN PROGRESS

• Walk-in bulk upload for appointments – Upload a spreadsheet of appointments to reduce the data-entry workload associated with walk-in clinics. This will go live April 30.





What is it?

A single My Turn code that can be used by a clinic's call center to schedule appointments on behalf of the patient on the My Turn website. Master Code can be linked to multiple clinics. Master Codes are not to be distributed to the general public.

What are the benefits?

Vaccinate ALL 58

- Simple: Call Center staff and LHJ's doing target outreach do not need My Turn Salesforce roles or formal training
- Accommodating: Enables residents who don't have a computer/smart phone or tech savvy to book a vaccine appointment via clinic's existing appointment line
- Customizable in My Turn: Show only coded clinic(s) to display to clinic staff making appointments

NOTE: This code can NOT be shared with the public.

The Experience



45

Prioritization & Eligibility

Louise McNitt, MD, CDPH



Anticipating childhood & adolescent immunization

- Children & adolescents will soon be able to receive COVID-19 vaccination
 - \circ 16+ years eligible April 15!
 - $_{\odot}$ 12+ years added to EUA May 2021?
 - $_{\odot}$ <12 years approved late 2021?
- Start thinking about how childhood & adolescent vaccination fits into your practice
- Many pediatric patients are behind on routine vaccination due to the pandemic. <u>Now</u> is a good time to catch up!





https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Let%27s-Get-to-ImmUnity-Toolkit.aspx

Storage & Handling

Kate McHugh, CDPH



Number of Doses in Each Vial

Janssen (Johnson & Johnson)

 \circ Pull only what is outlined in the EUA as the maximum number of doses (5 doses)

- Both Jonhson & Johnson and CDC recommend the maximum 5 doses
- Johnson & Johnson has said they are not confident the overfill consistently allows for a full 6 doses and have not studied pulling more than 5 doses
- VAERS needed only if partial dose volume given

Moderna

- $_{\odot}$ 10 to 11 doses for current NDC 80777-273-99
- $_{\odot}$ 13 to 15 doses for new NDC 80777-273-98
- Pfizer

 \circ 6 doses





Moderna Updates

- Moderna will start shipping the 13-15 dose vials announced last week
 - The federal government will allocate these in quantities of 14 doses per vial and provide kits to correspond with 140 doses per carton
 - \circ Timeline for these shipments starting is uncertain, sounds as if it will be several more weeks
- Plan is to fully transition to the 15 dose vials; the current 10/11 dose vials will be phased out
- There will be a short period of time where both NDCs are being shipped out
 Proper inventory management and training of staff will be important
- Ancillary kits and allocations for the 10/11 dose vials will remain in quantities of 100 (10 doses per vial), if providers are able to pull more doses, they can use their own supplies
- Carton dimensions and quantity of vials (10) in a carton will remain the same
- Timeline is still uncertain



Communications

Asbury Jones, CDPH



Let's get to immunity.

Paid Social – Asian/Pacific Islander



Punjabi

Educate // Side effects



Back-translation

HL: Some side effects can be beneficial

COPY:

Minor side effects from the COVID-19 vaccines are a normal sign that your body is working to protect you.

CTA: VaccinateALL58.com/info LEARN MORE

California Department of Public Health

Educate // Millions have been vaccinated



Back-translation

HL: Join millions of Californians

COPY: Many Californians have already been vaccinated for COVID-19.

CTA: VaccinateALL58.com/info LEARN MORE

California Department of Public Health

Educate // Immunity



Back-translation

HL: The most powerful solution for fighting against COVID-19: The COVID-19 vaccine

CTA: VaccinateALL58.com/info LEARN MORE

California Department of Public Health



Filipino

Chinese

Back-translation

HL: Let's unite in immunity

COPY:

The more people are vaccinated, the faster we will be able to reunite with our loved ones and return to normal life. For the future of our families and our community, the COVID-19 vaccine is our best answer.

Join millions of people who have been vaccinated.

Let's all do our part.

Learn more at

VaccinateALL58.com/Tagalog so you can get vaccinated when it's your turn, or call (833) 422-4255 to schedule your appointment.



GAWIN NATING LAHAT ANG ATING BAHAGI.

Sumali sa milyun-milyong mga taong nabakunahan.

Alamin ang higit pa sa VaccinateALL58.com/Tagalog upang mabakunahan ka kapag panahon mo na o tumawag sa (833) 422-4255 para iskedyul ang iyong appointment.



Back-translation

HL: Perhaps you still have questions. That's ok!

COPY:

Maybe you're worried about the side effects of the COVID-19 vaccine. The fact is, side effects are a sign that the vaccine kick-starts your immune system. Of course, you may not notice any at all, which is normal, too.

Let's get to immunity.

Learn more at VaccinateALL58.com/Chinese so you can get vaccinated when it's your turn, or call (833) 422-4255 to schedule your appointment.



你可能擔心接種新冠疫苗的副作用,事實上, 副作用代表疫苗正啟動身體的免疫系統;當然, 你也可能不會感覺任何不適,兩者都是正常現象。

全民全心齊免疫

CDPH

更多詳情請瀏覽VaccinateALL58.com/Chinese, 以便在輪到自己時可接種疫苗,或可致電(833)422-4255 安排預約接種。



Provider Office Hours Q&A

Please use the Q&A panel to comment or ask a question:

Q&A Panel





Your Feedback is Important to Us

Poll: How helpful was today's Provider Office Hours to your work?

- A. Very helpful
- B. Helpful
- C. Somewhat helpful
- D. Slightly helpful
- E. Not helpful at all







Vaccinate ALL 58

Where can I go for additional help?

Type of Support	Description Updated 4/6/21
Signing the TPA	 Send an email to the TPA Network Contracting team if you are interested in signing a TPA provider agreement to join the enhanced COVID-19 Vaccine Network. The team is working through a high volume of requests and will continue doing so during the next several weeks. They will contact you at their first opportunity to walk you through the agreement. Email: <u>CovidVaccineNetwork@blueshieldca.com</u>
Allocation process inquiries	This email box is being managed by a TPA team that is partnering with the State to set up the new site-level direct allocation process. They will obtain answers for you and respond to you. If you are representing an LHJ/County, it will be forwarded directly to your TPA representative for your LHJ/County, who will respond to you. Email: <u>TPA_allocations@blueshieldca.com</u> . (Note the underscore "_" between TPA and allocations.)
→ myCAvax help → desk	 Dedicated staff provides up-to-date information and technical support through myCAvax help desk: myCAvax.HD@Accenture.com or (833)-502-1245, option 2.
	 "411" myCAvax webinar training sessions are currently being scheduled each week. Send an email to the above address to inquire about the session schedule and invitation.
My Turn / My Clinic help desk	 For Onboarding (those in process of onboarding): <u>myturnonboarding@cdph.ca.gov</u> For Technical Support: <u>MyTurn.Clinic.HD@Accenture.com</u>; (415) 621-9494 (Sunday through Saturday from 7AM–7PM) For job aids and demo and training opportunities: <u>https://eziz.org/covid/myturn/</u>
COVID-19 Call Center for Providers/LHJs	 The COVID-19 Call Center for Providers is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution. Email: <u>covidcallcenter@cdph.ca.gov</u> Phone: (833) 502-1245 (Monday through Friday from 8AM–8PM)
TPA general inquiry	This email box is being managed by a team at the TPA who will either respond to you directly with an answer to your general question or forward your question/request to the specialized team managing the information you are seeking, so that team can respond to you directly. Email: <u>TPA_Inquiry@blueshieldca.com</u> (Note the underscore "_" between TPA and inquiry.)
Source: TPA Vaccine Task Force	

Thank you!



Next Monday:

Next Friday:

My Turn & myCAvax Office Hours

Monday, April 19th 12:00 PM

Audio Conference: 415-655-0001 Access Code: 145 995 8782 Session Number: 145 995 8782 Session Password: Immunize2020! Provider Office Hours Friday, April 23rd 9:00 AM

