COVID-19 AND IMMUNIZATIONS
GUIDING EMPLOYEES THROUGH UNCERTAIN TIMES TO ENSURE VACCINE ADOPTION
About 75%–85% of Americans must get vaccinated to achieve herd immunity

We are at the intersection of calamity and opportunity. As of December 2020, COVID-19 deaths have topped 300,000, scientists are predicting a grim winter, and coronavirus fatigue and burnout is leading to unrest and behavior that defies safety recommendations. Yet, the FDA has issued two Emergency Use Authorizations (EUAs) for highly effective vaccines, a first step in gaining control over the virus, with more vaccines in the pipeline.

THE CHALLENGES
Historically, vaccines have been life-changing medical miracles, safely preventing illness and saving lives. But from the first smallpox vaccine in 1796 to the first COVID-19 vaccine in 2020, safety concerns abound. Today, we know that:

▶ Competing COVID-19 vaccines are causing confusion.
▶ Political and social pressures have led to elevated levels of “vaccine hesitancy” about safety and efficacy, particularly among communities of color.
▶ The perceived “rush to market” is raising concerns for employers and employees.
▶ Employers are a primary gateway to an unprecedented, phased vaccine rollout, requiring them to play a critical role in heightening vaccine confidence and use.

“I doubt we are going to eradicate this (COVID-19). I think we need to plan that this is something we may need to maintain control over chronically. It may become something that is endemic... certainly, it is not going to be a pandemic for a lot longer because vaccines are going to turn that around.”

— Anthony Fauci, MD, Director, National Institute of Allergy and Infectious Diseases

Employers have commonly helped employees make informed decisions about their healthcare choices and responsibilities, but at no time has this work been more important.

1. **Include vaccine coverage in the medical and pharmacy benefits; consider offering incentives upon vaccination completion.**

While some aspects of determining coverage decisions and setting expectations for employees are easy, others will present significant ethical and legal challenges.

The easy decision is whether to provide first-dollar coverage for the vaccine. Doses purchased with US taxpayer dollars will be given to the American
people at no cost; however, vaccination providers may be allowed to charge administration fees for giving the shots. Revisit plan design to ensure those fees are included as a covered benefit in both the medical and pharmacy plans. Because the initial vaccine requires two doses to reach optimal effect, consider offering incentives to employees who receive them both.

Much more difficult is deciding whether to make the vaccine mandatory for employees. Because COVID-19 poses such a huge threat to public health, many employers can assert that vaccination is “job related and consistent with business necessity” — the standard under the Americans with Disabilities Act permitting employers to make medical inquiries and administer medical tests, according to the Equal Employment Opportunity Commission (EEOC). Unionized and public employers face even more challenges than private sector employers.

The case for mandatory vaccine policies is especially strong for workplaces where exposure and spread risk are high. Hospitals, long-term care facilities, and other healthcare environments whose employees will be among the first eligible to receive the vaccine will also be the first to impose mandatory vaccination policies, backed by CDC recommendations. Healthcare personnel include all paid and unpaid workers serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials (e.g., emergency medical service personnel, nurses and nursing assistants, physicians, technicians, therapists, dentists and dental staff, pharmacists, food services staff, and administrative staff).

As the vaccine rollout plan becomes clearer, employers can learn from early adopters and work with legal and benefits advisors to develop their own rollout plans — from administration, to communications, to logistics.

2. Understand and communicate about continued coronavirus spread and safety measures.

Promoting prevention will remain highly relevant. While the hope for a “return to normal” is pervasive, it is not foreseeably realistic. Simple, sustained safety measures will contribute to flattening the curve, which means reducing the number of cases at any given time, so hospitals and medical facilities have enough room, equipment and staff members to treat people who are sick. Remind employees of things they must do to keep themselves and others healthy as we navigate the immunization era. Even if they have completed quarantine, tested negative for the virus, or received the vaccine, they must:

- Talk to their doctor or other trusted medical professional about vaccine safety and protocols.
- Wear a mask in public places.
- Wash hands often with soap and water for at least 20 seconds. Hand sanitizer can substitute if soap and water are not available.
- Avoid touching the eyes, nose and mouth with unwashed hands.
- Stay at least six feet away from others, understanding this is not far enough in cases of indoor activities, coughing, sneezing, yelling and singing.
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- Stay at least six feet away from others, understanding this is not far enough in cases of indoor activities, coughing, sneezing, yelling and singing.
- Stay home as much as possible and always when they are sick.
- Cover coughs and sneezes with a tissue then throw the tissue away. Coughing into the elbow can substitute.
- Do not gather with people outside of the household.

3. Increase vaccine confidence by directly addressing common concerns.

Vaccine fear has been called “the next COVID-19 battleground,” with over 60% of Americans saying they plan to “wait
and see” what comes of a COVID-19 vaccine before committing to getting one, according to November 2020 survey data. Another 79%, including 84% of Black Americans and 80% of Latinx Americans, express concern that political expediency could compromise a safe, effective process for vaccine development. Increasing vaccine confidence is critically important. Achieving true herd immunity where you get a blanket of protection over the country, requires that about 75%-85% Americans get vaccinated, according to Dr. Anthony Fauci, the nation’s leading infectious disease scientist. CDC has developed and is continually updating the top things Americans need to know:

- **The safety of COVID-19 vaccines is a top priority.** The US vaccine safety system ensures that all vaccines are as safe as possible. The CDC has developed v-safe, a smartphone-based tool to provide personalized health check-ins after a person receives a COVID-19 vaccination to report any side effects.

- **COVID-19 vaccination helps protect against COVID-19.** For the first vaccines released under an EUA, two doses are needed. Three weeks after the first shot, a second shot is needed to get the most protection the vaccine has to offer. Additional vaccines are in the pipeline and not all require two doses.

- **Right now, CDC recommends a COVID-19 vaccine be offered to healthcare personnel and residents of long-term care facilities.** Because the current supply of the vaccine is limited, initial rollout will focus on those most at risk.

- **There is currently a limited supply of COVID-19 vaccines in the US, but supply will increase in the coming weeks and months.** The goal is for everyone to be able to easily get vaccinated. Once vaccines are widely available, the plan is to have several thousand vaccination providers including doctors’ offices, retail pharmacies, hospitals, and federally funded qualified health centers.

- **COVID-19 vaccination may result in side effects; a normal sign that the body is building protection.** The side effects from COVID-19 vaccination may feel like flu and may even affect the ability to do daily activities for up to a few days.

- **Cost is not an obstacle to getting vaccinated.** Vaccine doses purchased with US taxpayer dollars will be given to the American people at no cost. Administrative charges by vaccination providers can be reimbursed through public or private insurance companies. Uninsured patients may apply for reimbursement through the CARES Act Provider Relief Fund.

- **The first COVID-19 vaccines are being used under an EUA from the FDA. Many other vaccines are still being developed and tested.** Learn more about FDA's EUA authority or watch this video. As more vaccines are authorized or approved by the FDA, the Advisory Committee on Immunization Practices will hold public meetings to review all available data about each vaccine and make recommendations for use.

4. **Provide trusted tools and resources to assist employees in making informed choices.**

Employer leaders know that the importance of transparent employee communications, especially during times of crisis, cannot be overstated. Employees choosing to stay informed through an unprecedented and overwhelming number of news sources have one thing in common — their employer. Only one thing is certain in these critical next few months in the fight against COVID-19. There will be a considerable level of uncertainty. By developing a thoughtful yet flexible communications strategy, employers can offer employees the comfort that comes with knowing an informed, trusted source is providing
“Americans understand the public health value of a vaccine and are eager to see one developed. But the current political climate has caused Americans across party lines — but especially in communities of color — to fear that the vaccine will not be safe. It is the job of governors and the public health community to rebuild that trust and to assure the American people, with facts and science, that the vaccine they receive will help protect themselves and their loved ones and help them get their lives back.”

Michelle A. Williams, Epidemiologist and Public Health Scientist, Dean of the Harvard T.H. Chan School of Public Health

scientifically and medically sound facts to aid decision making.

One of the keys to communicating with employees during a crisis is to communicate frequently through every available channel. It’s important for leaders to communicate with staff far more often than they think is necessary. Frequent communication reduces fear and uncertainty and ensures employees have heard the message. As set forth in the above action steps, the rollout of the COVID-19 vaccine will be slow and steady, necessitating ongoing reminders about staying as safe as possible in the interim.

And because coronavirus burnout and fatigue are growing, reminders about staying the course are of utmost importance. As the saying goes, “this is a marathon, not a sprint.” Remind employees of the resources available to them, including access an employee assistance program and other mental health services, preventive care, and opportunities to connect virtually with healthcare providers, family, friends, coworkers, and community resources. And don’t forget to include a healthy dose of hope.

**KEEP MESSAGES SIMPLE**

Many factors such as age, ethnicity, political alliance, and income and education level affect how people perceive the threat of COVID-19 and the confidence in the vaccine. Meet people where they are with simple messages such as:

**DAY 1**

Jordan was exposed to COVID-19

**DAY 5**

Jordan felt well and tested negative for COVID-19

**DAY 8**

Jordan enjoyed New Year’s Eve with 20 friends while contagious

**DAY 10**

Jordan developed symptoms, exposed over 60 people to the virus, and tested positive for COVID-19, possibly facing a lifetime of health complications

**SHARE EVIDENCE-BASED RESOURCES WITH EMPLOYEES:**

- National Alliance educational video: The History of Vaccines
- National Alliance educational video: Trusting Vaccines
- CDC Things to Know About the COVID-19 Pandemic
- CDC Your Health: Vaccines
- National Institutes of Health (NIH) Coronavirus Resource Page
- World Health Organization (WHO) Coronavirus Guidance and Advice
- Choosingwisely.org
- Covidactnow.org

**ADDITIONAL RESOURCES FOR EMPLOYERS:**

- National Alliance COVID-19 resource page
- COVID Collaborative for Leaders