



COVID-19

Vaccine safety, development, and distribution

Talking points for stakeholders and LPHAs

<https://covid19.colorado.gov/vaccine>

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- Leading scientists in the private sector rigorously test vaccines and then the FDA authorizes them before they are available to members of the public. This vaccine process is overseen by the top scientists and doctors in our nation.
- Colorado expects to receive its first shipment of vaccines as early as mid-December. The initial supply of vaccines will be very limited. We have a robust group of experts planning for a distribution process that is swift, fair, and efficient.
- Once a vaccine is available, we expect it will take several months until everyone can access it because of limited availability. To save lives until the vaccine becomes widely available, we need to prioritize essential health care workers and Coloradans who are most at risk for getting severely sick or even dying of COVID-19.
- In emergencies like the current COVID-19 pandemic, the FDA can authorize the use of vaccines through an Emergency Use Authorization (EUA). An EUA permits the FDA to get lifesaving medicines to people who need them safely and efficiently.
- A diverse group of people participated in every phase of the clinical trials, including populations disproportionately impacted by COVID-19 due to generations of systemic inequities. For example, in [Pfizer's clinical trials](#), about 42% of volunteers identified as Asian, Black/African American, Hispanic/Latino/a, or Native American. About 37% of volunteers for [Moderna's trials](#) identified as Asian, Black/African American, Hispanic/Latino/a, or other.
- There are multiple COVID-19 vaccine candidates. The pharmaceutical companies Pfizer and Moderna have applied for an Emergency Use Authorization with the FDA, and we expect their vaccines to be the first to be distributed. The companies have reported that both vaccines have around 95% efficacy.

- To be as safe as possible and until the vaccine is widely available, we will all need to continue to follow critical public health protocols. Please wear a mask in public, maintain at least 6 feet of distance from others, avoid in-person interactions with people outside your households, wash your hands often, and stay home when you are sick.
- The vaccine will be distributed in phases. These phases are designed to save as many lives as possible by vaccinating high risk essential health care workers first. We are working closely with local public health agencies, health care providers, pharmacies, and diverse community partners to distribute the vaccine as equitably and efficiently as possible.
- The Governor’s Expert Emergency Epidemic Response Committee’s Medical Advisory Group (a group of medical experts and ethicists), Colorado Department of Public Health and Environment (CDPHE), the Governor’s Office, and community members and leaders all contributed to Colorado’s plan to distribute the vaccine in phases.
- Individual vaccine providers, in consultation with their local public health agencies, will need to use their best judgement about which patients may be eligible for vaccination during each of the phases.
- We are acting as swiftly as possible, but distributing a COVID-19 vaccine to the entire state will take time because of limited supply.
- Cost will not be an obstacle to getting the vaccine. Medicare, Medicaid, and private insurance will cover the cost of the COVID-19 vaccines. In addition, uninsured Coloradans will have access to free vaccines.
- We are working hard to make sure that a vaccine will eventually be available to anybody who wants one. We want to empower Coloradans to make informed decisions about their health with the help of their health care providers.

What are the phases? (As of 12/09/20)

The vaccine prioritization plan has three phases:

1A: Highest-risk health care workers and individuals. These are the people who must have direct contact with COVID-19 patients for longer periods of time (defined as 15 minutes or more over a period of 24 hours) as part of their jobs. This phase also includes long-term care facility staff and residents.

1B: Moderate-risk health care workers and responders. Health care workers who do not have prolonged direct contact with COVID-19 patients, but still work in direct patient care or as direct patient care support staff. This phase also includes EMS, firefighters, police, correctional workers, dispatchers, funeral services, other first responders, and COVID-19 response personnel.

2: Higher-risk individuals and essential workers. People who are at an elevated risk of getting very sick or dying of COVID-19, including any adult age 65 and older, as well as adults of any age with

obesity, diabetes, chronic lung disease, significant heart disease, chronic kidney disease, cancer, or who are immunocompromised.

This phase also includes people who have direct interactions with the public as part of their jobs, such as grocery store workers and school and child care staff, as well as people who work in high density settings like farms and meat-packing plants. Also included are workers who serve people that live in high-density settings (e.g. homeless shelter or group home workers), other health care workers not included in Phase 1, and adults who received a placebo during a COVID-19 vaccine clinical trial.

3: The general public. Any individuals age 18-64 without high-risk conditions.

Prioritization is subject to change based on data, science, and availability.