

January 25, 2021

Via email:

The Honorable Roy Cooper  
Governor of North Carolina  
Raleigh, NC 27601

Dear Governor Cooper,

Thank you for your time this past Friday discussing various challenges associated with delivering a successful COVID-19 vaccine effort. These are crucial and defining times and we need coordinated, well thought-out plans to win the day.

This is an unprecedented public health emergency that requires an unparalleled all-hands response. North Carolina's hospitals and health systems stepped in to collaborate with the state and local health departments on vaccination deployment, while still caring for record-high numbers of COVID-19 patients, maintaining robust testing, and coordinating continued high-quality and safe care for our non-COVID patients. Hospitals have also repeatedly pivoted on short notice to accommodate various urgent directives and orders from state and federal leaders, typically with no prior consultation for input or clear measures of success. We can, and do, adapt on the fly, but it is time for the state to now take steps to coordinate a better plan and way forward on vaccine deployment.

While public vaccination traditionally falls within the purview of public health authorities and is typically administered outside of the walls of an acute care hospital, North Carolina hospitals and health systems have stepped forward to largely assume the lead role in vaccination dispensation by planning and developing infrastructure for vaccination sites and leveraging our workforce and resources. It is fair to say that the responsibility to successfully vaccinate the state's residents has largely fallen to our state's hospitals without a clear and consistent plan from the state or the necessary resources for success.

It is our belief that to deliver the most efficient and effective mass vaccination effort, the following must be immediately addressed:

1. The federal allocation has remained consistent for the past three consecutive weeks, yet areas throughout the state have seen vastly different allocation amounts from week to week. DHHS needs to implement an equitable and predictable vaccine allocation plan based per capita and regional differences as well as the provider community's (hospitals, health systems, public health, and others) ability to deliver high-capacity throughput. We currently have health systems who have high-capacity capability with no allocation this week. This process must also be transparent for both providers and the public.
2. Assign a vaccine logistics lead responsible for equitable deployment of vaccine across the state.
3. The COVID Vaccine Management System (CVMS) is burdensome and ineffective, creating an unnecessary bottleneck in the delivery of vaccines. Speed to improvement has been slow. The provider community needs rapid relief from CVMS data issues by:
  - Simplifying or eliminating the registration process for those entering the data into the CVMS system.
  - Simplifying or eliminating the registration process required at the time of vaccination. In addition to being cumbersome, the current process is proving to be a barrier for those in underserved areas who lack access to the internet and email services.



- Immediately providing methods for hospitals and local health departments to send raw data - either flat files from electronic medical records (EMR) or other systems of record of inoculations, or paper forms via fax, for data entry into CVMS in advance of EMR integration functionality.
  - An alternative, accurate “real time” reporting from providers of vaccine administration capacity and inventories to inform allocation decisions.
4. Getting vaccines to more people is predicated not just on increased supply, but on smooth workflow and clear communication. Until CVMS and supply chain issues are more stable, moving to the frontline essential worker phase will create additional public frustration. As we saw when North Carolina moved to adults 65 and older with little to no advance warning to hospitals and county health departments, preparedness and clear communication is essential to smooth transitions among the general population groups. The state should therefore:
    - Not transition to the next eligibility group until a clear plan is developed and those expected to carry out the administration of vaccines have had an opportunity to prepare for the next transition.
    - Provide hospitals detailed information – *well in advance* – as to how the state will publicly message moving to the next phase. Messaging should set realistic expectations given the current wait time for many who are already eligible.
    - Provide clear messaging to the public that health care workers and adults over 65 will still have priority when moving to the next phase.
    - Define for hospitals and local health departments how DHHS plans to verify who qualifies as a frontline essential worker to avoid public frustration and to protect vaccination clinic workers. Requiring hospitals to take on this verification burden will further slow vaccination rates.
    - Provide immediate resolution to data discrepancies at the state and federal levels.
    - Collaborate with hospitals and health systems and other regional partners to develop and execute a plan that will enable additional Federally Qualified Health Clinics, clinics, pharmacies, and primary care offices to get more vaccine to the traditional point of access in their communities. This plan should not be created in a vacuum.
  5. Urge the Federal Government to immediately provide a more predictable number of weekly vaccine dose deliveries with more advance notice.
  6. Advocate to the Federal Government for designated vaccine allocation to specifically support mass vaccine events.
  7. Establish a revised deployment plan with clear strategies, metrics of success, and a dashboard in line with new federal “100 Million Vaccine” goals.

NCHA and our members remain steadfast in our commitment to care for all North Carolinians. We are resolute in our efforts to vaccinate as many people as quickly as possible in the coming months. We appreciate your prompt attention to these concerns and requests and look forward to your reply at your earliest convenience.

Sincerely,



Stephen Lawler  
 President and CEO  
 North Carolina Healthcare Association

CC:

Secretary Mandy Cohen, NC DHHS

The Honorable Phil Berger

The Honorable Dan Blue

The Honorable Tim Moore

The Honorable Robert Reives

The North Carolina Congressional Delegation