

FAQs for Pennsylvania's Provider Network: COVID-19 Vaccine

From daily "PA COVID-19 Provider Allocation Discussion" WebEx calls between 3/1 – 3/5

Note: Daily calls are not currently being recorded

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Recap of 2nd Dose Allocation Changes and Smoothing Strategy

- **What is the current 2nd dose challenge the state is facing?**
 - Currently, vaccine demand for 1st and 2nd doses outweighs our share of federal vaccine supply.
 - To meet urgent supply-demand gaps, our new allocation strategy smooths 2nd dose demand over ~3 weeks, spreading out demand while we wait for additional inventory. This means we will reduce allocations this week by around 50% of needed 2nd doses and expect to similarly reduce allocations (by a lesser %) for the next few weeks. You should receive an additional 30% of needed doses the following week, and around 20% the subsequent week.
 - This percentage breakout will not be the same for single provider, as we are also considering historical allocation and administration data when making allocation decisions! For this reason, we ask that you prioritize all information requests that come in from DOH, and ensure that the data you provide is as accurate as possible
 - Our goal remains getting the extremely limited supply of vaccine to people as quickly and efficiently and equitably as possible
- **So how does the smoothing strategy affect providers?**
 - We are requesting providers to adjust the timing of second dose administration, pushing some 2nd dose appointments out 1-2 additional weeks

- Doing so will keep administrations within CDC's suggested 42-day timeframe of administering second doses. We encourage providers to visit the CDC website for more information and to continue to communicate this information to their patients
- **What is the issue limiting PA from receiving a good supply of vaccines at the federal level?**
 - PA continues to be allocated a proportional volume of vaccines from the federal government through Operation Warp Speed and the Federal Pharmacy Partnership. However, the demand from our provider network has outweighed the supply, and both 2nd dose and 1st dose allocations have been affected by our need to smooth out 2nd dose demand as mentioned previously
- **Why aren't we using all 1st doses as 2nd doses if we are facing a 2nd dose shortage?**
 - Our goal is to protect as many Pennsylvanians as we can, while getting everyone fully vaccinated – across all counties and communities. We must make tradeoffs between halting new immunizations and getting those who have received their first dose fully vaccinated, and we have decided to pursue a strategy that meets both goals.
- **What is the “smoothing” additional quantity owed referenced in this week’s booster notification email be shipped next week?**
 - The additional “smoothing” quantity owed will be included in all 2nd dose notifications going forward is the quantity of 2nd doses we will include in the next week’s shipment. We hope that this will help our provider partners better adjust their timelines and appointment scheduling
- **Do you have projections on when the smoothing phase will end?**
 - We expect to continue implementing our smoothing strategy over the next 2-3 weeks to make up for the severe-supply and demand gap that the state is facing. We hope to transition out of this as soon as we have increased vaccine supply and accurate visibility into our provider’s data
 - This continues to be dependent on our supply from the federal government. If we receive enough supply to cover 2nd dose needs, then no smoothing will be needed.
- **Can you guarantee us doses to cover all patients within the 42-day CDC window?**
 - We will endeavor to provide 2nd doses for all Pennsylvanians who require them within the suggested 42-day window, and through the same provider who administered their 1st dose.
- **I have been ordering Pfizer doses and have not received any. Why?**
 - Our smoothing strategy currently applies to Moderna 2nd doses only. However, some providers have been ordering Pfizer 2nd doses a week early or have not entered correct administration data. We are delaying allocation until the correct week. We do not expect a 2nd dose shortage with Pfizer
 - Moreover, demand for vaccines across the state continues to exceed the state’s allocation of federal supply across the board. We are distributing as much Pfizer vaccine as we receive from the Federal government each week
 - If you recently obtained Pfizer super-freezer storage capacity, please reach out to our resource account to let us know that this is the case with the phrase “Pfizer storage

capacity” in the header, so that our PA-SIIS team can make sure you are getting approved to order these vaccines as soon as possible, given that Pfizer supply continues to increase across the country

- **We slowed down all vaccines 2 weeks ago related to the irregular supply chain. If we resume scheduling for next week can we be assured of delivery since allocations are according to previous use?**
 - In the future, we are looking to base allocations more strictly on previous administration. As supply/demand continues to be smoothed out, providers should expect to receive a more predictable share of vaccine. Note that the state’s supply of vaccines is dependent on federal allocation, and that we do not control the timeliness and delivery of vaccines, as that is in the hands of the manufacturers.
- **We are signed up with Clinic ID and PIN numbers and have ordered vaccine for the last 3 weeks. We have not received any vaccine to date; when can we expect to get our first doses?**
 - You may not have received any allocations to date for multiple reasons, including the fact that the state is currently facing a supply shortage, and we are making allocation decisions based on historical throughput and county population needs. Please continue to request via the weekly survey. As our supply stabilizes, we will be able to distribute an increasing number of vaccines to all providers who require them
- **Note: We want to reinforce that all providers are required to submit their administration and inventory information in SIIS per their enrollment agreement within 72 hours. We are actively using this information to determine allocation decisions each week. Please keep your information as current and complete as possible**
- **I noticed that our clinic type in PA-SIIS is labeled as 'All Vaccines Except COVID'. Does that mean our clinic is unable to administer COVID vaccines?**
 - That designation means that your facility is receiving vaccines under another vaccine program but that we have not yet activated your facility to receive COVID vaccine from Pennsylvania’s COVID-19 vaccine program. Please let us know if you believe that this is an incorrect designation
- **Are the hospital systems and pharmacies required to give all the doses in the same week and upload the information in the PA-SIIS within 24 hours?**
 - Providers are required to enter administration and inventory information within 72 hours after administering it to a patient or receiving vaccines. This information is crucial for us to be able to make the best allocation decisions for providers going forward. If you are able to update your information in 24 hours, please do so
- **Where can we find our PIN number? Is this the same as the PA-SIIS Clinic ID on our COVID-19 enrollment letter?**
 - The Clinic ID is the identifier used in SIIS

PA-SIIS and Systems

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- You can find your PIN in PA-SIIS under Clinic Settings. The PIN is labeled “VFC PIN” and is located in the upper right corner of the screen. Your PIN is linked to various federal systems used for supply chain management.
- We ONLY want to use the PIN for COVID-19 vaccine distribution. Please make sure you are submitting the right PIN in the survey in order to receive your allocation
- **What does “orders pending approval” mean?**
 - This is a temporary status that you may see as we are entering an order into PA-SIIS. Once we have completed the entry of the order, the order will move to the approval state. If you accidentally tried to enter your order in SIIS, it will also show as “pending” – however, as previously mentioned, it will ultimately end up being deleted
- **What does “on-hold” mean in PA-SIIS?**
 - If your clinic type in PA-SIIS includes the term “on hold”, this indicates that your COVID Provider Agreement has been processed but your clinic is not currently active to receive COVID vaccine. This status is used internally to assist us in managing the vaccine program including automating processes surrounding which clinics appear on the Department’s COVID vaccine map.
- **Is there a way to tell in PA-SIIS how much vaccine has been used per 1st dose vs 2nd dose?**
 - While you can determine which patients have received a first and/or a second dose, PA-SIIS does not track 1st dose vs 2nd dose usage in inventory management since the exact same product is used for both doses.
- **Where in PA-SIIS can we check the status of a vaccine order?**
 - Your vaccine coordinator can access your inventory from the Inventory button in the left toolbar. Then select the Order button. You may view orders in various statuses by changing the status dropdown option.
- **We have administered all our vaccines but PA-SIIS shows that we have more doses available. How can we fix that?**
 - You can add a new inventory reconciliation note to manually add administrations and make sure that the data on PA-SIIS is up to date.
- **Our Clinic ID mismatched with VFC PIN for our PA sites. How do we expedite this correction?**
 - Please reach out to our resource account to assist with this correction
 - As a reminder to all providers: Clinic IDs and PINs are two different things. The Clinic ID is the identifier used in SIIS
 - You can find your PIN in PA-SIIS under Clinic Settings. The PIN is labeled “VFC PIN” and is located in the upper right corner of the screen. Your PIN is linked to various federal systems used for supply chain management.
 - We ONLY want to use the PIN for COVID-19 vaccine distribution. Please make sure you are submitting the right PIN in the survey in order to receive your allocation
- **If the data in PA SIIS does not match the pulse check how will the discrepancy be handled? What will be used to determine how much vaccine is given to the provider?**

- This is a great question, and exactly one of the reasons that we developed the pulse check – to validate data across various sources, and be able to readily diagnose the root cause issues with data integrity affecting our provider community. We will be looking for ways to work with our providers to address the data mismatches.
- **Our pharmacy’s VFC PIN is not listed in your PDF file and we haven’t heard back from the resource account. What do we do?**
 - We are trying to ensure that our PDF includes all PINs and that these are consistent across our various systems (e.g., PA-SIIS, weekly request surveys)
 - Our resource account has received a few requests for PINs to be added to the PDF. Please give us a few days and if you do not hear back, then email us again.
 - You can find your PIN in PA-SIIS under Clinic Settings. The PIN is labeled “VFC PIN” and is located in the upper right corner of the screen.
 - As a reminder, we only want to use the PIN for COVID-19 vaccine distribution. Please make sure you are submitting the right PIN in the survey in order to receive your allocation.
- **I have found many duplicate records entered via HL7 interface and no race/ethnicity is entered on these records. Why is this being allowed to happen?**
 - These are exactly the types of data issues that we are working on resolving alongside our provider partners. Please share this information with us via our resource account; we will also be reaching out individually to our providers over the next couple of days to better understand these problems. It is imperative that we receive and report race/ethnicity data, and we will work closely with you and your IT teams to ensure that your data is being properly transmitted into centralized state/federal systems.

Requesting Doses via Weekly Survey

- **When should we submit requests for our 2nd doses?**
 - You should submit a request 2 weeks before you plan to administer 2nd doses, or 2-3 weeks after 1st dose administration
- **Should I re-request vaccines if I did not receive 2nd doses and have to re-schedule appointments?**
 - If you receive a notification that your request was unfulfilled after the survey closed, we ask that you re-request in the next open survey
 - Please place your full order every week, including backlog from the smoothing strategy
 - We are tracking your backlog but are using this as a sense check on our allocations. For the next few weeks, these allocations are based on a combination of your previous doses administered and allocated
 - We will make sure you receive the outstanding vaccines you were not delivered previously. In the future 2nd dose requests will be used as a check; allocation decisions will be based on 1st doses allocated and administrated
 - There is no difference between the request form for 1st and 2nd orders.
- **What if I made a mistake in my survey request? Can I re-submit it?**

- If the same weekly request survey where you submitted originally is still open, please re-submit. We will correct your submission in the background and use the submission with the latest timestamp. If it is no longer open, please reach out to our resource account and we will amend the order on the backend
- **Can you send a confirmation of what we request so everyone has a record of it being submitted?**
 - Our weekly request system is no longer sending confirmations of submission. Please reach out to us if you have questions about your submission.
 - After you have requested, if you are an officially registered provider who requested doses through our survey, you should receive an email from RA-DHCOVIDVAX@pa.gov informing you of whether you will receive doses after DOH makes allocation decisions. Notifications will be sent via email by approximately the end of the week the survey closes for 1st doses and beginning of the next week for 2nd doses.
 - You will receive an “unfulfilled” notification for vaccines; this will state if it is for 1st or 2nd doses – two separate letters will be sent out.
 - If you have not received an Order Fulfilled/Unfulfilled Letter from us, please first check that our communications are not being filtered into your spam, and then reach out to RA-DHCOVIDVAX@pa.gov immediately. Please include the phrase not receiving notification emails in the email subject line, so that we can prioritize.

DOH Notification Letter

- **When will we be notified about approval/denial of 2nd doses for the requested week?**
 - Going forward, if you are an officially registered provider who requested doses through our survey, you should receive an email from RA-DHCOVIDVAX@pa.gov. Notifications will be by approximately the end of the week that the survey closes for 1st doses and beginning of the next week for 2nd doses.
 - Once your order has been placed in PA-SIIS by us, you can check PA SIIS to find more information on approved orders including the quantity and brand of vaccine ordered for your site
 - You will receive an “unfulfilled” notification for vaccines, this will state if it is for 1st or 2nd doses – two separate letters will be sent out
- **If my doses were not approved, will I still get a notification?**
 - Yes – you will receive an “unfulfilled” notification for vaccines, this will state if it is for 1st or 2nd doses – two separate letters will be sent out
 - If you are not getting these communications, please reach out to us
- **I am not receiving these notifications for any of my requests! What should I do?**
 - If you have not received an Order Fulfilled/Unfulfilled Letter from us, please first check that our communications are not being filtered into your spam, and then reach out to RA-DHCOVIDVAX@pa.gov immediately. Please include the phrase not receiving notification emails in the email header, so that we can prioritize these

Order Shipment and Delivery

- **Relative to when I submitted the survey, when can I expect to receive my vaccines?**
 - You should expect to receive 1st doses late the week of your request or early the week after your request. Plan to administer doses the week after your request.
 - 2nd doses will arrive later in the week following your request, and should be administered two weeks after you submit a request via the weekly survey
 - To put this in real terms: for the vaccine requests you enter between Friday and Tuesday March 2nd, you can expect to receive 1st doses approximately the 5-8th, and 2nd doses approximately the 11th and 12th. Expect to 1st doses starting March 8, and 2nd doses the week following starting March 15th.
 - Vaccines will not be delivered on the weekend. Please monitor PA-SIIS for shipment updates
- **How will we receive shipment notifications?**
 - Please monitor your email for notification from suppliers, as well as PA-SIIS for shipping updates. Please be sure to let us know if you are getting communications from suppliers and not from us, as this may indicate that we have an incorrect email address for you on file
 - If you have questions about shipping, contact us via phone or email to the resource account. Please do not contact McKesson or Pfizer directly
- **Can you add a label to doses to be able to tell more easily which are 1st vs 2nd doses, or indicate that on the shipping invoice?**
 - This is a great idea! Unfortunately, the vaccines are being shipped directly from the manufacturers, and we do not have control over this process. We encourage you to keep all notification letters on file, as these should tell you which are 1st and 2nd doses. Please reach out to us if you are not able to determine after doing so. We will think in the future of ways to make it clearer for providers what dose they have received.

Scheduling and Administration of Doses

- **How late can we administer a 2nd dose?**
 - The CDC's recommended timeline is based on the best data that are currently available, and suggests that 2nd doses be administered between 3-6 weeks after 1st dose administration. However, patients may STILL RECEIVE a 2nd dose after 42 days
 - We encourage all providers to help us keep all 2nd dose administrations within this timeline, and to reach out to our resource account with urgent concerns regarding your ability to do so. We will work closely with our allocations team to make sure your patients are getting the coverage they need
- **What happens if a patient exceeds the 42-day CDC recommended timeline?**
 - The CDC's recommended timeline is based on the best data that are currently available. However, patients may STILL RECEIVE a 2nd dose after 42 days.

- We encourage all providers to help us keep all 2nd dose administrations within this timeline, and to reach out to our resource account with urgent concerns regarding your ability to do so. We will work closely with our allocations team to make sure your patients are getting the coverage they need
- If you have patients that will hit the 42 days during the week of March 15 and you have not had vaccine approved by this Wednesday, please reach out to us directly with the phrase “falling out of 42 day window” in the email header, so that we may prioritize these requests. Please only do so if your patients are coming up on 42 days the week of March 15, to allow us to prioritize request
- **Is there any evidence that a 42 day interval for Moderna is equivalent to a 28 day interval?**
 - Findings on this are still somewhat limited at this point, but for both Pfizer and Moderna, it is critical to know that a single dose protected almost everyone from severe disease and is highly effective (over 50%) in preventing COVID altogether, and that both vaccines provide prime protection at least 2 weeks after day 14 between 1st and 2nd doses.
 - According to the published and unpublished data on dosing interval trials available to the National Advisory Committee on Immunization through Health Canada for both the Pfizer-BioNTech and Moderna vaccines, there was no difference in vaccine efficacy between the people who got their second dose at day 19 and the people who got it at day 42 (BC Medical Journal).
- **Can we administer doses before 21 or 28 days?**
 - ⊖ Per CDC, persons should not be scheduled to receive the second dose earlier than recommended (i.e., 3 weeks [Pfizer-BioNTech] or 1 month [Moderna]). However, second doses administered within a grace period of 4 days earlier than the recommended date for the second dose are still considered valid. Doses inadvertently administered earlier than the grace period should not be repeated.
- **How should I reschedule appointments for second doses that were not fulfilled and that I have to re-request?**
 - If you are re-requesting doses, be aware of these timelines: fulfilled 1st dose request can be administered 1 week after the survey has closed; fulfilled 2nd dose requests can be administered two weeks after the survey was closed
 - So, if you were alerted that your 2nd dose request was not fulfilled, reschedule the appointments at least two weeks out – ensuring that you are still within CDC-recommended timelines for each patient
- **Do we have to offer a phone line for patient scheduling, or can we just offer online scheduling?**
 - Per the Governor’s order on February 12th, we ask that our providers have a phone scheduling option to provide an alternative to those who do not have access to the internet. This should be provided in addition to online registration.
 - Having both a phone and online scheduling options will allow a more equitable approach to vaccine distribution.

- **Yesterday, our SIIS coordinator told us to only pull 10 doses from any vial and not use 11th doses. Should we administer or should we discard?**
 - Regarding 11th doses, CDC guidance indicates that there are 10 doses per vial. Providers should discard the vial when there is not enough vaccine to obtain a complete dose. On the occasion that they can easily draw up an 11th dose to meet the 0.5ml dose requirement, then they can use this. However, please do NOT combine fluid from more than one vial to produce extra doses
 - Our 2nd dose allocations follow 1st dose administration, so it is important that you record all administrations in a timely and accurate fashion
 - Providers should not see these 11th doses as “bonus doses” since if you are consistently getting an 11th dose from 1st dose vials, you should also get these from 2nd dose vials to cover your patients. Moreover, due to our currently supply shortage, all doses will have to be used to compensate for reduced allocations by providers (by up to 50%) over the next few weeks
- **How will you assure that 11 doses are available in 2nd dose vials?**
 - Volumes between 1st and 2nd dose vials are the same. We expect that if our providers have the right tools and abilities to extract 11 doses from 1st dose vials, they should be able to from 2nd dose vials
- **Does the Department know which vials have 11 doses when they send the shipment?**
 - The ability to extract 10 vs 11 doses depends on needle syringe type, and not the vials themselves currently. Given this fact, we will not be able to say from which vials a provider will extract 10 vs 11 doses.
 - Please be reminded that you cannot combine fluid from across multiple vials to produce an additional dose. We will inform you if manufacturers add additional liquid volume to vials in the future
- **What should we do with empty vials? Is there any guidance on recycling?**
 - Vaccine disposal guidelines vary by circumstance, according to the CDC
 - For expired or compromised vaccine: Sometimes unused vaccine and diluent doses, unopened vials, expired vials, and potentially compromised vaccine may be returned for credit, even if they must be discarded.
 - For open and broken vials and syringes, manufacturer-filled syringes that have been activated, and vaccine pre-drawn by providers: these cannot be returned and should be discarded according to state requirements.
 - For empty vaccine vials: Most are not considered hazardous or pharmaceutical waste and do not require disposal in a biomedical waste container
 - Please contact your immunization program and/or the vaccine manufacturer for vaccine-specific information.

1st vs 2nd Dose Use

- **We were allocated first doses but have not heard about 2nd doses. Can we use these to catch up our 2nd dose shortage?**
 - Current DOH guidelines are to use stipulated 1st doses (as indicated in order notification letters) as 1st doses and 2nd doses as 2nd doses. As you know, adhering to our directives will help us move closer towards increasing Pennsylvania's immunity rate and getting more vaccines into arms.
 - That being said, we trust our providers to know their patients and their administration capacity best. You are ultimately responsible for managing schedules and administering vaccines to best meet your patients' and the community's needs.
 - In the future, please schedule appointments by taking into account predicted supply shortages and the option of pushing 2nd dose appointments 1-2 weeks out, per CDC guidelines. Additionally, please maintain administration and inventory data on PA-SIIS current and complete
 - Finally, we urge you to NOT use 2nd doses as 1st doses!
- **What are we doing in the case of a patient who doesn't attend their 2nd dose appointment? Do we just waste it? Can we use it as a 1st dose?**
 - Given the supply shortage, it is likely that you will require these 2nd doses for future patient needs. We urge you to not use 2nd doses as 1st doses, since could worsen our supply and demand gap and prevent you from getting enough 2nd dose allocations for your patients in the future. Please ensure that you are adhering to CDC guidelines in storing the doses safely until future use.
- **If a clinic receives 200 2nd doses to vaccinate 150 people that are due for their 2nd dose, what should be done with the remaining 50 doses?**
 - Please only utilize these 2nd doses as booster shots for patients. If you no longer have any need for them, reach out to our resource account with the phrase "no longer require 2nd doses" in the email header so that we may prioritize these requests and work with you to ensure the vaccines are not wasted. We urge you not to utilize 2nd doses as 1st doses
 - You can follow CDC guidelines for storage of these 2nd doses to meet the needs of your partially immunized patients or follow state redistribution guidelines to get them to where they are needed.
 - If you anticipate receiving 2nd doses but have no patients in need of them, please contact us through the RA-DHCOVIDVAX@pa.gov account.
- **What should I do with "bonus" doses in a 2nd dose vial, if I have been instructed to not use them as 1st doses? Should I really waste them?**
 - Given the supply-demand gap we have described previously and ensuing allocation cuts, there is no such thing as "bonus doses." All doses will have to be used to compensate for reduced allocations by providers (by up to 50%) over the next few weeks!
 - We urge you to not use 2nd doses as 1st doses in any circumstance

- Given our recent smoothing strategy, any additional 2nd doses will have to be used to make up for reduced second dose allocation
- Moreover, since 1st dose vials may contain additional doses, you will require these 2nd doses to meet your patients' requirements
- **We've noticed that second dose vaccine has been given as first dose in some cases by other providers. Can you confirm that this is not allowed? Will we lose out on future vaccine or be "punished" for this because we are administering 2nd doses?**
 - We can confirm this. We urge providers to NOT use 2nd doses as 1st under any circumstance. You will not be penalized for another provider's behavior near you. Please escalate this concern with us further if you are concerned. To note – we do not control the Federal Pharmacy Program and have more limited oversight over the behavior of associated providers.
 - We really appreciate the providers who have been following our guidance and will continue to recognize you going forward.
- **If we request 2nd doses and they are delayed what should we do with the doses remaining from patients that went elsewhere to receive their 2nd dose?**
 - Please save these 2nd doses to be used as booster shots for future patients. If you no longer can have any need for your 2nd doses, please reach out to your resource account and let us know. We urge you to not utilize your 2nd doses as 1st doses, as this could contribute to widening the gap between our supply and demand of 2nd doses

Janssen Vaccine for Educators and School Staff

- **Will Janssen vaccine only be available for teachers? Will it become available for anyone in Phase 1A?**
 - As general context: the state is expecting to receive an initial allocation of [94,600](#) initial Janssen doses, which will go towards the special educator vaccination plan. After this initial allocation, we expect there to be a steep drop off of Janssen supply for several weeks. However, eventually supply will increase and be sufficient to cover additional individuals in multiple phases
 - Through a Special Initiative, all public and private school teachers and school staff are eligible to receive the Janssen vaccine. We are prioritizing teachers and childcare providers who work with early learners and Pre-K students. We will then work our way up the list to vaccinate educators who teach older children. This way, parents with young children can get back to work sooner.
- **Who will be giving Janssen vaccine to teachers?**
 - The National Guard will facilitate vaccine rollout through intermediate units, or IUs. These units will communicate directly with the teacher and other administrative/support staff who are eligible for the Janssen vaccine to set up appointments.

- The intermediate units have all the information they need to efficiently prioritize groups of teachers and staff according to the State’s plan to first vaccinate those who work directly with early learners and pre-K students, and then educators who work with older students.
- **Are we using Janssen only to vaccinate educators?**
 - Yes, at this time the Janssen vaccine will only be given to educators and school support staff in both public and private schools. This includes bus drivers, school cafeteria employees, and administrators—anyone who works in a school will be eligible to receive the vaccine.
 - The State anticipates we will receive more Janssen vaccine by the end of the month to vaccinate a greater share of the population
- **What about the private school teachers and universities?**
 - Private school teachers who teach pre-K through 12th grade are eligible.
 - University instructors and staff are not eligible at this time, but the State anticipates receiving more vaccine by the end of the month and will evaluate next steps.
- **I understand the National Guard will be administering the Janssen vaccine through the IUs for pre-K through 12 teachers, but who will be administering the vaccine for early childcare providers?**
 - Early childhood educators are included in the same Special Initiative for Janssen vaccine, as well as early childhood program works who work in the following settings: Child Care; Part Day School Age Programs; Home Visiting Programs; Early Intervention; and Early Childhood programs including Head Start/Early Head Start, Pre-K, and Family Centers
- **What if the teachers do not want Janssen due to religious beliefs?**
 - No teacher or patient is obliged to receive a vaccine for any reason whatsoever
- **Is it 14 days to build immunity after receiving Janssen vaccine?**
 - Yes, according to clinical trials, 66% effectiveness in preventing moderate to severe COVID-19 was reported as early as 14 days after the first administration, as well as 85% effectiveness in stopping hospitalizations
- **How should we respond to 1A individuals who are now receiving vaccination after 1B individuals?**
 - As previously mentioned, only a select group of providers will be vaccinating 1B individuals (“educators”). Eligibility criteria have not changed for 1A individuals, and we are prioritizing the vaccination of all eligible persons across the state. We have prioritized teachers for the initial Janssen allocation for multiple reasons, including direction from the federal government as well as the important of getting our kids back into school. However, we have not shifted into 1B; the majority of vaccinations will continue to be 1A
- **Can regular providers vaccinate teachers, or must we turn them away?**
 - Our program for teachers with Janssen vaccines is a special initiative to ensure we can re-open schools safely. However, if a teacher qualifies for 1A due to being over 65, underlying conditions, or other eligibility criteria, you should administer their 1st or 2nd dose in Pfizer or Moderna.
 - You should not turn away any patient that is eligible to be vaccinated. If a teacher or school staff member is in line to receive their second dose of Pfizer or Moderna because they are part of 1A, you should vaccinate them

- **Will teachers be moved to the 1A group?**
 - Educators and school staff will not necessarily be moved into the 1A group, but they will be prioritized along with those who are currently in group 1A. The goal is to simultaneously vaccinate teachers and school staff with the added supply of Janssen vaccine. Since the Janssen vaccine has been provided to teachers, in addition to Moderna and Pfizer, those currently in 1A will not experience a reduction in available vaccine.
- **We requested Moderna 1st dose vaccine for this week. Is it possible to change to J&J vaccine instead?**
 - Providers cannot yet request J&J vaccines on their ordering forms.

Pulse Check and One-time Provider Input Form

- **Is the provider input form that was due Friday (today) now due on Monday, March 8th?**
 - Yes, the one-time provider input form is now due on Monday at noon, instead of Friday, to give our providers more time to submit the form.
- **How long will we have to submit the new “pulse checks”?**
 - The pulse check should take approximately 5 minutes to submit. It will be due every Monday, Wednesday and Friday (unless the facility is closed). The deadline to respond is 10 AM for the previous day's data
 - We expect to use this system for several months as we fix the “data gaps” and design permanent solutions for our existing systems
- **If a provider is not currently receiving vaccine and doesn't plan to administer in the future, do they still complete the pulse check?**
 - Yes. Every facility that has ever received or administered vaccines, regardless of allocation source, is required to submit.
 - If you have not received vaccines, you can submit the survey only once. Once you begin to get vaccines on a regular basis, you should be submitting 3x a week
 - Please submit the survey on Monday, Wednesday, and Friday, even if your data has not changed
 - We really need all sites' information to ensure the correct data is flowing through correctly in SIIS; understand where vaccine inventory is; and ensure that we are continuously building our provider network and allocations to be equitable and optimized across the state.
 - Retail Pharmacies must also complete the pulse check. The reporting on providers being shared with the Legislative Task Force is going to include all Federal Programs, so we need to validate their data.
- **As we complete the pulse check survey, how would you like us to incorporate bonus doses into our figures? Should we include them in our values? Or omit them?**
 - Please record every single administration; do not omit anything!
 - Moreover, as a reminder – there is no such thing as “bonus doses”. All doses will have to be used to compensate for reduced allocations by providers over the next few weeks!

- We urge you to not use 2nd doses as 1st doses in any circumstance
- Given our recent smoothing strategy, any additional 2nd doses will have to be used to make up for reduced second dose allocation
- Moreover, since 1st dose vials may contain additional doses, you will require these 2nd doses to meet your patients' requirements.
- **Will you send out a new pulse check survey link?**
 - Please note this change: we will not send out a new link each time. You can use the same link as was sent to you in our original email to submit the pulse check each time. We will be sending reminder emails for submission to our providers before each pulse check is due. We will be sure to update everyone ahead of time if the link were to change.
- **Was the one-time provider input form distributed? Must this be completed for each location?**
 - Yes - the one-time provider input form is already live currently and must be completed by every location. It was distributed in the original email containing information about the Pulse Check
- **If we complete the pulse check on Wed and there are no changes between Wed and the next pulse check on Friday, do we need to complete the Friday one with the same information?**
 - For the moment, we are asking all providers to provide a new submission every indicated day. We expect that this will require minimal time if the information to submit has not changed. We may be able to modify this in the future to make this easier for our providers.
- **For the one-time survey today, does a health system need to complete one for each vaccine location, or can the system answer the survey once?**
 - Please provide a submission for each location within a health system. We need to understand where vaccine is being administered, by site.
- **The pulse check is another thing for those providers to do that are entering SIIS in a timely fashion. Why penalize us and add more work?**
 - The intent of the pulse check is not to penalize our providers, but to help ensure that you are getting recognition for your work and receiving the vaccines you need to meet your patients' needs. We appreciate the time and effort required from our providers to provide this information on a regular basis. In the long run, we hope to be able to rely entirely on PA-SIIS, but in the meantime, this pulse check has proven effective in filling our data "gaps" across various areas.

The Provider Network

- **Do providers stop getting vaccine if a larger mass provider is in the same zip code? Smaller pharmacies can help seniors in the neighborhood who do not have internet, whereas large pharmacies can't.**
 - Large pharmacies receive their vaccines through the Federal Pharmacy Program, which is a separate pot of vaccines from the State's allocation.

- In considering how much of our limited vaccine supply we are sending to providers we will look at throughput and performance while also trying to ensure our smaller counties without large systems are still taken care of. We recognize our small providers are crucial in helping us reach all Pennsylvanians and appreciate your patience as we determine the best way to work with our providers to distribute vaccine equitably.
- **When will shipment to independent pharmacies who are not part of the Federal Pharmacy Partnership resume? We have over 1,600 people on our waiting list.**
 - Shipments to independent pharmacies have not ceased; however, we have reduced the number of providers who are receiving vaccine across all provider types while our supply is constrained. We appreciate your patience as we work through the best ways to ensure fast, equitable distribution across the state.
- **I did not get 2nd doses this week. Does that mean I will never get 2nd doses again?**
 - No! We have not communicated nor finalized any adjustments to our network and will be sure to communicate these to you all as soon as we have. There have not been any announcements made regarding small pharmacies or small practices/physicians being removed from the network. Our current allocation decisions are based on previous allocation and administration data, as well as additional factors to guarantee equity across our network.
- **I was denied 1st doses this week. Did my doses get re-allocated to big pharmacies?**
 - Large pharmacies receive their vaccines through the Federal Pharmacy Program, which is a separate pot of vaccines from the State's allocation.
 - We are currently facing a shortage of vaccines across the state, and have needed to make allocation decisions based on which providers can vaccinate the most people quickly, while maintaining coverage across the state
- **Will small providers be getting more vaccines as supply increases?**
 - In considering how much of our limited vaccine supply we are sending to providers we will look at throughput and performance while also trying to ensure our smaller counties without large systems are still taken care of. We recognize our small providers are crucial in helping us reach all Pennsylvanians and appreciate your patience as we determine the best way to work with our providers to distribute vaccine equitably. Please continue to share as much and as accurate data as possible, so that we can make the best allocation decisions for our network and for our patients.
 - As supply increases, it should reach an increasing number of providers.
- **Previous email stated that vaccine is being sent to areas with higher cases. Our residents are traveling to other counties to get the shot. If there are many cases in other counties, why are they able to vaccinate our residents and we are not?**
 - We take several factors into account when determining where to send vaccine, only one of which is rate of COVID cases. Some of the others include population and provider requests and capabilities (for example, ability to handle Pfizer).

- Our ultimate goal is to ensure that every Pennsylvanian who wants to get a shot is able to get one. We are monitoring patient outcomes across counties to ensure populations are getting vaccinated, regardless of where they live.
- **Why do you not send some doses to all providers?**
 - Right now, supply is still very limited. We cannot support all providers' requests for vaccine, so we are prioritizing allocations based on a variety of inputs, including historical administration data and county-specific demographics and COVID-19 metrics.
 - In the long run, as supply ramps up, we anticipate being able to send supply to every provider who requests vaccines.
- **Can you provide any information on how the CDC supplemental COVID 19 vaccine redistribution agreement works?**
 - All redistribution must occur through authorized channels; you can find additional information on how to apply on our website. It is critical for us to be able to track this information to minimize risk of transferring vaccines inappropriately, and to have as much visibility as possible into our providers' inventory to make informed allocation decisions. We encourage you to reach out with any additional questions regarding the process to apply for redistribution
- **Will there be more vaccinations distributed to the suburbs in the next few weeks?**
 - We are allocating on a county level based on population, population over 65, COVID cases and COVID deaths. We want all populations in Pennsylvania to receive the right level of care during this difficult time
 - There will continue to be fluctuations to county-level allocations as our total provider network shifts and all we are ensuring all counties get their fair share of vaccine
 - Additional factors that may influence allocation by county include redistribution between health systems; the importance of health equity; the Federal Pharmacy Program's allocation (which are outside of the state's control); and minimum order requirements

Additional Questions

- **Has there been any change to guidance regarding Pfizer?**
 - On February 25, the U.S. Food and Drug Administration (FDA) announced that it is allowing undiluted frozen vials of Pfizer-BioNTech COVID-19 Vaccine to be transported and stored at conventional temperatures commonly found in pharmaceutical freezers for a period of two weeks. This reflects an alternative to the recommended storage of undiluted vials in an ultra-low temperature freezer. We recommend providers learn more about these changes by consulting the [FDA's Fact Sheet for Healthcare Providers Administering Vaccine \(Vaccination Providers\)](#)
- **Why can't this call be interactive?**
 - We understand the desire from our providers to have real-time conversations with us, to make sure your important questions are answered. Unfortunately, so far attendance from

these daily calls spans from over 200 people to almost 1,000 providers, meaning we cannot feasibly open up the call for live questions.

- We will be moving to smaller formats for these calls moving forward, to provide more targeted and live opportunities to our various provider groups - invitations for these upcoming calls will be sent out shortly
- **Are links for future calls going to be sent?**
 - Yes – please let us know if you have not received the new information for future calls.
- **Do recipients have to be Pennsylvania residents to get vaccinated?**
 - No. An individual does not need to show proof of residency to be vaccinated in Pennsylvania. Please visit our website for more vaccine FAQs and details on eligibility
- **We have continued to receive calls regarding vaccines since our information was put on the DOH site, but we no longer have any supplies. Can our information be removed from the site?**
 - We are attempting to balance transparency for the public with support for our providers. We plan to continue to publish which providers are receiving vaccine on a weekly basis.
- **Can you please publish a disclaimer on the inventory associated with providers on the DOH website?**
 - We have several caveats mentioned with the spreadsheets, including that the data may be incomplete; does not differentiate between 1st and 2nd doses; does not include Retail Pharmacy Partners, etc. We will continue to add additional caveats on dose availability as information is updated on the website to make it clearer and more transparent for providers and the public alike
- **We have realized the data the DOH has on us is incorrect and we are not receiving second doses because of this. How can we get this fixed?**
 - Please reach out to us via the resource account with the topic header “incorrect historical” data so that we can get this problem fixed and ensure that we have accurate data in our systems. Team members may also be reaching out to some providers in the future to ask for data validation and to understand the data/system challenges some of our providers may be facing, so please keep an eye out for this
- **If you submit a question to the vaccine resource account, when can you expect a response back?**
 - We are working to resolve your data questions as quickly as possible. However, we are receiving upwards of 100 questions a day, in addition to the questions you are sharing during these daily calls – meaning that it may take a couple of days for us to respond. We are prioritizing the escalation of high-urgency questions, and hope to be able to resolve those for you within 24 hours (e.g., concerns of falling out of a 42 day window)