

THIRD AMENDED PUBLIC HEALTH ORDER 21-01 VACCINE ACCESS AND DATA REPORTING FOR COVID-19 November 14, 2021

PURPOSE

I issue this Public Health Order (PHO or Order) concerning access to vaccine for all populations and the reporting of vaccine administration and vaccine recipient demographic data from both state and federally enrolled **vaccine** providers regarding individuals who receive any of the coronavirus disease 2019 (COVID-19) vaccines authorized by the federal Food and Drug Administration (FDA) and recommended by the Centers for Disease Control and Prevention (CDC) for the purpose of compiling relevant demographic information to have a better understanding of COVID-19 vaccination rates across the state for all populations in Colorado.

FINDINGS

On March 10, 2020, Governor Jared Polis verbally declared a disaster emergency regarding COVID-19 in Colorado, and on March 11, 2020, Governor Polis issued **Executive Order D 2020 003** memorializing the disaster declaration. The Governor's verbal declaration of a disaster emergency is now memorialized in **Executive Order D 2021 122**, amended and extended by **D 2021 124**, **D 2021 125**, **D 2021 129**, **D 2021 132**, and **D 2021 136**. COVID-19 is a respiratory illness caused by a novel coronavirus. Symptoms include fever, cough, shortness of breath, or difficulty breathing. As of November 12, 2021, there are 781,960 known cases of COVID-19 in Colorado, 44,542 individuals have been hospitalized with COVID-19, and 8,886 people have died from COVID-19.

Since the emergency declaration, many additional executive orders and public health orders have been issued implementing the state's response to the COVID-19 pandemic, beginning with requiring Coloradans to Stay at Home, then moving to a Safer at Home framework with an ability to move to less restrictive standards in Protect our Neighbors, consolidating these frameworks into the COVID-19 Dial, and then rescinding these standards from state orders, allowing for counties to determine what restrictions to implement to best meet their needs. Consistent across the prior state requirements, now guidance, is the reminder to maintain 6 feet distancing where possible, wear face coverings, avoid large gatherings, and wash hands. All of these combined efforts are intended to slow the spread of disease and ultimately flatten the curve of COVID-19.

Since the arrival of COVID-19 **vaccines**, Colorado has worked diligently to provide vaccines to all eligible Coloradans. Providers who are authorized to administer **vaccines** and wish to order COVID-19 **vaccines** through the Colorado Department of Public Health and Environment (CDPHE) are required to complete an enrollment process with CDPHE for the CDC COVID-19 **Vaccination** Program. Retail pharmacies and Federally Qualified Health Centers may enroll

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directly at the federal level to order COVID-19 vaccines through separate federal vaccine distribution channels. To enroll, a **vaccine** provider must be credentialed or licensed in Colorado to possess or administer vaccines or provide vaccination services, sign and agree to the conditions in the CDC COVID-19 Vaccination Program Provider Agreement, and fully complete the CDC COVID-19 Vaccination Provider Profile form for each location where COVID-19 **vaccine** will be administered, even if owned under a larger corporate or parent organization.

In order to ensure that as many people as possible have access to COVID-19 **vaccine**, CDPHE needs to collect **vaccine** administration and **vaccine** recipient demographic data from both state and federally enrolled vaccine providers. Additionally, it is imperative that CDPHE gather and assess real time **vaccine** administration data across the state to identify underserved populations, with a focus on health equity and racial and ethnic disparities, and implement strategies to promote **vaccine** equity by enhancing access for those populations to receive **vaccines**.

On November 10, 2021, Governor Polis issued Executive Order D 2021 137 Declaring the State of Colorado High Risk for COVID-19 Exposure and Transmission, citing the current estimated COVID-19 infection rate as 1 in 67 Coloradans and finding that all individuals 18 years of age or older are at high risk and qualify for a booster dose. With available hospital bed capacity reducing due to the recent surge in cases, providing access to COVID-19 vaccine, including booster doses, to all eligible individuals is critical to reducing disease transmission in Colorado.

ORDER

I. VACCINE ACCESS AND REPORTING REQUIREMENTS

A. Vaccine Clinics. All COVID-19 vaccine providers that conduct vaccine clinics for the public shall to the greatest extent possible establish a direct web link for eligible Coloradans to sign up and register for a vaccine appointment. To be accessible, the web link should be separate from any regular patient portal with restricted access, and the registration services should be accessible to individuals with disabilities including individuals with visual impairments. The web link should be clearly shown on their COVID-19 webpage and easy to navigate. Federally qualified health centers and small community providers and clinics serving underserved communities may choose not to publish their registration information, but they must have another way to effectively communicate with their clients and others in the community whom they plan to vaccinate. COVID-19 vaccine providers should also have a telephone number for eligible Coloradans with language services for individuals with limited English proficiency, who do not have access to the internet, to call, and it should be properly staffed to efficiently serve eligible Coloradans without long wait periods.



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- Individuals seeking COVID-19 vaccines are not required to make an appointment and COVID-19 vaccine providers shall, as vaccine supply permits, allow walk up access to vaccines at all COVID-19 vaccination clinics.
- COVID-19 vaccine providers shall, as vaccine supply permits, accept any individual seeking a second COVID-19 vaccine, regardless of whether the vaccine provider administered the first shot.
- COVID-19 vaccine providers shall, as vaccine supply permits, accept any individual seeking an additional or booster dose of COVID-19 vaccine, regardless of whether the vaccine provider administered the primary vaccine series.
- 4. **COVID-19 vaccine providers** shall provide **vaccine** to any age-appropriate individual within the provider's scope of practice, including in accordance with **Executive Order D 2021 137** any additional or booster COVID-19 dose authorized by the FDA, provided the minimum timing interval following the individual's primary COVID-19 vaccine series completion has been met.
- B. Removing Barriers to Vaccine Access. Requiring a social security number, proof of insurance, or an identification card, particularly one issued by a government, can exacerbate distrust and accessibility inequities for many critical groups. These requirements are a barrier for people who are unable to provide this information or have trouble accessing services that issue identification cards, such as those who are undocumented, experiencing homelessness, or have a disability. To facilitate access for all individuals eligible for the COVID-19 vaccine, COVID-19 vaccine providers that conduct vaccine clinics for the public shall not require that an individual present or provide any of the following as a condition to receiving the vaccine:
 - 1. A state-issued or other government-issued identification card;
 - 2. A social security card or number;
 - 3. A fee for the **vaccine** or **vaccine** administration; or
 - 4. Proof of insurance.

A **COVID-19 vaccine provider** may ask if the individual has health insurance, as the provider may choose to bill the insurance for a **vaccine** administration fee; however, if the provider does ask for the individual's health insurance, they must provide the individual with a disclosure statement confirming that **vaccine** will be provided regardless of whether the individual provides health insurance information.

- C. Data Reporting Requirements.
 - 1. All COVID-19 vaccine providers administering COVID-19 vaccines in Colorado shall report demographic information to CDPHE pertaining to individuals they vaccinate. The demographic information required to be collected includes first and last name, date of birth, gender identity and address. COVID-19 vaccine providers shall also ask vaccine recipients to provide their telephone number, email address, and their race and ethnicity. Enrolled vaccine providers are



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required to ask individuals receiving a COVID-19 vaccination for race and ethnicity information; however, the individual may decline to provide the information, which the provider shall document and report to CDPHE. CDPHE will provide the required reporting platforms and the form and format for submission of the required information, which may be modified as the response to this pandemic evolves. **Vaccine** administration data, including **vaccine** recipient demographic data, is required to be reported to CDPHE within 72 hours of **vaccine** administration.

- Standardized Collection of Race and Ethnicity Data
 COVID-19 vaccine providers shall implement processes to collect standardized race and ethnicity information from vaccine recipients. Race and ethnicity shall be collected as separate data elements.
 - a. The minimum categories for race are: American Indian or Alaskan Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, White, Other, Unknown and Declined to Provide. Vaccine recipients should be able to self-identify with one or more races.
 - b. The minimum categories for ethnicity are: Hispanic or Latino, Not Hispanic or Latino, and Declined to Provide.
- 3. All COVID-19 vaccine providers, including pharmacies enrolled in the COVID-19 Vaccination Program at the federal level, administering COVID-19 vaccines to residents and staff of residential care facilities which include skilled nursing facilities, assisted living residences, group homes, and intermediate care facilities, shall submit vaccination administration data, as determined by CDPHE, to CDPHE through this <u>form</u> within 48 hours of holding a COVID-19 booster clinic for these residents.

D. Form of Reporting

- All COVID-19 vaccine providers shall report vaccine administration and vaccine recipient demographic information to CDPHE in one of the following ways:
 - a. Manual Reporting Options
 - i. <u>Direct Data Entry (Clinic Entry)</u>: **COVID-19 vaccine providers**would enter all vaccinations directly into the Colorado
 Immunization Information System (CIIS) web application.
 - ii. <u>IZ Quick Add (Clinic Entry)</u>: **COVID-19 vaccine providers** holding mass COVID-19 immunization clinics can use this option for loading mass doses administered into CIIS.
 - iii. <u>Direct Data Entry (CDPHE Entry)</u>: **COVID-19 vaccine providers** can request CDPHE staff resources to manually enter administered doses on their behalf. Providers shall report **vaccine** administration and **vaccine** recipient demographic information to CDPHE through the completion and submission of CDPHE's <u>Vaccination Administration Form</u>.



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- b. Electronic Reporting Options
 - Utilize Existing CIIS Interface: COVID-19 vaccine providers with an existing interface to CIIS (from their Electronic Health Record (EHR) or Pharmacy System) may continue using this existing interface.
 - ii. <u>Develop Immunization Interface</u>: **COVID-19 vaccine providers** that do not have an existing interface to CIIS (from their EHR or Pharmacy System) may express interest to develop an electronic interface. If this option is possible then they will participate in the expedited onboarding process to develop a new immunization interface.
 - iii. <u>Utilize PrepMod System</u>: **COVID-19 vaccine providers** may request access to a CDPHE-procured system called PrepMod. PrepMod is a mass vaccination scheduling and **vaccine** administration system which interfaces electronically with CIIS.
 - iv. <u>Flat File Import</u>: **COVID-19 vaccine providers** that do not have an EHR or can't develop an electronic interface may electronically report data to CDPHE by using a Flat File Import file format.
- E. Any patient identifiable information collected will be held as confidential by both the **enrolled COVID-19 vaccine provider** and public health, and will not be shared publicly. CDPHE shares deidentified, record-level **vaccine** administration information with the CDC through a Data Use Agreement to inform their national work on COVID-19 response.

F. Definitions

- "COVID-19 vaccine provider" means any provider enrolled in the CDC COVID-19 Vaccination Program or any provider receiving COVID-19 vaccines directly from the federal government.
- 2. "Vaccine" means any COVID-19 vaccine that is currently or in the future may be authorized for emergency use or fully approved for permanent use by the FDA and recommended by the CDC, including as many primary, additional and booster doses as the authorizations or approvals allow.

II. SEVERABILITY

If any provision of this Order or the application thereof to any person or circumstance is held to be invalid, the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.



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III. DURATION

This Order is effective on November 14, 2021 and will continue to be in effect until **Executive Order D 2021 122**, as amended and extended, has expired or been rescinded.

Jill Hunsaker Ryan, MPH

Executive Director

November 14, 2021

Date

