

Chairwoman Diana DeGette, Ranking Member Morgan Griffith and members of the subcommittee, thank you for the invitation and opportunity today to share the great State of Louisiana's journey in responding to the COVID-19 pandemic – both our successes and the opportunities to address challenges that currently hold us back. With your continued partnership, we are confident we will be able to clear these hurdles, namely through increased COVID-19 vaccine allocations, advance notice for planning, and continued flexibility around the long-term care federal partnership program.

First, I must recognize the toll that COVID-19 has had on families and individuals over the last year. This is a disease that has touched everyone in some way. Many of us know friends, colleagues or family members who contracted the illness and were able to return to their daily routine in just a few weeks. Others we know were admitted to hospitals, where doctors and nurses had to quickly adapt how they practiced medicine to fight this novel virus. Others got ill then recovered from their acute illness, only to be left with the lingering effects for an amount of time that is still uncertain. And then some paid the ultimate price – losing the battle, often alone in a hospital, after their body could take no more, altering the makeup of families for generations to come. In Louisiana, as of this past Sunday, we have lost 8,743 husbands and wives, brothers and sisters, fathers and mothers, daughters and sons to this virus.

From the outset, we adopted a “low and wide” strategy for vaccine distribution. Although Louisiana has a strong track record of hosting mass vaccination events and is ready to employ them once vaccines become more available, we put our energy towards working with several partners to get local providers all over the state enrolled and comfortable with the vaccine. Building a vast network of diverse providers is time and labor-intensive work, but we view it as fundamental to achieving equitable coverage, a top priority in Louisiana's planning and rollout from the very beginning.

We are proud of the progress our state has made to date, but we are determined to keep improving because we know our residents' lives depend on it. As of January 30, Louisiana has been allocated 438,100 first doses with 93,600 diverted to the *Pharmacy Partnership for Long-Term Care Program* (LTC partnership) leaving 344,500 available for in-state allocation. This week in Louisiana, we received 67,350 of first-dose vaccines that were shipped to 406 providers in all 64 parishes. This number of receiving providers has increased every week since the start of our vaccine distribution.

We have worked to increase the number of providers enrolled and ready to receive. We began with 701 providers enrolled in week 1 and we now we have 1,919 providers enrolled in all parts of the state who are ready to receive and administer vaccine, with only 32%, or 613 providers, receiving the vaccine so far because of limited supply.

Our efforts began the week of December 14, when Louisiana received 39,000 doses from Pfizer, which was distributed to five health systems across the state to begin vaccinating their

employees. In week 2, we received both Pfizer and our first allotment of Moderna doses for a combined allotment of 106,875, which included the LTC partnership doses. The addition of Moderna doses allowed us to increase distribution to our Tier 2 hospitals capturing those priority groups in Phase 1A, which continued for the next few weeks.

As we moved into week 4, we received a combined total of Moderna and Pfizer of 94,960 doses, which included 38,995 of Pfizer 2<sup>nd</sup> doses and the LTC partnership allotments. We began vaccinating individuals in our Phase 1B, Tier 1, which included persons 70 years old or older, dialysis patients, ambulatory and outpatient healthcare workers and allied health schools. This same week, we initiated a partnership with our Louisiana pharmacies in an effort to provide access across the state. This partnership allowed for 107 randomly selected chain and independent pharmacies to begin receiving the vaccine, with each pharmacy receiving an average of 100 doses. To prevent long lines from forming outside pharmacies, the state insisted providers and eligible residents make appointments.

The vaccine allocation remained consistent these last few weeks, where we have received approximately 58,150 doses per week and have continued to spread allocation across the state to an increasing number of enrolled providers. During week 6, we used social vulnerability mapping to inform our intentional effort of equitable distribution.

Providers receiving vaccine are added at an average of 65 providers per week, going from 118 to 406, including Federally Qualified Health Centers, Rural Health Clinics, Home Health agencies and other health facilities. Over the past few weeks, we have tested additional distribution models, including providing the Pfizer vaccine in non-hospital settings.

Louisiana continues to rank among the top tier of states when it comes to administering the vaccines. According to the CDC, we currently rank 18th among states for first doses of vaccine administered per 100,000 residents. With additional supply, the proper time to strategically plan and continue flexibility as to where our vaccine doses go, Louisiana would be able to significantly increase the number of residents vaccinated each week.

### **Louisiana is ready for increased allocations**

The narrative across the country has been that vaccines are going unused, but we have worked very hard to ensure that the limited supply of vaccines received from the federal government is going into eligible residents' arms each week, and we have done well. We firmly believe with an increased allotment that the state will be ready to vaccinate. Within a week, between 90 to 95% of the vaccines shipped to Louisiana are in arms.

As previously stated, in recent weeks, Louisiana has received approximately 58,500 vaccines a week. From that allotment, Louisiana was required to deposit an average of 23,400 doses to the LTC partnership with Walgreens and CVS, leaving around 35,100 doses for the state to utilize. Fortunately, we have requested and been approved to keep and utilize doses that would

have gone to that partnership. That has allowed us to further expand our network of vaccine providers and increase Louisiana's overall vaccinated numbers.

With the increasing number of COVID-19 cases in Louisiana, the vaccine remains a critical tool in the toolbox. As of February 1, 2021, we are reporting 899 new COVID-19 cases for a total of 401,591 cases. We have administered a total of 5,328,079 tests across the state and the statewide percent positivity is 8.60%, with hospitalized COVID patients at 1,403 (34.4%).

We know COVID-19 has hit our communities of color hardest, exacerbating health inequities that go far back. It is no surprise to us that due to historical and even current harm, there is *earned* mistrust especially in our African American communities in particular. We hear that from our communities and now we see it in our early vaccine data. While we continue to work with our providers on the importance of entering race data in the system, the current data show that we still have work to do. While African American communities make up 32 percent of Louisiana's population, they account for 14.83% of those who have received a dose of the vaccine. Though 13.02% are listed as unknown and 21.59% are listed as other races in current data, we are continuing to work hard to ensure equitable access to the vaccines. We expect this reporting to improve over time with better data from our state system, improved provider practices and improved matching.

Communication and partnering with stakeholders, such as the Health Equity Task Force, created by our Governor, as well as other partners such as the Louisiana Public Health Institute will assist in our efforts to demystify the process, answer questions and dispel misinformation, with the goal of increasing vaccine confidence.

The state is making every effort to raise awareness and prepare future priority groups in Phase 1B, Tier 2, by building local evidence so we know where and how to target our efforts by utilizing tools such as rapid research opportunities, especially in underserved communities and building community listening into our processes. Additionally, the creation of four COVID Vaccine Community Engagement Councils -- healthcare, faith-based, community and public sector, are equipping community leaders and stakeholders with facts, data, and resources about the vaccine that address concerns and questions we are hearing in multiple languages.

*Sleeves Up, Louisiana*, our statewide vaccination campaign represents and speaks to Louisiana's many diverse communities. It is and will continue to be informed by the latest national and local evidence and feedback, and will build and expand as we move through the phases of distribution. In addition to all these more traditional tools, we are mapping out canvassing efforts with the goal of educating eligible and soon to be eligible populations (as well as the more vaccine hesitant) and connect them to resources.

**Advance notice would allow for more strategic planning by state and providers**

Typically, our vaccination week begins on Tuesday, when Louisiana receives an estimated allocation for the following week from the federal government. Based on those numbers, the department works with local providers to determine the need for the coming week. That list is compiled on Wednesday and finalized on Thursday, when the order is entered into the system. Once the order is submitted, our team works through the weekend contacting providers, making them aware of the coming week's allotment. Monday shipments begin to arrive and we begin the process over again for the following week.

The turnaround between learning the expected allocation and placing the order creates challenges as it relates to planning, as there have been instances when the expected allotment is different from the actual doses we are allowed to order. Providing states greater visibility on what to expect weeks in advance would allow states the time to plan and distribute vaccines more efficiently. This would also allow providers time to adjust staffing needs and allow appointments to be scheduled further in advance. We are encouraged by the news last week from our federal partners that states will be given more notice on what they can expect to receive, and hope this will continue.

#### **Continued flexibility in the Long-Term Care Program for expeditious administration of vaccine**

We have faced challenges involving our participation in the LTC partnership with Walgreens and CVS. First, let me state that we are appreciative of these corporate partners' efforts. Our corporate representatives have been responsive and have tried to resolve problems that have arisen. However, the overall lack of proactive communication, awareness and speed of vaccinations continues to be an area of concern. Facilities, residents' families and local elected officials look to states for answers on when vaccinations will occur at a facility.

The greatest assistance you can provide around this program is to provide continued flexibility and visibility to states when it comes to doses allocated to the LTC partnership. Previously, we have been required to deposit an amount into the program's dosage bank to help meet the demand in our state; however, due to the slow pace in vaccinating this population, the result has been federal doses unused. We are very grateful for the flexibility that has been granted in the ability to allocate the necessary amounts to pharmacies. **We recommend continued flexibility in the LTC partnership.**

#### **Revising CDC reported data for increased clarity on vaccine doses administered**

An area of concern that we believe could be remedied with increased clarity extends to the data reported on the CDC's website. Those numbers often do not match what states are reporting and leads to confusion and the perception that doses are going unused. Some of this is a result of second doses being reported as delivered and ready to use even though the 21 or 28-day mark for the person to receive the dose has not been reached yet. When those second doses are added into the overall reported numbers that are available it does not provide the full picture in terms of what is happening with those doses. It appears that many more doses are available to be administered when that is not the case. Adding to that confusion is the

inclusion of doses that are taken from states for the long-term care partnership. Finally, the total LTC doses administered is higher than any data that we as a state can see on our end or on the Tiberius system. **We would encourage the CDC to report out separately, the number of partnership doses, as well as second dose numbers, to provide a more realistic number of what is available to the public each week.**

And finally, the financial burden being placed on states is tremendous. As a nation, we are responding to a pandemic the likes we have not seen in 103 years. Extraordinary times call for extraordinary cooperation and collaboration between Louisiana and our federal partners. The resources provided to states, communities and families will allow us to come out the other side of this pandemic successfully and not looking at a new financial problem facing our country. We are very grateful for the resources that have been provided to date. The recent notification of the 100% FEMA reimbursement has provided great relief to our public health team, coupled with the 100% Louisiana National Grant reimbursement and the second tranche of federal grant funds has been the resources needed for us to adequately respond to this pandemic.

In closing, I must recognize the hard-working people in Louisiana. In particular, pharmacists and other healthcare providers throughout the state who have administered hundreds of thousands of vaccines. Thank you to our front-line heroes in hospitals, emergency rooms, doctor offices, laboratories and emergency services who respond daily in treating those with this virus. Thank you to our Governor for his leadership, our Louisiana Congressional Delegation for their continued support at the federal level and our state legislators and local elected officials who have been our eyes and ears in each community. And finally, thank you to the team at the Louisiana Department of Health, and our colleagues in our partnering state agencies for their work. All of these individuals have put in countless hours, sacrificing time away from their immediate families, as well as a full night's sleep for the past year.

Committee members, the past year has been tough. Sacrifices were made by many. With the continued partnership of Congress and our federal partners and the advocacy of the Louisiana Delegation, I am optimistic that the coming months will allow us to vaccinate our population so we can eventually begin to return to a semblance of life as we once remembered.

Thank you for your time and attention today and am happy to answer any questions at the appropriate time.