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Energy and Commerce Oversight Committee U.S. House of Representatives

Testimony: Jill Hunsaker Ryan, executive director, Colorado Dept. of Public Health and Environment.

Thank you for allowing me to speak today, Mr. Chairman. I'm joining today from Eagle County in Colorado. Colorado received the first shipment of vaccine on Dec. 14, with the governor signing for it himself. Since then, Colorado has distributed vaccines quicker than the vast majority of other states, according to the CDC. We are moving as fast as the federal supply chain allows, and we are grateful for every vaccine we receive. If the pandemic has taught us anything at all-- it's that we are all in it together, and we know that the more Coloradans who are vaccinated the safer we are as a state and as a nation.

We want to thank General Perna and everyone involved in his operation. It's a scientific miracle that we have vaccines available for public use.

The main ask we have now is for more doses and greater predictability in the federal supply, so that we can continue to execute the state's vaccine distribution plan. We would welcome at least 300,000 doses a week under our current system.

We now have more than 770 providers helping to distribute vaccines and nearly 465,000 people have been vaccinated.

We have a phased distribution process that is based on recommendations from the Advisory Committee on Immunization Practices (ACIP), and modified slightly to match Colorado's needs. The principle goal is to have the greatest impact as quickly as possible. To do that, we have begun by vaccinating health care providers-- starting with providers who have direct contact with COVID-19 patients and emergency responders, then other health care providers.

Because Coloradans age 70+ account for 78% of deaths in Colorado, we have been moving toward the goal of vaccinating 70% of Coloradans age 70+ by the end of February. Hospitals and grocery store pharmacies have carried much of the weight in helping get it done. We now estimate that 39% of Coloradans age 70+ have been vaccinated and are lowering the age requirement to 65+.

Long term care facilities are relying on the Pharmacy Partnership for Long-Term Care Program. We have largely overcome delays with that program, after offering to provide staffing assistance. According to the federal government's Tiberius database, we have come a long way.

It hasn't been easy trying to mobilize a logistical operation like we have-- but we've had the help of local public health and providers.

Together, with our partners, we are committed to ensuring an equitable distribution process. From the beginning, we have developed a distribution plan using an equity lens. It aims to be responsive to the disparities that have been so pervasive throughout the pandemic-- disparities that have plagued society for years upon years but are ever more prominent during crises.

We know that we must be deliberate about achieving equity, meeting communities where they are-and addressing vaccine hesitancies that are rooted in historical injustices. We've seen these hesitances reveal themselves in our Oct. 2020 survey which showed that while 70% of White Coloradans planned to get the vaccine, only 53% of Black Coloradans and 56% of Hispanic Coloradans planned to get it. Knowing the challenges, the state also has the goal of ensuring there is a community based clinic providing vaccines in 50% of the top 50 census tracts for high density of low income and minority communities.

We are deeply committed to overcoming systemic barriers and having an equitable distribution process by:

- Allocating 10% of vaccines to providers that serve underserved populations.
 - Just this past weekend 1,200 does were administered thru 5 equity clinics. We have 8 additional equity clinics scheduled this week and anticipate over 3,400 doses administered.
- Collecting robust data to measure our objectives-- Our vaccine dashboard now includes vaccine administration by race/ethnicity, age group, and sex. The data available for race and ethnicity represents 78% of individuals receiving one or more doses because providers have not historically been required to report that data on all patients to the Colorado Immunization Information System (CIIS).
 - We have asked providers to collect race/ethnicity data when administering the vaccine, if the patient willingly gives the information. CDPHE will issue a public health order, providing further specificity about data collection.
- Establishing that providers should abide by an honor system, taking the individual's word on age, residency, and other eligibility criteria, and using their discretion to determine whether the individual is eligible for vaccination in the current priority phase.
 - Unnecessary ID requirements create a barrier for people who are unable to get identification or have trouble accessing services that issue IDs, such as those who are undocumented, experiencing homelessness, have a disability, or others on the margins of society who are unable to get an ID.
- Asking that providers consider every Coloradan who is currently eligible to get vaccinated fairly for the vaccine, without regard to their affiliation or history with the hospital, medical coverage status, or ability to pay.
- Leveraging community Based Organizations (CBOs) in underserved communities to advertise and host clicis. We are also working with Federally Qualified Health Centers to use their established infrastructure and community partnerships to pilot clinics.

- Coordinating with transportation providers to assist Coloradans with mobility barriers or without personal vehicles.
- Facilitating a Champions for Vaccine Equity program to provide information to communities of color about the safety and efficacy of vaccines, plus utilizing Promotoras, service providers, and crisis counselors to support vaccine literacy.
- Developing and are growing a vaccine media marketing campaign featuring medical professionals from diverse backgrounds and engaging influencers and local public health agencies to help get the word out to hard-to-reach communities.

Like many other states, we are continuously trying to grow our wayfinding systems-- scaling it as we get more vaccines. We've required large providers to establish a weblink and phone number specific for vaccinations-- emphasizing the need for both online and off-line communications. We also created a statewide hotline for Coloradans to use, which has been busy for days.

• Coloradans are eager to get vaccinated! And we are eager to vaccinate everyone who wants to be vaccinated and ending this crisis. We are grateful for the federal partnership, and are hopeful that when we look back at this 5 or 10 years from now-- we have lessons learned but also stories of great collaboration and innovation.

Thank you.