

COVID-19 Vaccine FAQs

December 18, 2020

- Does the Illinois mass vaccination plan track completely with CDC recommendations?
 - Yes – the Illinois Department of Public Health is committed to following all recommendations put forth by the CDC.
- Does the IDPH 3.0 vaccine plan differ from CDC recommendations? We note several states have prioritized access to the vaccine for persons with DD and support staff.
 - IDPH is working to ensure that vaccines are delivered and available in accordance with the CDC guidelines and recommendations of the Advisory Committee on Immunization Practices (ACIP).
- What is difference between IDPH’s 2.0 and 3.0 vaccine plan?
 - Please refer to page two of the 3.0 Plan to see the record of changes between the 2.0 and 3.0 versions of the plan.
- Will the first shipment of 86,000 vaccines only vaccinate 43,000 people if they all need two doses of the vaccine?
 - No, as you need a minimum of three to four weeks in between each dose, 86,000 people will be vaccinated, and they will receive their second dose with future shipments as the vaccine become more readily available.
- Will someone need to be tested before receiving the vaccine?
 - At this time, no, and we are fully committed to following CDC guidelines.
- Will there be a mandate in the State that requires the COVID-19 vaccine?
 - At this time, there are no plans for a mandate. We strongly encourage and hope people want to take the vaccine.
- Can organizations require the vaccine as a condition of employment?
 - We recommend consulting with your legal counsel. IDPH does not anticipate the State making it a condition of employment for State employees.
- What is the cost of a COVID-19 vaccine for individuals without insurance?
 - Everyone who qualifies for (currently, anyone who is 16 years old or older) and needs or wants a COVID-19 vaccine is to receive the requested vaccine at no cost.
- Has the vaccine been cleared for breastfeeding and/or pregnant women?
 - Currently, there is no data on the safety and efficacy of COVID-19 vaccines in these populations to inform vaccine recommendations. Further considerations around use of COVID-19 vaccines in pregnant or breastfeeding healthcare personnel will be provided once data from Phase III clinical trials and conditions of FDA Emergency Use Authorization are reviewed. Pregnant and breastfeeding women should consult with a healthcare professional.

- Will the vaccine be given to people who have been previously diagnosed with COVID-19?
 - Yes, the CDC has stated that a previous COVID infection is not considered to be a contraindication to vaccination and that testing for antibodies is not necessary or recommended prior to vaccination. However, as a matter of priority, the CDC has also stated that health care workers with documented acute COVID infections in the preceding 90 days may choose to delay vaccination until near the end of the 90-day period in order to facilitate vaccination of health care workers who remain susceptible to infection, as current evidence suggests that reinfection is uncommon during this 90-day period after initial infection. Pharmacy guidance states that individuals who have been diagnosed with COVID-19 within the past 2 weeks, should not get the vaccine at this time. Likewise, individuals who are feeling sick, have a fever, or are exhibiting any respiratory symptoms should not receive the vaccine until symptoms are resolved. Individuals should not receive the vaccine if they have received another vaccine in the past 14 days.

- What are the side effects of the vaccine?
 - The COVID-19 vaccination is expected to elicit systemic post-vaccination symptoms, such as fever, headache, and muscle aches and pains. This can include pain at the injection site and severe malaise in the 12-24 hours following the vaccine.
 - IDPH is still waiting on a report from the FDA with further safety, adverse effect data. Likewise, we still don't know any potential long-term effects – the FDA is still reviewing.
 - With these short-term side effects, providers should consider staggered delivery of the vaccine amongst their health care workers, particularly from a single facility, department, or unit and plan for personnel to have time away from work if they develop systemic symptoms.
 - https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/reactogenicity.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F covid-19%2F info-by-manufacturer%2F pfizer%2F reactogenicity.html

- Is there any information available regarding the efficacy of the vaccine on different demographics beyond race?
 - According to a [November 18, 2020 Pfizer press release](#), for the Phase 3 study, the 95% Pfizer “efficacy was consistent across age, gender, race and ethnicity demographics. The observed efficacy in adults over 65 years of age was over 94%.”
 - According to a [November 30, 2020 Moderna press release](#), for the Phase 3 study, the 94.1% Moderna efficacy “was consistent across age, race and ethnicity, and gender demographics.”

- Where will the residents of homeless shelters and persons who live on the streets who are unhoused and/or precariously housed (children, youth, families, and single adults) fall in terms of priority populations?
 - We are awaiting final information from ACIP as to who will be in subsequent rounds of the vaccine, following Phase 1a. According to the current phases, which haven't yet been finalized, people in homeless shelters and/or group homes are currently expected to be prioritized during Phase 2 of the COVID-19 vaccine distribution plan. Group home health care workers are a part of Phase 1a.

- Can you clarify when low-wage workers in industries driving COVID-19 transmission & leading outbreaks like factories & manufacturers will be phased into this plan?
 - We are awaiting final information from ACIP as to who will be in subsequent rounds of the vaccine following Phase 1a. According to the current phases, which haven't yet been finalized, food and agriculture centers, such as meat processing plants, will be included in Phase 1b, amongst Essential Frontline Workers.
- Are Direct Service Professionals (DSP) who work in community-based settings included in 1a?
 - Yes, Phase 1a includes both group home care staff and home care givers.
- What phase are first responders, like rape crisis advocates who assist victims at the hospital in?
 - Rape crisis advocates who assist victims at the hospital are not explicitly addressed in the guidance. They would most likely be a part of Phase 1a; they would otherwise be treated as Phase 1b essential frontline workers, whose duties cannot be performed remotely. We will inquire and also encourage you to ask your local health department.
- With pediatric populations being the last to receive the vaccine, where will residential treatment programs that serve youth and children fall in the phases?
 - We are awaiting final information from ACIP as to who will be in subsequent rounds of the vaccine after Phase 1a. According to the current phases, which haven't yet been finalized, should a pediatric vaccine become available, all youth and children are currently part of Phase 3. Staff that serve children in residential treatment programs fall in priority group 1a (as group home staff).
- Is there a way to include community day program staff in the group home reference, as it would ensure that capacity continues for people with I/DD to get out of their homes and into the community? If not, do you read that they would fall under essential workers in Phase 1b?
 - We are awaiting final information from ACIP as to who will be in subsequent rounds of the vaccine after Phase 1a. According to the current phases, which haven't yet been finalized, it is our reading that they are most likely to be included in either 1a (as comparable to group home staff) or 1b (as essential frontline workers).
- Where does the role of community-based providers who provide Substance Use Disorder treatment fit into what category?
 - Community-based providers who provide treatment for substance use disorder are not explicitly addressed in the guidance. They would most likely be a part of Phase 1a; they would otherwise be treated as Phase 1b essential frontline workers, whose duties cannot be performed remotely. We will inquire and also encourage you to ask your local health department.
- How can organizations help in the community?
 - Ongoing communication with your stakeholders about the importance and safety of the vaccine; highlighting the testimonials of leaders and community representatives who are taking the vaccine; sharing facts as the vaccine process for various segments of the workforce is solidified.

- Are Community Based Organizations (CBO) able to register as I-CARE providers or is this just for medical providers?
 - Yes, I-CARE is designed to help healthcare providers record, track, and report their patients' immunizations. If your organization will be administering vaccines, you must register as an I-CARE provider. Please visit: <http://www.idph.state.il.us/health/vaccine/enrollinginicare.htm> to register. Please review the following workflow [LINK] to determine whether you should register as an I-CARE provider.

- Is the State considering any additional marketing to more effectively reach populations who may have reason for the most distrust of vaccinations and the health care system?
 - Yes, IDPH has identified COVID ambassadors in communities throughout the State, allowing residents to speak with neighbors about what they know, to ask questions, to receive answers, and to provide feedback to IDPH.
 - IDHS is working alongside IDPH to assist with communications that reach all Illinois residents and underserved communities.

- How will you craft a marketing plan that is grounded in an approach that acknowledges and understands the historical experience that Black and Brown individuals in this country have had with medical research and treatment, as well as the health gap that exists in Illinois and the rest of the country?
 - In its 3.0 Plan, IDPH stated that it “will work with local community partners and providers to strategically target underserved populations for vaccinations.”
 - At IDHS, we are committed to sharing information with the communities we serve. We will work to implement a communications plan that educates and increases awareness on vaccinations that is relevant to all Illinoisans with an emphasis on underserved Black and Brown communities.