



Vaccine Policy during the COVID-19 Pandemic: *What State Legislators Can Do Now to Prepare for Tomorrow*

During these uncertain times, there are policies we can put in place to create a more certain future. Beyond critical stay-at-home orders, there are policies that we know will raise the vaccination rates for currently available immunizations, as well as prepare your state for the arrival of a COVID-19 vaccine. Below, we have provided an outline of these policies with links for more information.

- 1. Ensure your health, public health and immunization departments, as well as public health clinics, Federally-Qualified Health Clinics (FQHCs) and Rural Health Clinics (RHCs), are fully staffed.** Creating an exemption from state hiring freezes for departments that are responding to the COVID-19 pandemic, and which will be responsible for delivering both routine and coronavirus vaccinations, is critical. States cannot wait until a vaccine is available next year to hire the employees necessary for protecting your constituents. Contact your state's [immunization manager](#) for more information about the specific staffing needs of your state.
- 2. Evaluate your state's Immunization Information System (IIS), also known as an immunization registry, and determine any necessary improvements.** To be optimally effective, an IIS should include vaccination histories from both children and adults, with participation from all vaccinators in your state, including pharmacists. Participation of others who have direct access to children's immunization records, such as school nurses and WIC staff should also be considered. IIS policies should be reviewed for optimal data sharing across state lines to ensure that those who cross state borders can still access immunization histories. IIS policies that include opt-out provisions are ideal, as it allows individuals to elect to have their information not included if desired. Opt-in systems often vastly undercount the number of vaccinations given as many people are not aware they should include their vaccination records. For more information on IIS, please visit the [American Immunization Registry Association](#).
- 3. Re-evaluate pharmacist vaccination laws.** At a minimum, pharmacists should be able to vaccinate all adults 18 years of age and older. Roughly nine out of ten people in the U.S. live within five miles of a community pharmacy, making pharmacists a key partner in immunization. For more information, visit the [American Disease Prevention Coalition](#).
- 4. Plan for vaccine distribution now.** Gather an interagency task force now to determine how your state will distribute a potential COVID-19 vaccine. Use this coming flu season as a test run for implementing new vaccination locations and procedures. Higher flu vaccination rates not only better protect your constituents from influenza virus, but it can also ensure that hospital capacity is kept to a minimum during COVID outbreaks and a reduction in comorbidities. It may also offer insights into how many people your state is capable of immunizing with a COVID-19 vaccine.
- 5. Reserve state funding for immunization and public health infrastructure.** States often rely on federal funding to purchase and distribute both childhood and adult vaccines. Unfortunately,

the line item in the federal budget for the Centers for the Disease Control and Prevention Immunization Program has been chronically underfunded for the past decade. The current crisis has taught us that while budgets are tight, an investment in public health infrastructure and immunization can make a critical difference in our ability to do business.

[Vaccinate Your Family](#) is a national, nonprofit organization dedicated to protecting people of all ages from vaccine-preventable diseases. **For questions about these recommendations, or to be connected with your state's immunization coalition(s), please reach out to us at info@vaccinateyourfamily.org.**