



Insurance Brokers &
Consultants

What Employers Need To Know About COVID-19 Vaccines – Part 2

February, 2021

[EPICBROKERS.COM](https://epicbrokers.com)

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OVERVIEW

This is the second in a two part COVID-19 Vaccine Webinar Series


- Vaccine pipeline update, implications of variants and emerging efficacy data
- Frequently asked clinical questions
- Vaccine roll-outs
- CVS ready to help
- Key Workplace Initiatives




Vaccine pipeline update, implications of variants and emerging efficacy data

We started 2021 with nine leading vaccine candidates with the potential for emergency use authorization


Preclinical Phase I or Phase II



INOVO
POWERING DNA MEDICINES™




SANOFI gsk

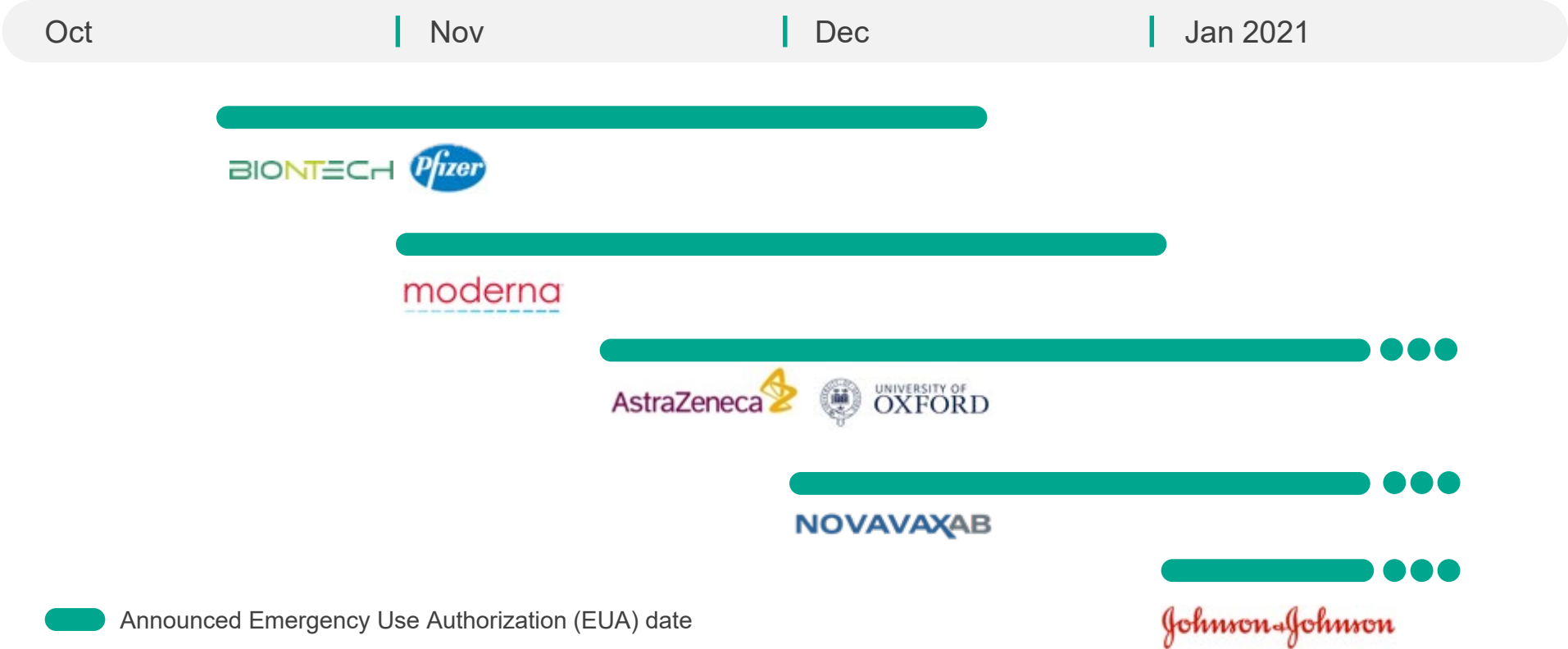


VAXART

Discontinued development



MERCK



Not comprehensive. Preliminary – Not meant to communicate clinical, legal, or regulatory advice.
Sources: BioCentury; ClinicalTrials.gov; Milken Institute COVID-19 Treatment and Vaccine Tracker.

Efficacy and safety of current FDA-authorized vaccines

Pfizer/BioNTech vaccine

Final efficacy analysis
demonstrated vaccine

95%
effective

Efficacy in preventing moderate to severe
symptomatic COVID-19

Efficacy evaluated 7 days after second dose

Overall safe profile

Sources: <https://www.nejm.org/doi/full/10.1056/NEJMoa2035389>
<https://www.nejm.org/doi/full/10.1056/NEJMoa2034577>

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Moderna vaccine

Full efficacy analysis
demonstrated vaccine

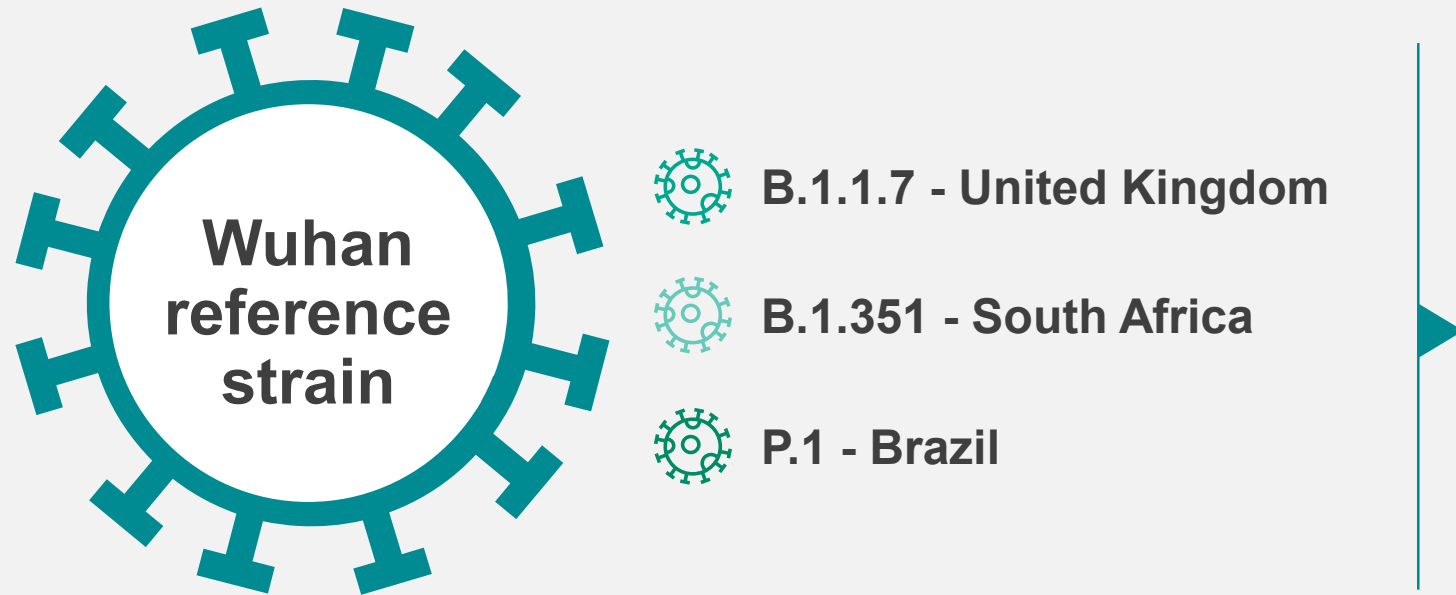
94.1%
effective

Efficacy in preventing moderate to severe
symptomatic COVID-19

Efficacy evaluated 14 days after second dose

Overall safe profile

Information on new COVID-19 variants



All share the N501Y mutation in the spike protein

South African and Brazil strains share the E484K mutation in the same protein

Common mutations emerging in different parts of the world

All three are in the United States

Sources: <https://www.cdc.gov/mmwr/volumes/70/wr/mm7003e2.htm>
<https://scdhec.gov/news-releases/south-carolina-public-health-officials-detect-nations-first-known-cases-covid-19>
<https://www.health.state.mn.us/news/pressrel/2021/covid012521.html>

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Questions about new COVID-19 variants

Are they more transmissible?

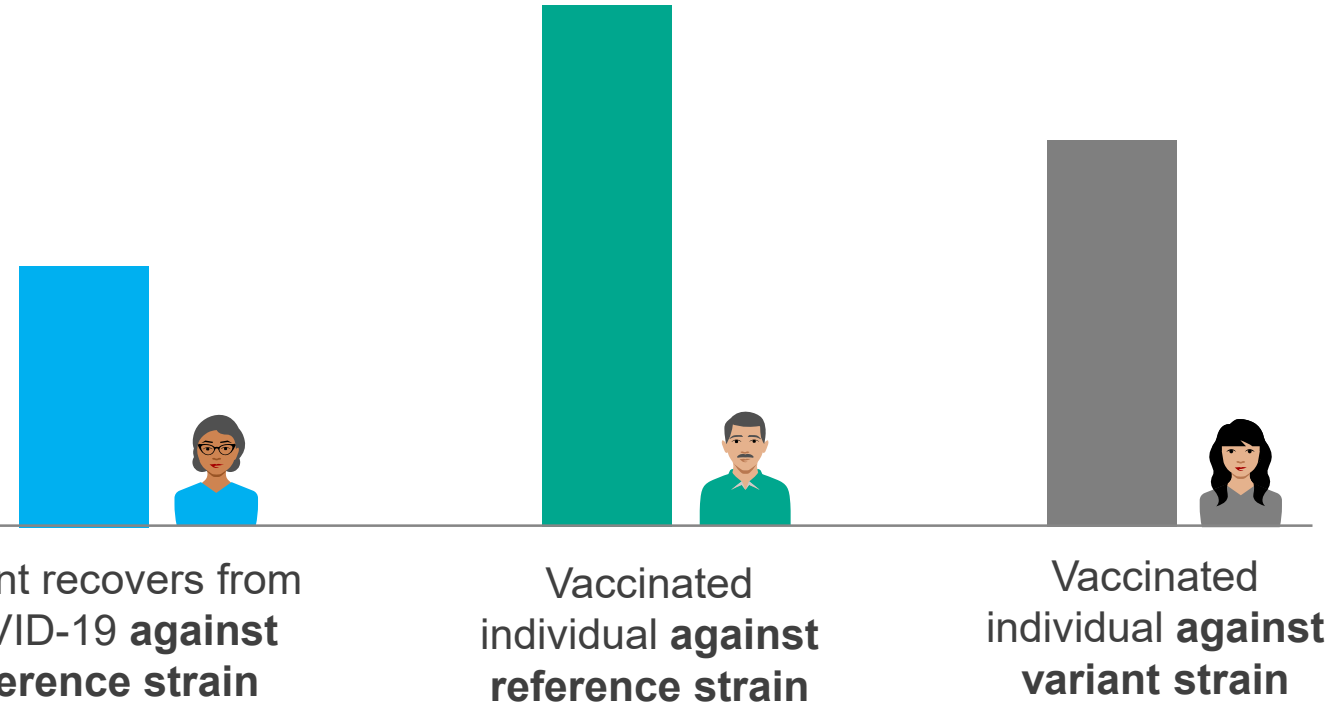
Do people get sicker?

Will the FDA-authorized vaccines
continue to work?



Level of antibody response to COVID-19 appears to be different in various scenarios

Illustrative Graph



Vaccines produce powerful levels of immune protection so they should be able to withstand some drop in potency while still protecting people

Example presented for illustrative purposes only

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 **CVS**Health.

FDA-authorized vaccine efficacy against new variants

Pfizer

The vaccine appears to produce similar antibody response (neutralizing titers) against the B.1.1.7 UK variant

Moderna

The vaccine appears to produce similar antibody response (neutralizing titers) against the B.1.1.7 UK variant

Six-fold reduction in antibody response against B.1.351 South Africa variant

- Antibody levels remain above levels expected to be protective (Cushion effect)
- May suggest potential risk of earlier waning of immunity to B.1.351 strains

Sources:

<https://www.biorxiv.org/content/10.1101/2021.01.18.426984v1>

<https://www.biorxiv.org/content/10.1101/2021.01.07.425740v1>

<https://investors.modernatx.com/news-releases/news-release-details/moderna-covid-19-vaccine-retains-neutralizing-activity-against>

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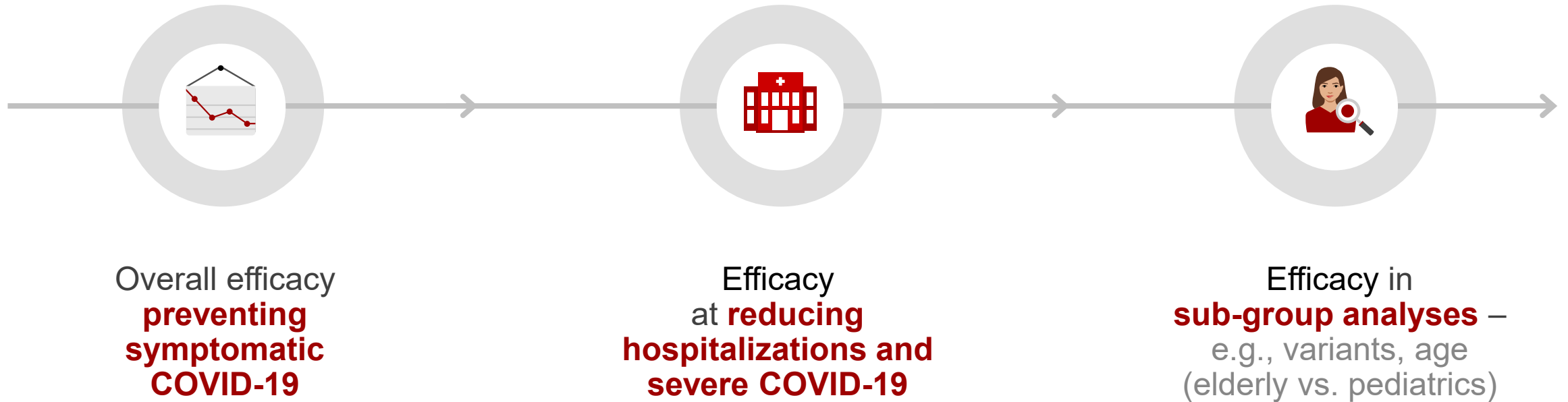
Implications

Both vaccines produce powerful levels of immune protection so they should be able to withstand some drop in potency while still protecting people

Laboratory data only – still need real-world efficacy

Vaccines can be updated as needed to confer the protection we see against the reference strain

There are several ways to look at vaccine trial efficacy data



Efficacy – interim analysis

Interim analysis demonstrated vaccine

66%
effective

Efficacy in preventing moderate to severe symptomatic COVID-19

Efficacy evaluated 28 days after one dose

Sources:

<https://www.jnj.com/johnson-johnson-announces-single-shot-janssen-covid-19-vaccine-candidate-met-primary-endpoints-in-interim-analysis-of-its-phase-3-ensemble-trial>.

<https://www.nejm.org/doi/10.1056/NEJMoa2034201>.

Phase III study in 43,783 participants aged 18 years and older

- **34%** of participants over the age of 60
- **44%** of participants from the U.S., **41%** from Latin America, and **15%** from South Africa

Efficacy based upon 468 symptomatic cases of COVID-19 among trial participants

- Did not include mild COVID-19 cases in vaccine efficacy analysis
- Breakdown of cases observed in the placebo group vs. the vaccine group not yet released

85% efficacy in preventing severe disease across all regions studied

- No reported cases of COVID-19 related hospitalization and death (day 28 post-vaccination)
- Vaccine efficacy by region: **72%** in the U.S., **66%** in Latin America, and **57%** in South Africa

Overall fever rates: **9%**, Grade 3 fever: **0.2%**

Overall serious adverse events reported were higher in participants who received placebo as compared to the active vaccine candidate

No anaphylaxis observed

Positive Notes

- **100%** efficacy in preventing hospitalizations and deaths
- One dose
- Easier cold chain shipping and storage requirements

Efficacy – interim analysis

Interim analysis demonstrated vaccine

89.3%
effective

Efficacy in preventing moderate to severe symptomatic COVID-19

Efficacy evaluated 7 days or more days after second dose

Source: <https://ir.novavax.com/news-releases/news-release-details/novavax-covid-19-vaccine-demonstrates-893-efficacy-uk-phase-3>.

UK Phase III study in >15,000 participants aged 18-84 years

- **27%** of participants over the age of 65 years

Interim analysis demonstrated overall vaccine efficacy of **89.3%**

- **56** cases in the placebo group and 6 cases observed in the vaccine group
- **1** severe case in the placebo group and 0 in the vaccine group
- **95.6%** efficacy against original COVID-19 strain
- **85.6%** efficacy against UK variant B 1.1.7

South African Phase IIb study demonstrated vaccine efficacy of **49.4%**

- **60%** efficacy observed in the 94% of the study population that was HIV-negative

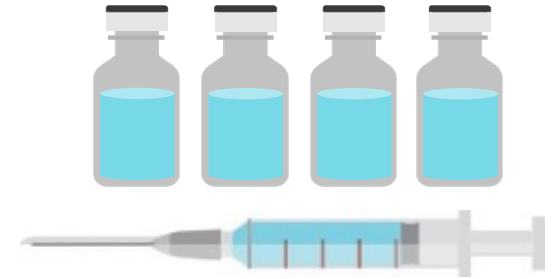
Severe, serious, and medically attended adverse events occurred at low levels, balanced between vaccine and placebo groups

U.S. phase III trial will complete enrollment in February; interim data may be available in March-April 2021

Positive Notes

- **100%** efficacy in preventing hospitalizations and deaths
- Easier cold chain shipping and storage requirements

Key takeaways on vaccine pipeline



▼

We have two new promising candidates nearing authorization

▼

All vaccines authorized or nearing authorization appear to **have high efficacy in preventing hospitalizations and deaths from COVID-19**

▼

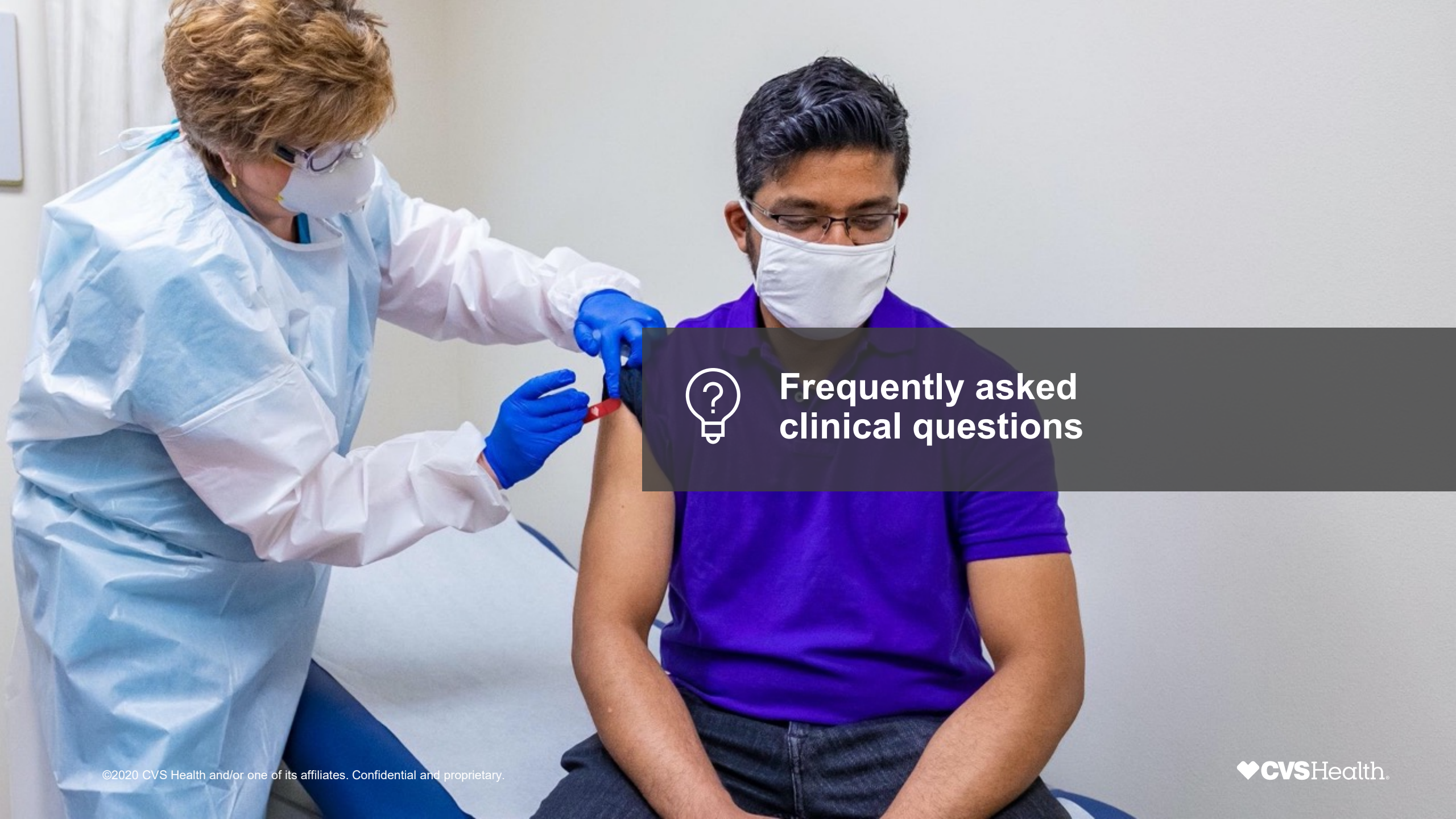
As the virus continues to spread, the **higher likelihood that even fitter variants will emerge**

▼

More people vaccinated means **less chance for COVID-19 to continue mutating**

▼

Reinforces need to vaccinate faster



Frequently asked clinical questions



Tell me more about the vaccine

Are the vaccines safe?

Yes. Each of the vaccines undergo rigorous, placebo-controlled, randomized clinical trials. The data are reviewed and analyzed by an independent committee of experts for recommendations on authorization to the U.S. Food and Drug Administration (FDA). This process was carefully followed for both the Moderna and the Pfizer vaccines, and will be for the remaining vaccines candidates.

Are the two current FDA-authorized vaccines equally effective?

Studies show both the Moderna and Pfizer vaccines appear to be equally beneficial.

What kind of side effects should I expect?

Mild to moderate side effects include injection site pain, tiredness, headache, muscle pain, chills, joint pain, and fever. Long-term side effects are unlikely, but still being studied.



Can I get the vaccine if...?

...I have underlying health conditions or if I'm immunocompromised?

People with underlying health conditions or who are immunocompromised are encouraged to get vaccinated. You should always consult with your doctor first.

...I'm pregnant, trying to conceive, or breastfeeding?

Women who are pregnant, breastfeeding, or trying to conceive are encouraged to get vaccinated, but should consult with their doctor first.

...I'm currently positive for COVID-19?

If you currently have COVID-19, or COVID-19 like symptoms, you should wait to receive a vaccine until after you recover.

...I have recovered from COVID-19?

Yes. Even if you have already had COVID-19 you can still benefit from the vaccine. You may contract the infection again and spread it to others, so it's important you get vaccinated to protect your family and your community.



What happens after the vaccine?

Will I still be protected from the virus if I'm late getting the second vaccine dose? What if I don't get the second dose at all?

Receiving the second dose late should not diminish the effectiveness of the vaccine. Although you gain some protection after the first dose, both manufacturers recommend two doses for strong and enduring protection.

After I get the second dose, how long before the vaccine takes effect?

In general, it takes 1-2 weeks for immunity to develop following vaccination.

If I am vaccinated against COVID-19, can I spread the virus to others?

Studies are underway to determine if a vaccinated person can spread the virus. Even after getting vaccinated, you should continue mask wearing, hand washing, and social distancing.

How often will I need to get the COVID-19 vaccination?

It is unclear at this time, but current information suggests that the COVID-19 vaccine will be like the flu vaccine, requiring annual dosing.

State governments will determine who gets the vaccine and when, guided by the following ACIP recommendations to the CDC:



Phase 1a

Health care workers

Long-term care residents



Phase 1b

Front-line essential workers

People ages 75+



Phase 1c

People ages 65–74

People with high-risk medical conditions,
ages 16–64

Other essential workers



Phase 2

General population,
ages 16+

Distribution in the U.S. – how it works



Federal government



Federal agencies & entities



States



Pharmacies

Indian health
services

Other federal
entity sites
(e.g., Department
of Defense)

Hospitals

Physicians

Pharmacies

Public health sites
and mobile
vaccination clinics

Long-term
care facilities

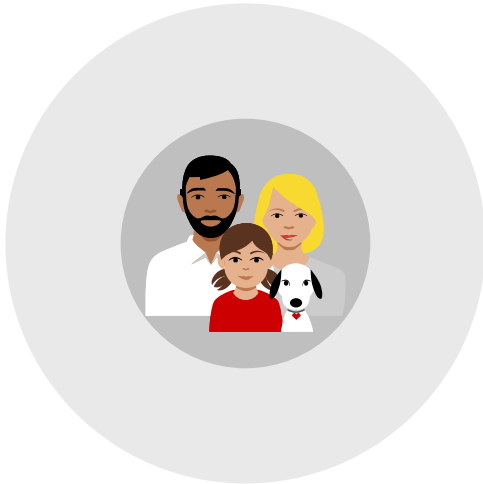
General population

EXAMPLES OF ADMINISTRATION SITES

The Biden Administration's key vaccine initiatives

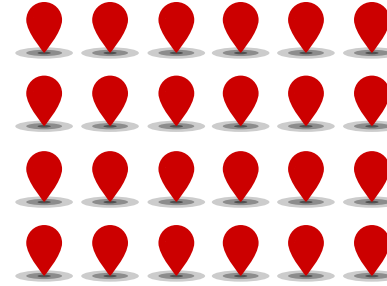
More people

need to get the vaccine



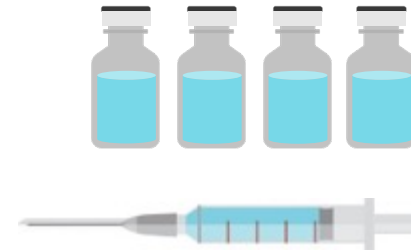
More locations

to administer vaccinations



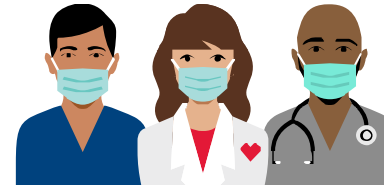
More supplies

of vaccines and ancillaries available



More immunizers

to get vaccines in arms



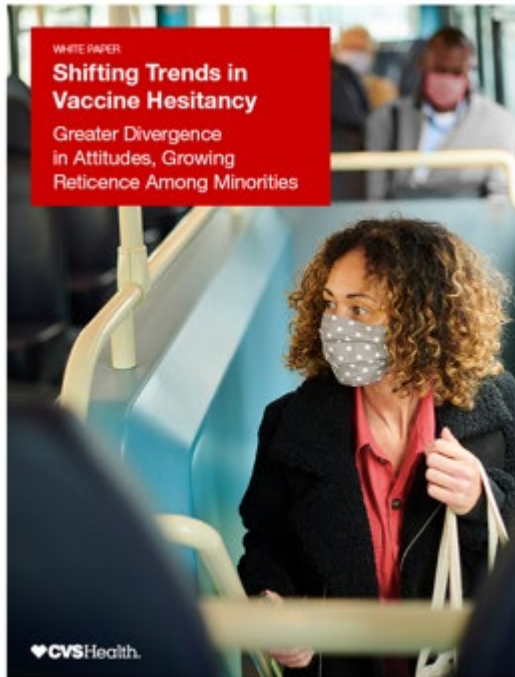
More consumer education

to address vaccine hesitancy



CVS Health survey early January 2021 findings on vaccine hesitancy

Some hopeful signs, some concerning trends



[Hyperlink to the white paper](#)

38%

**were interested
in a vaccine as soon
as it is available**

28% in November 2020

21%

**would wait
until others had
been vaccinated**

35% in November

17%

**were uncertain
about receiving
a vaccination**

20% in November

24%

**did not plan
on being
vaccinated**

17% in November 2020

└ **35% Black respondents**
26% in November

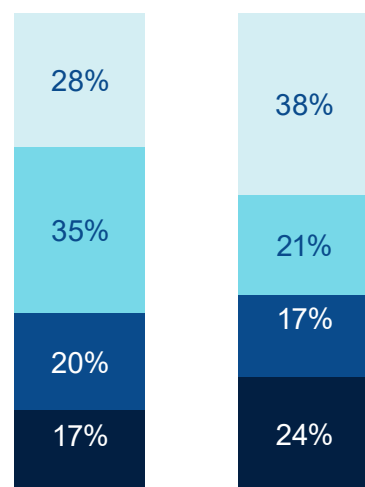
└ **22% Hispanic respondents**
17% in November

Findings from survey conducted January 8-11, 2021 compared to baseline findings from November 10-15, 2021.

Survey methodology: This survey was initiated on January 8, two days after Congress certified the results of the November 3, 2020 Presidential Election. The survey ran nationwide from January 8–11 among a national sample of 2,200 adults. The interviews were conducted online, and the data were weighted to approximate a target sample of adults based on age, educational attainment, gender, race, and region. Results from the full survey have a margin of error of plus or minus 2 percentage points. We constructed our total sample to be representative of the U.S. population as described by the U.S. Census Bureau. Participants represent the general population and were not screened as customers of CVS Health. We ascribed weights based on gender, age, race/ethnicity, and region of residence. Participants had the option of choosing more than one race/ethnicity.

Survey results show vaccine hesitancy continues to be an issue

TOTAL SAMPLE

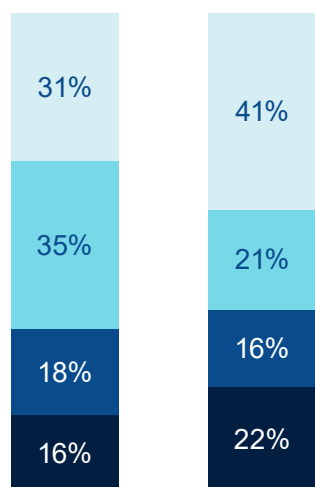


N=5,153
Baseline total

N=2,200
Jan 8 total

RACE/ETHNICITY

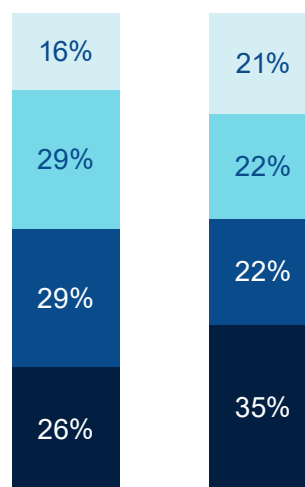
White



N=3,030
Baseline

N=1,789
Jan 8

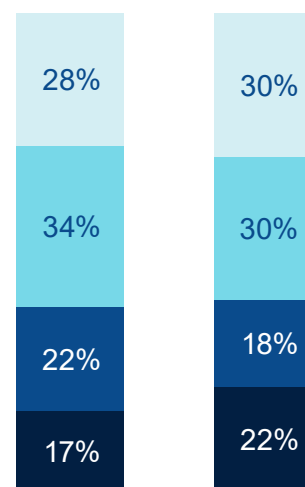
Black



N=808
Baseline

N=184
Jan 8

Hispanic, English or Spanish as primary language (combined)



N=1,141
Baseline

N=178
Jan 8

- I plan on receiving the new COVID-19 vaccine and I would like to get it soon after it becomes available to me
- I plan on receiving the new COVID-19 vaccine but I want to wait until after a decent number of people have already gotten it
- I am uncertain whether or not I would receive the new COVID-19 vaccine
- I do not plan to receive the vaccine for COVID-19

Findings from survey conducted January 8-11, 2021 compared to baseline findings from November 10-15, 2021.

Survey methodology: This survey was initiated on January 8, two days after Congress certified the results of the November 3, 2020 Presidential Election. The survey ran nationwide from January 8-11 among a national sample of 2,200 adults. The interviews were conducted online, and the data were weighted to approximate a target sample of adults based on age, educational attainment, gender, race, and region. Results from the full survey have a margin of error of plus or minus 2 percentage points. We constructed our total sample to be representative of the U.S. population as described by the U.S. Census Bureau. Participants represent the general population and were not screened as customers of CVS Health. We ascribed weights based on gender, age, race/ethnicity, and region of residence. Participants had the option of choosing more than one race/ethnicity.

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Vaccine roll-out



Since December, through February 8, CVS Health has administered over 3 million doses,

**that's like giving one
COVID-19 vaccine
every 1.3 seconds.**

Our ongoing partnership with the federal government

The long-term care pharmacy partnership program

Patient eligibility **dictated by the state**

Timing and scope of activation **dictated by the state**

Supply allocated to pharmacies **dictated by the CDC**

First: vaccination of nursing home residents and staff

Second: vaccination of assisted living and other facilities enrolled in the program

Most states chose to prioritize skilled nursing facilities and did not activate the assisted living and other facilities portion of the program until well into January.





Vaccinating long-term care residents and staff

~8K

Nursing homes
partnered with CVS
Health

100%

First dose
clinics
completed*

86%

Second dose
clinics
completed

1.8M+

Total vaccines
administered in skilled
nursing facilities

38K

Assisted living and
other facilities
partnered with
CVS Health

82%

First dose
clinics
completed

21%

Second dose
clinics
completed

1.2M+

Total vaccines
administered in
assisted living and
other facilities

CVS Health data as of February 8, 2021. Excludes 0.3% of skilled nursing facilities that 1) requested a later date due to a COVID-19 outbreak or other reason, 2) were rescheduled due to lack of responsiveness, or 3) requested to be added to the program after the start date or did not meet original program criteria regarding distance from CVS Health locations, but that CVS Health has opted to support.

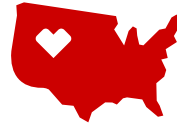
Broader allocation of COVID-19 vaccines opening up to retail pharmacies over coming weeks



Targeted distribution

Federal allocations to pharmacies only available for LTCF program.
All other allocations going to states for targeted distribution and some states have partnered with pharmacies as part of their vaccination programs.

Mid-Dec through Mid-Jan



State transfer program

States given mechanism to transfer allocations to Federal Retail Pharmacy partners to broaden access

Mid-Jan through Early/Mid-Feb



Full federal / pharmacy partnership

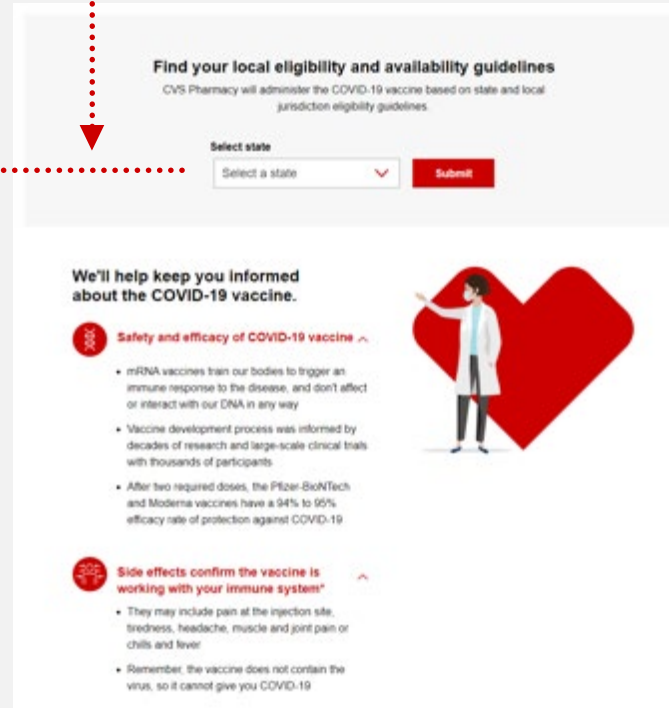
Pharmacies given direct allocations above and beyond state allocations

Early/Mid-Feb

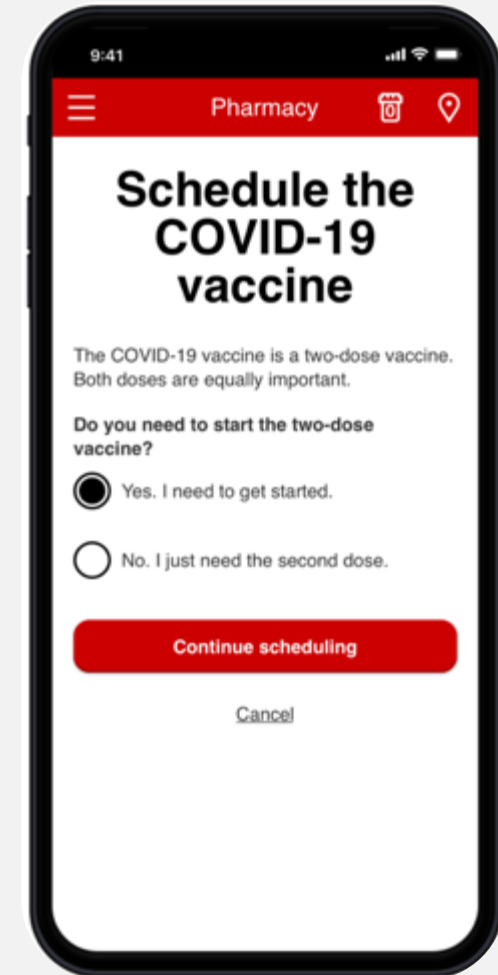
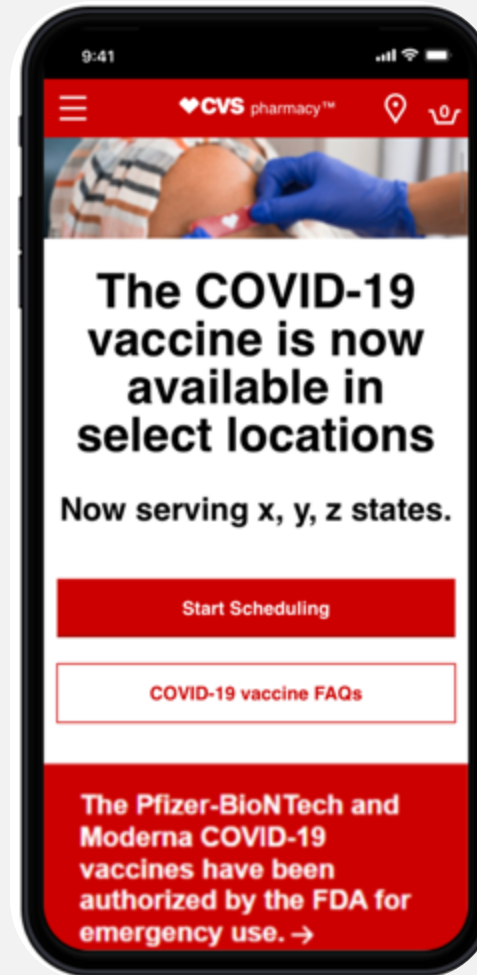
Clarity on COVID-19 vaccine eligibility and availability at CVS.com

Convenient
select-a-state tool
to check local
eligibility and
availability guidelines

We are in the process of
creating a map feature
where consumers can
easily see vaccine
availability by state.



First, we screen out patients with symptoms, then we check if they need both doses or just the second dose



Scheduling tool subject to change as we learn and refine the patient experience

Our configurable eligibility screener accommodates state and jurisdiction-level eligibility differences

9:41

Pharmacy

Determine eligibility

First, let's make sure you're eligible to receive the COVID-19 vaccine at this time. Please provide accurate info. Your responses will help us to quickly serve frontline and essential workers.

All fields are required.

Select location where you want to be vaccinated:

^

Alabama

Alaska

Arizona

Arkansas

California- Los Angeles County

California- All Other

9:41

Pharmacy

Confirm eligibility

Based on your location info, your state and/or jurisdiction requires that we ask some additional questions.

All fields are required.

What is your age?

66

Enter numbers only

Which category applies to you?

☐ Frontline worker

☒ Essential worker

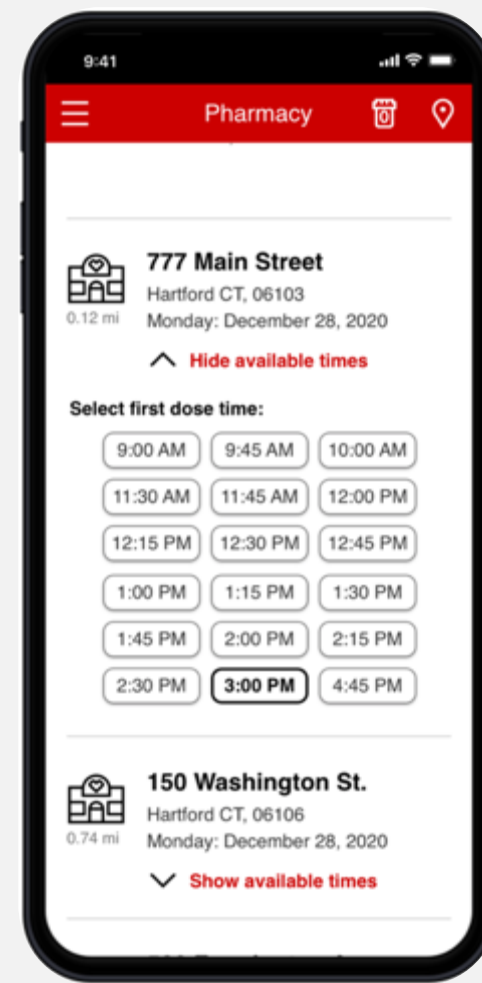
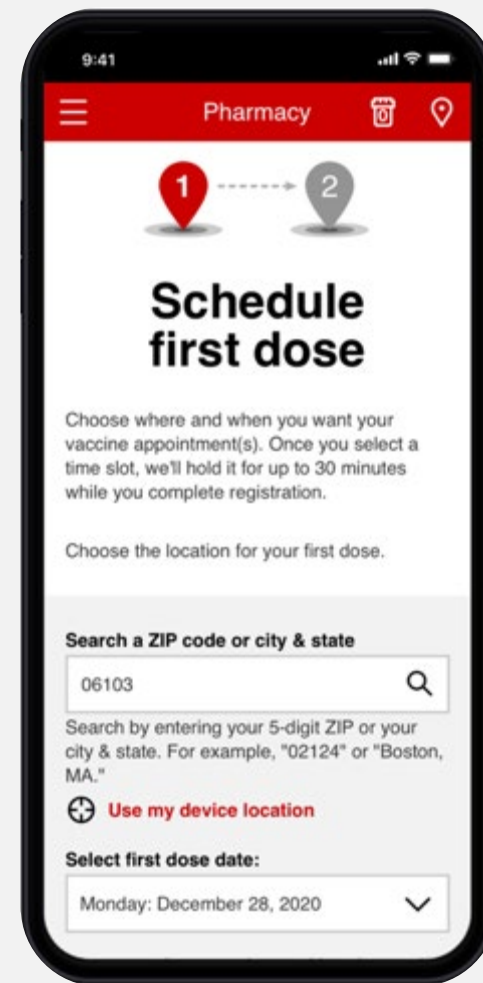
☐ 16 years or older, high risk

☐ None of the above

What type of frontline or essential worker are you?

Select

We make sure eligible consumers understand the two-dose regimen, and then allow them to schedule their first dose



Consumers then move to the next screen to **book their second dose appointment**

9:41

Pharmacy

Schedule second dose

Now, here is the time frame of available dates. We recommend you choose the earliest date at the same location to make sure you get the best service for you.

Select second dose date:

Tuesday: January 26, 2021

These are the available dates offered for your two-dose vaccine. Remember, make sure the time frame works for your schedule.

777 Main Street
Hartford CT, 06103
0.12 mi Monday: December 28, 2020

Select second dose time:

9:00 AM 9:45 AM 10:00 AM
11:30 AM 11:45 AM **12:00 PM**
12:15 PM 12:30 PM 12:45 PM

9:41

Pharmacy

We're now holding time slot #2. The second half of your two-dose vaccine is selected to be received at 777 Main Street, Hartford CT 06103 on January 26, 2021 at 12:00 PM EST. [Update second dose appointment](#)

Please provide details

We want to help you spend less time in person, so let's take care of intake details now. You'll need your insurance card, social security number and/or driver's license.

All fields are required, unless marked optional.

Patient information

First name

Sophia

Last name

Lee

9:41

Pharmacy

Street address

2 Brunswick Street

Unit, apartment, etc (optional)

City

Hartford

State **ZIP code**

CT 06114

Contact information

Contact info will be added to your patient record.

Email address (optional)

slee@gmail.com

Mobile number

(401) 465-3104

Consumers will not be charged for the vaccine or its administration, even if they don't have insurance.

We capture insurance information to get reimbursed from the insurance provider for vaccine administration.

Anyone without insurance will be covered by the HRSA uninsured program.

9:41 Pharmacy

Share coverage information

The COVID-19 vaccine is available at no out-of-pocket cost with insurance. There is also no cost for uninsured patients.

We need your coverage information. Providing accurate details will help us properly bill your insurance or the government for your vaccine. You'll need your insurance card(s). If you don't have insurance, we'll need a valid Social Security number and/or a driver's license/state ID number.

What kind of coverage do you have?

- ☒ I have Medicare
- ☐ I have only non-Medicare insurance
- ☐ I don't have medical insurance, Medicare, Medicaid or any commercial or government-funded health benefit plan

9:41 Pharmacy

Provide Medicare details

Enter Medicare details here. Doing so will ensure your vaccine(s) will be zero out-of-pocket cost to you. You may also spend less time onsite.

All fields are required, unless marked optional.

▼ Help me find my Medicare number

Please refer to, or ask someone to take a look at, this provider card example for help locating your info. Your card may not look exactly like this red, white, and blue card example.

MEDICARE HEALTH INSURANCE

Name/Nombre
JOHN L SMITH

Medicare Number/Numero de Medicare
1EG4-TE5-MK72

Enrolled in/En inscrito a
HOSPITAL (PART A)
MEDICAL (PART B)

Coverage starts/Cobertura empieza
03-01-2016
03-01-2016

Medicare number

**Consumers
can save time
by answering
clinical questions
before their visit**

9:41 Pharmacy

Let's prepare for your visit

You're halfway done. To save you time in person, let's go over these questions now. Do your best to answer and we'll confirm later.

All fields are required, unless marked optional

Have you ever had a severe allergic reaction (e.g., anaphylaxis) to something? For example, a reaction for which you were treated with epinephrine or EpiPen®, or for which you had to go to the hospital? If yes, what are you allergic to?

☐ Yes

☒ No

☐ I don't know

Have you ever had a severe allergic reaction after receiving a COVID-19 vaccine?

☐ Yes

9:41 Pharmacy

Review

You're almost there. Download and review your COVID-19 patient fact sheet before proceeding to the final step.

Please review

COVID-19

- Side effects
- Risks
- Learn more

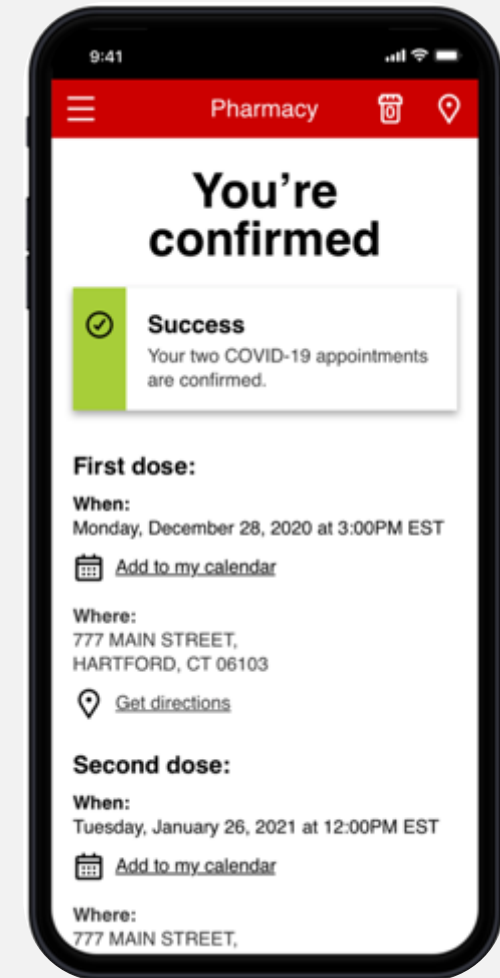
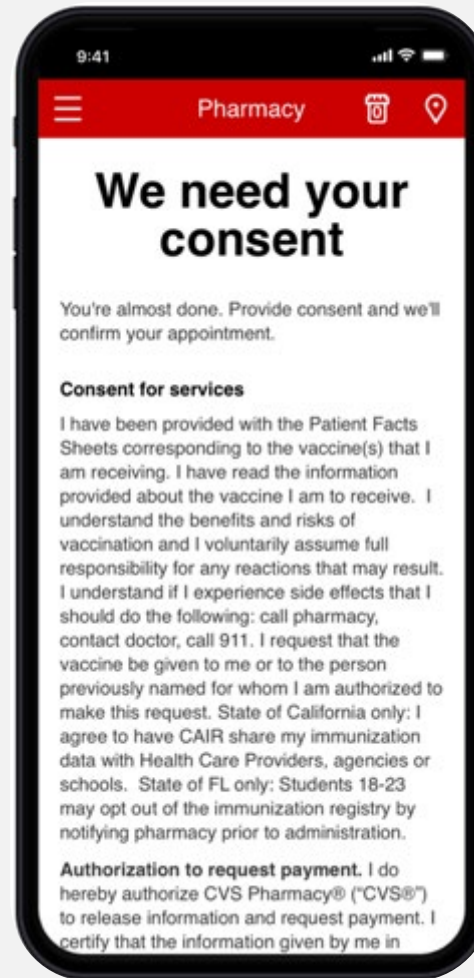
[Download patient fact sheet](#)

[Download the free Adobe PDF Acrobat Reader](#)

[Continue scheduling](#)

[Cancel](#)

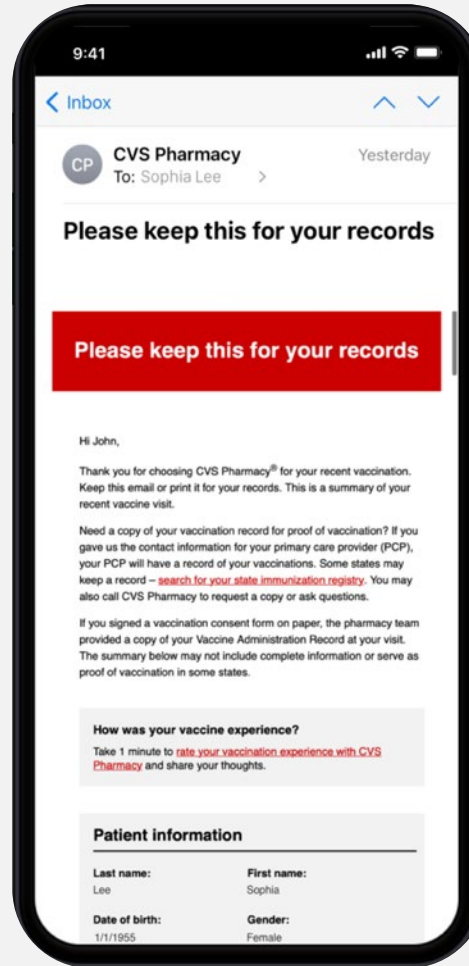
We capture consent and confirm both appointments, followed by a series of email and text message reminders



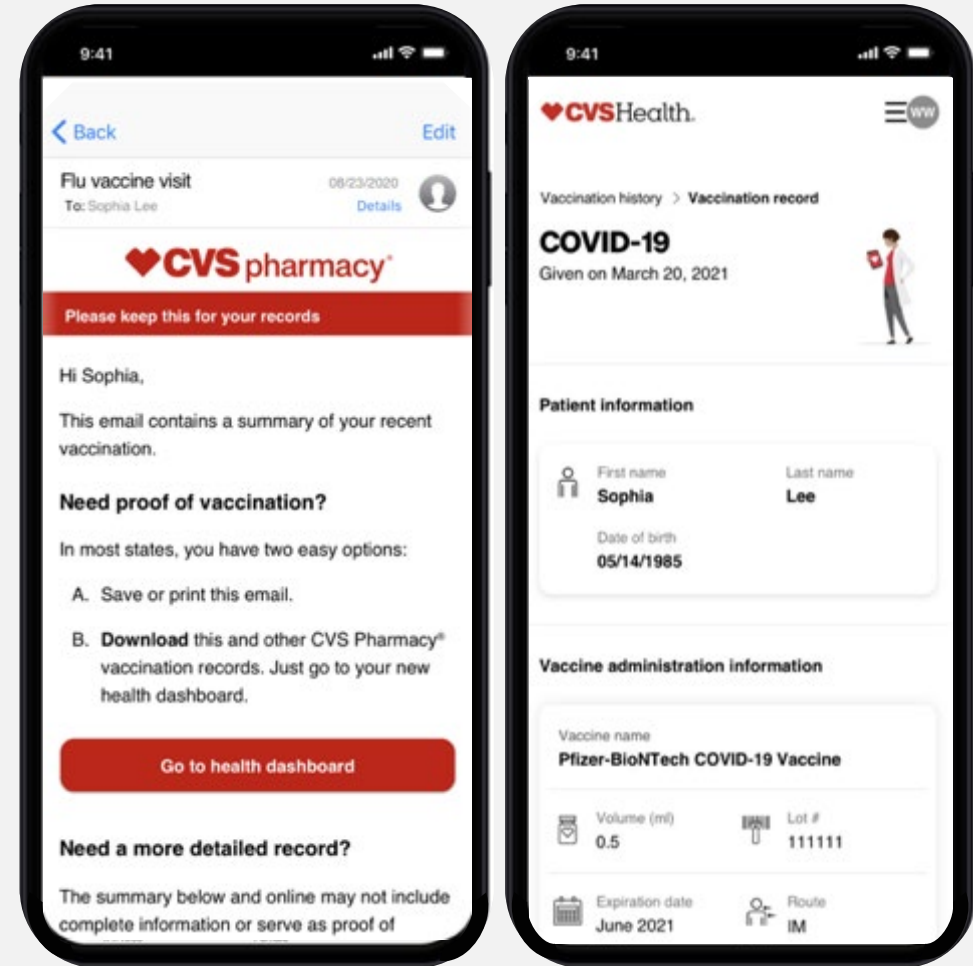
All patients who opt in will receive an electronic vaccine record.

We're also working to make it even easier for patients to access and share their vaccine record securely.

Email available today



Enhanced experience in development





Employer support for COVID-19 vaccinations and testing

Onsite COVID-19 vaccination clinics – **bring the vaccine to your employees**

Current requirements for onsite clinics

Employers has secured a dedicated vaccine allocation for their employees/essential workers from the state

Employer has more than 1,000 eligible essential workers that can be vaccinated at a single location

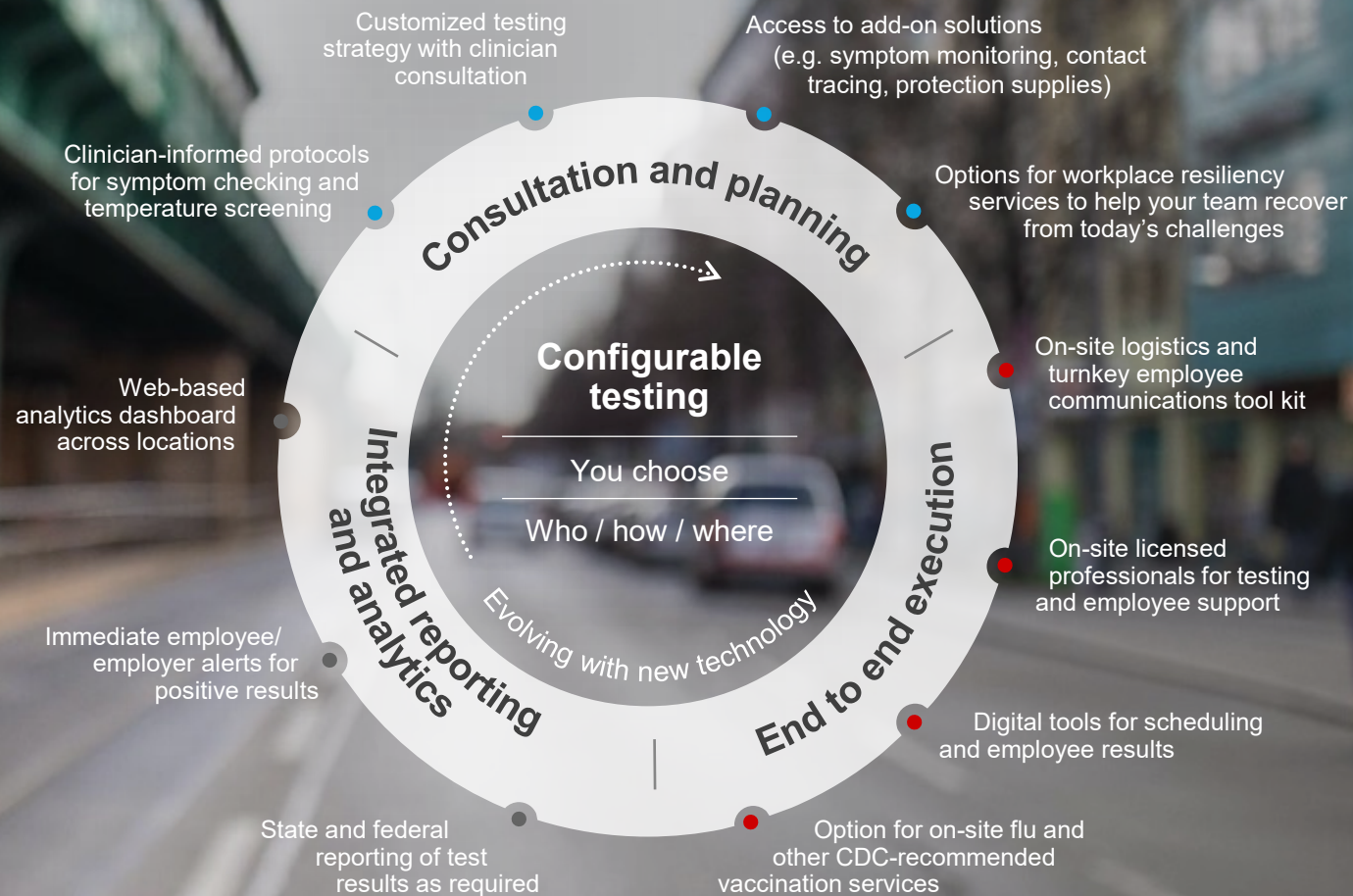
Contract required

When COVID-19 vaccine supply expands, requirements for onsite clinics may change and more employers may be eligible to contract for dedicated vaccination clinics.



**Return
Ready™**
by **CVS Health**

Your comprehensive
return to worksite
COVID-19 testing solution





Key Workplace Initiatives

WORKPLACE COVID-19 INITIATIVES

Pre-vaccine

Communication is key ([CDC.gov toolkits](https://www.cdc.gov/toolkits))

Limit number of employees in and around workplace

Monitor employees for symptoms

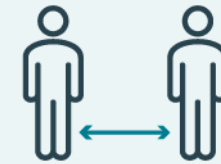
Monitor employees for contact tracing

Individual employees may be eligible before total workforce

Don't forget about the flu, encourage employees to get the flu vaccine



WEAR A MASK



STAY 6 FEET APART



AVOID CROWDS

**Learn how you can
get the COVID-19
vaccine.**



The COVID-19 vaccine is another important tool to help stop the pandemic.

www.cdc.gov

WORKPLACE COVID-19 INITIATIVES

When your organization is eligible for vaccines

- Stay in contact with your local public health department
- Build COVID-19 vaccine confidence at your workplace
 - Encourage leaders in your family, community, or organizations to be vaccine champions.
 - Have discussions about COVID-19 vaccines where people can openly discuss their views and ask questions.
 - Share [key messages](#) through multiple channels that people trust and that promote action.
 - Help educate people about [COVID-19 vaccines](#), how they are developed and monitored for safety, and how individuals can talk to others about the vaccines.
 - Learn more about [finding credible vaccine information](#). When you come across COVID-19 information, cross-check with CDC.gov and learn how to respond to misinformation you encounter.
 - When vaccine is offered to you, make [visible](#) your decision to get vaccinated and celebrate it!
- Survey employees on who wants a vaccine
- Company stance: strongly recommending, incentivizing or mandating employee vaccines

WORKPLACE COVID-19 INITIATIVES

Post-vaccine

- Continue to monitor employees for symptoms and contact tracing
- Do not rush to go back to normal working conditions, continue worksite safety precautions
- Continue with masks and social distancing policies
- Vaccines are up to 95% effective, not 100%
- Not all employees will get COVID-19 vaccine
- Not all employee family members will be eligible for COVID-19 vaccines



Wrap-Up

EPIC COVID-19 VACCINE WEBINAR – PART 2



Materials will be sent to all attendees and available on our [EPIC Brokers](#) site.



Insurance Brokers &
Consultants

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Thanks for attending!