

## **COVID-19 Frequently Asked Questions**

### **Is there a public facing vaccine FAQ?**

Yes, we have an FAQ on [yourshot.nc.gov](https://yourshot.nc.gov) which is regularly updated. A direct link to that FAQ can be found here: <https://covid19.ncdhhs.gov/vaccines/frequently-asked-questions>

### **Who should my constituents contact to schedule an appointment?**

- **Supplies are very limited.** Right now, very few vaccine doses are available.
- **You will likely need an appointment to get vaccinated.** You may have to wait to schedule your appointment to get your vaccine.
- **Your local health department or hospital can help you get your shot.** Because supplies are very limited right now, most doctors cannot provide vaccinations in their offices.
- **Find your local health department or hospital.** A list of contact numbers for providers offering the vaccine are available at [yourshot.nc.gov](https://yourshot.nc.gov)
- **You can also call the COVID-19 Line 1-877-490-6642.** It's a free call.

Counties are in various stages as they deal with new cases and vaccinations. These factors, along with limited supply, mean that many people will have to wait before vaccine is available for them.

### **Where can I find the vaccine prioritization schedule?**

This is also available on [yourshot.nc.gov](https://yourshot.nc.gov). Here's a direct link to the infographic: <https://files.nc.gov/covid/documents/vaccines/NCDHHS-Vaccine-Infographic.pdf>

### **How are the vaccine allocation determined?**

The federal government allocates vaccines to states based on population. We then tell the federal government where to ship vaccine. For the first three weeks we prioritized getting vaccine into every county, allocating by county population. Please note the splits aren't always perfect because the Pfizer vaccine ships in units of 975 doses. We wanted every county to have access to the vaccine (as opposed to focusing just on high population counties) to build staffing and throughput capacity for when supplies increased over time.

Now that we have distribution across the state and data on where backlogs are occurring, we've informed providers that future allocations will be adjusted to also account for vaccine on-hand, providing an incentive to move more quickly. We are also providing guidance and staffing to assist counties with distribution.

Additionally, we continue scaling up larger, high-throughput vaccination sites and events. We will do community vaccination events just like we have done community testing events. Finally, we have set aside 165,000 doses for the federal long-term care vaccination program.

### **How do residents and staff in long-term care facilities get vaccinated?**

Most long-term care facilities are being vaccinated by the federal government through a contract with CVS and Walgreens. If a facility is not participating in the federal vaccination program, then they should contact their Local Public Health Department. They may also contact their local hospital to see if they are available to provide vaccinations.

### **Why are nonresidents of North Carolina able to get vaccinated in North Carolina?**

The vaccine is bought with federal funding. Per the CDC, jurisdictions are prohibited from putting restrictions on administering to non-residents, if those patients meet the current prioritization criteria.

### **Why are some constituents being asked for insurance information when getting the vaccine?**

No one should have to pay anything out of pocket to get the vaccine but requesting insurance information to cover the provider fee is acceptable. The vaccine is paid for by the federal government. The fees for the medical provider to administer the vaccine are paid for by Medicaid, Medicare, and by commercial insurance. People who are providing vaccine for uninsured patients can also get reimbursement through the [Provider Relief Fund](#). If you hear of anyone being asked to pay money out of pocket to get a vaccine, please report that to DHHS as that is unallowable.

### **What is CVMS?**

CVMS is a secure, cloud-based COVID-19 Vaccine Management System that enables vaccine management and data sharing across recipients, care providers, hospitals, agencies, and local, state, and federal governments on one common platform. Through CVMS, North Carolinian healthcare providers will be able to:

- Enroll in the COVID-19 Vaccine Program and upload employees so they can register for COVID-19 vaccination
- Manage COVID-19 vaccine inventory
- Track COVID-19 vaccine administration

This is a new system and experience varies widely. We chose to develop CVMS instead of using the federal system so we can respond to software issues and we are sending updates to the system regularly. In response to user feedback we have already deployed four updates to improve usability.

Additionally, we're working to integrate CVMS with health provider's Electronic Health Records (EHRs). When this is implemented it will eliminate the double entry which is now occurring. There are no plans for the federal system to integrate with EHRs, so developing our own state system is the only option to reduce this administrative burden.

In the meantime, CVMS challenges should not be a barrier to vaccinating people. Documentation can be done on paper and entered later into the system. If local health departments need assistance with data entry, they should contact their county emergency manager and we have support personnel on standby to do the data entry for them.

### **Are we using the National Guard to help with vaccinations?**

Yes. We are using the county emergency management system (the same one used during hurricanes) to move state personnel, volunteers, and National Guard member into local health departments which need help. Currently, we are seeing staffing needs in simple but important tasks like answering phones, scheduling appointments, and data entry. If your local health department needs staffing assistance, they need to raise their hand through their emergency management system. The State is here to help!

**Which phase do dentists and dental hygienists, chiropractors, physical therapists, etc. fall under for vaccine priority?**

Any medical professionals who are having in-person patient contact can be vaccinated now. More detail is available in [this Deeper Dive](#).

Here's the latest infographic on the vaccine prioritization:

<https://files.nc.gov/covid/documents/vaccines/NCDHHS-Vaccine-Infographic.pdf>

**Can local Health Departments be required to extend minimum operating hours?**

Local Health Departments are strongly encouraged to set up vaccination clinics at times when people can more easily access them. A growing number of Local Health Departments are doing great work either by themselves or in partnership with other community providers to extend hours, stand up mass vaccination events and weekend clinics.

**Why can't we use more retail outlets, i.e., Walgreens CVS, etc. to give shots?**

Retail outlets will play a key role in vaccinating North Carolinians. However, vaccine supplies remain limited, and half of the doses coming into the state are from Pfizer meaning they ship in large units of 975 doses and require ultracold storage.

Local Health Departments and hospitals are welcome to partner with pharmacies and other retail outlets to provide shots. The most efficient way to do this is register the vaccinating pharmacists in CVMS and work with their local health departments and hospitals on how to best collaborate. If a transfer of vaccine is determined to be the best solution, we can approve that.

We are starting to direct shipments of vaccine to safety net providers such as Federally Qualified Health Centers and Rural Health Centers, but we are constrained by the limited supply of vaccine coming into the state. The overall number of doses has not been increasing. As long as that continues, when we add new providers to the allocation list current providers will get fewer doses.

**Can you recruit volunteers such as retired healthcare workers, fire, police, to help manage the distribution and shot administration?**

Shot distribution is handled directly by the manufacturers. In order to administer the actual shots someone does need to be licensed.

At the beginning of the pandemic, the Medical Board made it very easy for a retired physician or PA who previously practiced in North Carolina to get an Emergency License by filling out a one-page application with no fee and no criminal background check. Here is a link to the application:

<https://www.ncmedboard.org/licensure/inactive-physician-emergency-license-application>

Here is a link upstream from the last one that gives more information about emergency licensure and the Medical Board's response to COVID-19:

<https://www.ncmedboard.org/landing-page/covid-19-response-page>

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Also, the General Assembly has created easy and cheap pathways for retired physicians to get a non-temporary volunteer license, in the event a physician would like to practice past any declared state of emergency. Here's the link:

<https://www.ncmedboard.org/licensure/licensing/physicians/volunteer-application>

**What is a Secretarial Directive and what is enforcement authority?**

The Secretarial Directive is not enforceable through civil or criminal penalty. It sets out the immediate actions and critical information that the people of North Carolina can use to save lives, slow the spread of COVID-19, and protect our hospital capacity