



TOMÁS J. ARAGÓN, M.D., Dr.P.H
Director and State Public Health Officer

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

February 26, 2021

The Honorable Wendy Root Askew
Monterey County Board of Supervisors, Chair
Post Office Box 1728
Salinas, California 93902

Dear Supervisor Root Askew:

Thank you for your recent letter expressing concern regarding the implementation of the COVID vaccine program with the farmworker community.

Currently, California is receiving weekly vaccine allocations of just over 1.3 million doses (minus the Long-Term Care doses), that has to be divided up equitably between 70 entities (61 health jurisdictions and 9 Multi County Entities). There is a constant, ongoing need for more vaccine. We are seeing increases in our weekly dosage allocations from the Biden Administration and are hopeful that the dose allocation amounts will continue to increase.

Governor Newsom recently announced that the state is partnering with OptumServe and local counties to open up to 11 vaccination sites within the next week to serve some of the hardest-hit or most at-risk communities in the Central Valley, in addition to other steps to bolster vaccination efforts in the region. As soon as next week, the state is also making available an additional 34,000 doses on a one-time basis to vaccinate food and agricultural workers through the deployment of OptumServe mobile teams. These doses are in addition to existing county allocations.

The state is also increasing vaccine allocations to the Central Valley by 58 percent above last week, based on recent changes in our state's allocation methodology that better reflect this region's workforce. The state's vaccine



allocation formula began factoring in the employment sectors in Phase 1b, Tier 1 (education, emergency services and food and agriculture). The new formula weights age 65+ at 70 percent and employment sectors at 30 percent, which increases allocations to the Central Valley due to its heavy concentration of food and agricultural workers.

Also, beginning next month, healthcare providers may use their clinical judgement to vaccinate individuals aged 16-64 who are deemed to be at the very highest risk for morbidity and mortality from COVID-19 as a direct result of one or more of the severe health conditions. All future groups will become eligible based on age and the entire state will add eligible groups simultaneously.

This statewide standard will move in unison across all 58 counties. This will allow the state to scale capacity up and scale down quickly while also ensuring the vaccine goes to disproportionately impacted communities. While the state will drive faster administration of available vaccine supply, overall vaccine supply into California will continue to be dictated by the Federal government.

The new approach will continue to focus on equity. Vaccines will be allocated to make sure low-income neighborhoods and communities of color have access to vaccines, and providers will be compensated in part by how well they are able to reach underserved communities. Real time data will allow for adjustments to be made if initial equity targets are not met.

California is building a statewide vaccine administration network to speed the equitable delivery of current supply to eligible Californians. The state, through a Third-Party Administrator (TPA), will allocate vaccines directly to providers to maximize distribution efficiency by largely eliminating redistribution through local public health systems. This will also give the state greater visibility into what is happening on the ground.

The vaccine provider network is expected to include public health systems, pharmacies, health systems, public hospitals, FQHCs, pharmacies and pop-up and mobile sites with an immediate focus on allocating to high-throughput providers. This network will expand as vaccine supply grows and vaccine characteristics change to meet the needs of individual communities. Local public health systems will continue to play a key role as vaccine providers and by providing their unique insights and knowledge to ensure the network reaches disproportionately affected Californians.

California will be launching the My Turn pilot, vaccine registration program statewide. Currently being piloted in nine counties, people can use My Turn to determine their eligibility and to make a vaccine appointment. Even prior to being launched statewide, users now have the option to leave their contact information to be notified when it is their turn.

As to our current outreach efforts to these essential workers, we are partnering with cross-cultural providers to reach key communities. Local health departments are working with trusted messengers to help educate and inform individuals about vaccine locations. An important component of our outreach is the Promotoras presence and participation in vaccine campaigns. They will help disseminate information about vaccinations, link individuals to vaccine distribution centers, and serve as cultural brokers within health systems. Their involvement in vaccine campaigns will help diminish fears and concerns of farmworkers and hard-to-reach communities.

We are already broadcasting several multi-lingual PSA's, radio segments and digital ads. We will be developing more in the days, weeks, and months to come which will amount to a comprehensive public education campaign that includes media (paid, owned, earned, and social) as well as on-the-ground efforts with community-based organizations as partners and trusted messengers. The campaign has several central focus points, including helping all Californians understand that the vaccines are safe and effective.

Again, I thank you for your concern on behalf of this vulnerable and essential community of California during this unprecedented health crisis.

Sincerely,

A handwritten signature in blue ink that reads "Tomás Aragón". The signature is written in a cursive, flowing style.

Tomás J. Aragón, M.D., Dr.P.H.
Director and State Public Health Officer
California Department of Public Health