COVID Vaccine Initiatives
Vaccine Equity K-12 Reopening Grant

- HCA partnering with Coconino County and NAU on the *Vaccine Equity K-12 Reopening Grant*
- Grant was awarded to Coconino County by ADHS
- Main components:
  - BH services for K-12 students and families impacted by COVID-19
  - Wrap-around social supports (e.g. temporary lodging, laundry services and food) for families
  - Care coordination and linkages to ongoing BH services
- Grant will increase opportunities for NAU students to gain clinical hours and experience
<table>
<thead>
<tr>
<th>What has worked?</th>
<th>What has not worked as well?</th>
<th>Ongoing Initiatives</th>
<th>New and Innovative Focus Areas</th>
</tr>
</thead>
</table>
| Mass vaccination sites  
- 491,124 vaccines administered  
- 145,000+ hours of service provided by volunteers in 15,000+ shifts  
- 18,880 of those volunteer hours were filled by BCBSAZ and HCA employees | Mass text messaging  
- 20,007 members received texts (Apr 21)  
- 8 members (0.04%) accepted vaccine scheduling assistance | Gap lists  
- On-demand for PCPs on Provider Portal  
- Monthly distribution to Health Homes  
- All available data sources (Pharmacy, Claims, ASIIS, Medicare/COVAX) | Changing the dialogue about COVID vaccines  
Collaborative Communication about COVID-19 Vaccines  
Possible innovation with Maricopa County on large scale train-the-trainers |
| Initial targeted outreach for highest risk members based on early risk stratification in February and March 2020  
- 850 members with SMI  
- 101 Tribal reservation members | Receiving accurate, timely data on member vaccines  
- Tribal health care system data  
- Mass vaccination sites | Outreach to high-risk members by the Pharmacy Department (Project COVAX) | Focus on Pregnant Members  
- Tailor messaging to the specific needs and concerns of pregnant members and OB/GYN providers |
| Collaboration among MCOs, counties, and providers to vaccinate high risk Medicaid & ALTCS members (e.g. ALTCS) | Relying on possible vaccine mandates | Boosters for vaccinated members | Collaborate with county health departments on new types of messaging (e.g. community member testimonials) |
| Adding pharmacy and mobile vaccine sites | “Pop up” events that are poorly advertised or not regularly scheduled | Collaborate with providers and MCOs | Ensure that outreach and messaging is available in as many languages as possible and are culturally appropriate |
| Outreach from Health Homes to members using gap lists provided by Health Choice | Generic community messaging campaigns | Congregate setting interventions | Learn more about “digital nudging” |
| Convenient community locations that are consistently available (in unconventional locations) | | | Contact RWJ Foundation & others (Unicef, TAPI) about emerging best practice messaging approaches |
| Adding ASIIS data to our member vaccine information | | | Collaborate with local community leaders (including faith-based) on above activities |

January 2022 (partial list)
Vaccine Gap Lists – Provider Portal

- On-demand access to COVID Vaccine Gap Lists for PCPs on the Health Choice Provider Portal
- Launched January 2022
- Providers can view gaps in the portal or download a spreadsheet

Welcome to Health Choice Provider Portal

New & Upcoming Enhancements

- Now Available: Member COVID Vaccine Status Report
## Vaccine Gap Lists – Provider Portal

### COVID Vaccine Gaps List

<table>
<thead>
<tr>
<th>Provider NPI</th>
<th>Member ID</th>
<th>AHCCCS ID</th>
<th>Alt. Member ID</th>
<th>Member DOB</th>
<th>Vaccine Status</th>
</tr>
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<tbody>
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<td>HCA</td>
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</tbody>
</table>

[Export to Excel]
Collaborative Communication about COVID-19 Vaccines

https://www.healthchoiceaz.com/rvh/

• Training for providers and community members
• Purpose: Change the dialogue about COVID-19 Vaccines to focus on messaging that is nonjudgmental and strengthens relationships with trusted providers (PCP).
• Developed in collaboration with providers
• Evidence-based: Uses Motivational Interviewing techniques
• Brief: takes 10 minutes to complete
Collaborative Communication about COVID-19 Vaccinations

This course is intended for community providers who have conversations with patients about COVID-19 vaccines.
Collaborative Communication about COVID-19 Vaccinations

- Interactive web-based training for providers and community members
- Purpose: Change the dialogue about COVID-19 Vaccines to focus on messaging that is nonjudgmental and strengthens relationships with trusted providers (PCP)
- Developed in collaboration with providers
- Evidence-based: Uses Motivational Interviewing techniques
- Brief: takes 10 minutes to complete

The patient states they believe in an individual’s right to opt-out of receiving the vaccine

Vaccines are a personal choice and people should be able to make their own choices. Can you tell me about your reasons for opting out?

I understand it is a personal choice but by receiving the vaccine you protect yourself, family, friends, and community.
Project COVAX

**Goal:** Ensure Equitable Access to COVID Vaccination for Health Choice members

**Initial Focus Group:** Age 65+ or immune compromised

**Process Summary:** A pharmacy coordinator makes outreach to Health Choice members that are not fully vaccinated to identify and resolve barriers to vaccination.

1. **Address Members’ Questions**
   - Listen to concerns and reasons for hesitancy
   - Answer clinical questions or leave message for provider to call member
   - Address logistical or supply questions
   - Determine if N95 or KN95 masks or COVID tests are needed

2. **Schedule Vaccine Appointment**
   - Coordinate date and time with member to receive vaccination at a nearby pharmacy or provider office
   - Line up transportation to appointments when needed.

3. **Identify and Resolve Barriers**
   Examples of barriers encountered:
   - No internet or computer to schedule appointment.
   - Online scheduling is especially difficult for those unable to read English.
   - Health literacy; Interpreting mixed information about the benefits and risks of vaccination.
   - Some are waiting for their next doctor appointment to ask if it is okay to get the vaccine.
   - The member’s decision to not get vaccinated is sometimes due to a family member with opposition.
   - Some pharmacies won’t give a second or third dose unless proof of dose 1 or 2 is brought to the appointment.
   - Some members are willing to get vaccinated, but not sure how to start the process and too busy to research
   - No transportation.
Project COVAX

Of the 866 members reached so far:

- 22% (192 members) needed our help scheduling an appointment or needed transportation (VAX1)
- 18% (152 members) had questions for us and are now thinking about scheduling on their own (VAX2)
- 34% (299 members) very unlikely to get vaccinated (VAX3, VAX4, VAX5)
- 26% (223 members) already vaccinated; no help needed (ASIIS file mismatches) (VAX0, VAXB)
Project COVAX

- A surprising number of members are interested in learning more, even if they are hesitant to be vaccinated
- It is vital to have staff fluent in languages other than English
- Offering additional supports (e.g. masks, how to get COVID tests, connection to other services) is very helpful
- Opportunities exist for improved member demographic information 😊
- There have been many uplifting member stories
- Active listening makes a difference. Respectful conversation enables all of us to evolve personal health decision-making.