

**ALASKA STATE LEGISLATURE  
SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE  
ANCHORAGE LIO**

December 7, 2020

10:01 a.m.

**MEMBERS PRESENT**

Senator David Wilson, Chair  
Senator Natasha von Imhof, Vice Chair  
Senator Cathy Giessel (via teleconference)  
Senator Mike Shower (via teleconference)  
Senator Tom Begich (via teleconference)

**MEMBERS ABSENT**

All members present

**OTHER LEGISLATORS PRESENT**

Representative Harriet Drummond (via teleconference)  
Representative Bryce Edgmon (via teleconference)  
Representative Sara Hannan (via teleconference)  
Representative Delena Johnson (via teleconference)  
Representative Andi Story (via teleconference)

Senator Elvi Gray-Jackson (via teleconference)  
Senator Jesse Kiehl (via teleconference)

**COMMITTEE CALENDAR**

Presentation: Department of Health and Social Services Statewide  
COVID-19 Vaccination Plans

- HEARD

**PREVIOUS COMMITTEE ACTION**

No previous action to record.

**WITNESS REGISTER**

DR. ANNE ZINK, Chief Medical Officer  
Division of Public Health  
Department of Health and Social Services (DHSS)

Anchorage, Alaska

**POSITION STATEMENT:** Delivered a presentation on the statewide COVID-19 vaccination plan.

TESSA WALKER LINDERMAN, Nurse Consultant  
Division of Public Health  
Alaska Department of Health and Social Services and  
DHSS Lead  
Alaska COVID-19 Vaccine Task Force  
Anchorage, Alaska

**POSITION STATEMENT:** Answered question related to the statewide COVID-19 vaccination plan.

DR. ROBERT ONDERS, Medical Director  
Alaska Native Tribal Health Consortium  
Anchorage, Alaska

**POSITION STATEMENT:** Described the tribal partnership component of the Alaska COVID-19 taskforce.

MATTHEW BOBO, Immunization Program Manager  
Section of Epidemiology  
Division of Public Health  
Department of Health and Social Services (DHSS)

**POSITION STATEMENT:** Answered questions about the availability and distribution of the COVID-19 vaccine in each phase.

LORI WING-HEIER, Director  
Alaska Division of Insurance

**POSITION STATEMENT:** Stated that the taskforce has worked very hard to make the vaccine available to Alaskans as soon as possible.

#### **ACTION NARRATIVE**

[10:01:03 AM](#)

**CHAIR DAVID WILSON** called the Senate Health and Social Services Standing Committee meeting to order 10:01 a.m. Senators Giessel and Begich were present via teleconference, and Senator von Imhof and Chair Wilson were present in person. He noted that Senators Kiehl and Gray-Jackson, and Representative Drummond were also listening via teleconference.

Presentation: Department of Health and Social Services Statewide COVID-19 Vaccination Plan

[10:02:19 AM](#)

CHAIR WILSON stated that the purpose of the meeting is to receive an overview from the Department of Health and Social Services on the state's COVID-19 vaccination plan. He said the intent is to disseminate information and learn how the public can be involved and get more information. He identified the individuals online to present and answer questions as Dr. Anne Zink, Heidi Hedberg, Tessa Walker Linderman, Matthew Bobo, Dr. Robert Onders, and Lori Wing-Heier. He clarified that the committee is not taking a stance in support of or opposition to getting the vaccine. That is a personal choice that individuals should make in consultation with their health care professional.

CHAIR WILSON welcomed Dr. Zink to deliver the overview on the statewide COVID-19 vaccination plan.

[10:04:57 AM](#)

DR. ANNE ZINK, Chief Medical Officer, Division of Public Health, Department of Health and Social Services (DHSS), Anchorage, Alaska, reviewed the agenda for the presentation outlined on slide 2. She said she will provide opening remarks and a brief discussion of the vaccine candidates. Next, Tessa Walker Linderman will talk about the Alaska COVID-19 Vaccine Task Force followed by Dr. Robert Onders who will talk about the tribal health partner work. Ms. Walker Linderman will go through the phases and allocations followed by epidemiologist Matt Bobo who will discuss ordering, receiving, and distribution of the vaccine, then back to Ms. Walker Linderman to discuss communication and community planning. Dr. Zink said she will conclude the presentation with a discussion on vaccine confidence and answer any remaining questions.

[10:05:56 AM](#)

At ease.

[10:06:48 AM](#)

CHAIR WILSON reconvened the meeting.

DR. ZINK continued the presentation on slide 3 advising that the vaccine candidates are expected in Alaska in the near future. The Pfizer vaccine is expected to arrive first. It has gone through all three stages that ensure vaccine safety and efficacy, including Phases 1, 2, and 3. The vaccine has been tested in over 43,000 participants and has been submitted to the Food and Drug Administration (FDA) for emergency use authorization. The FDA is currently reviewing the data for safety and efficacy and the state is awaiting their conclusion. The initial data showed 170 confirmed cases of COVID-19. A

comparison of the placebo group versus the group that received the vaccine showed that the efficacy of the vaccine against COVID-19 was 95 percent [seven days] after the second dose was administered and 94 percent in those over age 65. This was consistent across ages, gender, race, and ethnicity.

DR. ZINK described the Pfizer vaccine as logistically challenging because it has to be stored at -70 degrees Celsius. She said the task force team has been working around the clock to ensure that that part of the distribution is successful.

[10:08:41 AM](#)

DR. ZINK advised that the Moderna vaccine is expected to arrive in Alaska soon after the Pfizer vaccine. She noted that they both use the messenger RNA (mRNA) platform.

She said the Moderna vaccine was tested on more than 30,000 participants and no serious safety concerns were found. The vaccine was 94 percent efficacious two weeks after the second dose and 100 percent against severe COVID-19. She noted that efficacy is how well a vaccine works in a controlled environment whereas effectiveness is how well it works in the real world.

DR. ZINK said the Moderna data was submitted to the FDA on December 2, 2020 and additional testing of the coronavirus vaccine is starting in children ages 12 through 17. The Pfizer vaccine was only tested in people age 18 and older.

She said the Moderna vaccine is not as logistically challenging as the Pfizer vaccine because the storage requirements are just -20 degrees Celsius.

[10:09:48 AM](#)

DR. ZINK displayed slide 6 that depicts the three test phases for the vaccine candidates. She emphasized that the clinical trial process for the COVID-19 vaccines did not skip any steps. The vaccines that have been submitted are built on years of technology. The process to develop mRNA vaccines have been long underway. They have been found to be very safe and efficacious.

She explained that the vaccine candidates from Pfizer and Moderna have completed the three test phases illustrated on slide 6. Phase 1 is the preclinical study phase that tests for safety in 10-100 people. Phase 2 tests hundreds of people with different characteristics such as age and health status to ensure that the effectiveness and side effects are well understood. Phase 3 tests thousands of people to assess both

safety and effectiveness. All three phases have been completed for both vaccine candidates and are being submitted to the FDA for approval.

DR. ZINK suggested watching Dr. Jay Butler's presentation to learn more about clinical trials and other vaccine candidates. The YouTube link is on the bottom of slide 7.

[10:11:18 AM](#)

DR. ZINK displayed slide 8 that shows the federal government currently estimates that Alaska's initial allocations of vaccines could include 35,100 doses from Pfizer and 17,900 doses from Moderna. She noted that the doses from Moderna are expected to change early this week, particularly with the Indian Health Service (IHS) distribution. She informed the committee that because of the geographic challenges of distributing the vaccine, Alaska has selected to receive its allocations up front for the month rather than week-to-week. She clarified that the initial allocations are for the first of two doses. The second doses will be shipped later. She also highlighted that in addition to the FDA, the Advisory Committee on Immunization Practices (ACIP) is also looking at the information.

DR. ZINK deferred to Tessa Walker Linderman to talk about the task force and how it is structured in Alaska.

[10:13:10 AM](#)

CHAIR WILSON stated that Senator Shower had joined the meeting via teleconference, and that Representatives Hannan and Story were listening to the meeting via teleconference.

[10:13:18 AM](#)

SENATOR VON IMHOF asked if the state contracted with the University of Alaska, Fairbanks (UAF) to help with storing the vaccine at the required ultra-cold temperature.

[10:13:50 AM](#)

DR. ZINK replied the department has worked extensively, including with UAF, to be able to store the vaccines. She deferred to Ms. Walker Linderman for more detail.

[10:14:22 AM](#)

TESSA WALKER LINDERMAN, Nurse Consultant, Division of Public Health, Department of Health and Social Services (DHSS), and DHSS Lead, Alaska COVID-19 Task Force, said Pfizer has developed a shipping container that can maintain the required ultra-cold temperatures for up to 20 days if it is replenished with dry ice

every five days. Also, the task force has talked with the university, the Alaska Department of Fish and Game (ADF&G), and the Alaska Sea Life Center to locate ultra-cold freezers in different communities statewide and determine whether or not a source of dry ice is readily available.

[10:15:39 AM](#)

SENATOR SHOWER referred to the statement on slide 8 that read:

Vaccines made available via an Emergency Use Authorization cannot be required or mandated by governments and businesses.

He asked if the vaccine could be mandated once the EUA has expired.

[10:16:16 AM](#)

DR. ZINK replied the state has no plans at this point to mandate any vaccine and private business can't mandate individual vaccines until there is full authorization, which won't happen for about two years.

SENATOR SHOWER said he asked because in some professions one's job can be jeopardized by taking a vaccine that is authorized through an EUA. He cited the example of the FAA saying that pilots who take the vaccine in this circumstance will lose their license.

[10:17:50 AM](#)

MS. WALKER LINDERMAN turned to the organizational chart for the Alaska COVID-19 Vaccine Task Force depicted on slide 10. She said that when the group was convened in August 2020, it quickly became clear that it would be important for DHSS to partner with the Alaska Native Tribal Health Consortium (ANTHC). She noted the co-leads within each of the eight teams and that each team is further broken down into sub-teams. She said the task force has 50 people that meet daily.

She deferred to Dr. Onders to discuss the tribal partnership.

[10:19:35 AM](#)

DR. ROBERT ONDERS, Medical Director, Alaska Native Tribal Health Consortium (ANTHC), expressed appreciation to the state for involving ANTHC early in the planning process. The partnership has worked well and has been instrumental in helping to plan for distribution to the more challenging areas of the state. He said that with more than 180 village clinics and multiple hospitals

throughout the state, ANTHC probably has more opportunity for vaccine administration than any other entity. They serve not only Alaska Natives, but also other people in those communities. ANTHC has helped to coordinate discussions with their regional tribal health partners and tribes and the state to use the state's existing infrastructure for vaccine administration and immunization coordination. This will help facilitate the process working well across the state.

[10:21:27 AM](#)

MS. WALKER LINDERMAN turned to slide 13 and paraphrased the timeline for December. It read as follows:

### **Timeline**

*Expect dates to change as we find out more*

December 1: CDC Advisory Council on Immunization Practices (ACIP) met and voted on a recommendation for who gets the vaccine first

December 3: Alaska Allocation Committee met to recommend prioritization and distribution model for Alaska

December 4-7: Vaccine shipment details (including estimated doses) reported to hospital leadership or hospital vaccine planners

December 10: FDA meeting on Pfizer vaccine. Additional CDC guidance is expected. If EUA approved, vaccine shipment may begin.

Technical difficulty

Mid December: Pfizer vaccine shipments arrive in Alaska

Mid-End December: Moderna vaccine shipments arrive in Alaska Expect regular shipments to continue throughout 2021.

*Expect regular shipments to continue throughout 2021*

[10:22:45 AM](#)

At ease.

[10:28:07 AM](#)

CHAIR WILSON reconvened the meeting and apologized the technical difficulty.

[10:28:37 AM](#)

SENATOR BEGICH asked what the time gap will be between the first and second dose of either the Pfizer or Moderna vaccine and if the second dose is necessary to achieve the efficacy that was described.

DR. ZINK replied both are two-dose vaccines; the Pfizer vaccine is split 21 days apart and the Moderna vaccine is split 28 days apart. The efficacy picks up after the second dose so it is important that people plan to get the second dose of the vaccine they received initially.

MS. WALKER LINDERMAN read the last two points on slide 13 and confirmed Dr. Zink's earlier statement that Alaska will receive the vaccine doses up-front for the month rather than in weekly shipments.

[10:31:05 AM](#)

MS. WALKER LINDERMAN reviewed the phases of vaccine availability depicted on slide 14. She said there will be very limited availability of the vaccine in Phase 1A/1B. More regular shipments will occur in Phase 2, but availability will be limited. In Phase 3, the vaccine will be widely available to the entire population. She said the timeline for the three phases is undefined at this point but Phase 1A is potentially a week away.

[10:32:02 AM](#)

MS. WALKER LINDERMAN paraphrased slide 15 that read as follows:

#### **Vaccine Allocation - Federal**

- CDC Advisory Council on Immunization Practices (ACIP) approved the following recommendation by majority (13-1) vote at its December 1, 2020 emergency meeting

When a COVID-19 vaccine is authorized by FDA and recommended by ACIP, vaccination in the initial phase of the COVID-19 vaccination program (Phase 1A) should be offered to both **1) health care personnel and 2) residents of long-term care facilities**

- More information:  
<https://www.cdc.gov/vaccines/acip/index.html>

[10:33:06 AM](#)

CHAIR WILSON asked if all or just critical front-line health care personnel will receive the vaccine in the initial phase.

[10:33:25 AM](#)

MS. WALKER LINDERMAN replied the next two slides address the question. She paraphrased slides 16 and 17 that read as follows:

#### **Vaccine Allocation - Federal**

Further CDC Advisory Council on Immunization Practices (ACIP) Recommendations:

- Healthcare personnel (HCP) with direct patient contact
  - Unable to telework
  - Including those who work in inpatient, outpatient, or community settings
  - Provide services to patients or patients' family members
  - Handle infectious materials
- HCP working in residential care or long-term care facilities
- HCP infected with COVID-19 within the preceding 90 days may choose to delay vaccination for other HCP more susceptible to infection
- No current data to inform recommendations for pregnant or breastfeeding women

#### **Vaccine Allocation - Federal**

Further CDC Advisory Council on Immunization Practices (ACIP) Recommendations:

- Long-term care facility resident sub-groups
  - Skilled Nursing Facilities
  - After Skilled Nursing Facilities:
    - Assisted living facilities
    - Intermediate care facilities for individuals with developmental disabilities
    - Residential care facilities
    - State Veterans Homes

[10:35:33 AM](#)

MS. WALKER LINDERMAN displayed slide 18 that uses nesting dolls to describe the vaccine allocation. The notion is that each

layer builds on the previous one. None of the layers stands on its own and there is prioritization within each layer. She explained that the largest nesting doll represents the federal recommendations and the next doll represents the Alaska Allocation Committee. Within that is how a community or hospital might prioritize the vaccine. The decisions move down ultimately to the individual level where Alaskans make the decision about the vaccine for themselves.

[10:36:28 AM](#)

MS. WALKER LINDERMAN paraphrased slide 19 that read as follows:

#### **Vaccine Allocation - Alaska**

On December 3, Alaska COVID-19 Vaccine Allocation Committee met and unanimously determined a portion of the groups that will be included in Phase 1A. These groups include:

- Hospital based front-line health care workers at highest risk for COVID-19 infection
- Long-term care facility residents and staff
- EMS/fire personnel
- Community Health Aides
- Individuals who are required to perform vaccinations

The committee will reconvene to discuss additional groups to include in Phase 1A Thursday, December 10.

MS. WALKER LINDERMAN said front-line hospital workers and residents and staff at long-term care facilities are tier one and EMS/fire personnel, community health aides, and people giving vaccinations are tier two in Phase 1A.

[10:37:39 AM](#)

CHAIR WILSON asked how many hospital workers will be immunized in Phase 1A.

MS. WALKER LINDERMAN replied the hospitals have identified about 8,000 critical workers and about 14,000 staff overall.

[10:38:46 AM](#)

SENATOR VON IMHOF asked if she would recommend that people get the vaccine if they have either had COVID-19 or have taken a test that shows they have antibodies in their system.

MS. WALKER LINDERMAN deferred the question to Dr. Zink.

[10:39:30 AM](#)

DR. ZINK said the department has been waiting for the CDC and APIC to provide additional guidance, but the initial data shows that immunity from the vaccination generally is stronger than natural immunity. They anticipate that people who have recovered from COVID-19 will get the vaccine if they choose to do so. The vaccine will be offered to people in tier 1 and tier 2 within Phase 1A, including those who have recovered. People will not be asked about antibody testing prior to receiving the vaccine because there is a lack of data to show it demonstrates immunity.

[10:40:32 AM](#)

SENATOR VON IMHOF said, based on her reading, it is too early to say whether the vaccine or natural immunity is more effective. She added that she likes the prioritization the department outlined and the caveat that front line workers who have had COVID-19 are able to delay getting the vaccine if they choose to do so.

[10:41:53 AM](#)

SENATOR BEGICH asked if access to excess vaccine that may be available in Phase 1A will be made available to law enforcement and other first responders. If not, he asked if they could be considered.

[10:42:30 AM](#)

DR. ZINK answered that the department is watching the scientific data very closely and will continue to work with the CDC and APIC to ensure that the distribution of the vaccine, including any excess, is science-based, equitable, and logistically feasible. The idea is to work through those three pillars while ensuring that no vaccine is wasted and that the health and wellbeing of Alaskans is protected.

[10:43:44 AM](#)

SENATOR BEGICH recalled that nursing home populations fall in Phase 1B of the distribution, and asked where the homeless population falls in the process.

DR. ZINK clarified that nursing homes, long term care facilities, and skilled nursing facilities fall within Phase 1A. To the question about when the homeless population would receive the vaccine, she said that is being discussed right now but the challenge with that group is that the vaccine is given in two doses.

SENATOR BEGICH asked her to keep his office informed on the progress to offer the vaccine to the homeless population.

DR. ZINK said she would make sure that the task force and the physician dedicated to COVID challenges keeps his office up to date.

[10:45:09 AM](#)

CHAIR WILSON recognized that Senator Stevens, Representative Edgmon, and Representative Johnson were listening and watching via teleconference.

SENATOR GIESSEL asked what data the U.S. is following, what is known about the specific variety of COVID-19 that is circulating in the country, and if there are different strains in different areas.

DR. ZINK replied the department is monitoring the different clades of SARS-CoV-2 that cause COVID-19 and has submitted some genomic sequencing to the genetic sequencing data bank in Fairbanks. Six of the seven major clades, or variations, that are circulating in the U.S. have been seen in Alaska but the shape and function of the protein spike seems to be consistent between the clades. The vaccines appear to target that protein spike, which is how the virus enters the human cell, so they should remain effective as the virus continues to change. She said the department will continue to watch that closely.

She said information about the side effects of new vaccines comes after about two months and how long the immunity lasts will come after about six months of data or during the Phase 3 trials. More data is also coming out about the fact that it appears that the virus that causes COVID-19 affects both innate immunity and responsive immunity. That will be followed closely to ensure that healthcare providers and the people of Alaska have that information.

[10:49:29 AM](#)

CHAIR WILSON asked for more information on who might fall in Phase 2 and Phase 3 and where teachers, public officials who have been diagnosed with the virus, and other essential workers might fit in the phases.

[10:50:20 AM](#)

MATTHEW BOBO, Immunization Health Program Manager, Section of Epidemiology, Division of Public Health, Department of Health and Social Services (DHSS), recounted that healthcare workers

and residents in long term care facilities will fall into Phase 1A. Teachers and other workers in the critical workforce, as defined by federal guidelines, will fall into Phase 1B. This will be mapped out by the Allocation Committee. Phase 2 will be spent working through the critical workforce and into the general population. The vaccine will be readily available to the general public in Phase 3.

CHAIR WILSON asked when interested people in the general public would be able to provide input to the Allocation Committee regarding who might be essential workers and what residents go into each phase.

[10:51:55 AM](#)

DR. ZINK said people are welcome to send letters to the Allocation Committee but it is important to understand that they are a group of scientists and clinicians who represent a diverse range of expertise and experience in both urban and rural areas. They will look at the information with the pillars of science, logistics, and statewide equity.

CHAIR WILSON asked if the information on how to contact the Allocation Committee is on the DHSS website.

DR. ZINK answered yes, and additional information sources are at the end of the presentation.

[10:53:34 AM](#)

SENATOR SHOWER asked if the vaccine eliminates the chance of getting COVID-19 and infecting others or if it just reduce the severity of the symptoms if someone were to come into contact with the virus post vaccination.

DR. ZINK answered that the initial data looked at symptoms and severity of the symptoms, which is where the efficacy was found. The data is still under review on whether somebody could get COVID-19 and transfer it to others.

SENATOR SHOWER commented on the moving goal posts for reopening the economy and asked when the medical benefit of keeping the economy closed isn't worth the devastation to the economy.

[10:56:34 AM](#)

DR. ZINK answered that the mission of DHSS is the physical and mental health and wellbeing of Alaskans and they know that economic health is tied to both. She said the tools DHSS is using to reduce the spread of the virus are the tools to keep

businesses open; to keep people healthy, safe, and moving forward; and to keep government systems open and functioning. This means schools open, hospitals functioning, and law enforcement doing its job without people being sick or any part of the system being overwhelmed. She said the team continues to look at all the components both within and outside of COVID-19. She offered her perspective that the goal post is ensuring the health and wellbeing of Alaskans and that has not changed.

SENATOR SHOWER asked if she could give a definitive timeline for opening all sectors of the economy.

[11:00:22 AM](#)

DR. ZINK answered that she has been describing the vaccine and its distribution like the sun. There is not a noticeable difference between December 21 and December 22, but by the spring equinox there will be more vaccine available and the world will be different. She said the caveat is that there are no associated production and distribution challenges.

DR. ZINK continued to say:

Honestly, from my seat in this position, it feels like watching a man land on the moon. To see the science coming together [in] such quick time over vaccines and to see the hope and inspiration right now, I feel like we can see the runway up ahead. It's going to be a lot of work but I think this spring and summer are going to feel like very different places. Not because of any rules or regulations, but because we're not going to be having as many people sick and infected by COVID-19, which is directly impacting their ability to function and work and keep businesses open and moving forward.

[11:02:11 AM](#)

MR. BOBO continued the presentation with a discussion of ordering, receiving, and distribution of the vaccine. He directed attention to the map on slide 21 that shows color-coded locations to illustrate Alaska's existing system to get vaccines from the larger airports to increasingly rural parts of the state. Specifically, it depicts the sites that DHSS distributes vaccines for the federal Vaccines for Children Program and the Alaska Vaccine Assessment Program.

[11:02:59 AM](#)

MR. BOBO displayed slide 22 and read the following:

**Ordering, Receiving and Distributing Vaccine**

COVID-19 vaccination providers may enroll in the CDC COVID19 Vaccination Program administered by the Alaska Immunization Program, a program within the Alaska Department of Health and Social Services: <http://dhss.alaska.gov/dph/Epi/id/Pages/COVID19/VaccineProviders.aspx>

As of December 4, 265 health care providers are fully enrolled.

MR. BOBO displayed slide 23 and read the following:

**Ordering, Receiving and Distributing Vaccine**

Integrated IT systems –both public and private, as well as new and existing—are needed to ensure successful vaccine allocation, distribution, administration, monitoring, and reporting.

[11:04:19 AM](#)

SENATOR BEGICH asked if precautions were being taken to prevent the state's IT systems from being hacked and disrupting distribution of the vaccine.

MR. BOBO answered yes; the security plan for the vaccination tracking system is behind firewalls and is being assessed throughout the process. Furthermore, the state security officers are holding these conversations with their federal partners.

[11:05:05 AM](#)

SENATOR BEGICH asked if DHSS is communicating about the recently reported IT breach and receiving real-time data about the hack.

MR. BOBO said he was unclear about the specific case but security protocols are being followed and the system is up to date to ensure there are no hacks. There have been none to date, he said.

[11:05:46 AM](#)

MR. BOBO paraphrased slide 24 that read as follows:

**Ordering, Receiving and Distributing Vaccine**

Jurisdictions are not advised to purchase ultra-cold storage equipment at this time:

- Ultra-cold vaccine will be direct shipped from the manufacturer in coolers that are packed with dry ice
- Direct shipments to the vaccination provider site will be in 975-dose increments on a real-time, day to day basis

[11:06:44 AM](#)

MS. WALKER LINDERMAN turned to slide 26 and explained that in terms of community planning, the DHSS task force has focused on planning for Phase 1A so that communities can focus on the subsequent phases. To accomplish this, the task force has developed a team of public health nurses who will serve as regional technical assistant advisors (TAAs) in the different areas of the state.

She displayed slide 27 and explained that the TAAs will be responsible for: assessing the community's planning progress, providing individualized outreach and support, providing updated information, assisting with problem solving and providing resources; engaging in regular communications, and supporting the community's planning efforts for subsequent phases of vaccine distribution.

MS. WALKER LINDERMAN displayed the list of entities for which the TAAs serve as the task force point of contact. She said this shows the robust planning that the task force hopes to support on the community level. She said the TAAs will serve the following regions: Southcentral, Interior, Southeast, Northern, and the Municipality of Anchorage.

[11:09:17 AM](#)

DR. ZINK expressed appreciation that the committee held the hearing to receive information and answers to questions the public may have posed about the vaccine. She said the goal is to be transparent and provide timely and accurate information about vaccines to Alaskans and Alaska decision-makers on an ongoing basis. She said there may be efficacious vaccines but to be effective it has to get out to people.

She directed attention to slide 31 that has a link to a recent public service announcement from the Centers for Disease Control (CDC) that talks about testing and production. She said the task force is also working to produce local announcements to ensure that direct questions are answered.

[11:10:13 AM](#)

DR. ZINK reviewed slide 32 that read as follows:

**<http://Covidvax.Alaska.gov>**

- Regular updates: Learn about vaccine availability
- Communications tools: Weekly updated written messages you can use to discuss COVID-19 vaccine in your community
- Learning opportunities: Weekly Thursday 2 PM publicly available virtual learning opportunity to stay informed about planning, distribution and vaccine science
- Planning resources: Healthcare stakeholder and community partner resources

DR. ZINK said the last few slides have additional resources that the committee and public may find helpful. She offered to answer questions.

[11:11:08 AM](#)

CHAIR WILSON asked what the cost of vaccine is and who is paying for it.

MR. BOBO explained that the federal government is paying for the vaccine through Operation Warp Speed. There is no cost to the public, but providers may charge a fee to administer the vaccine and insurance companies will pay.

CHAIR WILSON asked how long the funding is expected to last.

MR. BOBO said his understanding is that the funding will last through all three phases of administering the vaccine. He said he didn't know what would happen after Phase 3.

[11:12:32 AM](#)

SENATOR SHOWER asked Dr. Zink if someone who received the vaccine and still contracted COVID-19 would be considered contagious.

DR. ZINK said the science and data is insufficient to say whether or not this vaccine will prevent the spread of the disease, but the hope is that an answer will be forthcoming very soon.

CHAIR WILSON asked if someone who gets COVID-19 after they receive the first vaccination should go ahead and get the second booster.

DR. ZINK answered that the expectation is that the emergency use authorization (EUA) will provide more clarity on that, but people are generally discouraged from getting vaccines when they are sick because their immune system is fighting the disease.

[11:15:27 AM](#)

SENATOR BEGICH asked if the resource materials listed on the last few slides were available in languages other than English. He noted that over 100 languages are spoken in his district alone.

MS. WALKER LINDERMAN replied the task force communications team is working to make translated materials available and the CDC already has documents available in different languages.

SENATOR SHOWER asked Dr. Zink to comment on the notion that a certain percent of the population must be vaccinated within six months to achieve broad immunity, and how that might work in Alaska. He also asked if there will be exemptions for individuals who do not wish to get the vaccine.

[11:18:13 AM](#)

DR. ZINK reiterated that the state has no intention to require anybody to take the vaccine. With regard to the question about herd immunity, she said somewhere between 60 and 70 percent of the population needs to have robust immunity to prevent ongoing transmission of the virus across the population as a whole. As to how long the vaccine will last, she said there isn't an answer to that question at this time. Six months into the trials is about the time it takes to see if the body builds innate immunity that it holds onto for a longer period as opposed to having to renew the vaccine on a regular basis. She said there is not a lot of concern about mutations because the virus has been fairly stable to this point.

DR. ZINK stated that the goal is to efficiently provide as much vaccine as possible to those who want to take it, given the limitations of production, allocation to the state, and distribution within the state. She said the data and science on the immunology is very reassuring at this point.

[11:20:30 AM](#)

CHAIR WILSON asked if there is a percentage of the population the department would like to see immunized.

DR. ZINK said herd immunity is achieved when 60 to 70 percent of the population has a significant degree of immunity. The vaccine is a significant tool to achieve that immunity and therefore the goal of the health and wellbeing of Alaskans. She said a lot has been learned about the immunology of this disease and the department will continue to monitor it closely moving forward.

SENATOR BEGICH said he, too, has heard concerns about a vaccine mandate and he wanted to point out that even President-elect Biden indicated that there would be no mandate, but people should "do the right thing." He suggested all legislators reassure constituents that there is no mandate but that people take a vaccine to stay safe.

[11:23:13 AM](#)

CHAIR WILSON reiterated that the committee is not taking an official stand on the vaccine but is trying to provide information.

He asked Dr. Zink to respond to the concern about whether the vaccine will in some way alter a person's DNA.

DR. ZINK emphasized that the vaccine will not alter a person's DNA. She explained that DNA is transcribed into RNA that makes proteins and this messenger RNA (mRNA) cannot get into the nucleus or mitochondria where DNA lives.

CHAIR WILSON asked if the vaccines are made of fetal material.

[11:24:36 AM](#)

DR. ZINK replied neither Pfizer nor the Moderna use fetal material to develop these vaccines.

[11:24:48 AM](#)

CHAIR WILSON asked if there is any type of micro-chip tracking device contained in the vaccine.

DR. ZINK replied there is no tracking associated with these vaccines. She said the CDC will be offering an app for people to monitor their symptoms, but that is as close as it gets to tracking.

[11:25:17 AM](#)

CHAIR WILSON asked if she had any reason to believe the vaccine poses a risk to fertility.

DR. ZINK answered no; there are no concerns about fertility related to these vaccines. However, COVID-19 is a vascular disease and increasing data indicates the disease itself may cause vascular problems, which can cause fertility challenges.

[11:26:04 AM](#)

CHAIR WILSON asked how likely it is that a person will have severe side effects from the vaccine.

DR. ZINK said that in the first two months, neither test group had any significant side effects or allergic reactions. One vaccine trial had over 30,000 participants and another had over 40,000 participants. She added that the basis for RNA vaccines have been studied for a long time and are thought to be among the safest platforms available.

[11:27:08 AM](#)

CHAIR WILSON asked if mRNA vaccines are new and how people know they are safe.

DR. ZINK answered that mRNA vaccines have been around for some time but there has not been a widely spread mRNA vaccine used in the past because of efficacy concerns - making the mRNA stable enough that it works well once it is in the body.

[11:28:44 AM](#)

CHAIR WILSON asked if <http://covidvax.alaska.gov> was the best website for people to visit if they want more information or have questions.

MS. WALKER LINDERMAN answered yes; it is the best website to get up to date information.

CHAIR WILSON thanked the presenters and asked Ms. Wing-Heir if she had any comments.

[11:30:13 AM](#)

LORI WING-HEIER, Director, Alaska Division of Insurance, stated that the taskforce has worked very hard to make the vaccine available to Alaskans as soon as possible. She expressed hope that it would help turn the corner for Alaska once it is available.

[11:30:49 AM](#)

There being no further business to come before the committee, Chair Wilson adjourned the Senate Health and Social Services Standing Committee meeting at 11:30 a.m.