



MEMORANDUM
HEALTH AND HUMAN SERVICES
PUBLIC HEALTH
County of Placer

TO: Board of Supervisors

DATE: March 30, 2021

FROM: Robert Oldham, MD, MPH, Director of Health and Human Services

SUBJECT: MOU with California Government Operations Agency for Vaccine Distribution

ACTION REQUESTED

Approve a non-monetary Memorandum of Understanding (MOU) with California Government Operations Agency related to vaccine allocation guidelines and authorize the Director of Health and Human Services to sign the amendment with Risk Management and County Counsel concurrence, and to sign subsequent amendments consistent with subject matter and scope of work with Risk Management and County Counsel concurrence.

BACKGROUND

Since late December 2020, local health departments have played a critical role in the distribution of COVID-19 vaccines to the public. Placer County has been recognized as one of the leading counties in California in terms number of doses administered per capita. In addition, Placer County has been able to offer vaccinations to priority populations across the county and in close alignment with the State's eligibility guidelines.

Approximately one-third of all vaccines administered have been administered at our Placer County HHS-run clinic at the Placer County Fairgrounds (@ the Grounds) in Roseville. Approximately another third of total doses have been administered by a network of more than 20 pharmacies and other providers created and managed by Placer County HHS. The remaining doses (approximately one-third of all doses administered) have been administered by Kaiser Permanente and Sutter Health, who receive vaccine allocations directly from the State of California.

The supply of vaccines allocated from the federal government through the State of California continues to be the primary factor that limits the rate of vaccine distribution in Placer County. Our locally-managed network has the capacity to deliver far more doses than it currently receives. Many existing providers could deliver more doses if allocations from the state were to increase. In addition, there are more providers who have indicated that they would be interested in providing vaccine to their patients if there were a more regular vaccine supply, particularly as required vaccine-related data systems and handling requirements become less burdensome for small providers.

In late January, the state announced that it was establishing a California COVID-19 Vaccination Network to be operated by a third-party administrator (TPA) that would allocate vaccines directly to providers, and that all providers and local health departments would have to contract with the TPA in order to receive vaccine allocations. Local health departments were directed by CDPH not to add any new providers to local-managed networks in anticipation of this transition.

It was hoped that the TPA would be successful at adding new providers to locally-managed networks. However, it does not appear that the TPA has been successful at contracting with large numbers of new providers not previously in locally-managed networks. In addition, many existing vaccine providers and counties have not able to come to agreement with the TPA on contract terms. This stalemate created uncertainty about the future of the vaccine-delivery network during a phase of the pandemic that requires a very strong network. As a result, counties successfully negotiated an MOU and clarifying letter from the California Government Operations Agency (CalGovOps) that clarifies the county's role in vaccine distribution and allows counties to continue receiving vaccine allocations without contracting with the TPA. This letter further assures counties that:

1. CalGovOps shall ensure that the TPA consults with the County before making any allocation recommendations.
2. CalGovOps' allocation decisions shall be concurrently communicated to the County/LHJ and TPA.
3. The County using its discretion and subject to approval of the Agency, may distribute portions of vaccines allocated to the County to County-supported sites.

Based on these assurances from CalGovOps, HHS recommends moving forward with signing the proposed MOU.

FISCAL IMPACT

Potential fiscal impact projections related to COVID-19 were shared during the FY 2019-20 3rd Quarter Fiscal Update before the Board on April 21, 2020.

The MOU is on file with Clerk of the Board.