

Regence BlueCross BlueShield of Oregon presents:
What you need to know about the COVID-19
vaccines and health care in 2021



FAQs from webinar presentation on February 4, 2021

General

Q: Who pays for the vaccine?

A: Currently, the vaccine won't cost consumers anything regardless of insurance coverage. The federal government is buying enough vaccine doses to immunize every American. The Centers for Medicare and Medicaid Services or private insurance pays for the administration. Grandfathered plans may pass administration costs on to their members.

Q: What is the anticipated impact of COVID-19 on health plan rates?

A: While is too early to tell if COVID will have an impact on rates, we estimate very little to no impact.

Q: What is the difference in cost between the COVID-19 vaccines vs. the flu shot?

A: The administrative fee for the flu vaccine is around \$7 versus the fee for administering the COVID-19 vaccine, which is currently around \$45.

In addition to the administrative fee and vaccine costs will vary based on manufacturer pricing. At present, all drug costs for COVID-19 vaccines are being covered by the government whereas an ASO group would pay drug costs for flu vaccine.

Q: What is the status on vaccine options, including efficacy rates and FDA approval of each (including those in the pipeline)?

A: We follow the [New York Times vaccine tracker](#) for the latest on vaccines and suggest you do too.

Q: How do we determine eligibility and timeline for scheduling?

A: For the most accurate and up-to-date information on vaccine eligibility, the best source is the [Oregon Health Authority](#). Visit the OHA website for information about vaccine prioritization and distribution in Oregon.

Q: Does blood type make a difference with how hard you are hit with COVID-19?

A: This is currently unclear; more scientific studies are needed in this area.

Q: What steps do we need to take to ensure that everyone understands the importance of being vaccinated?

A: Lead by example. Everyone can contribute to community health by:

- Practicing the three Ws: wear a mask when in public, wash hands frequently, watch your distance from those outside your household.*
- Stopping the spread of misinformation. Check your information sources before sharing information about the pandemic with anyone. When in doubt, rely on your state health department, the FDA or the CDC.*

Safety & Efficacy

Q: What is the length of efficacy for the various COVID-19 vaccines?

A: Medical experts do not know for sure. The CDC will be your best source of information about vaccines for COVID-19.

Q: Do we have a choice of vaccine, and which is best?

A: Medical experts advise getting whichever vaccine is available to you. They all protect against serious illness and death.

Q: Is it a live vaccine? Does it provide immunity, or just protect against severity?

A: The current vaccines do not contain the corona virus or inactivated virus. NPR offers a great explanation on what vaccine efficacy means. Getting vaccinated can dramatically reduce the chance of you getting COVID-19. If you still get infected and have symptoms, the vaccine can protect you against serious illness. Currently with people who've been vaccinated and still contracted COVID-19, the death rate is zero and one person was hospitalized.

Q: How can we trust the clinical trials – were they done for long enough?

A: Vaccines are developed by teams of world-class scientists with many years of education and experience. All vaccines undergo extensive safety trials. We refer people to the New York Times vaccine tracker for a plain language explanation of how vaccines are developed and what phase COVID-19 vaccines are currently in.

Vaccines undergo rigorous clinical trials to prove safety and effectiveness before they receive approval from the Food and Drug Administration (FDA) for broad distribution. Clinical trials involve tens of thousands of people who volunteer to receive the vaccine. The FDA grants emergency use authorization only if independent analysis confirms the vaccines are safe and effective.

The Pfizer and Moderna vaccines have an effectiveness rate of more than 95%. While these vaccines are new, the technology behind them has been studied for years.

The vaccine does not contain the virus or inactivated virus. You cannot get COVID-19 from the COVID-19 vaccine.

Q: Regarding the Pfizer and Moderna vaccines; does your second dose have to be the same type as the first?

A: We suggest following CDC recommendations: “The safety and efficacy of a mixed-product series have not been evaluated. Both doses of the series should be completed with the same product.”

Q: Are the current vaccines effective against the new strains? Are they being tested and/or modified to respond?

A: The emergence and transmission of virus strains is highly dynamic. We suggest referring to the CDC for the most current information on virus strains.

Q: What are the short-term side effects of the vaccines?

A: The majority of people will experience no side effects other than a sore arm. About 10% may have flu like symptoms for a couple of days as the body develops antibodies. This is normal and generally not cause for alarm. A small number of people have had a very serious reaction (anaphylaxis) that is treatable. Currently anyone receiving a vaccine is asked to stick around for a 15 to 30-minute observation period just to be safe. There have been no reported deaths as a result of getting the COVID-19 vaccine.

Q: What are the long-term side effects of the vaccines?

A: The CDC offers an excellent resource on vaccine safety and monitoring.

Q: Once a person is vaccinated, can they still transmit the virus?

A: Medical experts do not yet know. It's best to continue practicing safety protocols: masking, distancing, washing hands frequently.

Q: Does the vaccine change your DNA? Or cause a gene mutation in humans?

A: No.

Q: Is J&J also an mRNA vaccine?

A: No. J & J is not a mRNA vaccine but a vector-based vaccine using a modified adenovirus using a double stranded DNA to cause the host cell to produce mRNA and spike proteins resulting in an immune response (antibodies) ready to attack a COVID-19 virus.

How the Johnson & Johnson Covid-19 Vaccine Works - The New York Times (nytimes.com)

Q: Is it true that there are nanoparticles contained within these injectable technologies?

*A: Yes. The Novavax is an example of such a vaccine technology. *How the Novavax Covid-19 Vaccine Works - The New York Times (nytimes.com)**

Q: What is the status of vaccine development for children under 16?

*A: According to the *Mayo Clinic*, "Several companies have begun enrolling children as young as age 12 in COVID-19 vaccine clinical trials. Studies including younger children will begin soon."*

Q: Is there anyone who shouldn't get the vaccine?

A: Please consult with your doctor if you have any questions about getting vaccinated, whether related to allergies, pregnancy, or other medical or health conditions.

Q: What alternatives are available outside of taking these "experimental vaccines?"

A: Clinically we would not consider these approved vaccines as experimental since they have completed the research. They are all new but not experimental.

Medical evidence shows that getting a COVID-19 vaccination can help keep you, your family, your community, and your country healthy and safe. By getting vaccinated, you can act to help end the damage to the economy, prevent more illness and deaths in America, and eliminate COVID-19.

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Q: What plans are being discussed with Regence in regard to the use of Ivermectin?

A: Regence health plans cover FDA-approved treatment for COVID-19. Ivermectin is not approved for the prevention or treatment of COVID-19. The clinical evidence is very mixed with Ivermectin and there are no national recommendations for the use of Ivermectin in the management of CV19 infection.

After the vaccination

Q: Is it still necessary to wear a mask after receiving the vaccine?

A: Yes, please keep practicing safety protocols until the majority of people in your community have been vaccinated.

It takes a few weeks for your body to build up immunity after vaccination. In addition, while the vaccines have a high efficacy rate for preventing serious illness, you may still be susceptible to getting the virus and transmitting it to others.

As the virus mutates, the original vaccines may also not be as effective. Therefore, continuing diligence with public health measures will remain important until the incidence of new viral cases is minimal.

Check with your state or local health department on safety protocols for your community.

Q: How long before no more need for masks and social distancing?

A: That really depends on us. If we continue to mask up, keep our distance, wash hands frequently, we will help stop the virus from spreading. Most experts anticipate fall/winter of 2021 as vaccinations ramp up and public health safety measures continue. Your state and local health departments will be your best source of information about community safety protocol.

Q: What are the metrics and anticipated timeline for herd immunity from COVID-19?

A: Medical experts do not know for sure. Herd immunity occurs when the vast majority of a population is immune from an infection. For highly infectious viruses such as measles, herd immunity occurs when 92 – 94% of the population is immune. At 70 – 80% herd immunity, we would start to see a reduction in case rates. The CDC will be your best source of information about herd immunity for COVID-19.

Q: I've heard that people that have survived COVID-19 feel they have protection and may not need a vaccine. Can you address this?

A: If it's been more than 90 days since you've had COVID-19, medical experts recommend getting vaccinated. It is unclear how long natural immunity lasts.

Reinfection with COVID-19 is occurring and many times with more severe symptoms than the initial infection.

Workplace

Q: Are there any opportunities for onsite vaccination clinics? (like with the flu shot)

A: Not at this time.

Q: Can we require employees to be vaccinated before returning to onsite work? And require proof of vaccination?

A: Please consult your legal counsel.

Q: How can we encourage or incentivize our employees to get the vaccine?

A: Please consult your legal counsel.

The recording of the full webinar is available for playback and future reference [here](#). If you need ongoing updates related to COVID-19 and our efforts to support you at this time, please contact your account manager.

Additional Resources:

[Centers for Disease Control and Prevention \(CDC\)](#)

[World Health Organization \(WHO\)](#)

[New York Times vaccine tracker](#)

[Oregon Health Authority](#)