

STATE OF TENNESSEE DEPARTMENT OF HEALTH

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BILL LEE GOVERNOR

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RE: Vaccine Administration in Tennessee

Dear hospital leaders:

Thank you for your continued partnership and commitment to providing care for Tennesseans. Though the pandemic continues to place incredible strain on your staff and operations, we share the hope that this pressure will subside as more Tennesseans have access to COVID-19 vaccines.

To that end, the Tennessee Department of Health is focused on equitable and accessible vaccination administration statewide, and Tennessee has been a leader in administering doses received from the federal government. However, as you are aware, COVID-19 vaccine supply continues to be limited, with demand far exceeding supply.

As we transition to age-based criteria and phases beyond healthcare workers, our strategy is focused on implementing the most efficient and convenient delivery methods to serve the population currently in phase. In addition to local health department efforts, TDH is launching several new access points statewide, including certain pharmacies, rural health clinics, and community health centers. Hospitals may continue to be an important access point, and—in partnership with local health departments—vaccine supply is still being directed to hospitals in some areas each week to serve the community.

For hospitals to receive vaccine supply for persons beyond Phase 1a, the following conditions apply:

- Site(s) must be community-based, facilitating both access and equity
- Current county age-based and phase eligibility must be followed
- Access may not be limited to hospital/system patients and efforts must be made to reach patients outside of the healthcare system
- Provide access without regard to payor. Balance billing patients is prohibited.
- Collect and report all TDH and CDC-required data fields
- Exhaust allocation within one week
- Provide second doses, regardless of first dose location (except in cases of vaccine manufacturer mismatch)

We understand the limited and unpredictable nature of vaccine supply makes planning difficult and may cause this to be impractical for your hospital at this time. In that case, we would still welcome your participation when circumstances change with respect to vaccine supply and broader eligibility.

Sincerely,

Lisa Piercey, MD, MBA, FAAP

Commissioner