



COVID-19 Vaccination Management for Employers

February 24, 2021



Today's Agenda of Panelists

9:00 – 9:05 **Jeff Kluever**
Executive Director, Business Health Care Group
Welcome & Opening Remarks

9:05 – 9:35 **Jon Meiman, MD**
*Chief Medical Officer and State Epidemiologist
for Environmental and Occupational Health,
Wisconsin Department of Health Services*

Stephanie Schauer, PhD
*Immunization Program Manager, Wisconsin
Division of Public Health*

9:35 – 10:10 **Lindsey Davis**
*Partner, Labor & Employment & Practice Group,
Quarles & Brady LLP*

10:10– 10:20 **Jim Sheeran**
*Director, Corporate Benefits, Molson Coors
Beverage Company*

10:20 – 10:40 **Margaret Hennessy, MD**
*Medical Director, Ascension Medical Group
Wisconsin & Physician Leader, Ascension
Wisconsin COVID-19 Vaccine Operational
Planning Team*

10:40 – 11:00 **Cheryl DeMars**
CEO, The Alliance
Questions & Closing Remarks

Jon Meiman, MD

*Chief Medical Officer and State Epidemiologist for
Environmental and Occupational Health*
Wisconsin Department of Health Services

Stephanie Schauer, PhD

Immunization Program Manager
Wisconsin Division of Public Health



COVID-19 VACCINATION INFORMATION FOR EMPLOYERS

Division of Public Health
Wisconsin Department of Health Services

Jonathan Meiman, MD
DHS Chief Medical Officer

Stephanie Schauer, PhD
Immunization Program Manager

OVERVIEW OF TODAY'S TALK

- January 15, 2021 webinar provided overview of COVID-19 workplace safety
- Today's webinar will focus on vaccines
 - Part 1 (Schauer): Vaccine updates
 - Part 2 (Meiman): Employer considerations during workforce vaccination

Vaccine Updates



Currently Authorized Vaccines

- **There are currently 2 vaccines which have received Emergency Use Authorization (EUA)**
 - Pfizer BioNTech
 - Moderna
- **mRNA vaccines**
- **Require two doses for full protection**
 - Pfizer, 21 days apart
 - Moderna, 28 days apart

Currently Authorized Vaccines

- Johnson and Johnson (Janssen) has submitted an application for EUA
- Will be reviewed by FDA on February 26
- Only a single dose is needed
- If authorized, the vaccine could be available in early March, but likely the number of doses available will be limited initially

What are mRNA vaccines?



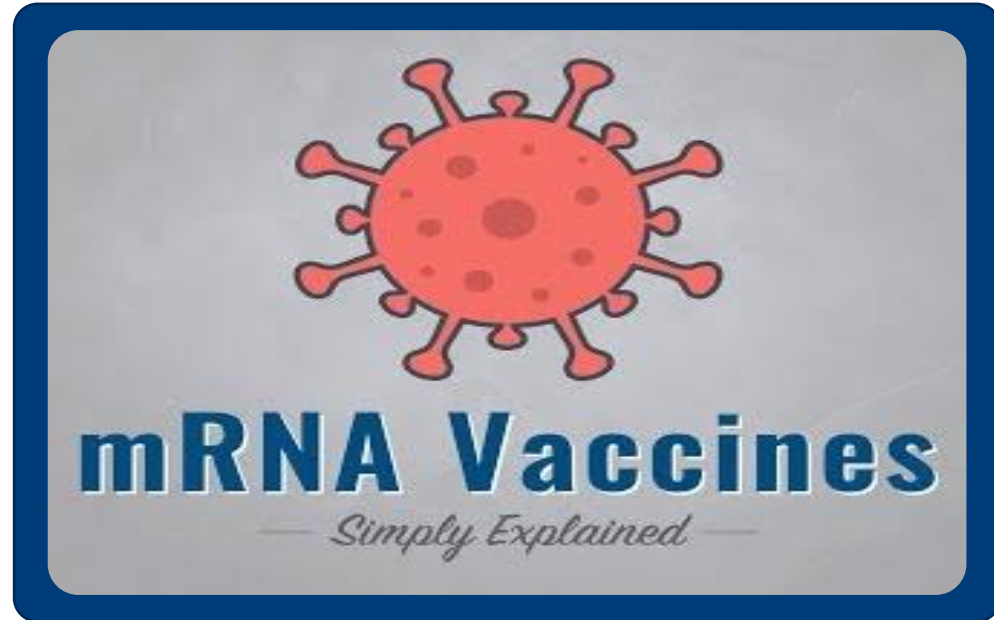
They carry genetic material that teaches our cells how to make a harmless piece of “spike protein,” which is found on the surface of the COVID-19 virus.






Cells display this piece of spike protein on their surface, and an immune response is triggered inside our bodies.



This produces antibodies to protect us from getting infected if the SARS-CoV-2 virus enters our bodies.



Facts about mRNA vaccines

-  Genetic material from the vaccine is destroyed by our cells once copies of the spike protein are made and it is no longer needed.
-  They do not affect our DNA; mRNA does not enter the cell nucleus.
-  mRNA vaccines are faster to produce than older technology vaccines.

What vaccine side effects can I expect?



The common side effects include: fever, chills, body aches, and soreness at the injection site.



It is normal to have these, and is a sign that your body is building protection to the virus.



Most side effects go away in a few days. The likelihood of a severe side effect is less than 0.5%.

Some individuals are reporting more side effects after the second dose or if they have had COVID-19 disease.

Emergency Use Authorization

- Vaccine approval is driven by science
- The vaccines are going through all same steps in the trial phases that all vaccines go through for full FDA licensure
- The vaccines were tested in large clinical trials to make sure they met safety and efficacy standards.
- Thousands of people of different ages, races, ethnicities and medical conditions were recruited to participate in the trials.
- The vaccines continue to be monitored through a variety of systems.

How do we know the vaccines are safe?



CDC and FDA continuously track the safety of vaccines after they get authorized or approved.

These systems have been around for a long time:

- [Vaccine Adverse Event Reporting System \(VAERS\)](#)
- [Vaccine Safety Datalink \(VSD\)](#)
- [Clinical Immunization Safety Assessment \(CISA\)](#)
- [Biologics Effectiveness and Safety System \(BEST\)](#)

CDC also added [v-safe](#), a new smartphone-based health checker, to make it even easier for people to report any health problems after they get their COVID-19 vaccines.

Eligible Groups



Currently Eligible

Began 12/14/2020

- **Frontline health care personnel** (who provide direct patient care with patients who can transmit SARS-CoV2 and/or infectious materials)
- **Residents and staff in skilled nursing and long-term care facilities** (incl. Skilled Nursing Facilities & Assisted Living Facilities)

Began 1/18/2021

- **Police and fire personnel, correctional staff**

Began 1/25/2021

- **Adults ages 65 and over**

Next Eligible

Starting 3/1/2021

- **Educators** (incl. childcare and higher ed.)
- **Individuals enrolled in Medicaid LTC programs** (IRIS, FC, Katie Beckett and Children's LTC Waiver)
- **Mink husbandry**
- **Public-facing essential workers** (incl. 911, utility, public transit, food chain)
- **Non-frontline health care personnel**
- **People who live in congregate settings** (incl. including shelters, supported and transitional housing, employer-provided housing, & correctional institutions)

Future

To be determined

- **Other essential workers**
- **People with high-risk medical conditions**

To be determined

- **General Public**

**YOU
STOP
THE
SPREAD**



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Educators and Child Care

- All staff in regulated childcare, public and private school programs, out-of-school time programs, virtual learning support, and community learning center programs.
- All staff in Boys and Girls Clubs and YMCAs.
- All staff in preschool and Head Start through K-12 education settings.
- Faculty and staff in higher education settings who have direct student contact.

Public-Facing Essential Workers

- **9-1-1 operators**
- **Utility and Communications Infrastructure:**
 - Workers who cannot socially distance and are responsible for the fundamental processes and facilities that ensure electric, natural gas, steam, water, wastewater, internet, and telecommunications services are built, maintained, generated, distributed, and delivered to customers.

Public-Facing Essential Workers

Public Transit

- Drivers who have frequent close contact with members of the public, limited to:
 - Public and commercial intercity bus transportation services.
 - Municipal public transit services.
 - Those employed by specialized transit services for seniors, disabled persons, and low-income persons.

Public-Facing Essential Workers

Food Supply Chain:

- Agriculture production workers, such as farm owners and other farm employees.
- Critical workers who provide on-site support to multiple agricultural operations, such as livestock breeding and insemination providers, farm labor contractors, crop support providers, and livestock veterinarians.
- Food production workers, such as dairy plant employees, fruit and vegetable processing plant employees, and animal slaughtering and processing employees.

Public-Facing Essential Workers

Food Supply Chain (cont):

- Retail food workers, such as employees at grocery stores, convenience stores, and gas stations that also sell groceries.
- Hunger relief personnel, including people involved in charitable food distribution, community food and housing providers, social services employees who are involved in food distribution, and emergency relief workers.

Non-Frontline Essential Health Care Personnel

- Personnel who are not involved in direct patient care but are essential for health system infrastructure. These staff are often affiliated with hospitals. Non-hospital employee and non-frontline employees employed by health systems are also included.
- **Categories of non-frontline essential health care personnel include:**
 - Public health
 - Emergency management
 - Cyber security
 - Health care critical supply chain functions, including the production, manufacturing, and distribution of vaccine.
 - Support roles

Congregate Living Facility Staff and Residents

- Staff and residents of congregate living facilities.
- Some settings in this group may be non-voluntary or provide services to marginalized populations – meaning residents do not have the resources or choice to mitigate exposure.

Prioritization

- Vaccine providers are strongly encouraged to continue with currently eligible populations (e.g. individuals 65 years and older, unaffiliated healthcare providers)
- Of the March 1st eligible groups: Educators and childcare staff are the priority
- It will take time to get everyone in the newly eligible groups vaccinated and will depend on vaccine supply from the federal government.

Congregate Living Facility Staff and Residents (cont)

- Shelters: Shelter provided to those who are homeless and/or in need of protection (e.g., domestic violence shelters).
- Transitional housing: A project that is designed to provide housing and appropriate supportive services to homeless persons to facilitate movement to independent living when such facilities include shared bedrooms.
- Incarcerated individuals: Individuals in jails, prisons, and mental health institutes.

Vaccinating March 1 Eligible Groups

- Vaccination of March 1st eligible populations will be supported by
 - Local and Tribal Health Departments (LTHD)
 - pharmacy partners
 - hospitals and clinics
 - employers
 - home health agencies/community and commercial vaccinators
 - through State and Federal assistance in the form of
 - community-based vaccination clinics
 - mobile vaccination teams
- LTHD are coordinating efforts in local jurisdictions.

Website Resources

The screenshot shows the Wisconsin Department of Health Services website. At the top, there is a search bar and a navigation menu with categories like 'About DHS', 'Data & Statistics', 'Diseases & Conditions', 'Health Care & Coverage', 'Long-Term Care & Support', 'Prevention & Healthy Living', 'Partners & Providers', and 'Certification, Licenses & Permits'. Below the navigation is a 'Topics A-Z' bar. The main content area features a 'COVID-19: Vaccine' page. On the left is a sidebar menu with options like 'You Stop the Spread', 'Symptoms of Illness', 'Testing', 'Vaccine', 'Diagnosed', 'Close Contacts', 'Higher Risk Groups', 'Contact Tracing', 'Resilient Wisconsin', 'New Career', 'Making Safe Choices', 'Language, Graphics, & Print', 'Impacts on DHS Programs', 'Health Care Professionals & Residential Care Facilities', 'Safer Businesses & Communities', and 'Wisconsin Data'. The main content includes a 'COVID-19: Vaccine' section with a paragraph about equitable distribution, a 'Who is eligible for the COVID-19 vaccine?' infographic, and a 'Learn about COVID-19 vaccines' section with three sub-articles: 'Am I eligible?', 'Where to get vaccine', and 'After you receive the vaccine'. A 'Join our email list' button is at the bottom left of the page.

<https://www.dhs.wisconsin.gov/covid-19/vaccine.htm>



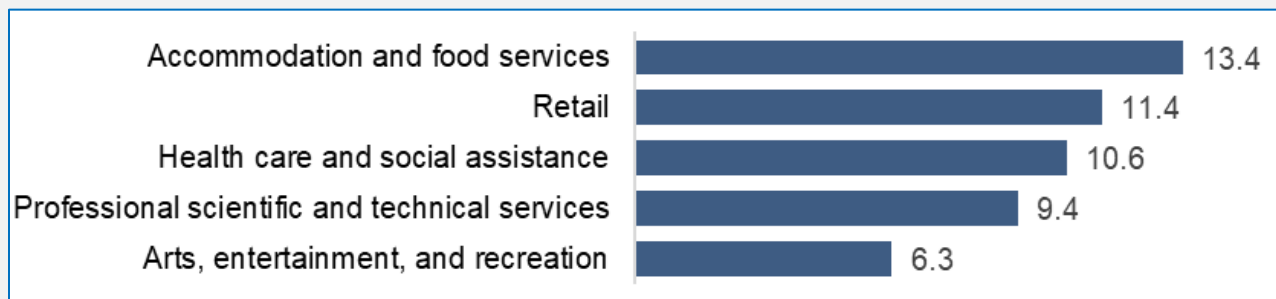
PART 2: WORKFORCE VACCINATION

VACCINATING THE WORKFORCE

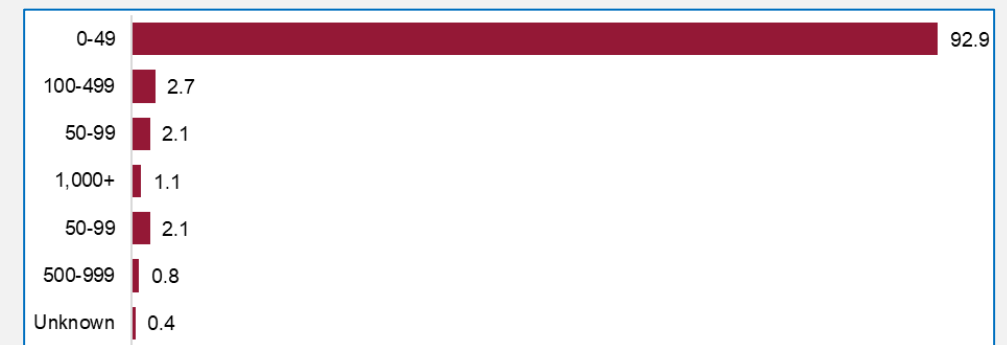
- How are Wisconsin employers approaching vaccination?
- What can employers do to encourage vaccination among workers?
- What are the practical considerations of workforce vaccination?

WEDC/DHS EMPLOYER SURVEY

- Anonymous online survey conducted through publicly accessible link
- January 19 – February 05
- 4,451 respondents



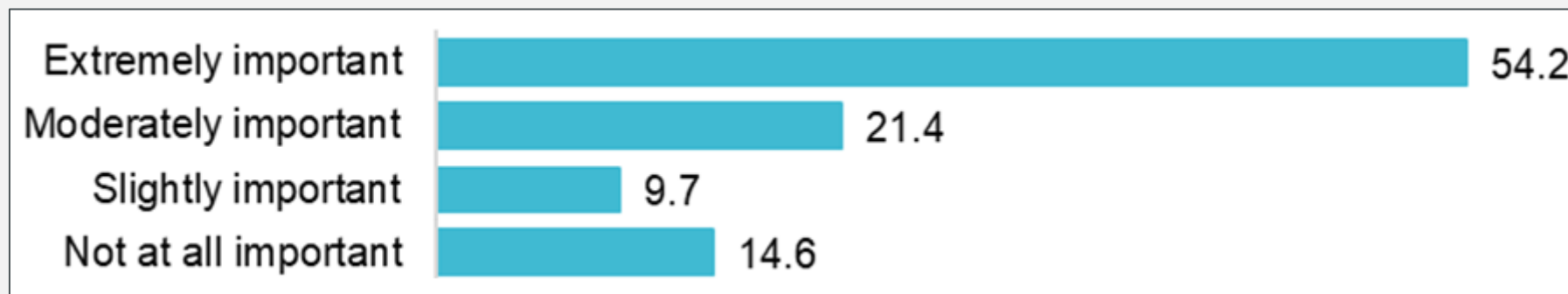
% respondents - top 5 industry sectors



% respondents - by workplace size

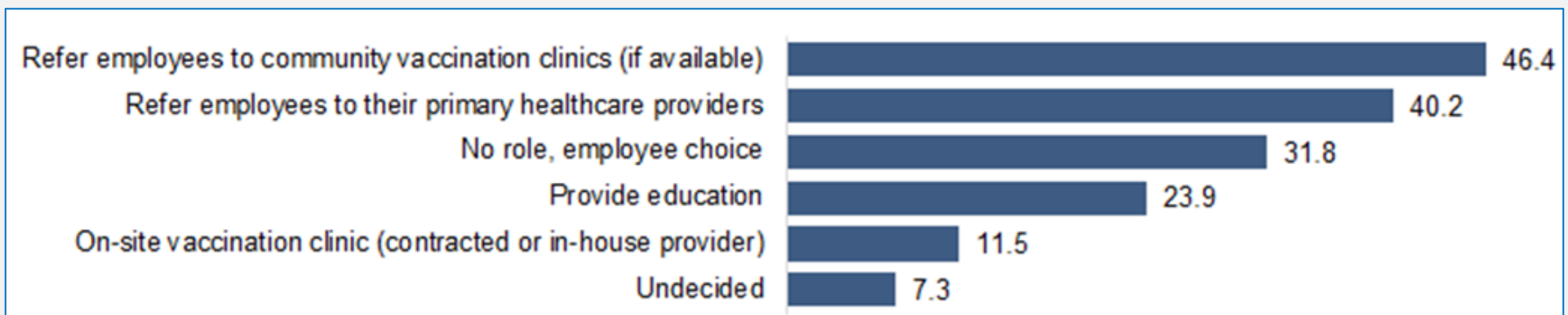
WEDC/DHS EMPLOYER SURVEY

Employer views on importance of workforce vaccination



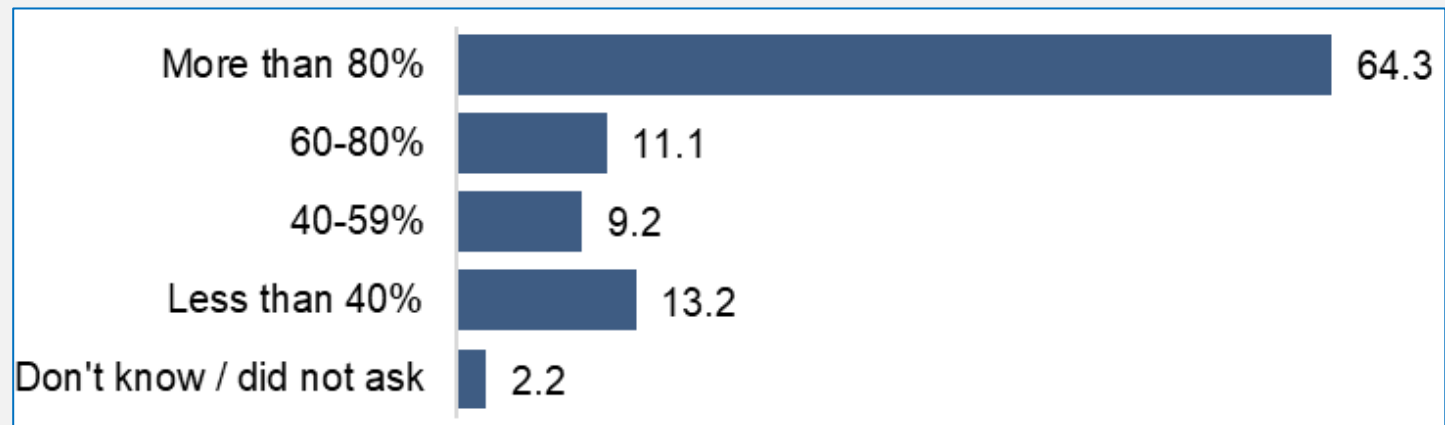
WEDC/DHS EMPLOYER SURVEY

Role of employers in vaccination



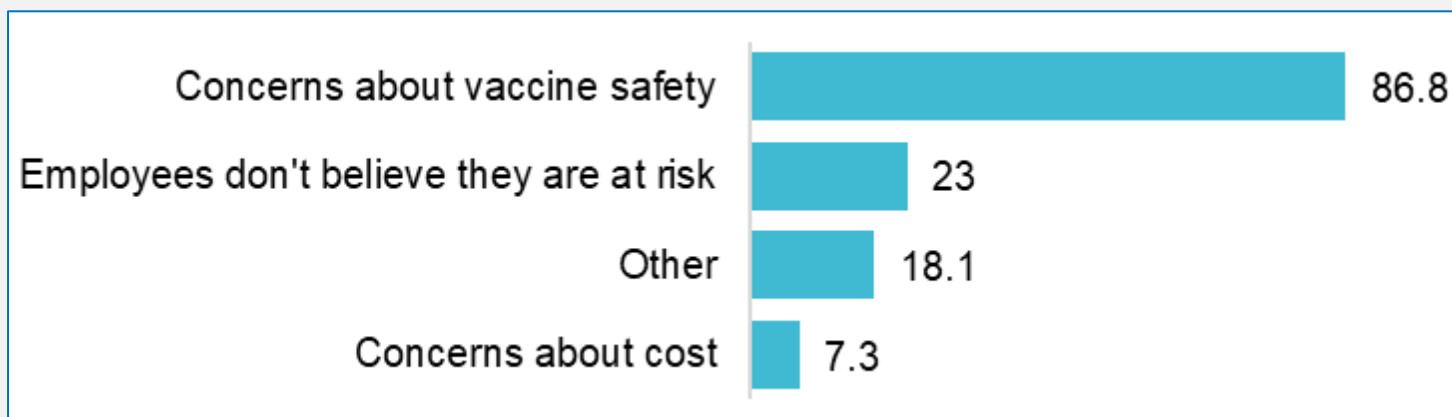
WEDC/DHS EMPLOYER SURVEY

Percent of workforce willing to be vaccinated (of employers who conducted worker surveys, n=859)



WEDC/DHS EMPLOYER SURVEY

Major drivers of vaccine hesitancy



WEDC/DHS EMPLOYER SURVEY

**Trusted messengers,
according to employers:**

- Local healthcare providers
- DHS / CDC / Local public health
- Company management

ENCOURAGING VACCINATION

What can employers do to encourage vaccination?

1. Provide education
2. Reduce barriers
3. Consider incentives

ENCOURAGING VACCINATION

Education

- **Utilize trusted messengers**

ENCOURAGING VACCINATION

Education

- Utilize trusted messengers
- **Address vaccine efficacy and safety**

Is it safe for me to get a COVID-19 vaccine if I would like to have a baby one day?

Yes. People who want to get pregnant in the future may receive the COVID-19 vaccine.

Based on current knowledge, experts believe that COVID-19 vaccines are unlikely to pose a risk to a person trying to become pregnant in the short or long term. Scientists study every vaccine carefully for side effects immediately and for years afterward. The COVID-19 vaccines are being studied carefully now and will continue to be studied for many years, similar to other vaccines.

The COVID-19 vaccine, like other vaccines, works by training our bodies to develop antibodies to fight against the virus that causes COVID-19, to prevent future illness. There is currently no evidence that antibodies formed from COVID-19 vaccination cause any problems with pregnancy, including the development of the placenta. In addition, there is no evidence suggesting that fertility problems are a side effect of ANY vaccine. People who are trying to become pregnant now or who plan to try in the future may receive the COVID-19 vaccine when it becomes available to them.



<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/facts.html>

ENCOURAGING VACCINATION

Education

- Utilize trusted messengers
- Address vaccine efficacy and safety
- **Use multiple channels**
(reading level, language)

Communicate with Your Employees

- [Introductory letter](#): Send this letter to encourage your branches, offices, or units to review and use the toolkit materials.
- [Letter to your employees](#): Customize this letter about COVID-19 vaccination to send to your staff.
- [Newsletter content](#): This short newsletter-style blurb can be widely distributed to share information on COVID-19 vaccines.
- [COVID-19 Vaccine Basics \(Slide Deck\) \[4 MB, 16 pages\]](#) *(also available in Spanish [4 MB, 16 pages])*: These basic slides about COVID-19 vaccines are for informational meetings within your organizations. You can use all or part of the set or also include your own organization's information.
- [Key messages](#): Use these key messages about COVID-19 vaccine to educate your employees.
 - [Printable Key Message](#) 📄 [401 KB, 2 pages]
- [Myths & Facts](#): Accurate COVID-19 vaccine information is critical. Share this credible and accurate information.
- [V-safe](#): Encourage your employees who are vaccinated to enroll in v-safe and get answers to the frequently asked questions about V-safe.

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/toolkits/essential-workers.html>

ENCOURAGING VACCINATION

Reducing barriers

- Support paid leave for COVID-19 vaccination in the community
- Support paid leave for employees with side effects
- Employer-sponsored vaccine clinics

ENCOURAGING VACCINATION

Providing incentives

CNN BUSINESS Markets Tech Media Success Perspectives Videos

Publix joins a growing list of grocers offering incentives for workers to get vaccinated

By [Jazmin Goodwin](#), CNN Business

Updated 5:25 PM ET, Sun February 21, 2021

<https://www.cnn.com/2021/02/21/business/store-chain-workers-covid-vaccine/index.html>

ENCOURAGING VACCINATION

Providing incentives

- Large body of scientific literature on vaccine incentives
- Randomized controlled trial* of >12,000 workers:
 - Incentive + education most effective for increasing flu vaccination
- Meta-analysis of influenza vaccination studies**
 - Incentives reduce unvaccinated healthcare workers ~30%

* Nowalk MP, Lin CJ, Toback SL, Rousculp MD, Eby C, Raymund M, Zimmerman RK. Improving influenza vaccination rates in the workplace: a randomized trial. Am J Prev Med. 2010 Mar;38(3):237-46. doi: 10.1016/j.amepre.2009.11.011. Epub 2009 Dec 24. PMID: 20036102.

** Siemieniuk R, Coleman B, Shafiz S, Al-Den A, Bornsten S, Kean R, McGeer A, Goodliffe L. Interventions to increase healthcare worker influenza vaccination: a meta-analysis. Poster ID1713 presented at the IDWeek2014. Advancing Science, Improving Care.

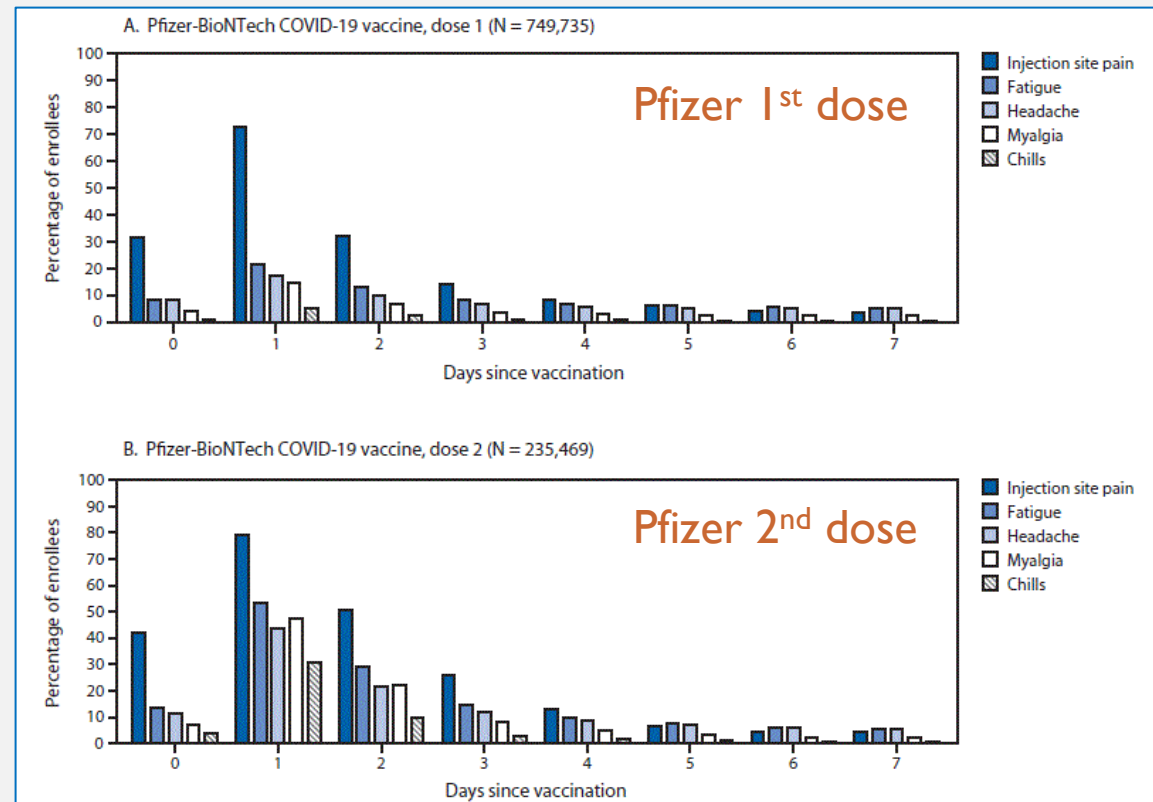
PRACTICAL CONSIDERATIONS

What are the practical considerations of workforce vaccination?

1. Vaccine side effects
2. Staggering vaccination
3. Quarantine for vaccinated workers
4. Continuing workplace safety measures

PRACTICAL CONSIDERATIONS

- Side effects are usually short-lived and minor
- Symptoms quickly subside after day 2
- Fever or fatigue, on occasion, may result in lost work time



PRACTICAL CONSIDERATIONS

Returning to work when side effects occur:

- **Fever, fatigue, chills, muscle aches**
 - Ideally employees should stay home until being evaluated.
 - Return to work when fever resolves and employee feels well enough to work
- **Caution** for symptoms that are unlikely to be from vaccine:
 - Cough, shortness of breath, sore throat, loss of taste/smell
 - Worker should be tested for COVID-19

PRACTICAL CONSIDERATIONS

Staggering vaccination:

Pros:

- Avoid possible sick leave of highly essential personnel
- Probably more important after 2nd dose of mRNA (Pfizer, Moderna) vaccine

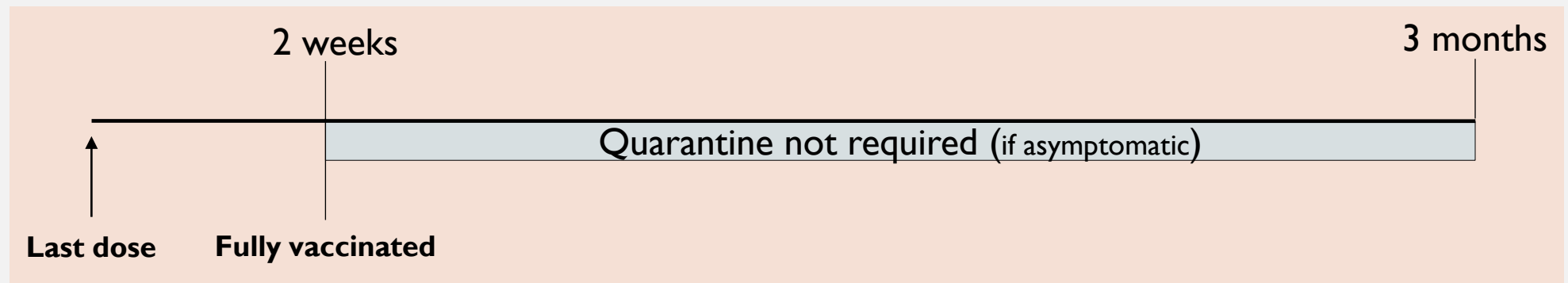
Cons:

- Logistically challenging with 2-dose series
- Could result in delays vaccinating workforce

PRACTICAL CONSIDERATIONS

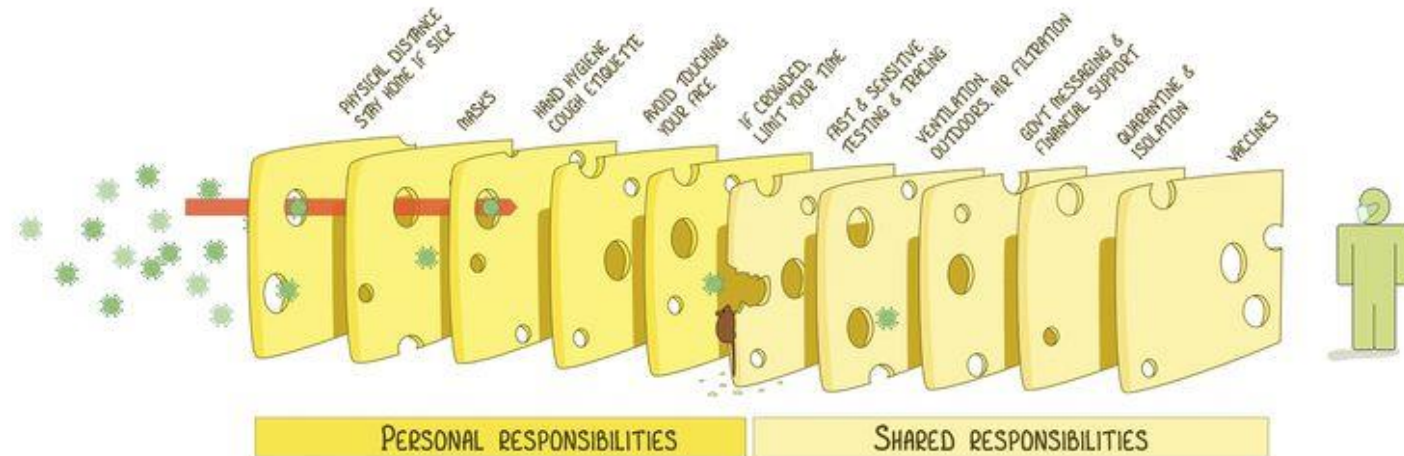
Quarantine after COVID-19 exposure not required if 3 criteria met:

- Fully vaccinated
- Within 3 months of last dose
- No symptoms



PRACTICAL CONSIDERATIONS

Maintaining workplace safety protections



EACH INTERVENTION (LAYER) HAS IMPERFECTIONS (HOLES).
MULTIPLE LAYERS IMPROVE SUCCESS.

PRACTICAL CONSIDERATIONS

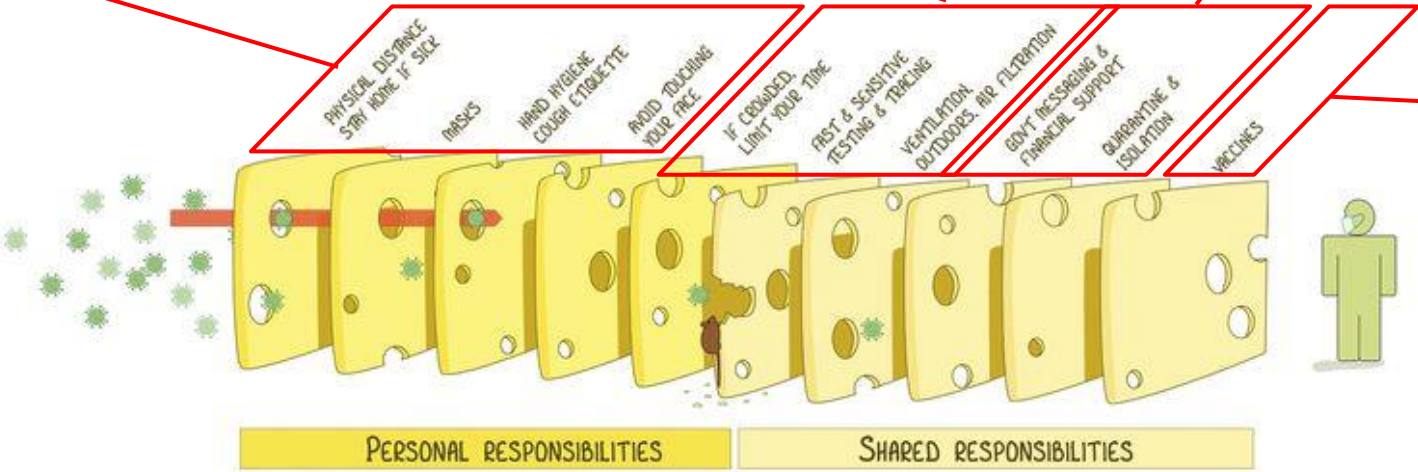
Maintaining workplace safety protections

Employee education
(being safe outside work)

Safe work environment

Managing COVID-19 in the workplace

Vaccination



PERSONAL RESPONSIBILITIES

SHARED RESPONSIBILITIES

EACH INTERVENTION (LAYER) HAS IMPERFECTIONS (HOLES).
MULTIPLE LAYERS IMPROVE SUCCESS.

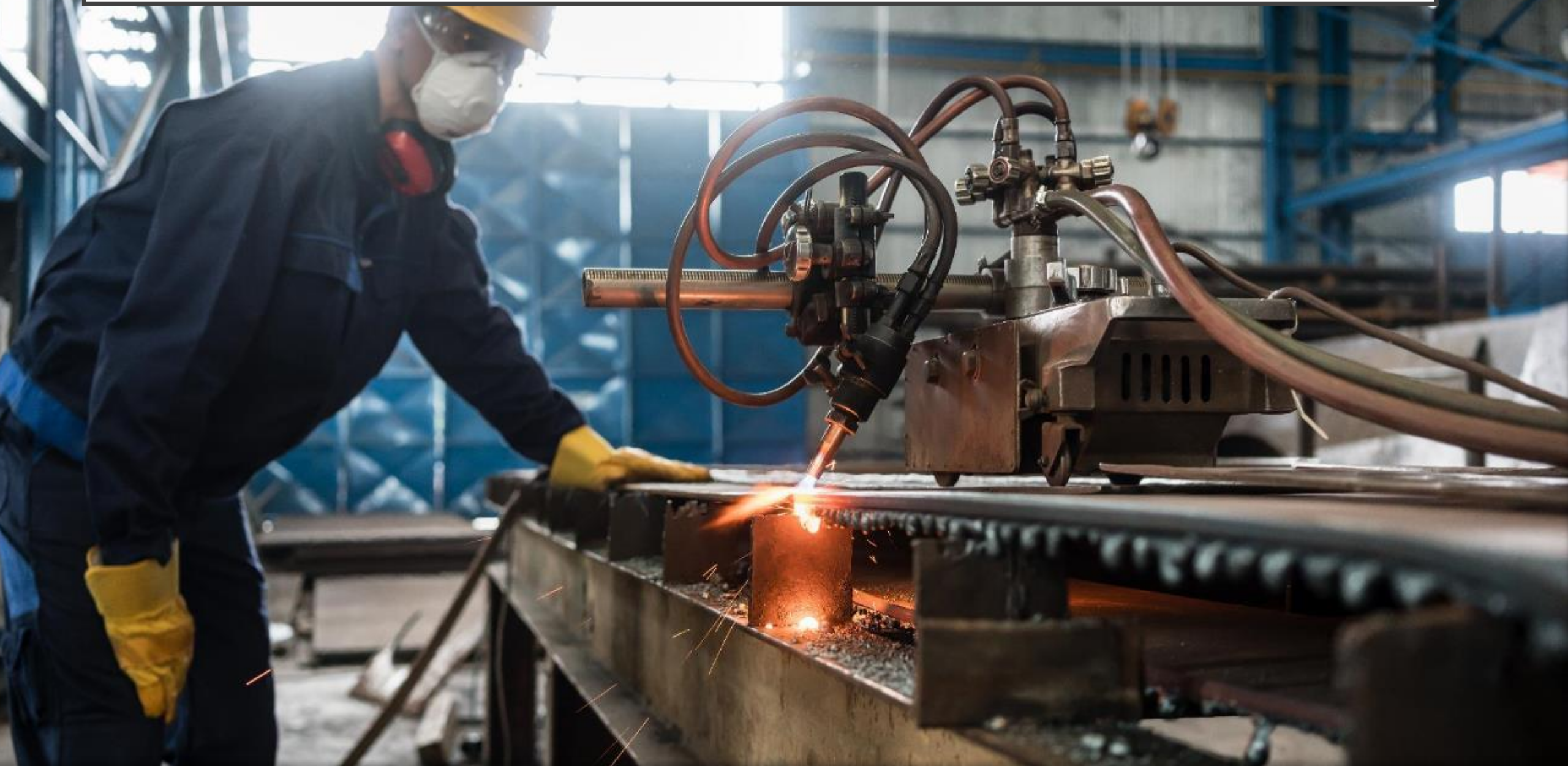
Law Dr. Tracey
VIRALOGYDOWNUNDER.COM
WITH THANKS TO JODY LAMARD, KATHERINE ANDER & THE UNIV. OF GLD
BASED ON THE SWISS CHEESE MODEL OF ACCIDENT CAUSATION, BY JAMES T. REASON, 1990
VERSION 3.0
UPDATE: 24oct2020

PRACTICAL CONSIDERATIONS

Maintaining workplace safety protections

- Keep masking, physically distancing, testing, tracing
- Safety measures will keep all workers healthy
- Need large fraction of the population vaccinated to get back to 'normal'

THANK YOU



RESOURCES

- <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/keythingstoknow.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/facts.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/toolkits/essential-workers.html>

Lindsey Davis

*Partner, Labor & Employment
Practice Group*
Quarles & Brady LLP





Employer Considerations For Selecting A Covid-19 Vaccination Program

Presenter: Lindsey Davis - Partner, Labor & Employment

February 24, 2021



Presenter



Lindsey Davis

Partner, Labor & Employment

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(414) 277-3073

Agenda

- **Options for Approaching Vaccination in the Workplace**
 - Compulsory Vaccination Programs
 - Employer-Encouraged Vaccination Programs
 - Voluntary Vaccination Programs
- **Considerations During Vaccination Rollout**
- **Anticipated Issues Following Widespread Vaccination Availability**



Compulsory Vaccination Programs

- **Positives of a Compulsory Vaccination Program**
 - Protect Workplace and Community Health
 - Reduce Costs of Absences, Lost Productivity, and Long-Run Medical Care
 - Open and Stay Open
 - Defend Against Civil Liability
 - Protect Against Enforcement Action



Compulsory Vaccination Programs cont.

- **Employers Who *Might* Consider a Compulsory Vaccination Program**

- Healthcare Industry
 - High level of contact between caregivers and patients likely vulnerable to COVID-19
- Dining and Hospitality Industry
 - CDC recommends that businesses close off any areas used by a sick person for 24 hours
- Customer-Serving Businesses
 - Stores may wish to require vaccines to increase likelihood that customers feel comfortable patronizing
- Businesses Where Employees Work in Close Proximity
 - Vaccination may lessen PPE-related friction between employees, and allow employers to eventually relax such requirements
- Educational Institutions and Daycares
 - Teachers and students spend a majority of the day together in enclosed, small learning environments
- Travel Industry
 - Due to high level of interface with the public, vaccination would protect employees and customers

Compulsory Vaccination Programs cont.

- **Negatives of a Compulsory Employer Vaccination Program**
 - Potential Employer Liability Related to Vaccine
 - Distrust of Vaccine
 - Need to Develop an Exemption Process and Consider Accommodations
 - Disciplining and/or Terminating Employees For Noncompliance

- **Employers Who *Might Not* Consider a Compulsory Vaccination Program**
 - Employers with a Union Presence
 - Employers in Less “High-Risk” Work Environments

Compulsory Vaccination Programs cont.

- **What To Do Now:**

- ✓ Determine how to track compliance and identify what proof of vaccination will be required
- ✓ Make a plan to process exemption requests (both medical and religious)
- ✓ Strategize how to build employee buy-in (including education) and plan for conflict diffusion
- ✓ Assess how to minimize (and if possible, eliminate) vaccination costs to employees
- ✓ Anticipate employee time off requests (i.e., related to fatigue and headache after vaccination)
- ✓ Consider any potential discriminatory impact of a narrowly tailored vaccination requirement (e.g., if vaccines are required only for employees who cannot telework)
- ✓ Create and communicate a vaccination policy

Employer-Encouraged Vaccination Programs

- **Positives of an Employer-Encouraged Vaccination Program**
 - Employee Morale and Retention
 - Administrative Ease
 - Less Liability Risk for Discrimination Claims
- **Employers Who *Might* Consider an Employer-Encouraged Vaccination Program**
 - Workplaces That Do Not Require Close Contact
 - Workplaces that Can Accommodate Remote Work, But Remote Work Arrangement is Winding Down



Employer-Encouraged Vaccination Programs cont.

- **Negatives of Employer-Encouraged Vaccination Programs**
 - Voluntary vaccination programs have *traditionally* had relatively low compliance
 - Widespread uncertainty and disinformation surrounding COVID-19, and vaccines in particular
 - Potential that incentives are deemed so enticing that they are coercive and/or discriminatory
- **Employers Who *Might Not* Consider an Employer-Encouraged Vaccination Program**
 - May not work well where employees have close contact with members of the public and/or vulnerable populations



Employer-Encouraged Vaccination Programs cont.

- **What To Do Now:**

- ✓ Do not fully (or perhaps at all) rely upon waivers
- ✓ Take a thoughtful approach to continued PPE and distancing requirements
- ✓ Consider "Carrots and Sticks" to encourage inoculation
- ✓ Create and communicate a vaccination policy

Voluntary Vaccination Programs

- **Positives of a Purely Voluntary Vaccination Program**
 - Avoids complicating factors associated with other vaccination programs, such as:
 - Legal Risks
 - EUA versus FDA licensure
 - Inquiring about employees' protected status
 - Offering incentives only to non-protected class
 - Administrative Costs
 - Practical Difficulties



Voluntary Vaccination Programs cont.

- **Employers Who *Might* Consider a Voluntary Vaccination Program**

- Industries whose workforces are primarily remote:

- Computer and Information Technology
- Account/Project Management
- Customer Service
- Consulting
- Marketing
- Finance

- Employers in compliance with public health guidelines and with no record of workplace outbreaks:

- Construction
- Transportation/Delivery

Voluntary Vaccination Programs cont.

- **Negatives of Voluntary Vaccination Programs**
 - Potential Legal Exposure
 - OSHA, Tort, or Workers' Compensation Claims
 - Harmful Business Implications
 - Diminished Employee Morale and Retention
- **Employers Who *Might Not* Consider a Voluntary Vaccination Program**
 - Employers with workforces with high risk of exposure
 - Healthcare
 - Education
 - Emergency Response
 - Public Transportation
 - Food Retail



Voluntary Vaccination Programs cont.

- **What To Do Now:**

- ✓ Distribute educational materials regarding the COVID-19 vaccine
- ✓ Create and communicate a vaccination policy



Predicting Potential Issues

- **Vaccination Policy Guinea Pigs:**
 - Healthcare industry
 - Education sector
- **Mix of Vaccination Programs**
 - Both mandatory and employer-encouraged
 - Dependent upon local COVID-19 threat levels
 - Prioritization of vaccinating persons at higher-risk
- **Reluctance From Some Employees**
- **CDC Guidance**
 - Strategies to minimize barriers to access (e.g., on-site or mobile clinics)
 - Messaging and outreach
 - Use of other COVID-19 safety measures (e.g., masking and distancing)
 - "Access to vaccination" should not be a condition to reopening



Anticipated Issues Post-Widespread Vaccination Availability

- **Open Issues:**

- Full FDA approval of vaccine
- Impact of vaccination on infection rates; likely variable by industry and location
- The extent to which employers can incentivize the vaccine
- How widespread vaccination availability will impact other COVID-19 safety protocols and workplace modifications

- **Next Steps:**

- Expect further guidance from the CDC and EEOC
- Monitor state and local law and industry-specific and local trends
- Remain vigilant and flexible
- When in doubt, connect with your local Quarles & Brady attorney

Thank you!



Lindsey Davis

Partner, Labor & Employment

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(414) 277-3073

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Jim Sheeran

Director, Corporate Benefits

**Molson Coors Beverage
Company**





A BHCWG Member Employer Perspective

Jim Sheeran
Director, Corporate Benefits
Molson Coors Beverage Company

Molson Coors – Covid-19 Response Framework

- Decision Making Framework

- Early in the pandemic, the company leveraged its crisis management framework to create a Covid-19 task force. This task force:
 - Monitors all aspects of the Pandemic with a specific focus on impacts to the business such as company covid-19 cases and quarantines by site, state by state requirements for bars/restaurant openings, brew pub sales of beer onsite, restrictions on office openings, state by state definition of essential workers for vaccine rollout etc.
- Keeps the senior leadership informed by 2x weekly meetings and requests approval for key decisions.

Covid-19 Policy Guardrails

- Covid-19 policies are guided by company values and our new organizational structure
 - Put People First
 - Consistent policies (to the extent possible) across the Americas
 - Canada
 - US
 - Latin America
- As essential business we have never shut down our breweries and in deference to that, we tend to prioritize the needs of our operations people over that of non-operational employees

Molson Coors Vaccine Policy

- Subject to change!
- We are not mandating the vaccine but are encouraging it
 - No FDA approval (Emergency Use Authorization only)
 - Not readily available
 - Ability to maintain social distancing within our operations
 - Not retail/consumer facing
 - Inability to have any real consequences in Canada
 - Company focus on D&I and recognition of cultural/historical differences in various groups receptivity to the vaccine
 - Overall human resource issues created via mandate
 - Union relationships

Molson Coors Vaccine Policy

- We will not provide special pay for persons getting the vaccine on company time
 - Already have a very generous PTO policy
 - Consistent with not mandating the vaccine
- We will not provide any special incentives to employees to get the vaccine
 - Leadership bias against simply paying people
 - Other incentives considered all created their own set of issues
 - Wellness program incentives
 - Extra vacation days
 - Gift cards, more free beer

Molson Coors Vaccine Policy

- We are working to facilitate employee knowledge of the vaccine
 - Company internet microsite with information (mainly from the CDC) and info on how to register for the vaccine
 - Leveraging our employee resource groups to specifically target certain groups to provide information and vaccine encouragement through respected and influential leaders
- Working with our onsite clinic vendors to acquire the vaccine at our clinics
 - Employee survey/registration
 - Lottery system of distribution, prioritizing operational employees
- Monitoring state requirements and providing information to the state when requested
 - Uploading employee name/email address into VAMS (With employee permission)
 - Working with local health systems and pharmacies to do onsite/near site vaccinations when employees are eligible based on
 - Will provide employee letters, if appropriate, validating their status as essential workers

Molson Coors Vaccine Pay Policy

- Amending Covid-19 leave and Pay Policy to accommodate potential side effects from the vaccine
 - Employees allowed up to 2 days off post vaccination with pay
 - Employee must show proof of vaccination
 - Symptoms must start within 24 hours of vaccination
 - Applies to both vaccinations
- Amending our quarantine process
 - Employees who show post vaccine symptoms that begin more than 24 hours post vaccination, or last more than 48 hours post vaccine will be treated as possibly covid-19 positive and will fall into our current risk assessment/contact tracing protocols
 - Employees who are exposed between 15 and 104 days after their second vaccine will not be quarantined

Margaret Hennessy, MD

Medical Director

Ascension Medical Group WI

Physician Leader

Ascension Wisconsin COVID-19

Vaccine Operational Planning Team



Ascension Wisconsin

Associate COVID-19 Vaccination Plan

Presented by: Dr. Margaret Hennessy, MD

Medical Director of Pediatrics for Ascension Medical Group Wisconsin and physician leader on Ascension Wisconsin COVID-19 Vaccine Operational Planning Team, member of the Wisconsin Committee on Immunization Practices



Ascension

Preparation

- Established national and local committees to develop workflows
- Development of educational material/resources for different audiences
- Operationalizing vaccine clinics

COVID-19 Vaccine Resource Center

For Ascension Use Only

This site provides resources and updates for our Ascension community in support of our COVID-19 vaccine distribution and administration efforts. The health and safety of patients and associates remain our top priority. Documents, protocols and resources are updated as new information is available.

Please bookmark this page and check back often for updates.

Do I have COVID-19?

[TAKE THE COVID-19 SELF ASSESSMENT](#)

Frequently asked questions: **COVID vaccination**



Ascension Wisconsin - Associate COVID-19 Vaccination Findings

Launch - December 16, 2020



“Between Gianni signing the supermax and getting this vaccine today, my Christmas wish list is complete.”

- Dr. Joseph Weber, critical care pulmonologist, first Ascension Wisconsin caregiver to receive COVID-19 vaccine.

Post Crescent.

'It's your most precious Christmas present': Elation, hope as Appleton health care workers get first doses of COVID-19 vaccine

Madeline Heim Appleton Post-Crescent

Published 6:18 p.m. CT Dec. 17, 2020

[View Comments](#)



Lessons Learned

How to accomplish a successful clinic

- **Use a scheduling platform** for large groups
- **Organize the right people**
 - Vaccine Manager--RN or higher OR pharmacist
 - Medical Authority-sign vaccine order, screen for contraindications to vaccine
 - Medical observer prepared for severe allergic reactions, medical kit, 15-30 minute waiting period
 - Vaccinators--Medical assistants, RNs, nursing students
 - Documentation team-enter data into Wisconsin Immunization Registry (WIR)
- Have a **large space for observation**--space individuals 6 feet apart
- Use **multiple communication channels** to reach everyone
 - Virtual vaccine town halls with subject matter experts, email blasts, text messages, signage in office space / at clinics



Ascension Columbia St. Mary's Ozaukee patient clinic

Lessons Learned

- **Challenges**
 - Technology challenges--schedule platform, WIR entry
 - Cold chain maintenance--an issue with current mRNA vaccines
 - Time limit on vaccine vial-6 hours once vial is opened
 - Need more people than expected for other vaccine programs like flu clinics
 - Communications - not everyone checks email, eligibility confusion, scheduling challenges, etc.
- **Minimize impact to staff schedule (side effects):**
 - Encourage employees to receive vaccine when they have next 1-2 days off
 - If clinic open 7 days a week, break up unit into groups
 - Most common side effects: Fever, muscle aches, fatigue, injection site pain--1-2 days
 - If fever, then not able to work

Employer Advice

- **Lead by example**
- **Educate** and empower your employees
- **Provide reliable and trusted information** about COVID-19 vaccines
 - Sources like WHO, CDC, FDA and Wisconsin DHS
- **Be transparent**
- **Mitigation strategies are still critical** during the vaccine rollout
 - Maintain safety precautions at your office during vaccine rollout: social distance, masking, hand-washing and disinfection practices

Employer Advice - Educational Resources

- Ascension - [Frequently Asked Questions about COVID-19 Vaccines](#)
- CDC - [Coronavirus Disease 2019 \(COVID-19\) Vaccines](#)
- CDC - [Clinical resources for COVID-19 Vaccines](#)
- FDA - [FDA COVID-19 Vaccine Information](#)
- de Beaumont Foundation - [ChangingtheCOVIDConversation.org](#)
- FDA - [Pfizer-BioNTech COVID-19 Vaccine Fact Sheet](#)
- FDA - [Pfizer-BioNTech COVID-19 Vaccine EUA Letter of Authorization](#)
- FDA - [Moderna COVID-19 Vaccine Fact Sheet](#)
- FDA - [Moderna COVID-19 Vaccine EUA Letter of Authorization](#)

The cheat sheet is titled "LANGUAGE THAT WORKS TO IMPROVE VACCINE ACCEPTANCE Communications Cheat Sheet". It features a red "TIPS" banner and a table comparing "Words MORE" and "Words LESS".

TIPS

- TAILOR YOUR MESSAGE FOR YOUR AUDIENCE.** Americans' perceptions about vaccines and their safety differ by political party, race, age, and geography.
- EXPLAIN THE BENEFITS OF GETTING VACCINATED, NOT JUST THE CONSEQUENCES OF NOT DOING IT.** Say, "Getting the vaccine will keep you and your family safe," rather than calling it "the right thing to do." Focus on the need to return to normal and reopen the economy.
- TALK ABOUT THE PEOPLE BEHIND THE VACCINE.** Refer to the scientists, the health and medical

Use These Words MORE:	Use These Words LESS:
The benefits of taking it	The consequences of not taking it
Getting the vaccine will keep you safe	Getting the vaccine is the right thing to do
A return to normal	Predictability/certainty
Your family	Your community
Medical experts	Scientists/health experts
Research	Discover/create/invent
Medical researchers	Drug companies
Damage from lockdowns	Inability to travel easily and safely



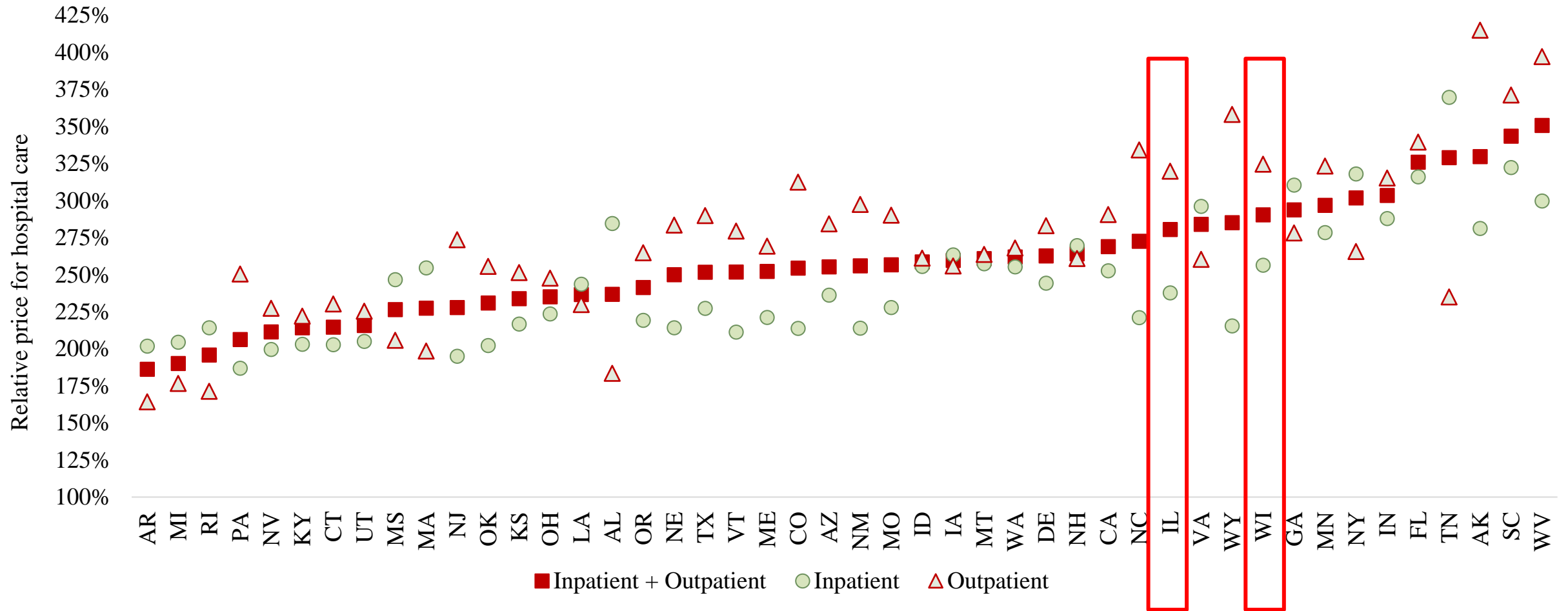
Reducing Vaccine Hesitancy Among Employees

Video Resources

- The following videos are available from the National Alliance of Healthcare Purchasers Coalition:
 - [COVID-19 VACCINE: Get the Facts](#)
 - [COVID-19 VACCINE: Get the Facts \(Spanish translation\)](#)
 - [The History of Vaccines](#)
 - [The History of Vaccines \(Spanish translation\)](#)
 - [Trusting Vaccines](#)
 - [Trusting Vaccines \(Spanish translation\)](#)



RAND 3.0: Commercial prices relative to Medicare vary widely across states



Lend Your Voice – RAND 4.0

- **Employers**

- **Submit** your claims data for RAND 4.0 – easy process
 - [RAND homepage](#)
 - [Contact page to enter your information if interested in submitting data](#)
 - [Hospital Price Transparency Study FAQs](#)
- **Lend** your employer voice to efforts to improve health care value in Wisconsin
- **Join** your regional employer coalitions and encourage other employers to do the same
- **Engage** with other quality and cost transparency initiatives
(e.g.; [Wisconsin Health Information Organization](#); [Wisconsin Collaborative for Health Care Quality](#))
- **Use** the data to:
 - Reward physicians and hospitals providing high value health care

Questions & Answers

Cheryl DeMars

CEO

The Alliance





RAND 3.0 Results – September 24, 2020

Thank You!

Questions?