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U.S.

Demand for Covid-19 Vaccines Overwhelms State Health Providers

Federal guidance by Trump administration to broaden vaccine eligibility has created a free-for-all; 'It's like the Hunger Games'



Nurse practitioners and other volunteers administered the Covid-19 vaccine to drive-thru participants inside Broadbent Arena in Louisville, Ky., last month.

PHOTO: WILLIAM DESHAZER FOR THE WALL STREET JOURNAL

By [Jared S. Hopkins](#) and [Arian Campo-Flores](#)

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Federal guidance to rapidly expand eligibility for Covid-19 vaccines has caused skyrocketing demand in some states, overwhelming local providers and frustrating people seeking shots.

In Pennsylvania, vaccine demand has local health offices contending with crashed appointment systems and flooded phone lines. In Maryland, some counties and providers struggle to handle newly authorized groups. In Missouri—where officials made vaccines available to first responders on a Thursday last month, and then to millions more people the following Monday—one provider has 100,000 residents on a waiting list with no more doses to give.

“It’s like the Hunger Games for Covid vaccines,” said Clarence Lam, a state senator in Maryland, which opened eligibility to large pools of people last month. “People are just desperate to find a vaccine.”

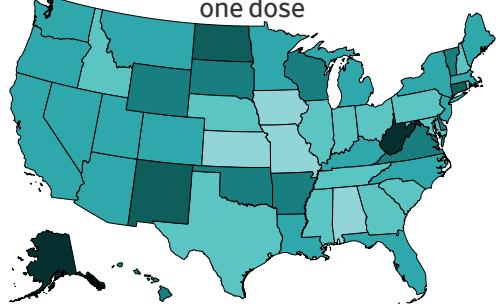
The free-for-all stems from governors and public-health officials implementing recommendations made Jan. 12 by the Trump administration—and continued by the Biden administration—to immediately make people 65 and older and adults with comorbidities eligible to start the two-shot vaccine regimen. The federal government wanted to speed up vaccinations, particularly for high-risk populations, and ensure doses didn’t go unused.

Shots given **Doses distributed**

Share of state population given at least one



9.74% of the US population given at least one dose



Note: Total includes U.S. territories and federal agencies. Last updated Feb. 8, at 2:00 p.m.

Source: Centers for Disease Control and Prevention

The expansion departs from recommendations late last year by the Advisory Committee on Immunization Practices, a group of external medical experts that advises the Centers for Disease Control and Prevention. Since initial supply was expected to be limited, the committee suggested vaccines first go to health-care workers and long-term-care facility residents, with adults 75 and older and essential workers next.

But the U.S. “kind of threw the ACIP recommendations out of the window,” said Marcus Plescia, chief medical officer of the Association of State and Territorial Health Officials. “We created expectations and demand for far more vaccine than is available right now.”

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Although state officials often cite limited vaccine supply, manufacturers are producing largely on schedule. Pfizer Inc. and Moderna Inc. since December have supplied about 60 million doses, nearly one-third of the 200 million the companies together must deliver by the end of March. The firms are also ramping up to supply another 200 million combined doses in the spring. The U.S. could see more doses should Johnson & Johnson's vaccine, now under review for emergency use, be cleared by federal regulators in the coming weeks.

Responding to demand, some local providers have delayed governors' prioritization plans to focus on people previously eligible. Some counties are requiring people to prove residency. Some hospitals are combing patients' records to inoculate those most in need.

Gov. Tom Wolf announced on Jan. 19 that Pennsylvania would expand eligibility to people 65 and older, as well as people with serious medical conditions—a move that some providers say came with no advance notice. Chuck Kray, owner of Hershey Pharmacy in Hershey, Pa., said the announcement triggered about five to six calls and one to two emails a minute at each of two locations. His staff logged about 10,000 vaccine requests in three days.

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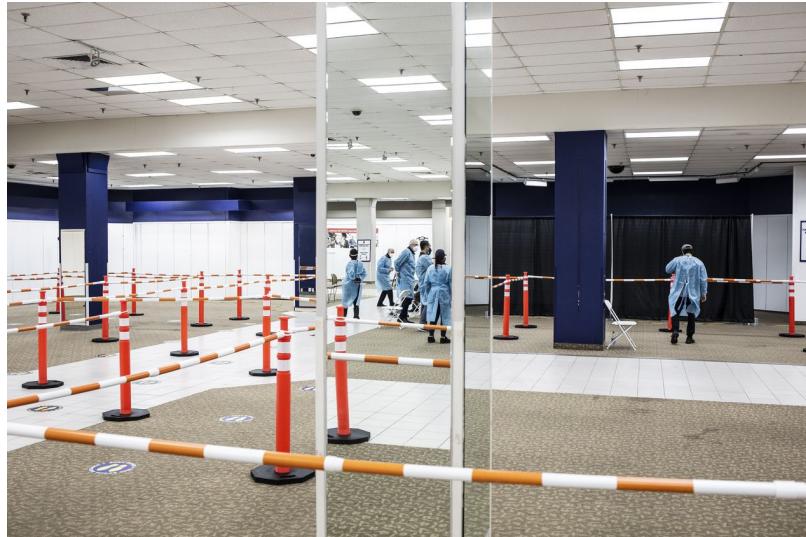
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“The sudden change did create a significant amount of chaos,” Mr. Kray said. “It literally shut our business down. All we were doing was answering vaccine questions.”

As a result, he said, older people in their 70s or 80s who might not be computer-savvy have been crowded out by younger people who could quickly navigate websites and submit requests.

In Allentown, Pa., the volume of demand crashed the online scheduling system, forcing staff to write down people's names and numbers to follow up with them later, said city health director Vicky Kistler. The bureau is now contracting with a call center to help.

Mr. Wolf said at a recent news conference that the state expanded eligibility under the assumption that the federal government would increase supply. "That didn't materialize," he said. "It's been frustrating."



Volunteers prepared to give Covid-19 vaccines in a former Sears store at the Livingston Mall in Livingston, N.J., last month.

PHOTO: BRYAN ANSELM FOR THE WALL STREET JOURNAL

In Maryland, Gov. Larry Hogan expanded eligibility on Jan. 18 to people 75 and older and groups including educators—860,000 people. A week later, he opened eligibility to adults 65 and older and essential workers—another 773,000 people.

In expanding eligibility, Mr. Hogan said he wanted to improve the state's low vaccination rate and protect high-risk populations. He expected supply would increase, a spokesman said, and also consulted with public-health officials two days before to get input and ensure Maryland was prepared.

But the state only received 10,000 doses a day, and local providers were inundated with phone calls and emails—precisely the scenario Mr. Hogan said he wanted to avoid when Trump officials encouraged expanding eligibility.

"Most of us were somewhat taken aback" by Mr. Hogan's decision, said Howard County Executive Calvin Ball.

The county is still working through the more than 70,000 health-care workers, teachers and others in earlier groups before vaccinating adults 65 and older. It's impossible with the current supply to vaccinate groups recently prioritized, said Maura Rossman, the Howard County health officer. "It's like, 'Which 65-year-old do I pick?' It's impossible math."

Patricia Vest, a 72-year-old retired teacher in Baltimore who lives in a Covid-19 hot spot and became eligible in late January, spent nearly two weeks searching online and calling public health departments and hospitals. She has yet to schedule an appointment.

"I'm still nowhere," Ms. Vest said. "Nobody's ever called back."

Missouri Gov. Mike Parson expanded eligibility to seniors and adults with comorbidities on Jan. 14 because of the Trump administration's suggestion and promise of more supply. But his decision caught public health and hospital officials off guard, and was made without consulting a state panel of health experts that advised on the state's prioritization plan, said one of the panel members, Larry Jones, executive director of the Missouri Center for Public Health Excellence.

CoxHealth Chief Executive Steven Edwards said Missouri's expansion is helping ensure doses don't go unused. But due to high demand and limited supply, his hospital network will prioritize high-risk segments, such as people over 80 or with diabetes, by searching electronic health records and public surveys.

In southwestern Missouri, the wait list at a Mercy hospital group has grown to 100,000 people, but it hasn't received doses for weeks, said David Barbe, vice president of primary care at Mercy Springfield Communities. Dr. Barbe has advised patients to try other hospitals and local health departments. "Sign up anywhere you can," he said he tells them.

Some states that have been slower to open eligibility have experienced less disruption. South Dakota planned to prioritize residents 65 and older until its three major health providers, who contracted to vaccinate residents, requested the state begin with an older population, said Andrea Polkinghorn, immunization strategy leader at Sanford Health in Sioux Falls.

"We asked them to narrow that so that they don't open the floodgates," she said.