Dennis Rochford  
President  
240 Cherry Street  
Philadelphia, Pennsylvania  19106-1906

Dear Mr. Rochford:

Thank you for your letter to the Administrator of the Maritime Administration in the U.S. Department of Transportation Rear Admiral Mark Buzby and me regarding the Coronavirus Disease 2019 (COVID-19) pandemic, access to rapid testing, and plans for vaccine distribution. I am responding on behalf of the Centers for Disease Control and Prevention (CDC).

Regarding access to testing, CDC provides information on testing strategies in non-healthcare workplaces (https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/testing-non-healthcare-workplaces.html). Employers are encouraged to collaborate with state, territorial, tribal, and local health officials to determine whether and how to implement testing strategies and which are most appropriate.

CDC is using its expertise in public health preparedness and response and its immunization infrastructure to support Operation Warp Speed (OWS) in planning for vaccine distribution. Our goal has been to safely, effectively, and efficiently implement a COVID-19 vaccination program immediately after the Food and Drug Administration (FDA) authorizes or approves a vaccine. The Advisory Committee on Immunization Practices (ACIP), CDC’s independent vaccine advisory committee, develops vaccine recommendations that go to the CDC director for adoption. The committee has held public meetings since June 2020 regarding COVID-19 vaccines. While the end goal is to offer vaccines to the entire U.S. population, identifying priority groups for COVID-19 vaccination is critical for implementation planning using a phased approach while supply is limited.

CDC and OWS partners are working closely with state and local health departments on implementing detailed but flexible plans specific to each jurisdiction, including consideration of critical infrastructure and healthcare workers, high risk individuals, health equity issues and lessons learned from the 2009 H1N1 pandemic. The plans are being executed in phases by the federal government, the 64 CDC jurisdictions, including all 50 states and five large cities, territories, industry partners, and other entities. Centralized distribution will allow the government full visibility, control, and ability to shift assets and use data to optimize vaccine uptake. OWS is harnessing the strength of existing vaccine delivery infrastructure, while leveraging innovative strategies, new public-private partnerships, and robust engagement of state and local health departments to ensure efficient, effective, and equitable access.

While COVID-19 vaccine supply is limited, ACIP issued recommendations on COVID-19 vaccine prioritization, and I adopted those recommendations – Phase 1a: healthcare personnel who might be directly or indirectly exposed to patients or infectious materials and residents of long-term care facilities; Phase 1b: frontline essential workers and adults aged 75 years and older; and Phase 1c: adults aged 65-74 years, those aged 16-64 years with high risk medical conditions, and other essential workers. Depending on COVID-19 vaccine supply, jurisdictions may need to plan for subsets within these groups.
At the December 1, 2020 meeting of the ACIP, members passed an interim recommendation to include healthcare personnel and residents of long-term care facilities in the initial phase (Phase 1a) of the COVID-19 vaccination program. The full recommendation was published in the *Morbidity and Mortality Weekly Report* on Thursday, December 3, 2020 (www.cdc.gov/mmwr/volumes/69/wr/mm6949e1.htm).

On December 20, 2020, ACIP voted to update its interim recommendations to include Phase 1b and Phase 1c populations as vaccine supply remains limited. The full recommendation can be found at *The Advisory Committee on Immunization Practices’ Updated Interim Recommendation for Allocation of COVID-19 Vaccine — United States, December 2020* (https://www.cdc.gov/mmwr/volumes/69/wr/mm695152e2.htm). These interim recommendations for phased allocation provide guidance for federal, state, territorial, and local jurisdictions while vaccine supply is limited. In its deliberations, ACIP considered scientific evidence of SARS-CoV-2 epidemiology, vaccine program implementation, and ethical principles.

Essential workers perform duties across critical infrastructure sectors and maintain the services and functions that U.S. residents depend on daily. The Cybersecurity and Infrastructure Security Agency (CISA) of the U.S. Department of Homeland Security has developed a list intended to guide jurisdictions in identifying essential critical infrastructure workers, who may be exempted during stay-at-home-orders. ACIP used CISA guidance¹ to define frontline essential workers as the subset of essential workers likely at highest risk for work-related exposure to SARS-CoV-2, the virus that causes COVID-19, because their work-related duties must be performed on-site and involve being in close proximity (<6 feet) to the public or to coworkers. ACIP has classified the following non–health care essential workers as frontline workers: first responders (e.g., firefighters and police officers), corrections officers, food and agricultural workers, U.S. Postal Service workers, manufacturing workers, grocery store workers, public transit workers, and those who work in the education sector (teachers and support staff members) as well as child care workers. A tiered approach for essential workers builds on the occupations identified by the National Academies of Science, Engineering and Medicine for early vaccination.

Two COVID-19 vaccines have been authorized for use under Emergency Use Authorizations (EUA) from FDA. Additional COVID-19 vaccines are still being developed and tested. If more COVID-19 vaccines are authorized or approved by FDA, the ACIP will quickly hold public meetings to review all available data about each vaccine and make recommendations for their use in the U.S.

Thank you for your interest in this ongoing response. We appreciate your support as we all work together to fight COVID-19. CDC remains committed to protecting the American public during this pandemic.

Sincerely,

Robert R. Redfield, MD
Director, CDC

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