



# Department of Health

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## Guidance for The New York State COVID-19 Vaccination Program

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### Purpose and Background:

Limited amounts of COVID-19 vaccine are available for New York's COVID-19 Vaccination Program. The amount of vaccine the State receives is based upon the allocation made to New York by the federal government. The New York State Department of Health (NYSDOH) then determines State allocations to providers and entities who have enrolled to administer vaccine.

Effective April 6, all individuals that reside, study, or work in New York age 16 and older are eligible to be vaccinated. See Appendix A for guidance regarding necessary consent for individuals under 18. All providers enrolled in the NYS vaccine program may vaccinate any eligible individual. (**Note to pharmacies:** Pharmacists are authorized to vaccinate individuals age 16 and older for COVID-19 only, pursuant to the Public Readiness and Emergency Preparedness [PREP] Act.)

All vaccine providers in New York State, including those located in the City of New York and those participating in federal programs, must follow New York State Department of Health (NYSDOH) guidance and directives, including the "Use It or Lose It" policy and the requirement to report to the NYS Vaccine Tracker.

### Eligible individuals:

All individuals that reside, study, or work in New York age 16 and older are eligible to be vaccinated. See Appendix for additional detail.

### Vaccine Provider Responsibilities:

- All facilities, entities, and practices receiving vaccine doses have an obligation to quickly utilize all doses, per New York's "Use it or Lose it" policy and [Executive Order 202.88, as extended](#). If any vaccine is not administered within seven days of receipt, remaining doses may be removed, and entities may not be allocated future vaccine doses.
- Any provider or entity not on track to administer all received doses to eligible populations within the week of receipt, must notify the State no later than the fifth day after receipt, at [CovidVaccineNotUsed@health.ny.gov](mailto:CovidVaccineNotUsed@health.ny.gov), pursuant to [Executive Order 202.88, as extended](#).
- Vaccine cannot be redistributed to another facility, provider, practice, or department without prior approval and consent of the NYSDOH. Facilities needing to redistribute vaccine must submit a [completed redistribution form](#) to [COVIDVaccineRedistribution@health.ny.gov](mailto:COVIDVaccineRedistribution@health.ny.gov) and must not redistribute until NYSDOH approval.

- A provider may transport vaccine to another location for the purpose of holding a limited duration vaccination clinic without prior approval from the NYSDOH. If the provider is administering the doses and reporting doses administered against their own inventory in NYSIIS, all unused vaccine must be transported back to the original location at the conclusion of the clinic that day. The provider must retain possession and control of the vaccine for the duration of the transport and administration.
- Those who are administering the vaccine should be prioritized to receive vaccine as soon as doses are available.
- All providers must keep a daily list of “standby” eligible individuals to be notified of open appointments for vaccine administration on short notice. As soon as providers are aware that there are more doses than people to be vaccinated, “standby” eligible individuals should be called, or other steps must be taken to bring additional eligible recipients to the facility or clinic before the acceptable use period expires. Standby lists must include eligible individuals for first and second doses. (See page 3 for further guidance.)
- Providers should not prefill more syringes than they can use within one hour. Prefilled syringes of Pfizer-BioNTech and Moderna vaccines must be used within six hours of filling; Janssen (Johnson & Johnson) vaccine must be used within two hours of filling. Excess prefilling can lead to waste if a clinic must end early or an excessive number of recipients fail medical screening or do not show up for their appointment. Please see [Guidance on Use of COVID-19 Vaccine Doses Remaining at End of Day or Clinic for Providers Participating in the New York State COVID-19 Vaccination Program](#) for more information.
- All facilities or practices are required to track vaccine uptake among their staff and must furnish uptake data to the NYSDOH via HERDS survey, or as part of the daily NYS Vaccine Tracker.

Each provider that receives vaccine:

- **MUST ensure that for each individual they vaccinate:**
  - The individual displays evidence of completed [NYS COVID-19 Vaccine Form](#) and attestation;
  - The individual displays proof of eligibility; and
  - The provider reports all relevant information in the NYS Vaccine Tracker and NYSIIS/CIR, as applicable.
- Will be notified about how much vaccine will be received.
- Must use all vaccine doses within seven days of receipt by rapidly deploying it to the eligible populations.
- Must prioritize vaccinating eligible staff and those who are administering the vaccine (if you are a new provider).
- All vaccine administered must be reported, using the New York State Immunization Information System (NYSIIS) or the Citywide Immunization Registry (CIR) in New York City, within 24 hours of administration.
- Vaccine Administrators **must also report additional information on all those vaccinated every Monday and Thursday** using the [COVID-19 Vaccine Tracker](#).

#### Message for COVID-19 Vaccine Clinical Trial Sites:

As a reminder, all COVID-19 vaccines administered in the State of New York must be entered in to NYSIIS. This includes any doses administered as part of an experimental arm of a clinical trial as well as doses offered and administered to participants in the control group (originally received placebo) after the clinical trial ended or at other time points per trial protocol. Staff at the participating site of the clinical trial must provide participants with a vaccination card and enter participant’s immunization history into NYSIIS/CIR as applicable. Please note

that only vaccines that have been issued an Emergency Use Authorization or that have been approved by the United States Food and Drug Administration (FDA) can be entered.

### **The Second COVID-19 Vaccine Dose:**

Pfizer-BioNTech and Moderna vaccines require two doses, whereas Janssen (Johnson & Johnson) vaccine requires only a single dose. The second dose must be administered 21 days (Pfizer-BioNTech vaccine) or 28 days (Moderna vaccine) after the first dose. To facilitate this, all providers **must** schedule the second dose appointment for recipients **at the time the first dose is administered**.

Limited circumstances may arise where individuals will need to receive their second dose at a different location than their first. Due to limited supply, each such circumstance must be evaluated to determine the most appropriate solution, including requiring the patient to return to original location if feasible, evaluating the impact of extending the interval between doses, or making arrangements for receipt of the second dose at a different provider. Providers who have determined that the individual cannot return to the location where they received their first dose should coordinate with the Hub Lead Hospital to find a provider who has extra second doses of the appropriate vaccine to vaccinate the individual.

Individuals must receive two doses of the same vaccine (e.g., you must receive two doses of the Pfizer-BioNTech vaccine or two doses of the Moderna vaccine). They are **not** interchangeable. Please see [Guidance for Administration of the Second Dose of COVID-19 Vaccine](#) for additional information regarding administration of the second dose.

**Do not reserve first dose vaccine for the second dose.** A second dose allocation will be automatically shipped to your facility in time for administration of the second dose at the required interval. **The vaccine included in the second shipment must be reserved for second doses.** Facilities will be notified of the timing and quantity of the second dose shipment so that it can be separated from first doses in your inventory.

New York State has adopted the [Centers for Disease Control's \(CDC's\) Vaccine Inventory Management Guidance](#). This guidance requires providers, on a weekly basis, to review all missed appointments, as well as any other reason for a second dose to be unused after 42 days, and to repurpose any remaining doses as first doses.

Frozen second doses that are not beyond the 42-day window for scheduled administration must NOT be used as first doses. The only second doses that may be administered as first doses are those doses that are approaching their expiration or beyond use date, and providers must follow the process outlined in the Second Dose Guidance.

Any frozen second doses that are currently beyond the 42-day window should immediately be used as first doses. These doses can be administered to any eligible individual in accordance with NYS Vaccine Program Guidance. If an individual requests a second dose after missing the 42-day window, they should still be administered a second dose. There is no need to restart the series, pursuant to CDC guidance. Providers who have insufficient vaccine to administer a second dose that was delayed beyond the 42-day window should work with their Lead Hub Hospital, which maintains a second dose waiting list.

### **Extra Doses of Pfizer-BioNTech and Moderna:**

Vials of both Pfizer-BioNTech and Moderna are expected to contain at least one extra dose of vaccine. Depending on the type of needle and syringes used, additional vaccine may remain in the vial. Vaccine

administrators may use any extra vaccine that can be easily drawn up in a syringe to meet the full dose requirements. Extra vaccine fluid from more than one vial **CANNOT** be combined to produce extra doses. This is particularly important because the vaccination does not contain preservatives. Enter all vaccines given into NYSIIS/CIR, including any additional vaccines given, however do not modify inventory in anticipation of extra doses. For additional information please see [Pfizer-BioNTech](#) guidance and [Moderna](#) guidance for extra doses. Extra vaccine has not been observed in the Janssen (Johnson & Johnson) vials beyond the expected five doses.

### **Remaining COVID-19 Vaccine Doses:**

All vaccine providers must plan accordingly to ensure every dose of vaccine is administered. Proper planning to avoid waste includes confirming the exact number of eligible recipients available to be vaccinated before drawing the first dose from a new vial.

All providers must keep a daily list of “stand by” eligible individuals to be notified for vaccine administration on short notice. “Stand by” lists must include individuals eligible for first and second doses. As soon as providers are aware that there are more doses than people to be vaccinated, “stand by” eligible individuals should be called, or other steps must be taken to bring additional eligible recipients to the facility or clinic before the acceptable use period expires. Each provider should contact their regional hub hospital to help facilitate the use of extra doses at the end of the clinic day.

### **Mandatory Vaccine Form:**

All individuals receiving the COVID-19 vaccine **must** complete the [New York State COVID-19 Vaccine Form](#) for the first dose, and attest that they are eligible to be vaccinated. Pursuant to [Executive Order 202.86](#), as extended, all practices, providers, and entities must confirm adherence to this requirement at the time of vaccine administration.

### **Proof of Eligibility:**

Individuals being vaccinated **must** provide proof of eligibility.

If an individual is eligible due to their work or employment status, they must prove they work or are employed in the State of New York, regardless of where they reside. Additionally, if an individual resides in New York but is employed or works in another state, such individual must show proof of residence in New York.

Proof of work or employment may include:

- an employee ID card or badge;
- a letter from an employer or affiliated organization;
- a pay stub, depending on the specific priority status; or
- display proof of work via an application (e.g., Uber, Lyft, DoorDash, etc.).

If an individual is eligible due to their age, they must produce proof of age and proof of residence in New York.

To prove New York residence, an individual must show:

- One of the following: State or government-issued ID; consulate ID (if New York address is displayed); Statement from landlord; Current rent receipt or lease; Mortgage records; or
- Two of the following: Statement from another person; Current mail; School records.

Proof of age may include:

- Driver's license or non-driver ID;
- Birth certificate issued by a state or local government;
- Consulate ID;
- Current U.S passport or valid foreign passport;
- Permanent resident card;
- Certificate of Naturalization or Citizenship;
- Life insurance policy with birthdate; or
- Marriage certificate with birthdate.

Alternatively, employers or organizations can provide a list of staff who meet the eligibility criteria for vaccination. Do not vaccinate any person who does not have proof of their work, age, or residence, as applicable. [Executive Order 202.86](#) imposes monetary penalties for any provider vaccinating an individual who has not certified eligibility or for whom the provider otherwise has knowledge the individual is not eligible.

After April 6, 2021, for individuals with certain comorbidities or underlying conditions, or for individuals who made an appointment prior to such date, at State-operated mass vaccination sites, such individuals still must only produce proof of age and/or residence, as applicable.

The mandatory [New York State COVID-19 Vaccine Form](#) includes a self-attestation regarding eligibility for vaccination and New York residence or employment in New York, which must be completed prior to vaccination. Minors must present identification to verify that they are at least 16 years of age or have a parent present to attest on their behalf.

#### **Vaccine Safety:**

Post-vaccination monitoring is an essential part of the COVID-19 vaccination program. The Centers for Disease Control and Prevention (CDC) is promoting and encouraging all those being vaccinated to participate in V-Safe, a smart-phone based application that will allow those vaccinated to enter their symptoms in the days after vaccination using text messaging. V-Safe also provides reminders for the second dose and telephone follow up for anyone who reports medically significant adverse events. V-Safe materials can be found at <http://www.cdc.gov/vsafe>, including a V-Safe information sheet. Please print out the information sheet and hand to each person vaccinated. You must report any adverse events that occur after vaccination to the Vaccine Adverse Events Reporting System (VAERS) at [info@VAERS.org](mailto:info@VAERS.org) or by calling 1-800-822-7967.

#### **Equity:**

Effort must be made to do outreach to persons age 16 and older in all communities and settings. Persons in areas that have a high social vulnerability index are particularly vulnerable to COVID-19 and should be notified about how they can receive vaccine.

#### **Communicating the Plan:**

Please be sure to clearly communicate prioritization to all staff.

This guidance is in effect from the date of issuance until it is updated, or additional guidance is issued by NYSDOH. For questions, please contact the New York State Department of Health, Bureau of Immunization at [COVID19vaccine@health.ny.gov](mailto:COVID19vaccine@health.ny.gov).

**New York State Vaccination Program Guidance**  
**Appendix A**  
**Priority Groups Eligible to be Vaccinated**

**New Eligible Groups beginning Tuesday, April 6, 2021:**

All New York State residents age 16 and older, including individuals studying in New York, or individuals employed in the State of New York are eligible. Note: according to Emergency Use Authorization (EUA) for the Pfizer/BioNTech COVID-19 Vaccine, minors ages 16 and 17 are authorized to receive such vaccine. **However, minors ages 16 and 17 are NOT authorized to receive the Janssen or Moderna COVID-19 Vaccines.**

**Minor Consent**

For the purposes of this document, a minor is defined as an individual under the age of 18. Minors need parental or guardian consent to receive a COVID-19 vaccine, except in the rare instance where the minor is part of a group to whom the law gives the right to consent to their own care (e.g., married minors, minors who are parents or pregnant, and minors in the military).

**In general, it is strongly encouraged that a parent or legal guardian accompany a minor age 16 or 17 to provide in-person consent for vaccination at each dose.** Vaccine Support/Medical Documentation Staff must document in the CDMS Notes section the name of the person providing consent for the minor. Verbal consent is allowed.

If a minor is unaccompanied, a parent or guardian must be available by phone at the time of the minor's vaccination to provide consent to the provider.

Minors for whom a parent or guardian cannot be reached by phone will be rescheduled, unless the minor can consent for themselves because they are married, a parent or pregnant, or in the military.

**Persons continuing to be eligible for vaccination:**

- Healthcare Workers:
  - High-risk hospital and FQHC staff, including OMH psychiatric centers
  - Health care or other high-risk essential staff who come into contact with residents/patients working in LTCFs and long-term, congregate settings overseen by OPWDD, OMH, OCFS and OASAS, and residents in congregate living situations, run by the OPWDD, OMH, OCFS and OASAS
  - Staff of urgent care provider
  - Staff who administer COVID-19 vaccine
  - All Outpatient/Ambulatory front-line, high-risk health care workers of any age who provide direct in-person patient care, or other staff in a position in which they have direct contact with patients (i.e., intake staff)
    - This includes, but is not limited to, individuals who work in private medical practices; hospital-affiliated medical practices; public health clinics; specialty medical practices of all types; dental practices of all types; dialysis workers; diagnostic and treatment centers; occupational therapists; physical therapists; speech therapists; phlebotomists and blood workers; behavioral health workers; midwives and doulas; and student health workers

- All front-line, high-risk public health workers who have direct contact with patients, including those conducting COVID-19 tests, handling COVID-19 specimens and COVID-19 vaccinations
- Certified NYS EMS provider, including but not limited to Certified First Responder, Emergency Medical Technician, Advanced Emergency Medical Technician, Emergency Medical Technician – Critical Care, Paramedic, Ambulance Emergency Vehicle Operator, or Non-Certified Ambulance Assistant
- County Coroner or Medical Examiner, or employer or contractor thereof who is exposed to infectious material or bodily fluids
- Licensed funeral director, or owner, operator, employee, or contractor of a funeral firm licensed and registered in New York State, who is exposed to infectious material or bodily fluids
- Home care workers and aides, hospice workers, personal care aides, and consumer-directed personal care workers
- Staff and residents of nursing homes, skilled nursing facilities, and adult care facilities
- First Responder or Support Staff for First Responder Agency
  - Fire
    - State Fire Service, including firefighters and investigators (professional and volunteer)
    - Local Fire Service, including firefighters and investigators (professional and volunteer)
  - Police and Investigations
    - State Police, including Troopers
    - State Park Police, DEC Police, Forest Rangers
    - SUNY Police
    - Sheriffs' Offices
    - County Police Departments and Police Districts
    - City, Town, and Village Police Departments
    - Transit or other Public Authority Police Departments
    - State Field Investigations, including DMV, SCOC, Justice Center, DFS, IG, Tax, OCFS, SLA
  - Public Safety Communications
    - Emergency Communication and PSAP Personnel, including dispatchers and technicians
  - Other Sworn and Civilian Personnel
    - Court Officer
    - Other Police or Peace Officer
    - Support or Civilian Staff for Any of the Above Services, Agencies, or Facilities
- Corrections
  - State DOCCS Personnel, including correction and parole officers
  - Local Jails and Correctional Facilities, including correction officers
  - Local Probation Departments, including probation officers
  - State Juvenile Detention and Rehabilitation Facilities
  - Local Juvenile Detention and Rehabilitation Facilities
- P-12 Schools (including pre-primary, primary, and secondary schools, as well as Head Start and Early Head Start)
  - P-12 school (public or non-public) or school district faculty or staff (includes all teachers, substitute teachers, student teachers, school administrators, paraprofessional staff, and support staff including bus drivers)
  - Contractor working in a P-12 school (public or non-public) or school district (including contracted bus drivers)
  - NYS Licensed, registered, approved or legally exempt before and after school group childcare settings including center-based and family care providers

- In-Person College Faculty and Essential In-Person Staff
- Employees or Support Staff of NYS Licensed, Registered, Approved or Legally Exempt Group Childcare Settings, including center-based and family care providers
- Public Transit
  - Airline and airport employee
  - Passenger railroad employee
  - Subway and mass transit employee (i.e., MTA, LIRR, Metro North, NYC Transit, Upstate transit)
  - Ferry employee
  - Port Authority employee
  - Public bus employee
- Public Facing Grocery Store Workers, including convenience stores, bodegas, regional food banks, food pantries, and permitted home-delivered meal programs
- Incarcerated individuals
- Individual living in a homeless shelter where sleeping, bathing or eating accommodations must be shared with individuals and families who are not part of your household
- Individual working (paid or unpaid) in a homeless shelter where sleeping, bathing or eating accommodations must be shared by individuals and families who are not part of the same household, in a position where there is potential for interaction with shelter residents
- Restaurant employees, including workers in permitted soup kitchen and congregate meal programs,
- Restaurant delivery workers
- Public facing hotel workers, For-hire vehicle drivers, including taxi, livery, black car, and transportation network company drivers
- Public-facing government and public employees
- Not-for-profit workers who provide public-facing services to New Yorkers in need
- Essential in-person public-facing building service workers and providers of essential building services

**Individuals with comorbidities or underlying conditions as defined [here](#).**