

**Draft Minutes
MSSNY
Committee on Infectious Diseases Meeting
February 11, 2021**

Present

Joshua Cohen, MD Commissioner
Janine Fogarty, MD Asst. Commissioner
William Valenti, MD Chair
Karen Myrie, MD Co-Vice Chair
Philip Kaplan, MD
Monica Sweeney, MD

Absent

Mary Ruth Buchness, MD
Carmen Rodriguez, MD
Ryan Schloback, MD
Webeh Anis Wehbeh, MD
Joan Cincotta, Alliance

Invited Guests

Bonnie Litvack, MD President

Staff

Patricia Clancy, Sr. Vice-President
Managing Director,
Public Health Education and Governmental
Affairs
Maureen Ramirez, Administrative Asst.

Excused

James Braun, DO Co-Vice-Chair

1 **1) Welcome**

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3 **2) Adoption of October 15, 2020 minutes**

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5 **3) COVID Discussion**

6 **a) Vaccine distribution and rollout** – the goal is to vaccinate as many people, as quickly as
7 possible. Dr. Litvack reported that MSSNY is in constant contact with the DOH and the
8 governors’ office. Reports are that over 10% of the state has had the 1st shot. The Governor
9 reports that the vaccine supply will be increased by 5% over our current allocation. Demand is
10 definitely outstripping supply. It is improving, but it is taking time. While the governor has
11 opened access to vaccination to group 1A and 1B, he has also opened it to people with
12 comorbidities. The inability to get the vaccine, especially by community physicians is becoming
13 difficult/near impossible. At this point there are 5 million people eligible for vaccination. While the
14 community physicians seems to have been skipped over, MSSNY is pushing to get the vaccine
15 to the physicians office. There are many people with co-morbidities that do not want to go to a
16 mass vaccination site feeling it would be safer just to go to their doctors office. Along with the
17 newly added group, MSSNY is still waiting for guidance on what is required for this new group
18 for certification. It was noted that if you qualify having a comorbidity you can only be vaccinated
19 at state sites. A signed doctors note or a certificate from the government qualifies you to
20 schedule a vaccine appointment. More information on this will follows.

21

22 Since community based physicians are not able to get the vaccine, physicians cannot vaccinate
23 their own patients. While vaccines are being distributed in nursing homes and senior facilities,
24 homebound patients are being overlooked.

25 Dr. Valenti pointed out that vaccines are going to part of our lives for many years to come and
26 because of that, there is a need to pay attention and plan now how that will happen. There is a
27 need to pay attention to how that will happen in the future and what MSSNY’s role will be. This
28 needs to be a discussion for this committee in the near future. The overriding goal remains the

29 same – attaining herd immunity. Getting the vaccine into the arms of as many people as quickly
30 possible is the goal. There was a question about children and is that group being looked at?
31 There isn't much information yet regarding vaccinating children. Dr. Cohen checked into clinical
32 trails. Johnson & Johnson are conducting clinical trials on vaccine effects on Adult &
33 Adolescents. Moderna is about to being a trial studying ages 2 to 18 years of age. Pfizer is also
34 studying vaccinations from age 12-50. The committee will be looking forward to the results of
35 those trails.

36
37 There was additional discussion of patients not being able to get on the internet and schedule
38 an appointment. It was recommended that people that are having difficulty call the states
39 vaccination hotline: 1-833-NYS-4-VAX or 1-833-697-4829, Discussion followed about getting
40 the vaccine to the disparate communities. Not everyone has access to transportation, etc. It is
41 important that if people can't get to the vaccine, the vaccine needs to be brought to the people.
42

43 **b) New variants** – not much is known regarding the variants. It has been determined that
44 different vaccines perform differently with different variants. Used as an example was the Astra
45 Zeneca vaccine not working well against the African variant. The future of the vaccines and
46 vaccine variants need to be discussed now so that we are prepared down the road. Boosters for
47 example should be discussed now. There needs to be preparation for this for the future. The
48 overriding goal is the same – achieving herd immunity. Then there needs to be a discussion of
49 vaccinating children and what will that entail. It is still unclear to what extend children are
50 involved in community spread. If people contracted COVID are they immune? And for how
51 long? The current thinking is that having COVID does not contribute to herd immunity. The viral
52 antibodies you have last about 90 days. The body sheds these non-viable viral cells within that
53 time. It is then time to be vaccinated.

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55 A recent CDC guideline indicates that after a person has been vaccinated and they are then
56 exposed, they do not have to quarantine.

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58 Regarding vaccines in disparate communities – The vaccines need to be delivered to the people
59 – not the people to the vaccine. Rural communities are suffering along with the black and brown
60 communities. Race, Ethnicity, Income and Geography all play a role in vaccine inequity.
61

62 **c) Treatments** – What is being done to keep people off ventilators until they can be vaccinated?
63 A copy of a press release from Eli Lilly and Company regarding the BLAZE-4 trail indicates
64 Lilly's neutralizing antibodies bamlanivimab (LY-Cov555) and etesevimab (LY-CoV016) together
65 reduced risk of COVID-19 hospitalizations and death by 70%. A copy of that release was given
66 to committee members for review.
67

68 **4) 2021 MSSNY Sunset Review – MSSNY Policy 312.978 Immunizations and 312.988**
69 **Administration of HPV Vaccines** – MSSNY has a policy that policies are to be reviewed every
70 10 years to determine whether they are still pertinent. After a brief discussion, the committee
71 voted to reaffirm the important of continuing both these policies.
72

73 Pat Clancy reminded the committee that MSSNY has been forwarding to the governors' office
74 and the Department of Health, any concerns that have stemmed from the Public Health
75 Education Committees of MSSNY. If anyone has any concerns in addition to the ones voiced at
76 this meeting, please bring them to her attention. She will make sure these concerns are
77 conveyed to the governors' office and the Department of Health.
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79 **Adjourned** – next meeting April 29, 2021