

Board of Supervisors Memorandum

August 10, 2021

Mandatory COVID-19 Vaccinations for County Employees

Introduction:

The subject of requiring County employee's to be vaccinated has been discussed previously with the Board. A wait and see attitude was adopted in the past. However, given that:

- 1. we are now more than 18 months into the present pandemic,
- 2. vaccination supply is widely available and proven to be safe and efficacious,
- 3. there are several options with regard to what vaccine to take,
- vaccination rates are generally static and the latest variant of COVID-19, the Delta variant is highly infectious,
- 5. COVID-19 cases are on the rise, and hospitalization and deaths related to COVID-19 are increasing it is apparent we should no longer take a wait and see approach.

A number of public sector employers in other states have now required employees to be vaccinated, including public employees. In Arizona, the largest healthcare institution, Banner Health, has required vaccination of their employees. It is likely other healthcare providers will follow suit in the near future. It is now appropriate to require all Pima County employees to be vaccinated.

Vaccinating our employees not only protects the employee, but also the public. Many Pima County departments and agencies are involved in the delivery of direct services to the public, increasing the publics risk to COVID-19 exposure if employees are unvaccinated. Vaccination will minimize the risk of employees acquiring COVID-19 infection from an unvaccinated employee or our employees who are unvaccinated transmitting COVID-19 to the public.

I am enclosing a report from Cathy Bohland, our Human Resources Director, on inquires I made with regard to requiring vaccinations for County employees. Her report is attached and discusses the processing of exemptions, the likely number of exemptions the County would have based on the size of our workforce and COVID-19 related medical expenses to date given we self-insure medical services for our employees.

The Honorable Chair and Members, Pima County Board of Supervisors

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Recommendation:

Based on a previous discussion in the memorandum dated July 29, 2021 from the Human Resources Director this is part of the recommendation I would ask the Board to require COVID-19 vaccinations for our employees as a condition to continued employment with Pima County. There are a number of effective dates that could be selected. Banner Health has selected November 1, other entities or agencies have adopted a date before that time frame. It is up to the Board to select an effective date though, given the recent acceleration of COVID-19 transmission within Pima County I would suggest that employees have at least their first immunization no later than October 1, 2021.

Sincerely,

C. Deutselbeury
C.H. Huckelberry
County Administrator

CHH/sp - July 30, 2021

Attachment

c: Jan Lesher, Chief Deputy County Administrator

Francisco García, MD, MPH, Deputy County Administrator & Chief Medical Officer, Health and Community Services

Terry Cullen, MD, MS, Public Health Director, Health Department Cathy Bohland, Director, Human Resources



Date: July 29, 2021

From: Cathy Bohland Director

Human Resources

To: C.H. Huckelberry County Administrator

Via: Jan Lesher, Chief Deputy County Administrator

Re: Response to Mandatory COVID-19 Vaccination for Employees with Medical and Religious Exemptions Memorandum Dated July 22, 2021

Many employers are determining whether to mandate vaccinations in the workplace. This measure was first implemented in April 2021, in the health care field as evidenced by Houston Methodist, an academic medical center in Texas and now locally by Banner Health. This decision is now being implemented by public employers as evidenced by New York City which will require all city workers to either get vaccinated or test weekly for the virus, and California, which has a similar policy for state employees and health care workers. Below is additional information to consider when making this critical decision.

Processing Exemptions

The U.S. Equal Employment Opportunity Commission (EEOC) has issued guidance indicating employers can require employees to get vaccinated and block them from entering the workplace if they refuse. Along with this mandate comes the employee's ability to request an exemption due to either a medical disability or a sincerely held religious belief. The employee would be required to complete paperwork identifying the reason for the exemption request and, in some cases, provide supporting documentation for review by Human Resources. The requesting employee, employee's Department and Human Resources would then need to engage in the interactive process (which requires an individualized assessment) to identify possible reasonable accommodations that exist which could include providing a separate office or workspace, additional personal protective equipment, telecommuting, or regular COVID-19 testing, if it does not pose an undue hardship on the County. Generally, insurers are required to cover the cost of testing without cost sharing – deductibles, copayments, co-insurance - when testing is ordered by a medical provider for diagnostic purposes; however, return to work program screenings do not have to be paid by a health plan. Therefore, where a reasonable accommodation of regular COVID-19 testing is the identified reasonable accommodation selected, the County would likely be required to pay this ongoing expense. The average cost for a COVID-19 PCR test is estimated to be approximately \$85.00 to \$95.00 each.

Number of Exemptions

Currently, we have approximately 6,800 employees. Of those, we know for certain that 2,046 employees have been vaccinated as they have requested an "I'm Vaccinated" badge and been verified in the vaccination database maintained by the State or via direct review of their vaccination card by the Human Resources Nurse Liaison. Obtaining the "I'm Vaccinated" badge is voluntary; therefore, we could have a higher number of employees that are vaccinated. Assuming we have the remainder of

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4,800 employees who require vaccination, it is difficult to ascertain the number of exemption requests that we will receive; however, their requests may not only include medical and religious exemptions, but personal and ethical exemptions as well. Meaning, while the personal and ethical exemptions will not qualify for an accommodation, each exemption request must be reviewed on its own to determine its nature and would require the review of any necessary follow-up information to ensure an accurate understanding of the nature of the request.

In determining the number of exemptions Human Resources can expect to receive, we can expect an equal or greater number of objections to the vaccine than we received from wearing a mask or face covering as a mask is significantly less intrusive. A review of data tracked by Houston Methodist, which mandated vaccines for 33,500 employees/credentialed private-practice staff, they received 393 exemptions and 332 deferral requests, for a total of 2% combined. Following this trend and applying 2% to our 6,800 employee population, we could easily expect at the minimum, at least 136 requests for exemptions. However, reviewing data concerning vaccine hesitancy provided by the Centers for Disease Control and Prevention, the estimated hesitancy² for obtaining vaccines in Pima County is 13.71% with an estimated 10.32% identified as "strongly hesitant." Using the "strongly hesitant" estimate of 10.32% of our 6,800 employees, identifies the maximum number of employees who may be opposed to vaccination as 702. Therefore, a projected number of requested exemptions can range anywhere from 136 to 702.

Because it is an individualized assessment with paper documentation required for both requests and denials/approvals, interactions with employees and their Departments, and regular reviews in the event the employee's circumstances or the Department's business needs change, this will be a time-consuming process. Currently, Human Resources has one Human Resources Nurse Liaison dedicated to COVID-19 efforts and we are recruiting for our ADA Coordinator position which is currently vacant.

COVID-19 Related Expenses to Date⁴

As of June 30, 2021, the County has 5,900 benefits eligible employees of which 5,130 employees and COBRA individuals are on the Aetna Plan. We have an additional 5,685 dependents on the plan for a total of 10,815 members. Between March 2020 and February 2021, insurers were required to cover the full costs of COVID-19 expenses and not permitted to apply cost sharing to its members, i.e.

¹ How to Develop a COVID-19 Employee Vaccination Policy, July 27, 2021, by Susan M. Miller, Robert A. Phillips, Roberta L. Schwartz, H. Dirk Sostman, Carole Hackett, and Marc L. Boom.

² Hesitant: includes survey responses indicating that they would "probably not" or "definitely not" receive a COVID-19 vaccine when available.

³ Strongly hesitant: includes only survey responses indicating that they would "definitely not" receive a COVID-19 vaccine when available.

⁴ This section relates only to the costs incurred and paid to Aetna and does not reflect any monies incurred or paid to CVS Pharmacy. Current vaccine administration costs billed by CVS Pharmacy to date are \$58,087; however, other costs for additional prescriptions or COVID-19 related costs have not yet been identified.

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deductibles, coinsurance, copayments, etc. Therefore, during this time period, the Health Care Benefits Trust (HBT) bore all COVID-19 expenses that were identified and coded by the medical provider/facility as COVID-19.⁵

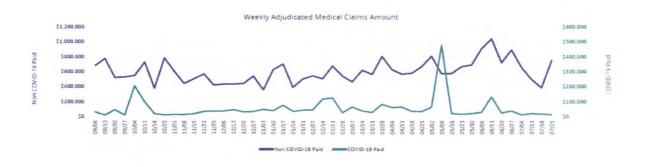
From January 2020 through June 2021, the HBT spent \$3.2 million for COVID-19 related claims that were coded as COVID-19. This was 6.9% of our total medical paid claims of \$46.5 million, and covered 5,308 unique claimants. Of this, 2,965 were employees and 2,343 were dependents. Testing was 20% of the total COVID-19 spend (\$625,851) for 3,989 members, of which 5,476 were viral tests and 1,138 were antibody tests. The total paid for vaccine administration for 1,860 members, during this time period, was \$93,865 with 1,535 members, or 15.40%, fully vaccinated.

A review of the past six months finds that our COVID-19 costs are increasing, with the HBT spending \$1.4 million for claims *incurred and paid* from January 2021, through June 2021. This amount reflects 9.5% of our total medical spend. During this time period, the *actual* cost paid for COVID-19 activity is estimated to be higher due to:

- A 30 to 45-day lag from time of treatment to payment of the claim; and,
- Cost sharing in effect March 2021 payment of deductibles, coinsurance, and copayments by members an additional cost not reflected in the \$1.4 million paid by the HBT.

It is important to also note that while individuals who are unvaccinated, partially vaccinated and elderly are most at risk for the new Delta variant, there is also a risk for medically compromised individuals. Currently 28.2% (3,003) of the Aetna members are identified as "at risk for severe illness" of which 36% are employees, 40% are spouses, and 10% are dependents.

Below is a weekly adjudication of Non-COVID-19 and COVID-19 claims paid from September 6, 2020, through July 25, 2021. Because the report is weekly, it does incorporate a lag; therefore, some claims likely were incurred a month or so prior to the payment.



⁵ The codes used represent the current best efforts to identify likely COVID-19 activity; however, there may be some expenses that were paid and not included as a COVID-19 activity if they were coded as something different.

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Factors to Review When Determining Whether to Mandate the Vaccine

In making the decision of whether or not to mandate vaccinations for employees, the County must weigh the employee's choice in obtaining the vaccination versus the County's obligation to provide a safe workplace. Discussion topics to take into account when making this decision include:

- Employee autonomy;
- Safety of employees, customers we serve, and families of both;
- Individuals currently housed in juvenile and adult detention centers;
- Evaluation of the risk of COVID-19 infection versus the risk of severe adverse reaction of the vaccine;
- Adequate amounts of vaccine supply;
- Cost of providing the vaccination to employees;
- Loss of employees due to vaccines becoming mandatory;
- Maintenance of list identifying vaccinated and unvaccinated employees and ensuring integrity of the data collected due to possible serious consequences for noncompliance;
- Exemption accommodation request deadline (prior to vaccination deadline);
- Imposition of vaccination deadline;
- Consequences of not obtaining the vaccine;
- Consistent handling of exemption requests and sufficient staff to handle these requests;
- Creation of a mandatory vaccination policy;
- Posting requirement of vaccinations in recruitments;
- Date by which newly hired employees must be vaccinated;
- Costs to the Health Benefit Insurance Trust for both the COVID-19 vaccine and COVID-19 testing; and,
- Whether to divert associated costs to the Self-Insurance Fund.

Consequences of Failing to Obtain Vaccination

If vaccines are mandated, employees must be notified of the deadline by which to be vaccinated and of the consequences of failing to become vaccinated. Decisions must be made as to how unvaccinated employees will be handled. Options for those employees that are not vaccinated by the provided deadline and have not been granted a religious or disability-related exemption may include termination from employment or requirement of weekly or biweekly COVID-19 testing. If testing is required, it must be determined what type of test is acceptable, but more importantly, who is paying for the test. Insurers and plans are not responsible for testing for general workplace health and safety or other purposes "not primarily intended" for individualized diagnosis or treatment of COVID-19. Therefore, if weekly or biweekly COVID-19 testing is required for non-vaccinated employees, either the employee or the County must cover the cost for ongoing COVID-19 testing expenses.

Please let me know if you need anything further.