January 29, 2021

The Honorable Gavin Newsom  
Governor, State of California  
State Capitol Building, First Floor  
Sacramento, CA 95814

RE: Urgent Concerns with Changes to California’s Vaccine Distribution System

Dear Governor Newsom,

On behalf of California’s counties and local health jurisdictions, the California State Association of Counties (CSAC), the Urban Counties of California (UCC), the Rural County Representatives of California (RCRC), the County Health Executives Association of California (CHEAC), the Health Officers Association of California (HOAC), and the county Latino Caucus of California are writing today to share our urgent concerns and recommendations regarding the plan to abruptly alter the state’s vaccine distribution system.

The proposal, for which there is little detail, threatens to eclipse our members’ core local public health expertise and functions. Currently, local health jurisdictions lead local vaccination efforts, but perhaps most importantly, they are face-to-face with an anxious public and administering actual vaccine – that is, shots into arms – at the ground level every day.

As your local government partners, we implore you to urgently focus on prioritizing local health jurisdictions for available vaccine, ensure meaningful and ongoing consultation with our members, and provide immediate fiscal resources for these local efforts.

We outline these concerns – along with our proposed solutions – below:

**Vaccine Allocation:** Currently, the California Department of Public Health (CDPH) consults with local health departments on vaccine allocations to providers throughout their jurisdiction. There is tremendous concern regarding a third-party administrator’s (TPA) role in vaccine allocation without the benefit of local context. However, our members are even more critically concerned with maintaining and increasing our ability to directly administer as many vaccines as possible to residents.

- **Proposed Solution:** Prioritize local health jurisdiction requests for doses of the vaccine. Ensuring supply for local health jurisdictions will help us continue to build momentum and
leverage our months of planning and effort to vaccinate the public. This will also ensure some attention to equity, as local health jurisdictions are the only entity tasked with and experienced at serving everyone in our communities.

**Partners, Not Just Providers:** Again, counties and local health jurisdictions are not simply vaccine providers who only serve a proscribed population. Instead, our members possess expertise on special populations, effective logistics, specialized outreach strategies, and granular knowledge of the local provider landscape. Any state effort to achieve efficiency without consultation and collaboration with local health jurisdictions every step of the way will surely falter, if not outright fail.

- **Proposed Solution:** Immediately partner with counties and local health jurisdictions to ensure the best chance of successfully vaccinating all Californians and saving lives. This includes planning, allocations, implementation, and ongoing efforts. CSAC respectfully requests a formalization of local health jurisdiction consultation with CDPH, the California Government Operations Agency, and your office moving forward.

**Resources:** Counties are in immediate need of cash resources to continue pushing out vaccines to our communities. Rapid, flexible, up-front funding is required regardless of the proposed new framework, as counties will continue leading vaccination efforts and reopening our economy and schools. Further, counties have already applied considerable resources to obtain and staff vaccination sites, develop online reservation systems, and mount both broad and targeted public affairs campaigns to increase vaccination rates. Any migration to a new vaccine framework risks marginalizing at best, and squandering at worst, these significant investments made by our historically underfunded local public health systems.

- **Proposed Solution:** Immediately dedicate $1.2 billion to counties and local health jurisdictions to support critical vaccine, testing, contact tracing, public health equity, and supports for the most vulnerable in the current year. Further investments in public health infrastructure are also desperately needed, but we have tailored this urgent request to critical activities requiring funding for the next six months.

Counties embrace the single driving goal of vaccinating as many Californians as quickly as possible. However, while efficiency and constant improvement is required of all of us in this unprecedented pandemic, any changes must be considered with caution, thoughtfulness, accurate data, and constructive input. Like everything related to COVID-19, the easy route is often confounded, and the consequences can mean the difference between life and death.

Additionally, counties acknowledge the context in which the state, local health departments, and providers are operating: an extreme scarcity of needed doses and uneven and inaccurate data. These two factors require caution and should limit the consideration of premature and wholesale changes to the current system. California’s overall vaccine distribution picture is further constrained by the fact that providers in the state have only been tasked with inoculating health care workers and, more recently, those 65 years old or older. Basing major decisions for change on current efforts at targeted inoculation is misleading and does not consider the efficiencies some providers have shown simply because they enjoy the advantage of focusing only on their own staff and patients.
County supervisors across the state and local health jurisdictions recognize the significance of the above requests, but prioritizing local jurisdictions for vaccines, committing to true partnership, and funding urgent COVID-19 activities represent the keys to success in navigating this stage of the pandemic.

Respectfully,

Graham Knaus  
Executive Director  
California State Association of Counties  
gknaus@counties.org

Jean Kinney Hurst  
Legislative Advocate  
Urban Counties of California  
jkh@hbeadvocacy.com

Paul Smith  
Senior Vice President, Governmental Affairs  
Rural County Representatives of California  
psmith@rcrcnet.org

Michelle Gibbons  
Executive Director  
County Health Executives Association of California  
mgibbons@cheac.org

Kat DeBurgh, MPH  
Executive Director  
Health Officers Association of California  
deburgh@calhealthofficers.org

Pedro Carrillo  
Executive Director  
Latino Caucus of California Counties  
Pedro@prime-strategies.com

cc: The Honorable Nancy Skinner, Chair, Senate Budget and Fiscal Review Committee  
The Honorable Phil Ting, Chair, Assembly Budget Committee  
Honorable Members, Senate Budget and Fiscal Review Committee  
Honorable Members, Assembly Budget Committee  
Ana Matosantos, Cabinet Secretary, Office of Governor Newsom  
Dr. Mark Ghaly, Secretary, California Health and Human Services Agency  
Yolanda Richardson, Secretary, California Business Operations Agency  
Dr. Tomás Aragón, Director and State Public Health Officer, California Department of Public Health  
Keely Bosler, Director, Department of Finance  
CSAC Board of Directors  
CSAC Legislative Coordinators  
CSAC County Caucus