FREQUENTLY ASKED QUESTIONS ABOUT COVID-19 PREVENTION, IMMUNITY AND VACCINATION

About the COVID-19 Vaccine and How to Get It

1. Is there a cost for the vaccine?
There will be no cost. You will receive the COVID-19 vaccine with $0 copayment.

2. Will only providers in the MCS Classicare network administer the vaccine to members?
No. You can get the COVID-19 vaccine at the most convenient place for you through participating and non-participating providers.

3. When is the vaccine expected to be available in Puerto Rico?
The vaccine has been available in Puerto Rico since December 15. Stay tuned for information your plan will be sharing with you to find out your turn for getting the vaccine.

4. What should I do right now if I haven't yet received the vaccine?
For the time being, you must wait for the official information and follow prevention and safety recommendations, such as:

- Frequently washing your hands
- Social distancing
- Wearing a mask or face covering that covers your nose and mouth when with other people
- Covering your mouth and nose with a tissue when you cough or sneeze, or with the inside of your elbow if you don't have a tissue available.
- Cleaning and disinfecting
- Monitoring your health daily

5. Will there be enough vaccines for everyone?
The vaccine continues to be produced, and will be made available in phases as it arrives in Puerto Rico. Stay tuned for communications to find out when and where you can get vaccinated.

6. How many COVID-19 vaccines are available?
Several COVID-19 vaccines are being developed. As safety and efficacy testing is completed, the FDA (Food and Drug Administration) will be approving the vaccines for availability to the population.

7. When can I receive the vaccine?
The vaccine will be handled in phases. At this time, you must wait and stay tuned for official information to find out when it will be available for you. We will be offering more detailed information on vaccine access later.

8. Why is it necessary to be vaccinated if we have other measures such as social distancing and masks to prevent the spread of the virus that causes COVID-19?
To stop the pandemic, it's necessary to use all available tools. The vaccines work with the immune system to prepare your body to fight the virus, if exposed to it. Other measures, such as wearing a mask to cover your nose and mouth, and social distancing (minimum of 6 feet), help reduce your risk of exposure to the virus or spreading it to others. The best protection against COVID-19 will be the vaccine, plus following recommendations to protect others from COVID-19.

Preventive Measures even after getting the COVID-19 vaccine

9. After receiving the first dose of the vaccine, can I stop wearing a mask and have close contact with people again?
Currently, there is not enough information to determine when the CDC (Centers for Disease Control) will stop recommending masks and to avoid direct contact with others to prevent the spread of the COVID-19 virus. Experts need to learn more about the protection offered by the COVID-19 vaccines before making that decision.

10. If I've already received both doses of the vaccine, should I continue wearing a mask and avoid close contact with others?
Yes. While experts learn more about COVID-19 vaccine protections, it's important we all continue following the prevention measures available to help stop this pandemic. Therefore, you must continue wearing a mask that covers your mouth and nose, wash your hands frequently, and keep a distance of at least 6 feet from others.

COVID-19 Immunity

11. Does post-COVID-19 immunity last longer than the protection provided by COVID-19 vaccines?
The protection a person acquires after having been infected (called natural immunity) varies depending on the disease and one's immune system. Since the virus is new, we don't know how long natural immunity could last. As for the vaccine, we won't know how long immunity will last until we have more data on the vaccine's effectiveness.

Both natural and vaccine-induced immunity are important aspects of COVID-19 experts are trying to learn more about. Health authorities will provide more information to the public when evidence is available.

12. What percentage of the population needs to be vaccinated for massive, community or "herd" immunity against COVID-19?
Experts are unaware of what percentage of people should be vaccinated to achieve mass or "herd" immunity against COVID-19. Mass or "herd" immunity is a term used to describe when a sufficient number of people are protected, either from a previous infection or through vaccination and it's unlikely a virus or bacteria can spread and cause a disease.

Vaccination for Special Populations with Underlying Medical Conditions

13. If I receive the first dose of the Pfizer-BioNTech vaccine, how soon should I get the second dose?
Each approved COVID-19 vaccine will have specific instructions. For the Pfizer-BioNTech vaccine, it is recommended a 2-dose series be administered intramuscularly 3 weeks apart.

- Administration of the second dose is considered valid within a grace period of four days, and refers to day 17 to 21 of the first dose.
- If more than 21 days after the first dose, the second should be given as soon as possible (but none needs to be repeated).
- Both doses are necessary for protection. The efficacy of a single dose has not been systematically evaluated.

14. Can I receive the first dose of the Pfizer-BioNTech vaccine and the second from another manufacturer?

- At this time, research indicates that the Pfizer-BioNTech COVID-19 vaccine is not interchangeable with others, as safety and efficacy have not been evaluated.
- People receiving the first dose of the Pfizer-BioNTech COVID-19 vaccine should receive the second dose within the same product.
- If doses from two different COVID-19 ARNm vaccines are administered inadvertently, no additional doses of any of the vaccines are recommended at this time.

15. Can I get the COVID-19 vaccine simultaneously with another type of vaccine for another disease?
Due to the lack of safety and efficacy data on vaccines administered simultaneously with others, the Pfizer-BioNTech COVID-19 vaccine must be administered alone, with a minimum of 14 days before or after the administration of any other vaccine (Example: the flu vaccine).

16. The vaccination for those previously infected with or exposure to COVID-19
The vaccine should be offered to people regardless of their history of previous SARS-COV2 infection, whether symptomatic or asymptomatic. Clinical trial data suggests the vaccine is safe and likely effective for these people.

17. Should people currently infected with COVID-19 get the vaccine?
Vaccination should be postponed until the person recovers from the acute disease (if there are symptoms) and the quarantine criteria have been met.

There is no minimum interval between infection and vaccination. However, current evidence suggests that reinfection is rare within 90 days of the initial infection. Therefore, those with acute infection over the previous 90 days can postpone vaccination until the end of this period, if desired.

18. Can people who previously received antibody therapy to treat COVID-19 receive the vaccine?
Currently, no data are available on the safety or efficacy of COVID-19 vaccines for those who received monoclonal antibodies or convalescent plasma as part of a preventive COVID-19 treatment.

Vaccination should be postponed for a minimum of 90 days to avoid interference with vaccine-induced immune response treatment. This is based on the estimated life of these therapies and evidence suggesting reinfection is rare within 90 days of initial infection. Talk to your doctor or vaccine provider.

Vaccination in Special Populations with Underlying Medical Conditions

The COVID-19 vaccine can be given to those with underlying medical conditions who do not have vaccine contraindications. Clinical trials show a similar safety and efficacy profile in those with underlying medical conditions, including those at increased risk of severe COVID-19, compared with those without comorbidity.

19. Is the COVID-19 vaccine safe and effective for immunocompromised people?
Those with HIV and other immunosuppression conditions (including drug use) may have an increased risk of a severe illness if infected with COVID-19:

- No data are available on the safety and efficacy of the vaccine in these groups. However, they may receive the COVID-19 vaccine.
- No data are available on the safety and efficacy of the vaccine in immunocompromised people. However, there is a chance that the immune response will be minimal. Therefore, they must follow all current prevention measures to protect against COVID-19.

20. Is the COVID-19 vaccine safe for pregnant women?
No data are available on the safety of COVID-19 vaccines in pregnant women.

However, ARNm vaccines:

- Do not contain live viruses.
- Are rapidly degraded by normal cellular processes, and do not enter the cell's nucleus.
- COVID-19 and pregnancy:
  - Pregnancy may pose an increased risk of the disease.
  - Increased risk of adverse pregnancy or outcomes, such as a pre-term birth.
  - If a woman is pregnant and part of a group (Example: health personnel) recommending to get the COVID-19 vaccine, she may choose to be vaccinated. A conversation with one's healthcare provider may help with an informed decision.

21. Is the vaccine safe for breastfeeding women?

- There are no data on the safety of COVID-19 vaccines for nursing women, nor on the effects of ARNm vaccines on the infant or milk production or excretion.
- This vaccine does not contain live viruses, and is not believed to be a risk to the infant.
- If a woman is part of a group (Example: health personnel) recommending COVID-19 vaccination, and is pregnant, she may choose to be vaccinated.

Note: Information on the COVID-19 virus and vaccines is constantly being researched, so the information provided may change. For updated information, go to: **https://espanol.cdc.gov/coronavirus/2019-ncov/vaccines/index.html**

References:

- National Center for Immunization and Respiratory Diseases (NCIRD), Division of Viral Diseases. Last Update: December 13, 2020. https://espanol.cdc.gov/ coronavirus/2019-ncov/vaccines/index.html.
- COVID-19 Vaccine Providers Communication. Assistant Secretary of Family Health, Integrated Services and Health Promotion, Vaccination Program. Puerto Rico Department of Health.

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