

Mandatory COVID-19 Vaccination Policy

Policy Number: COVID19-21

Policy: Great Lakes Bay Health Centers (GLBHC) will maintain compliance with the Federal COVID-19 Vaccine Mandate, as established in the Centers for Medicare & Medicaid (CMS) Interim Final Rule entitled “Medicare and Medicaid Program; Omnibus COVID-19 Health Care Staff Vaccination”.

Background: CMS issued an emergency regulation effective November 5, 2021, requiring COVID-19 vaccination of all staff at all healthcare facilities that participate in the Medicare and Medicaid programs regardless of clinical responsibility or patient contact. Because compliance with the rule is a requirement of participation in Medicare and Medicaid, failure to comply would result in the loss of GLBHC’s status as a Federally Qualified Health Center and closure of all GLBHC locations and services.

Purpose:

Vaccination is a vital tool to reduce the presence and severity of COVID-19 cases in the workplace, in communities, and in the nation as a whole. Great Lakes Bay Health Centers has adopted this policy on mandatory vaccination to safeguard the health of our employees from the hazard of COVID-19 and to remain compliant with CMS regulations.

Scope:

This Mandatory COVID-19 Vaccination Policy applies to all eligible staff, both current and new, working at a facility regardless of clinical responsibility or patient contact, including the following:

- GLBHC Employees
- Students
- Trainees
- Volunteers
- GLBHC Board of Directors
- Individuals who provide care, treatment, or other services for GLBHC and/ or GLBHC patients, under contract or by other arrangement

All individuals covered by this policy are required to be fully vaccinated as a term and condition of employment, training, or contracted service provision at GLBHC. Individuals are considered fully vaccinated two weeks after completing primary vaccination with a COVID-19 vaccine, with, if applicable, at least the minimum recommended interval between doses. All affected individuals are required to report their vaccination status and to provide proof of vaccination to the Corporate Immunization Coordinator or designee. All affected parties must provide truthful and accurate information about their COVID-19 vaccination status. Employees not in compliance with this policy will be subject to discipline up to and including termination for failing to meet conditions of employment.

GLBHC has established protocols for employees to request exemption from this mandatory vaccination policy as well as pertinent accommodations. Exemption may be requested if the vaccine is medically contraindicated, medical necessity requires a delay in vaccination, or for religious reasons. Individuals

may be legally entitled to a reasonable accommodation if they cannot be vaccinated due to a disability, or if the provisions in this policy conflict with a sincerely held religious belief, practice, or observance as required by federal and state law. Requests for exemptions and reasonable accommodations must follow the procedures set forth in this policy. All such requests will be handled in accordance with applicable laws and regulations.

Staff who are fully vaccinated against COVID-19, as well as staff who are granted an accommodation under this policy, will still be required to comply with all applicable current policies and guidelines for masking, social distancing, and PPE use by the CDC, state and local governments, or GLBHC policy.

Protocol:

Overview and General Information

All individuals outlined in the scope above, must have proof of having received, at a minimum, the first dose of a two-part COVID-19 vaccine (Moderna or Pfizer BioNTech) or a single dose of a one-part (Janssen/ Johnson & Johnson) COVID-19 vaccine by **12/5/2021**. Any employee that has not received at least a first dose of COVID-19 vaccine, and does not have an approved exemption on file, will begin a two week unpaid suspension beginning 12/6/2021. Any employee who fails to receive a first dose of COVID-19 vaccine by the end of the two-week suspension period will be considered no longer in compliance with the terms of employment with GLBHC. Students, trainees, and volunteers who fail to have received a first dose of COVID-19 vaccine on or before 12/5/2021 will not be allowed to continue in any onsite training or volunteer activities until a status of fully vaccinated is achieved. Employees of vendors that require onsite interactions with GLBHC patients and/ or employees must receive at least a first dose of COVID-19 vaccine on or before 12/5/2021 to provide those onsite services.

All doses of a two-part COVID-19 vaccine, such as Moderna or Pfizer-BioNTech, with recommended intervals in between doses, must have been received by **1/4/2022** unless an approved delay has been documented. Employees who decline the COVID-19 vaccination and do not have an approved exemption and/ or accommodation by 1/4/2022 will be ineligible for continued employment. Upon proof of compliance, employees may be eligible for re-hire at a later date.

Employees who may have received only one dose of a two-dose vaccine regimen on the established 1/4/2022 deadline, due to a justified delay, will be subject to additional precautions to mitigate the transmission and spread of COVID-19.

Vaccination at GLBHC can be coordinated through the assigned employee health nurse or the Corporate Immunization Coordinator.

Contracted Employees/ Employees of Vendors

Persons providing full, part-time, or occasional services to GLBHC that require entry to GLBHC facilities and interaction with employees and/ or patients must comply with this vaccine policy. Individuals who provide short-term (less than 15 minutes) ad-hoc services at GLBHC outside of a written contract (delivery drivers, emergency services, exigent repair services, company representatives, etc.) are not subject to this policy. This policy does not apply to contractors providing services strictly outside (e.g. lawn care). Covered contractors must ensure that all covered contractor employees are fully vaccinated for COVID-19. Should GLBHC have an urgent, mission-critical need for contractor to have employees begin work at a GLBHC facility before becoming fully vaccinated, GLBHC may approve an exception for the contractor—in the case of such limited exceptions, the contractor must ensure these employees are

fully vaccinated within 60 days of beginning work at a GLBHC facility. The covered contractor must further ensure that such employees comply with masking and physical distancing requirements.

The covered contractor must review its covered employees' documentation to prove vaccination status. GLBHC will require each vendor to complete the Vendor Vaccination Status Form (see Attachment A). The vendor must be able to provide the required documentation upon request from GLBHC.

New Hires:

All new employees are required to comply with the vaccination requirements outlined in this policy as soon as practicable and as a condition of employment. Once an offer of employment is extended, documentation related to vaccine status will be collected.

Vaccination Status and Acceptable Forms of Proof of Vaccination

All vaccinated employees are required to provide proof of COVID-19 vaccination, regardless of where they received vaccination. Proof of vaccination status can be submitted via email or interoffice mail to the Corporate Immunization Coordinator.

Acceptable proof of vaccination status is:

1. The record of immunization from a healthcare provider or pharmacy
2. A copy of the COVID-19 Vaccination Record Card
3. A copy of medical records documenting the vaccination
4. A copy of immunization records from a public health, state, or tribal immunization information system
5. A copy of any other official documentation that contains the type of vaccine administered, date(s) of administration, and the name of the healthcare professional(s) or clinic site(s) administering the vaccine(s).

Supporting COVID-19 Vaccination

GLBHC will pay a GLBHC employee for reasonable time spent during normal work hours to receive a COVID—19 vaccine. Alternatively, an employee may choose to be vaccinated outside of normal work hours at his or her own expense but managers cannot require it. Employees may utilize up to one workday of PTO immediately following each dose if they have side effects from the COVID-19 vaccination that prevent them from working. Employees who have insufficient PTO will be granted up to one day of negative PTO immediately following each dose if necessary. Any and all requests for use of PTO are to be coordinated and communicated with the employee's direct supervisor.

Requests for Exemption:

GLBHC provides reasonable accommodations, absent undue hardship, to (i) employees with sincerely held religious beliefs, observances, or practices that conflict with this policy and to (ii) qualified employees with disabilities for whom a COVID-19 vaccine is medically contraindicated or any other employee for whom a COVID-19 vaccine is medically contraindicated.

GLBHC employees may request an exemption from this mandatory vaccination policy if the vaccine is medically contraindicated for them or medical necessity requires a delay in vaccination. Employees also may be legally entitled to a reasonable accommodation if they cannot be vaccinated because of a disability, or if the provisions in this policy for vaccination conflict with a sincerely held religious belief, practice, or observance. Requests for exemptions and reasonable accommodations must be initiated by submission of the relevant exemption form (see attachments) to the GLBHC Vaccine Exemption Review

Committee. All such requests will be reviewed in accordance with applicable laws and regulations and GLBHC's applicable policies and procedures. Accommodations will be granted only as required by applicable law and in such a manner that does not cause GLBHC undue hardship or pose a direct threat to the health and safety of others. GLBHC reserves the right to review and assess the necessity and efficacy of any granted accommodations and to rescind or modify any accommodation considering changes of circumstances or applicable case law, statutes or guidelines.

Employees requesting an exemption from this policy due to a medical contraindication, disability or because of a sincerely held religious belief must submit a completed exemption/ accommodation request form to GLBHC's Corporate Immunization Coordinator via email (employeehealth@glbhealth.org) or interoffice mail (Attn: Corporate Immunization Coordinator at Administration):

Request for Medical Exemption/ Accommodation (Attachment B): Employees seeking exemption or delay due to a qualifying disability or diagnosis must submit a request complete with a certification from the employee's medical provider. Documentation related to the medical condition may not be more than three months old.

Request for Religious Exemption/ Accommodation (Attachment C): Employees seeking exemption or delay due to a sincerely held religious belief must submit a completed request form.

All exemption/ accommodation requests will be reviewed by the GLBHC Exemption Review Committee and may include interactive dialogue to determine if an accommodation is reasonable and can be granted without causing undue hardship or posing a direct threat to the health and safety of others (staff, patients, etc.). Employees will be notified within 10 working days if the submitted exemption request is approved or denied. If approved, determinations will be made if reasonable accommodation can be made.

Confidentiality and Privacy:

All medical information collected from individuals, including vaccination information will be treated in accordance with applicable laws and policies on confidentiality and privacy.

Reviewed by: GLBHC Board of Directors, GLBHC COVID Command Staff

Effective Date: November 19, 2021

Review Date:

Approval: *Douglas Saylor, MD*
Douglas Saylor, MD- Chief Medical Officer



Contractor/Vendor Vaccination Status Form

The Contractor & Vendor employees who work inside a GLBHC site listed below have completed a primary vaccination series for COVID-19. Each Contractor/Vendor must complete this form by December 4th, 2021 and return it to GLBHC.

Please update this form for any new staff hired after December 4, 2021.

Company Name	Employee's Name (Print)	Date

Return completed form to Alan Malesky @ amalesky@glbhealth.org



Request for Medical Exemption / Accommodation: COVID-19 Vaccination

To request exemption from required vaccinations, please complete Section 1 below and have your medical provider complete Section 2 before returning this form to the human resources department.

Section 1

Name (print): _____	Date: ____ / ____ / ____
Site/Dept: _____	Position: _____
Manager: _____	Work/Cell Phone: _____
<p>I am requesting a medical exemption and/ or accommodation from Great Lakes Bay Health Center’s mandatory COVID-19 vaccination policy due to the following:</p> <p><input type="checkbox"/> Severe allergic reaction (e.g. anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine</p> <p><input type="checkbox"/> Known diagnosed allergy to a component of the COVID-19 vaccine</p> <p><input type="checkbox"/> Other: _____</p> <p>_____</p> <p>_____</p>	
<p>Please describe the specific accommodation(s) you are requesting at this time: _____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

I verify the information I am submitting to substantiate my request for exemption from GLBHC’s vaccination policy is true and accurate to the best of my knowledge. I understand that any falsified information can lead to disciplinary action, up to and including termination.

I further understand that GLBHC is not required to provide this exemption and/ or accommodation if doing so would pose a direct threat to others or myself in the workplace or would create an undue hardship for GLBHC.

Employee Signature	Date

Section 2

Medical Certification for Medical Exemption

Employee Name: _____

Dear Medical Provider,

GLBHC requires vaccination against COVID-19 as a condition of employment. The individual named above is seeking an exemption to this policy due to medical contradictions.

Please complete this form to assist GLBHC in the reasonable accommodation process.

The person named above should not receive the following COVID-19 vaccine:

- Pfizer-BioNTech COVID-19 Vaccine/ Comirnaty Vaccine
- Moderna COVID-19 Vaccine
- Janssen (Johnson & Johnson) COVID-19 Vaccine

The exemption from COVID-19 vaccine is due to:

- Severe allergic reaction (e.g. anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine
- Known diagnosed allergy to a component of the COVID-19 vaccine
- Other: _____

This exemption should be:

- Temporary expiring on ___/___/___, or when _____
- Permanent

The above named individual is under my care. I certify the above information to be true and accurate, and request exemption from the COVID-19 for the above named person.

Medical Provider Name (print): _____

Medical Provider Signature: _____ Date: ___/___/___

Practice Name and Address: _____

Provider Phone: _____

GLBHC USE ONLY

Date of initial request: ___/___/___

Date certification received: ___/___/___

Accommodation Request

Approved ___/___/___

Describe specific accommodation details:

Denied ___/___/___

Describe why accommodation is denied:



Request for Religious Exemption / Accommodation

Part 1 - To be completed by Employee

Name (print): _____

Date: ____ / ____ / ____

Site / Dept: _____

Position: _____

Manager: _____

Work/Cell Phone: _____

Please specify the religious belief, practice, or observance that is the basis for your request for accommodation:

Please specify the work requirement that conflicts with the religious belief, practice or observance described above and explain the nature of the conflict.

Please describe the specific accommodation(s) that you are requesting at this time, including an explanation of how the requested accommodation(s) will enable you to meet your religious obligations.

What are some other accommodation options that might address your needs?

If you have requested religious accommodation before, please state approximately when the

request was made, the name of the individual who responded to the request, and the outcome of the request.

In some cases, GLBHC will need to obtain additional information and/or documentation about your religious practice(s) or belief(s). We may need to discuss the nature of your religious belief(s), practice(s) and accommodation with your religion’s spiritual leader (if applicable) or religious scholars to address your request for an exemption. If requested, can you provide documentation to support your belief(s) and need for accommodation?

Yes ___ No ___

If no, please explain why:

Verification and Accuracy

I verify that the information that I am submitting in support of my request for accommodation is complete and accurate to the best of my knowledge, and I understand that any intentional misrepresentation contained in this request may result in disciplinary action. I also understand that my request for an accommodation may not be granted if it is not reasonable, if it poses a direct threat to the health and/or safety of others in the workplace and/or to me, or if it creates undue hardship on the Company.

Signature: _____ Date: ___/___/___

Part 2 – To be completed by GLBHC

Date this Request Form Received: ___/___/___

Interactive Discussion Date(s) if applicable:

Documentation provided if applicable:

Exemption / Accommodation granted? Yes ____ No ____

Describe Exemption / Accommodation:

If Exemption / Accommodation granted, list required alternative safety precautions required:

If Exemption / Accommodation not granted, explain why:

Name of Representative: _____

Signature of Representative: _____ Date:

____/____/____