

## **Updated Frequently Asked Questions COVID-19 Vaccine (as of 23 Feb 21)**

### **Vaccine Basics**

#### **Q. Who should receive COVID-19 vaccine?**

A. The goal is for everyone to easily get a COVID-19 vaccination as soon as large quantities of the vaccine are available. Because the supply of COVID-19 vaccine in the United States is currently limited, the Centers for Disease Control and Prevention is providing [recommendations](#) to federal, state, and local governments on who should be vaccinated first. Each state has its own plan for deciding which groups of people will be vaccinated first. You can contact your military hospital or state health department for more information on its plan for COVID-19 vaccination.

#### **Q. Who should NOT receive COVID-19 vaccine?**

A. If you have had a severe allergic reaction to any ingredient in an mRNA COVID-19 vaccine, you should not get either of the currently available mRNA COVID-19 vaccines. If you had a severe allergic reaction after getting the first dose of an mRNA COVID-19 vaccine, the Centers for Disease Control and Prevention recommends that you should not get the second dose. If you have had an immediate allergic reaction—even if it was not severe—to a vaccine or injectable therapy for another disease, ask your doctor if you should get a COVID-19 vaccine. Your doctor will help you decide if it is safe for you to get vaccinated.

#### **Q. What can I do now while I wait for the vaccine?**

A. It's still important to follow Centers for Disease Control and Prevention guidelines to help stop the spread of COVID-19. This includes wearing masks, washing hands, restriction of movement, and physical distancing. The more steps you and your family can take to prevent the spread of COVID-19, the safer you'll be. This is true even after you get your vaccine.

#### **Q: Will we still need to wear masks and practice physical distancing once a vaccine is available?**

A: Yes. The intent of the vaccine is to prevent the spread of COVID-19. We'll still need to wear appropriate face coverings and practice physical distancing in order to limit the spread of the virus. Additionally, initially, we will not have enough vaccine for everyone who wants it and the COVID-19 pandemic risks will continue. We will continue to recommend wearing masks and practicing physical distancing, for everyone, until the pandemic risk of COVID-19 is substantially reduced.

#### **Q. How will the DoD track personnel who receive a COVID-19 vaccine?**

A. Everyone who receives a COVID-19 vaccine will be tracked through existing medical record reporting systems.

#### **Q. Why should we receive the first-available vaccine when there are several other vaccines still in trials?**

A. People who are offered the first-available vaccine are considered to be in groups that are most in need of COVID-19 protection. Vaccinated people will be protecting themselves, as well as their families and all people with whom they interact. Evaluation of the first-available vaccine will continue, even after its pre-licensure release. The release of other vaccines cannot be fully predicted, so people who are offered the first-available vaccine are encouraged to receive it.

**Q. Why should I get the vaccine?**

A. According to the Centers for Disease Control and Prevention, a COVID-19 vaccine is an important tool in stopping the pandemic. It may be an effective way to lower your risk of contracting COVID-19, and it may help keep you from getting seriously ill if you do catch the virus. Getting vaccinated also protects the health of the people around you—especially those who are at increased risk of severe illness from COVID-19.

**Q. When can I get the COVID-19 vaccine?**

A. Each location may be at different phases of the DoD Population Schema. To know when you're able to get it, please contact your local military hospital or clinic. Continue following @TRICARE for more information. Visit your military hospital's website or social media to stay informed about their vaccination process and availability.

**Q. Where can I get the COVID-19 vaccine?**

A. The availability of the vaccine may vary by location. Eventually, you'll be able to get the vaccine at:

- Your local military hospital or clinic.
- Your civilian provider.
- TRICARE network pharmacies.
- TRICARE non-network providers or TRICARE non-network pharmacies.

If you visit a non-network provider or pharmacy, you may need to pay a cost-share based on your plan, and file a claim for reimbursement. The vaccine itself is offered at no cost, but there may be a cost based on your plan for an office visit or if you require follow-on care. Wherever you eventually receive your vaccination, please remember you need to check availability before showing up.

**Q. Am I required to get my COVID-19 vaccine at a military treatment facility?**

A. No. Service members who are not able to access a DoD vaccination site and elect to receive the COVID-19 vaccine through non-DoD channels must provide documentation of receipt of the vaccination to their unit for documentation in appropriate medical readiness systems. Dependents of active duty service members, retirees, and other eligible DoD beneficiaries are eligible to receive COVID-19 vaccinations and encouraged to access COVID-19 vaccines through existing processes at military treatment facilities or through the private sector care component of TRICARE.

**Q. Where can you sign up to get the COVID-19 vaccine?**

A. Each military hospital or clinic may have a different process in place for signing up to get the vaccine. We encourage you to check with your local military hospital or clinic.

**Q. How much does the COVID-19 vaccine cost?**

TRICARE will cover the cost of the vaccine from any location, but if you go to a civilian provider, there may be a cost for an office visit based on your plan. Those who receive their vaccine through a civilian pharmacy should not be billed. Active duty service members will require a referral from their primary care manager to get the vaccine from a TRICARE-authorized civilian provider, but a referral is not required to get the vaccine from a civilian pharmacy. To learn more, visit:

<https://tricare.mil/HealthWellness/HealthyLiving/Coronavirus/COVID-Vaccine>

**Q. What should I do once I have received my vaccine?**

A. If you've already received your first dose of the COVID-19 vaccine, you can sign up for [v-safe](#). V-safe is a smart-phone based tool developed by the Centers for Disease Control and Prevention, that uses text messaging and web surveys to provide personalized health check-ins after you receive a COVID-19 vaccine. Through v-safe, you can quickly tell the CDC if you have any side effects after getting the COVID-19 vaccine. V-safe will also remind you to get your second COVID-19 vaccine dose if you need one.

**Q: How will I be able to keep track of what vaccine I have received and when I need to get a second dose?**

A: All vaccine recipients will be provided a copy of the Centers for Disease Control and Prevention COVID-19 Vaccination Record Card after receipt of the vaccine. It is recommended that the second-dose appointment be made at the time of initial vaccinations, or instructions provided on procedures for a second dose follow-up. If a vaccine recipient has a smartphone, it is recommended that they take a photo of the vaccination record card as a back-up copy and set a calendar reminder for receipt of the second dose.

**Q. I have received my first dose of Pfizer but I am moving overseas and they only have Moderna. Can I get Moderna as my second dose?**

A. mRNA COVID-19 vaccines are not interchangeable with each other. Therefore, you should take all necessary planning steps to ensure you are at a location that has the same vaccine product as your first dose. However, the Centers for Disease Control and Prevention has stated that in truly exceptional circumstances in which the first dose vaccine product cannot be determined or is no longer available, any available mRNA COVID-19 vaccine may be administered at a minimum interval of 28 days between doses to complete the mRNA vaccine series.

**Q. If I volunteer to get the vaccine and have issues later in life related to the vaccine, will the Department of Defense cover vaccine related medical support after I am out of the military?**

A: Within certain limits, military members who incur or aggravate an injury, disease or illness in a qualifying duty status are covered for that episode of care under the Line of Duty authority. Determinations on any benefits from the Veterans Health Administration (VHA) will be made by the VHA. All individuals vaccinated with a Food and Drug Administration-authorized/approved COVID-19 vaccine may be eligible for compensation for adverse reactions under other programs, including: the Countermeasures Injury Compensation Program (CICP) program, National Vaccine Injury Compensation Program (VICP), applicable Workers Compensation authorities and other sources of care for which eligible (e.g., at Federally Qualified Health Centers in their community).

**Q. Where does one get a "vaccine card"?**

A. You'll get a copy of the Centers for Disease Control and Prevention COVID-19 Vaccination Record Card when you get the first dose of the vaccine. It is recommended that the second-dose appointment be made at the time of initial vaccine, or you get instructions about procedures for second dose follow-up. If you have a smartphone, it is recommended that you take a photo of the vaccination record card as a back-up copy and set a calendar reminder for receipt of the second dose.

## **Recent Infections, Vaccine Allergies, Doses, Immunity**

### **Q. If I have symptoms of COVID-19, should I delay getting the COVID-19 vaccine?**

A. Yes. If you have symptoms of COVID-19, you should delay getting the COVID-19 vaccine until you are well

### **Q: If I've already recovered from COVID-19 infection, do I need to be vaccinated?**

A: Because the duration of immunity from natural infection with COVID-19 is unknown, vaccine may have value in protecting people who have already had the disease. Early evidence suggests natural immunity from COVID-19 may not last very long, but more studies are needed to better understand this. Talk with your provider if you have been previously infected with COVID-19.

### **Q. I have allergies, but they are not related to getting vaccines. Should I get the COVID-19 vaccine?**

A. The Centers for Disease Control and Prevention recommends that people with a history of severe allergic reactions not related to vaccines or injectable medications - such as food, pet, venom, environmental, or latex allergies - get vaccinated. People with a history of allergies to oral medications or a family history of severe allergic reactions may also get vaccinated.

### **Q. I had a severe reaction to an ingredient in an mRNA COVID-19 vaccine, should I get my second mRNA COVID-19 vaccine?**

A. If you had a severe allergic reaction after getting the first dose of an mRNA COVID-19 vaccine, the Centers for Disease Control and Prevention recommends you should not get the second dose. Talk to your healthcare provider.

### **Q. Should I get other vaccines not related to COVID-19, such as the flu or shingles vaccine with or near the time I get my COVID-19 vaccine?**

A. COVID-19 vaccine series should be administered alone, with a minimum of 14 days before or after receiving other vaccines. The exception would be situations where the benefits of vaccination are deemed to outweigh the potential unknown risks of vaccination co-administration. For example, needing a tetanus, measles or hepatitis A shot during an outbreak.

### **Q: What kind of information will be available to me before I receive the vaccine?**

A: Each potential recipient of COVID-19 vaccine will receive a vaccine-specific Emergency Use Authorization (EUA) Fact Sheet for Recipients from the FDA, which will provide the following information:

- Basic information on COVID-19, symptoms, and what to discuss with a health care provider before vaccination
- Who should and should not receive the vaccine
- That recipients have the choice to receive the vaccine
- Dosage and vaccine series information
- Risks and benefits of the vaccine
- An explanation of what an EUA is and why it is issued
- Any approved available alternatives for preventing COVID-19
- Additional resources

**Q. How many doses of the vaccine will I need?**

A: The COVID-19 vaccines currently authorized are given in a 2-dose series. The vaccines are NOT interchangeable and a vaccine recipient's second dose must be from the same manufacturer as the first dose. Arrangements for scheduling a second dose and setting a reminder can be made while you are getting your first dose. The series does not have to be restarted if there is greater time than recommended between the first and second dose. The two COVID-19 vaccines currently available are administered in two doses, either 21 (Pfizer) or 28 days (Moderna) after the first dose. Check with your local military hospital or clinic to see which product they are administering to see how long between each dose.

**Q. Is immunity from the COVID-19 vaccine better than natural immunity from infection?**

A: Getting COVID-19 may offer some natural protection, but experts don't know how long this protection lasts, and the risk of severe illness and death from COVID-19 far outweighs any benefits of natural immunity. COVID-19 vaccination will help protect you by creating an antibody (immune system) response without having to experience sickness.

**Q. What if you go beyond 42 days between doses — is it still advisable to get the second dose?**

A. You should always get your required second dose as soon as possible within the established parameters since there is currently limited data on efficacy of mRNA vaccines administered beyond the stated windows.

**Q. I just received an antibody treatment for COVID-19, when can I get the vaccine?**

A. If you have received convalescent plasma or monoclonal antibodies, you should defer getting a COVID-19 vaccine for 90 days.

**Q. Can mRNA vaccines cause infertility in women?**

A. There is no scientific evidence to suggest that the vaccine could cause infertility in women. In addition, infertility is not known to occur as a result of natural COVID-19 disease, further demonstrating that immune responses to the virus, whether induced by infection or a vaccine, are not correlated with infertility. The currently available COVID-19 vaccines are mRNA vaccines. They contain a small piece of the SARS-COV-2 virus's genetic material that instructs cells in the body to make the virus's distinctive "spike" protein. After a person is vaccinated, their body produces copies of the spike protein, which does not cause disease, and triggers the immune system to learn to react defensively, producing an immune response against SARS-COV-2. This protein is not the same as any involved in formation of the placenta.

## **Schema Information and Vaccine Recipients**

### **Q. Who is getting the vaccine first?**

A. The first supply of the vaccine is limited. The first vaccines will be given in phases. The first phases will be for:

- Individuals providing direct medical care
- Individuals maintaining essential installation functions
- Deploying forces
- Individuals at the highest risk for developing severe illness from COVID-19
- Adults age 75 and older

Vaccines will be offered to other TRICARE beneficiaries as more vaccines are available and after priority individuals have been vaccinated.

### **Q. What phase is the DoD currently on?**

A. Each military hospital or clinic may be in different phases of the DoD Population Schema based on local availability. Please check with your local facility to find when you can get it.

### **Q. How did you determine the priorities for receiving the vaccine?**

A. DoD follows the Advisory Committee on Immunization Practices and the Centers for Disease Control and Prevention's recommendations as much as possible. The CDC recommendations, in addition to input from service leaders, United States Coast Guard, and Joint Staff resulted in the current DoD priorities for vaccination.

### **Q. How will the DoD choose between vaccinating critical and essential personnel and vulnerable beneficiary populations, such as retirees?**

A. The DoD vaccination efforts are data-driven and informed by the Centers for Disease Control and Prevention. Vulnerable beneficiaries, including retirees, will be offered the vaccine in accordance with the highest phase for which he or she qualifies within the DoD priorities and CDC guidance.

### **Q. I am a member of the National Guard on active duty. Can I get my COVID-19 vaccine at a military treatment facility?**

A. Service members on active duty and in the Selected Reserve (including National Guard personnel) are eligible and encouraged to receive COVID-19 vaccines at military medical treatment facilities or other DoD vaccination sites, as identified by the military departments, and within the schema prioritization. Service members who are not able to access a DoD vaccination site and elect to receive the COVID-19 vaccine through non-DoD channels must provide documentation of receipt of the vaccination to their unit for documentation in appropriate medical readiness systems.

### **Q. How will the DoD support vaccine dissemination to Reserve and National Guard service members not currently on active duty?**

A. The Selected Reserve have been accounted for in vaccination planning and we are working with the Reserve and National Guard on this effort as well. As more vaccine becomes available and we move into the next operational phase, additional sites will receive the vaccine.

**Q. When can dependents of active duty personnel who are in a high-risk category get the vaccine?**

A. Dependents of active duty members who are in a high-risk category and at least 16 years of age may be offered COVID-19 vaccine when the DoD immunization site is offering vaccine to high-risk individuals in the appropriate age group. Those  $\geq 16$  years but  $\leq 18$  years of age may only receive Pfizer vaccine per the Food and Drug Administration Emergency Use Authorization. At this time, not every immunization site has Pfizer vaccine. Therefore, high-risk dependents in this age group may need to receive the Pfizer vaccine in the community. All high-risk beneficiaries are encouraged to contact your local military hospital or clinic to learn when vaccine may be available and how to schedule an appointment.

**Q. Should children get the vaccine?**

A. The current vaccine trials have not studied the safety and efficacy for children and manufactures are not currently asking the Food and Drug Administration for authorization to vaccinate children.

**Q. Will DoD provide vaccines for civilian employees and contractor staff working in military hospitals or clinics? How about working on installations or in depots and arsenals?**

A. The DoD will offer vaccine to civilian and contractor staff with direct patient care and to those who normally receive vaccine for occupational health purposes, as authorized in accordance with DoD regulation. This may include some of those working on installations or depots or arsenals, and we are continuing to refine guidance for these populations.

**Q: Will TRICARE beneficiaries including military retirees have access to the vaccine?**

A: Yes, based on Department of Defense prioritization. While there is limited vaccine availability, vaccination distribution prioritization will focus on those providing direct medical care, maintaining essential national security and installation functions, deploying forces, and those beneficiaries at the highest risk for developing severe illness from COVID-19. TRICARE beneficiaries empaneled at a DoD military treatment facility are eligible to receive the vaccine there. TRICARE beneficiaries who receive care at military treatment facilities on a space-available basis can alternately receive vaccine through the local civilian jurisdiction, when available.

**Q. Why doesn't the base have vaccine administration for retirees?**

A. The DoD is implementing a standardized and coordinated strategy for prioritizing, distributing, and administering the COVID-19 vaccine through a phased approach to all DoD uniformed service members, both the active and Selected Reserve components, including members of the National Guard; dependents; retirees; civilian employees, and selected DoD contract personnel as authorized in accordance with DoD regulation. Right now the vaccine is limited – it's only available at some military hospitals and clinics and it's being distributed in phases. Eventually, it will be made available to everyone, based on the DoD's approved population schema.

**Q. When should military families expect to receive more precise information? "Eventually" is difficult to use for planning purposes.**

A. Each military hospital and clinic is vaccinating according to the Centers for Disease Control and Prevention's priorities and DoD's population schema. Each location may be at different phases of the DoD Population Schema based on availability of the vaccine and the total population they serve. You should contact your local military hospital or clinic, visit their website or follow them on social media to see when they are ready for you to be vaccinated. Also, you can check with your local pharmacy. You can get the COVID-19 vaccine at any pharmacy, network or non-network, at no cost to you. Keep in mind TRICARE does NOT cover access to other vaccines (e.g. Flu, Shingles, etc.) at non-network pharmacies.

**Q. I am a NAF employee (or DoD Contractor) but can't be treated by a military treatment facility normally. Can I still get my COVID-19 vaccine at my installation MTF or site?**

A. DoD civilian employees, who are not otherwise eligible DoD beneficiaries, are eligible to receive the vaccine, and select contractor personnel who usually receive influenza vaccines as part of a DoD occupational safety and health program (e.g., health care workers, maintenance depot workers), and who are not otherwise eligible DoD beneficiaries, may be offered COVID-19 vaccines at DoD vaccination sites. Follow-on care (other than the administration of a second vaccine dose) will be provided through such individuals' existing health care plans or personal health care providers.

**Q. I am an employee of a DoD contractor supporting DoD efforts. Can I get the vaccine from the DoD?**

A. DoD's allocation may be offered, and administered at DoD vaccination sites to employees of DoD contractors directly supporting the DoD on DoD installations or in an operational environment, in accordance with the attached DoD COVID-19 vaccine population schema (e.g. health care providers/support personnel, personnel preparing to deploy), and the terms of applicable contracts.

**Q. Can OCONUS DoD Contractor dependents receive their COVID vaccine from military treatment facilities?**

A. In certain situations, DoD contractors who are stationed or employed outside the United States and their accompanying dependents, when residing in the same household, are authorized on a space-available basis to be vaccinated in accordance with the DoD prioritization schema. To qualify as "accompanying dependents," there must be authorization from the sponsoring DoD entity that authorizes the accompaniment of dependents. This authorization may be pursuant to the contract or other written documentation.

**Q. Any idea how a service member in the 1b phase can get vaccinated in Minnesota? We do not have a military clinic within 100 miles of us, and the VA hospital will only do current patients over 65.**

A. You can go to any civilian pharmacy (network or non-network) to get the vaccine, but even there the vaccine is being administered based on the Centers for Disease Control and Prevention and DoD population schema. If you go to any doctor other than your primary care manager, you'll need a referral. If you get the vaccine from a civilian pharmacy or provider, you need to make sure the information is added to your health record. You may also want to check with your unit – they may be working out some way for you to get the vaccine.

**Q. Why can't a 20-year retiree get her vaccine at the VA as well?**

A. If you're eligible to get care at the VA, you should be able to get the vaccine there too. We recommend that you contact your local VA facility to learn more.

### **Voluntary versus Mandatory Vaccine**

**Q. Will DoD require all service members to receive the vaccine?**

A. No. The vaccine is offered on a voluntary basis. Priority populations are highly encouraged to receive the vaccine. When formally licensed by the Food and Drug Administration, a vaccine may become mandatory for military personnel, as is the case for the influenza vaccine.



**Q. Why did the DoD decide to make the vaccination voluntary rather than mandatory?**

A. When a vaccine product becomes available under pre-licensure status, such as the Food and Drug Administration's Emergency Use Authorization, recipients have the option to accept or refuse the EUA product. The Department of Defense does not independently have the authority to mandate an EUA vaccine to service members. However, The President of the United States may, under certain circumstances, waive the option for members of the armed forces to accept or refuse administration of an EUA product. To date, the Department of Defense has not requested a waiver from the President to mandate a COVID-19 vaccine issued under an EUA to service members.

**Q. If the interest and the uptake of the vaccine is slow, will the DoD look to mandate the vaccine?**

A. No. The DoD supports the option for service members and other beneficiaries to voluntarily accept or refuse an Emergency Use Authorization product. However, similar to the civilian community, all individuals with an indication to receive a COVID-19 vaccine are highly encouraged to receive it. Once a COVID-19 vaccine is issued Food and Drug Administration licensure or if the President of the United States waives the option for members of the armed forces to accept or refuse administration of an EUA product, the vaccine may become mandatory for military personnel, as is the case for the influenza vaccine.

**Pharmacy**

**Q. How does the Federal Retail Pharmacy Program work?**

A. The Federal Retail Pharmacy Program will supply COVID-19 vaccines to retail pharmacies in phases. As part of the initial phase, 1 million doses of the [Moderna COVID-19 vaccine](#) will be sent to a select group of pharmacies. These pharmacies will then administer vaccinations to those who are eligible. Some pharmacies have already begun offering a limited amount of the vaccine through this program. Other pharmacies are set to begin offering doses soon. As stated by the [Centers for Disease Control and Prevention](#), "As vaccine supply increases, more retail locations will be added."

**Q. Will my local pharmacy offer the COVID-19 vaccine?**

A. Pharmacies that are part of the Federal Retail Pharmacy Program may vary by state and territory. Pharmacies participating in the program may include [TRICARE network pharmacies](#) and [non-network pharmacies](#). You can find a [list of pharmacies that are currently participating in your area](#) on the CDC website.

**Reserve Component**

**Q. Can Reserve Component service members receive the COVID-19 vaccine from the DoD?**

A. Yes. Per the Deputy Secretary Defense Memo, Coronavirus Disease 2019 Vaccine Guidance dated 7 December 2020, service members in the Selected Reserve, including National Guard are eligible and encouraged to receive COVID-19 vaccines at military medical treatment facilities or other DoD vaccination sites.

**Q. Do Selected Reserve service members have to pay for receiving COVID-19 vaccines?**

A. No. Pursuant to Presidential Executive Order 13962, no one will be billed for receiving the COVID-19 vaccine. Military treatment facilities will not charge for the vaccine or vaccine administration.

**Q. I don't live near a military treatment facility or DoD vaccination site. Can I get the COVID-19 through my county health department or civilian employer?**

A. Yes. Reserve Component service members can utilize local civil vaccination programs. The goal is to rapidly and safely vaccinate as many service members in order to build COVID-19 immunity across the force. Reserve Component service members should not wait for DoD vaccination opportunities if they have earlier access to civil vaccination programs. Reserve Component service members must report their vaccination status to their chain of command.

**Q. Do I have to be in a duty-status in order to receive the COVID-19 vaccination?**

A. The services will determine the duty-status and other administrative procedures for their Reserve Component service members receiving the vaccination. Line of Duty questions should be referred to DoDI 1241.01.

**Q. Can Selected Reserve service members receive the COVID-19 vaccine from a retail pharmacy (Walgreens, Giant Supermarket, etc)?**

A. Selected Reserve service members who are TRICARE beneficiaries will be covered to receive the vaccine from a retail pharmacy. Selected Reserve service members who are not TRICARE beneficiaries will have to use their existing civilian insurance if they choose to receive the vaccination from a retail pharmacy.

**Q. Where do Reserve Component service members fit in the DoD Population Schema?**

A. The DoD Population Schema is the priority list of when DoD service members receive the COVID-19 vaccination. The schema priorities are based upon CDC recommendations and include Reserve Component service members in the Selected Reserve and National Guard. There isn't one tier for all Selected Reserve personnel. Instead the tiers are based on prioritized categories of personnel because of job function, deployment status or risk categories.

**Q. Is the COVID-19 vaccine mandatory for Reserve Component service members?**

A. No, however it is encouraged.

**Vaccine Development Information**

**Q: What is an Emergency Use Authorization?**

A: Drugs and vaccines have to be approved by the Food and Drug Administration to ensure that only safe and effective products are available to the American public. During public health emergencies, when there is good scientific reason to believe that a product is safe and is likely to treat or prevent disease, the FDA may authorize its use through an Emergency Use Authorization (EUA), even if definitive proof of the effectiveness of the drug or vaccine is not known. FDA pre-licensure approval is considered for treatment or prevention of diseases that are very serious.

**Q. What has the DoD done to ensure the vaccines they are distributing is safe?**

A. Vaccines and therapeutics to prevent and treat diseases are developed in stages. In Phase 1 Trials, researchers test an experimental drug or treatment in a small group of people for the first time. In Phase 2 Trials, the experimental drug or treatment is given to a larger group of people to see if it is effective and to further evaluate its safety. In Phase 3 Trials, the experimental study drug or treatment is given to very large groups of people. Researchers confirm its effectiveness, monitor side effects, compare it to commonly used treatments, and collect information that will allow the experimental drug or treatment to be used safely. Manufacturers are required to submit their raw data for the Food and Drug Administration to review. Safety, immune response, and efficacy data from the trial stages are submitted to the FDA before they are authorized for use and distribution.

**Q. Will a COVID-19 vaccination protect me from getting sick with COVID-19?**

A. Yes. COVID-19 vaccination works by teaching your immune system how to recognize and fight the virus that causes COVID-19, and this protects you from getting sick with COVID-19. Being protected from getting sick is important because even though many people with COVID-19 have only a mild illness, others may get a severe illness, have long-term health effects, or even die. There is no way to know how COVID-19 will affect you, even if you don't have an increased risk of developing severe complications.

**Q. How long will protection last following vaccination?**

A. We do not know how long protection will last following vaccination but it will be critically important to measure long-term protection (at least two years) in the phase 3 trials and in other groups prioritized for early vaccination. We are still learning about the duration of protection following infection with COVID-19 and it is too early to tell how long protection will last.

**Q. Can someone get COVID-19 from the vaccine?**

A. No, it is not possible to get COVID-19 from vaccines. Vaccines against COVID-19 use inactivated virus, parts of the virus, or a gene from the virus. None of these can cause COVID-19.

**Q. How do we know if the vaccine is safe? How will you monitor and track vaccine side effects?**

A. DoD is confident in the stringent regulatory process and requirements of the Food and Drug Administration. Manufacturers are required to submit their raw data for the FDA to review. Safety, immune response, and efficacy data from the trial stages are submitted to the FDA before they are authorized for use and distribution. Per FDA requirements, the DoD will be monitoring and tracking vaccine reports of vaccine side effects through various surveillance activities both internal and external to the DoD.

**Q. What are the risks of the vaccine?**

A. The vaccines may cause side effects in some people, like sore muscles, feeling tired, or mild fever. For most people, these side effects will last no more than a day or two. Having these side effects doesn't mean you have COVID-19. If you have questions about how you're feeling after your vaccination, contact your provider or call the [Military Health System Nurse Advice Line](#). It's rare, but if you have a severe allergic reaction, call 911 or go to your nearest emergency room. The hospital department that provides emergency services to patients who need immediate medical attention. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the vaccine.

**Q. Who should I tell if I suffer from side effects after getting vaccinated?**

A. All suspected serious or unexpected vaccine-related adverse events must be reported through the Vaccine Adverse Event Reporting System (VAERS), which is run by the Centers for Disease Control and Prevention and the Food and Drug Administration. Anyone can report to VAERS (<https://vaers.hhs.gov/reportevent.html>). The majority of VAERS reports are sent in by vaccine recipients, health care providers, and vaccine manufacturers. Vaccine recipients are encouraged to seek the help of their health care professional in filling out the VAERS form.

**Q. Does the vaccine work against the mutation? Or does another vaccine have to be developed?**

A. According to CDC, scientists are working to learn more about variants of the virus, and more studies are needed to understand how variants affect existing therapies and vaccines.

**Q. With all of the COVID-19 variants now circulating, do you need a booster of the Pfizer or Moderna vaccines?**

A. No doses beyond the 2-dose primary series are recommended at this time.

**Pfizer BioTech**

**Q. How many days should I wait between my first Pfizer vaccine dose and my second one?**

A. You should receive a second Pfizer vaccine dose 21 days after receiving your first one. In rare and exceptional situations, you can get your second vaccine dose 17 days after your first vaccine dose, but in most circumstances you should wait until the 21<sup>st</sup> day.

**Q. It has been more than 21 days since I received my Pfizer first vaccine dose. Should I still get my second vaccine dose?**

A. The position of the Centers for Disease Control and Prevention is that the second dose for mRNA vaccines should be at the timelines identified in the Emergency Use Authorization (EUA). When this is not possible, the CDC states the second dose administration may be scheduled up to 42 days after the first dose.

**Q. I received the Pfizer vaccine for my first vaccine dose, but I am moving overseas, and only have access to the Moderna vaccine for my second dose. Should I skip getting my second vaccine dose?**

A. No, you should not skip your second vaccine dose. You should take all necessary steps to ensure you are at a location that has the same vaccine product as your first dose. mRNA COVID-19 vaccines are not interchangeable with each other. However, the Centers for Disease Control and Prevention states that in truly exceptional circumstances in which the first dose vaccine's producer cannot be determined or is no longer available, any available mRNA COVID-19 vaccine may be administered at a minimum interval of 28 days between doses to complete the mRNA vaccine series.

**Moderna**

**Q: How many days should I wait between my first Moderna vaccine dose and my second one?**

A. You should wait 28 days between your first Moderna vaccine dose and second dose. In rare and exceptional situations, you can get your second Moderna vaccine 24 days after your first vaccine dose, but under most circumstances you should wait until the 28<sup>th</sup> day.

**Q: It has been more than 28 days since I received my Moderna vaccine. Should I still get my second vaccine?**

A. The position of the Centers for Disease Control and Prevention is that the second dose for mRNA vaccines should be at the timelines identified in the Emergency Use Authorization (EUA). When this is not possible the CDC states the second dose administration may be scheduled up to 42 days after the first dose.

### **TRICARE Information on the Vaccine**

**Q. Will TRICARE cover the cost if we get the vaccine some place besides the military treatment facility?**

A. TRICARE will cover the cost of the vaccine from any location, but if you go to a civilian provider, there may be a cost for an office visit based on your plan.

**Q. How much will the COVID-19 vaccine cost?**

A. The vaccine itself is offered at no cost, but there may be a cost based on your plan for an office visit (if received from a non-network provider, for example) or if you require follow on care.

**Q. I am on TRICARE Select. Will I have to pay for vaccine?**

A. TRICARE will cover the vaccine for all beneficiaries regardless of plan. The vaccine itself is offered at no cost, but depending on where you get it, there may be a cost for an office visit or if you require follow on care. That cost would be the same for any other office visit under TRICARE Select.

**Q. Will TRICARE For Life cover the vaccine?**

A. Military treatment facilities will offer the COVID vaccine to TRICARE For Life beneficiaries by following CDC guidance for those age and risk categories that are eligible for the vaccine, but you may choose to get the vaccine through your regular Medicare provider when the vaccine becomes available to your category.

### **Vaccine Distribution**

**Q. Why/how were these military treatment facilities selected by the DoD to receive the first wave of vaccines?**

A. The vaccination sites were selected by the DoD's COVID-19 Task Force from sites recommended by the military services and U.S. Coast Guard to best support several criteria: anticipated supply chain requirements for initially approved vaccines (i.e. ultra-cold, bulk storage facility); sizeable local population to facilitate rapid vaccine administration to priority personnel across the military services; and sufficient necessary medical personnel to administer vaccines and actively monitor vaccine recipients after initial and second-dose administration.

**Q. Why is the plan being phase-driven and not population or hot spot focused?**

A. The distribution process is phase-driven to safely protect the DoD from COVID-19 as quickly as possible. In the initial phase, a limited number of sites were selected to receive vaccine. Initial sites also allow DoD to validate distribution and administration processes and structures and guide senior leader decisions to increase distribution and administration as vaccine manufacturing and Centers for Disease Control and Prevention allocation permits. Initial site performance will guide follow-on site identification and the scaling of DoD distribution and administration processes.

**Q. How will the DoD support vaccination in remote locations not located near a military treatment facility?**

A. The DoD will ensure the vaccine is available for all beneficiaries. Planning is ongoing to ensure the widest distribution to our geographically dispersed population. During initial distribution, the vaccine will be primarily directed to locations with high concentration of the Centers for Disease Control and Prevention's phase 1A medical/support personnel and locations that have the capability to store vaccine in monitored freezers in accordance with manufacturer's requirements.

**Q. How will you secure the COVID-19 vaccine shipments to ensure they are protected and not diverted or misappropriated?**

A. Most shipments will be shipped directly from the manufacture to the vaccination site. The Department of Defense will continuously monitor threats in concert with the whole of nation COVID-19 response to ensure security of the COVID-19 vaccine. Secure handling provisions are in place; COVID-19 vaccines will be stored properly to prevent unauthorized access and/or threat.