

## **VMS Notes on Governor Scott Press Conference from Tuesday 6.22.21**

### **Weekly Media Briefing**

- Gov. Scott: Dr. Walenski said upcoming ACIP meetings coming up this week
- Delta variant most of the cases in the State – vaccines work
- In July – Pfizer and Moderna contracts are up – with 300 million doses produced
- It for the whitehouse briefing
- Vermont first state in the nation to vaccinate 80 percent of the population. Now at 81.3%
- Still many opportunities to be vaccinated this week – every single one counts
- We are seeing low cases, low hospitalizations and low deaths – one death in the last 5 weeks

### **Commissioner Pieciak**

- Highest vaccine rates, cases, hospitalizations and fatalities
- VT highest percentage of vaccinated
- 90% of 65+ population vaccinated
- 5k started vaccination last week
- We still see a stark difference btw states with high/low vaccination percentages
- 300 lives saved in VT with vaccine
- Case trends following forecast – will remain very low in the near future
- Northeast have been very low – 6 NE states are now the lowest in the nation
- Situation in Canada is improving 66.7% in one dose – 19% fully vaccinated
- If you are fully vaccinated and a full Canadian citizen you can now cross the border without quarantining
- Cases are rising in the UK – risen dramatically in the last 6 or 7 weeks – tied to rapid rise of Delta variant – it is impacting those that are unvaccinated.
- Those that are vaccinated are protected – hospitalizations remain low because they are impacting younger, healthier unvaccinated people
- Delta variant also growing in the U.S. – 10% of cases

### **Sec. Smith**

- Walk-in to pharmacies to get a vaccine – we have not slowed the pop-up clinics down – we really want to provide opportunities for everyone to get vaccinated.
- Serving the homeless has been recognized nationally – we made sure all Vermonters could be safe from the VT and we provided hotel vouchers to the homeless. Currently, FEMA is reimbursing \$79 million in costs. Hotels/motels have been a valuable resource but cannot be a permanent solution. Local EMS have been greatly strained we have to move to a more stable model – VT will now not have the hotel motel housing available. Vermont put together a workgroup and they put together a plan and that will take effect July 1<sup>st</sup> – the plan will cost an estimated \$41 million

- Focused on vulnerable, homeless households and families with children and new eligibility rules go into July 1<sup>st</sup>.
- Homeless providers across the state are working with families to develop a transition plan – 2,000 in essential dollars and up to \$8,000 in housing subsidies.
- The goal is to transition these households to more stable conditions and provide 3 Squares and rental assistance programs. Have lost several at least 305 rooms because of tourism – we anticipate losing more rooms July 1<sup>st</sup> as the hotel/motels move to meeting the needs of tourists.

**Dr. Levine:**

- More than a week since celebrating the 80% milestone – because of the safe, effective vaccines that have been proven to work. Avg of 3 cases a day, 1 hospitalization a day, 1 death in 5 weeks.
- I do trust the vaccine, but I don't trust the virus.
- Parts of the world where COVID is still spreading and mutating to create other variants. Public health experts believe the Delta variant will become the dominant strain. Far more contagious and maybe more severe illness. But the vaccine is effective, and we need as many Vermonters to protect themselves. Free and Easy. If you know someone who isn't vaccinated encourage them to find their own personal reason to get vaccinated. In an empathetic, non-judgemental way. Vaccination is a routine part of our health care – how we take control back over a virus.
- 450k Vermonters have gotten at least one dose.

**Questions:**

Veto session?

We can do better – that is all. We are just giving lawmakers our perspective. The low point from a legislative perspective was that we were fully remote. It wasn't their fault – people just weren't able to pay attention to all of the nuance. A letter from George Cross – a Democratic former Rep. wrote: I urge you to support Gov. Scott's veto of the Winooski & Montpelier charter changes. I have been fully involved with Winooski new Americans for years – town by town charters – is not an equitable way to do this. If non-citizens can vote on local issues than it should be statewide.

How many homeless people will move out by the end of the month?

M. Smith – multitude of responses. Some can go back to living with friends and families. You are right there is a housing crisis - \$120 million is going to that. More homeless shelter capacity – about 700 people won't be eligible for this program. This new program has expanded so that we can house more people to the tune of 42 million. We have tried to this compassionately and I can't remember in my lifetime a \$250 million program to build housing capacity. Around 1200 eligible for the new hotel/motel program.

Do you see the problem being exacerbated by all of the people coming into the state and buying up all of the affordable housing?

This is a multi-year, multi-million program and I hope that the legislature would help us with some revision of Act 250.

What has been the reception from the construction industry?

I think the concern would be how fast can we do it.

Newest Olympian?

Gov. Scott Very excited – I thought she was going to get knocked off the track. My congratulations to her and her family – she will be a great representative.

Three to four reasons for veto session but not S.107?

Gov. Scott – it will come down to 3 or 4 votes either way.

Can insurers incentivize vaccination?

M. Pieciak – VT required that insurers provide the vaccine and treatment – so can an insurance incentivize vaccination yes these are programs that can be established.

Where can I find the 81.3% Stat for today?

Pieciak – VT Vaccine Dashboard

Onecare report?

I haven't read the whole report – I appreciate the points but I'm not sure he sees things the way I do. We will glean anything we can do with the report to be better. But, I want to encourage people to look at the all payer model as a prevention tool. If you have a car, and you decide you want to keep the vehicle for 10 to 12 years – you might invest money, time and energy to make sure it will the distance. To take a snapshot in time and say it hasn't done anything because prevention always takes time. We have an older population, so it will be more difficult to see the benefits.

Mike Smith: In November we put out a review of the Allpayer model – we have an obligation to do the hard work to fix any imperfections in the model and ultimately, we improve affordability, quality and access. I am all in on a fixed payment system that focuses on the health of Vermonters. We saw that during the pandemic – guess what was there to make sure that the health care system did not collapse. We welcome audits by the way. When we take a snapshot of this we are looking at a very small view of health care costs. Most Vermonters understand that if you go from fee to service to a population health service model that is certainly what we have seen.

Where we will see a benefit?

At the same time – these are bodies that take a little more to change – started with the Blueprint for health – these are going to be a little bit longer than five years. We can do an extension and we may look at that as we move forward.

New Delta variant – are you planning specific tactics to show Vermonters how vulnerable they are to this strain?

Gov. – we are using these press conferences and everything we can to inform Vermonters of this risk. We are in good shape here in Vermont – but we need to keep working on this. Levine – Delta is 50% more transmissible but there will be the next and the next variant. We are dealing with a lot smaller part of our population – only very small percentage are really reluctant. Trying to reach those sitting on the fence – also people described as not paying attention – you have to put it in front of them. We only do whole genome sequencing on positive tests – but there are so few of them – but inevitably some will show up as Delta.

Why is veto-session remote?

Gov. Scott – I don't know if its fully remote. Time will tell. I think it is safe to do so – I would hope as many would come in as possible.

Your recommendation for kids to continue to wear masks inside but not outside and proliferation of the Delta variant – any changes in recommendation?

Whitehouse is going to take a look at that and give us further guidance in the future. Levine – we have been recommending the CDC guidance. Like everything with COVID this is a moving target. Prevalence of virus in the state and amount of community transmission is moving in a good direction in Vermont. We won't see it in VT because it will deadend – I would assume that cdc guidance will say yes we need to protect vulnerable people but we also need to put it into context. Not effective today but I think that's where we should be moving.