

To: McLaren Colleagues: Contractors, Contracted Services, Vendors, Volunteers and Students

Date: November 17, 2021

Re: CMS COVID-19 Vaccination Requirement for Contractors, Contracted Services, Vendors, Volunteers and Students

McLaren Health Care is mandated to comply with the final rule issued by the Centers for Medicare & Medicaid (CMS) requiring COVID-19 vaccination for all staff at our McLaren facilities regardless of clinical responsibility or patient contact.

This requirement is applicable to all Contractors, Contracted Services, Vendors and Students and <u>only fully vaccinated</u> individuals will be permitted to work at McLaren Facilities.

Compliance is required before January 4, 2022.

Frequently Asked Questions

What does this mean for contracted staff?

You are required to obtain the primary series of COVID-19 vaccination, per CDC recommendations by January 4th, 2022.

Where can you obtain the COVID-19 Vaccine?

- You can receive COVID-19 vaccinations at any neighborhood retail pharmacies, or local health departments.
- For a full list of available clinic appointments and resources visit: Michigan.gov/COVIDVaccine
- Once you have received the series, you must submit proof of vaccination to your local Employee Health Services Office.

What is acceptable as 'Proof of Vaccination'?

- Proof of vaccination may include
 - MCIR printout
 - Receipt or a copy of consent or attestation which includes manufacturer, lot number, and date received. (CDC COVID-19 Vaccination Card)
 - Provider's note of vaccine
 - Documentation of COVID-19 Vaccination Form may be used to provide proof of vaccine
 - Form is attached to this memo
 - You may contact any local Employee Health Services to obtain the form.
 - All forms must be returned via email to Corporate Employee Health Services employee.health@mclaren.org

What happens if I am not able to obtain a vaccine by Jan 4th?

After January 4th, **only** fully vaccinated contractors, Contracted Services staff, Vendors and Students will be allowed to work inside McLaren Facilities.

Who can I contact if I have additional questions?

Please contact your local employee health services or send your questions to employee.health@mclaren.org



DOCUMENTATION OF COVID-19 VACCINATION

2021-2022

Please complete this form if you received your COVID-19 vaccination. Date administered and LOT number are required fields. Please print legibly, as difficult-to-read documents will not be entered.

Thank you.

PRINT:

Last Name			First Name	
/ / Date of Birth	XXXX-XX- Social Security	Number	McLaren Work Location	
Work phone # / Tie line / exter	ision	Department	Manager's Name	
FHIS SECTION MUST BE CON	IPLETED BY THE	HEALTHCARE	PROVIDER ADMINISTERING THE VACCIN	
Dose 1 Date:		_ Dose	2 Date:	
Manufacturer (Check On	e)		Manufacturer (Check One)	
Pfizer			Pfizer	
Moderna			Moderna	
—			Lot Number	

employee.health@mcLaren.org along with your vaccine card attached.