

## 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 4<sup>th</sup>, 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 4<sup>th</sup>?

After January 4<sup>th</sup>, **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	<b>XXXX-XX-</b> 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.