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The Vaccination Mess – and a Proposed Solution

We are about four weeks into the introduction of the COVID-19 vaccine, and no serious analyst can give the roll-out a passing grade. The litany of complaints is several:

1. The wrong people are getting the vaccine.
2. The right people are not getting the vaccine.
3. More of the vaccine is sitting unused than is being used.

Meanwhile, the number of COVID-19 deaths has settled in at about 3,000 per day, and by Inauguration Day (January 20, 2021) over 400,000 Americans will have died of COVID-19 in less than one year. This is over ten times the annual number who died in traffic accidents before the pandemic began.

This failed roll-out is largely due to the reluctance of the federal government to act “federally”. In an earlier blog (April 2, 2020), your blogger (YB) wrote the following about the bombing of Pearl Harbor:

Scholars of World War II agree that the United States was woefully underprepared for its start on December 7, 1941. We had only recently instituted a draft, and we did not have the war-time materiel ready. The war was a national war; President Roosevelt didn't tell the authorities in Hawaii, California, Oregon, and Washington (who feared of being bombed) to “figure out a way” to fight the Japanese. There was a full federal mobilization ...

How did it the vaccine roll-out get this bad? Here are a few bullets.

- YB receives treatment at a local clinic three times per week. He asked the nursing staff whether they had been vaccinated. By their reports, the vaccine assignments have seemed almost random.
- YB was sent emails by two different medical groups. Because of his age, he qualifies for priority placement in the vaccination, and he was told that he should check the web site, and would be contacted by email. The next day, the web site for one of them crashed due to the flood of inquiries, and several days later, there has still been no notification.
- YB's employer indicated that vaccines would be available, but the employer does not know when, and the employer has not really established priorities, other than for medical personnel.

In short, millions of people want the vaccine, and they have no idea when and where they can expect to get it.

Prioritization has been defined at the state level, and the states have largely failed the test. In some places, like Florida, they have further delegated

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distribution to the counties – there are over 3000 counties in the United States. Moreover, state finances to administer and distribute vaccines are a mess. Many states were able to tap so-called “rainy day” funds for whatever fiscal year encompassed the last nine months of 2020, but they are largely tapped out financially by now. There is no plan in place to mobilize the resources necessary to vaccinate ten million people in Michigan, let alone 330 million people around the country.

This is the time for a federal response.

1. Find out from the states who the medical personnel are, and send the vaccines to their employers, with a mandate that they be vaccinated.
2. Prioritize the rest of the potential vaccine recipients by Social Security number. Social Security numbers are birthdate stamped. Moreover, most everyone currently collecting Social Security or receiving Medicare benefits would, by definition, be in a high priority group, and the federal government (because it mails checks to them) knows where they are. Put these numbers in a fishbowl and fish them out lottery-style as vaccine becomes available.
3. Send vouchers to the lottery winners and invite them to come to central locations located in stadiums, shopping malls, and other places with large parking lots, at specified times.
4. Give them a federally-issued Vaccine Identification Card (call it a **VIC**), so they are easily recognized. The **VIC** will be initially activated, and fully activated according to the timeline for second vaccinations. This would be the first step to a national health identification card, which YB has proposed several times in the past year.

This is an emergency. It is time to recognize the emergency nature and to act accordingly.

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