Dear Tribal Member,

The Narragansett Indian Health Center would like to share the following information with you concerning:

1. Our upcoming Flu Vaccine Clinic

2. Pfizer and Moderna Booster Vaccines: The CDC recommends an "additional" vaccine for individuals who are immunocompromised, which is separate from a booster vaccine. Please review the enclosed documents for further clarification.

3. Get your COVID-19 Vaccine

4. COVID Variants

5. Medicare Open Enrollment

6. 211 Van Flyer

We hope this information is helpful. Please call us at 401.364.1263 ext. 107 to schedule your flu vaccine. You may also schedule to receive COVID-19 Moderna vaccines, booster vaccine, and/or Additional Moderna vaccine, if you are immunocompromised. If you need assistance with locating a Pfizer Booster or Pfizer Additional vaccine, please call and we will be happy to help you locate a location, as NIHC does not currently have Pfizer vaccines available - see enclosures.

NIHC also continues to offer rapid and PCR testing for COVID-19. Testing is available M-F at 9:30, 10:30: 12:30, 1:30, and 2:30, when staffing/patient schedule allows. Please call to schedule an appointment. If more than one person is being tested, please let the scheduler know at the time you are making your appointment so we can accommodate multiple tests.

When you arrive for your test, please remain in your vehicle and call us at 401.364.1263 x107 to let us know you have arrived. Someone will come out to complete your test.

Best regards and stay well!

Your NIHC team

Enc.
Flu Season has begun.
Now is the time to get your Flu Shot.
The flu is a contagious respiratory illness that is caused by the influenza viruses that infect the nose, throat, and lungs. It can cause mild to severe illness, and at times even worse.
The best way to prevent the flu is by getting a flu shot!

WHERE: Narragansett Indian Health Center
51 Old Mill Road, Charlestown, R.I. 02813
WHEN: Thursdays on October 21 and 28, 2021 and Wednesday, November 3
TIME: 9:00 AM to 4:00 PM
WHO: All tribal members and their descendants with proof of descendancy; members of other federally recognized tribes and their descendants with required proof.
AGE: six months and up.

If you are not a patient of NIHC, you will need to register. Please bring your tribal ID, 2 current proofs of residence, and your insurance card(s), if you have insurance of any kind.

If you are a registered patient with NIHC, please bring these documents to update your file and to avoid interruptions and delays in your care.

Questions? Contact: Patient Registration (401) 364-1263 x107

We look forward to helping you with your healthcare needs.
A Strong Defense Against Flu: Get Vaccinated!

The best way to protect yourself and your loved ones against influenza (flu) is to get a flu vaccine every flu season. Flu is a contagious respiratory disease that can lead to serious illness, hospitalization, or even death. CDC recommends everyone six months and older get an annual flu vaccine.

What are some key reasons to get a flu vaccine?

- Every year, flu vaccination prevents illnesses, medical visits, hospitalizations, and deaths.

- Flu vaccination also is an important preventive tool for people with chronic health conditions. For example flu vaccination has been associated with lower rates of some cardiac events among in people with heart disease.

- Vaccinating pregnant women helps protect them from flu illness and hospitalization, and also has been shown to help protect the baby from flu infection for several months after birth, before the baby can be vaccinated.

- A 2017 study showed that flu vaccine can be life-saving in children.

- While some people who get vaccinated still get sick, flu vaccination has been shown in several studies to reduce severity of illness.

Why is it important to get a flu vaccine EVERY year?

- Flu viruses are constantly changing, so flu vaccines may be updated from one season to the next to protect against the viruses that research suggests will be common during the upcoming flu season.

- Your protection from a flu vaccine declines over time. Yearly vaccination is needed for the best protection.
What kinds of flu vaccines are recommended?

There are several licensed and recommended flu vaccine options this season:

- **Standard dose flu shots made from virus grown in eggs.**
- **Shots made with adjuvant and high dose for older adults.**
- **Shots made with virus grown in cell culture instead of eggs.**
- **Shots made using a recombinant vaccine production technology that does not require the use of a flu virus.**
- **Live attenuated influenza vaccine (LAIV, the nasal spray vaccine), which is made with live, weakened influenza viruses. It is an option for people 2 through 49 years of age who are not pregnant.**

Is the flu vaccine safe?

Flu vaccines have a good safety record. Hundreds of millions of Americans have safely received flu vaccines over the past 50 years. Extensive research supports the safety of seasonal flu vaccines. Each year, CDC works with the U.S. Food and Drug Administration (FDA) and other partners to ensure the highest safety standards for flu vaccines. More information about the safety of flu vaccines is available at [www.cdc.gov/flu/protect/vaccine/vaccinesafety.htm](http://www.cdc.gov/flu/protect/vaccine/vaccinesafety.htm).

What are the side effects of flu vaccines?

**Flu shots:** Flu shots are made using killed flu viruses (for inactivated vaccines), or without flu virus at all (for the recombinant vaccine). So, you cannot get flu from a flu shot. Some minor side effects that may occur include soreness, redness and/or swelling where the shot was given, low grade fever, and aches.

**Nasal spray flu vaccines:** The viruses in nasal spray flu vaccines are weakened and do not cause the severe symptoms often associated with influenza illness. For adults, side effects from the nasal spray may include runny nose, headache, sore throat, and cough. For children, side effects may also include wheezing, vomiting, muscle aches, and fever.

If these problems occur, they are usually mild and go away on their own, but serious reactions are also possible. Almost all people who receive flu vaccine have no serious problems from it.

When and Where to get vaccinated?

You should get a flu vaccine by the end of October. However, as long as flu viruses are circulating, vaccination should continue throughout flu season, even in January or later.

Flu vaccines are offered in many doctors' offices and clinics. Flu vaccine is available in many other locations, including health departments, pharmacies, urgent care clinics, health centers, and travel clinics. Vaccines may also be offered at your school, college health center, or workplace. Visit: [www.vaccinefinder.org](http://www.vaccinefinder.org) to find a flu vaccination clinic near you.

For more information, visit: [www.cdc.gov/flu](http://www.cdc.gov/flu) or call 1-800-CDC-INFO
COVID-19 Vaccines for Moderately to Severely Immunocompromised People

What You Need to Know

- People with moderately to severely compromised immune systems are especially vulnerable to COVID-19, and may not build the same level of immunity to 2-dose vaccine series compared to people who are not immunocompromised.
- CDC recommends that people with moderately to severely compromised immune systems receive an additional dose of mRNA COVID-19 vaccine at least 28 days after a second dose of Pfizer-BioNTech COVID-19 vaccine or Moderna COVID-19 Vaccine.
- This additional dose is intended to improve immunocompromised people's response to their initial vaccine series.

Data on Decreased Immune Response Among Immunocompromised People

People who are moderately to severely immunocompromised make up about 3% of the adult population and are especially vulnerable to COVID-19 because they are more at risk of serious, prolonged illness.

Studies have found that some immunocompromised people don’t always build the same level of immunity after vaccination the way non-immunocompromised people do and may benefit from an additional dose to ensure adequate protection against COVID-19. Smaller studies found fully vaccinated immunocompromised people made up a large proportion of hospitalized “breakthrough cases,” suggesting immunocompromised people are more likely to transmit the virus to household contacts.

Who Needs an Additional Dose of COVID-19 Vaccine?

Currently, CDC is recommending that moderately to severely immunocompromised people receive an additional dose. This includes people who have:

- Been receiving active cancer treatment for tumors or cancers of the blood
- Received an organ transplant and are taking medicine to suppress the immune system
- Received a stem cell transplant within the last 2 years or are taking medicine to suppress the immune system
- Moderate or severe primary immunodeficiency (such as DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection
- Active treatment with high-dose corticosteroids or other drugs that may suppress your immune response

People should talk to their healthcare provider about their medical condition, and whether getting an additional dose is appropriate for them.
Find a COVID-19 Vaccine

Find a COVID-19 Vaccine: Search vaccines.gov, text your ZIP code to 438829, or call 1-800-232-0233 to find locations near you.

- Check your local pharmacy’s website to see if vaccination walk-ins or appointments are available.
- Contact your state or local health department for more information

Vaccination Card and an Additional Dose

At your first vaccination appointment, you should have received a vaccination card that tells you which COVID-19 vaccine you received, the date you received it, and where you received it. Bring this vaccination card to your additional dose vaccination appointment.

Frequently Asked Questions

How long after getting my initial COVID-19 vaccines can I get an additional dose?

CDC recommends the additional dose of an mRNA COVID-19 vaccine be administered at least 28 days after a second dose of Pfizer-BioNTech COVID-19 vaccine or Moderna COVID-19 vaccine.

Can you mix and match the vaccines?

For people who received either Pfizer-BioNTech or Moderna’s COVID-19 vaccine series, a third dose of the same mRNA vaccine should be used. A person should not receive more than three mRNA vaccine doses. If the mRNA vaccine product given for the first two doses is not available or is unknown, either mRNA COVID-19 vaccine product may be administered.

What should immunocompromised people who received Johnson & Johnson’s Janssen (J&J/Janssen) vaccine do?

The FDA’s recent emergency use authorization amendment only applies to mRNA COVID-19 vaccines, as does CDC’s recommendation.

Emerging data have demonstrated that immunocompromised people who have low or no protection following two doses of mRNA COVID-19 vaccines may have an improved response after an additional dose of the same vaccine. There is not enough data at this time to determine whether immunocompromised people who received J&J/Janssen COVID-19 vaccine also have an improved antibody response following an additional dose of the same vaccine.

What are the benefits of people receiving an additional vaccine dose?

An additional dose may prevent serious and possibly life-threatening COVID-19 in people who may not have responded to their initial vaccine series. In ongoing clinical trials, the mRNA COVID-19 vaccines (Pfizer-BioNTech or Moderna) have been shown to prevent COVID-19 following the two-dose series. Limited information suggests that immunocompromised people who have low or no protection after two doses of mRNA vaccines may have an improved response after an additional dose of the same vaccine.

What are the risks of vaccinating individuals with an additional dose?

There is limited information about the risks of receiving an additional dose of vaccine, and the safety, efficacy, and benefit of additional doses of COVID-19 vaccine in immunocompromised people continues to be evaluated. So far, reactions reported after the third mRNA dose were similar to that of the two-dose series: fatigue and pain at injection site were the most commonly reported side effects, and overall, most symptoms were mild to moderate.

As with the two-dose series, serious side effects are rare, but may occur.
What is the difference between an additional dose and a booster shot?

An additional dose is administered to people with moderately to severely compromised immune systems. This additional dose of an mRNA COVID-19 vaccine is intended to improve immunocompromised people's response to their initial vaccine series. A booster shot is administered when a person has completed their vaccine series, and protection against the virus has decreased over time.

If I am immunocompromised do I need an additional dose and a booster shot?

At this time, CDC does not have a recommendation for immunocompromised people to receive both a booster shot and an additional dose. The current recommendation is for immunocompromised people to receive an additional dose 28-days after completing an mRNA COVID-19 vaccine series.

For Healthcare and Public Health

- Talking with Patients Who Are Immunocompromised
- Use of COVID-19 Vaccines Currently Authorized in the United States

Last Updated Oct. 8, 2021
Who Is Eligible for a COVID-19 Vaccine Booster Shot?

What You Need to Know

COVID-19 Vaccine booster shots are available for the following Pfizer-BioNTech vaccine recipients who completed their initial series at least 6 months ago and are:

- 65 years and older
- Age 18+ who live in long-term care settings
- Age 18+ who have underlying medical conditions
- Age 18+ who work in high-risk settings
- Age 18+ who live in high-risk settings

Data Supporting Need for a Booster Shot

Studies show that after getting vaccinated against COVID-19, protection against the virus may decrease over time and be less able to protect against the Delta variant. Although COVID-19 vaccination for adults aged 65 years and older remains effective in preventing severe disease, recent data suggest vaccination is less effective at preventing infection or milder illness with symptoms. Emerging evidence also shows that among healthcare and other frontline workers, vaccine effectiveness against COVID-19 infections is decreasing over time. This lower effectiveness is likely due to the combination of decreasing protection as time passes since getting vaccinated (e.g., waning immunity) as well as the greater infectiousness of the Delta variant.

Data from a small clinical trial show that a Pfizer-BioNTech booster shot increased the immune response in trial participants who finished their primary series 6 months earlier. With an increased immune response, people should have improved protection against COVID-19, including the Delta variant.

Booster Shots Are Only Available for Some Pfizer-BioNTech Vaccine Recipients

Only certain populations initially vaccinated with the Pfizer-BioNTech vaccine can get a booster shot at this time.

Older adults and 50-64 year old people with medical conditions

People aged 65 years and older and adults 50-64 years with underlying medical conditions should get a booster shot of Pfizer-BioNTech vaccine. The risk of severe illness from COVID-19 increases with age, and can also increase for adults of any age with underlying medical conditions.

Long-term care setting residents aged 18 years and older

Residents aged 18 years and older of long-term care settings should get a booster shot of Pfizer-BioNTech vaccine. Because residents in long-term care settings live closely together in group settings and are often older adults with underlying medical conditions, they are at increased risk of infection and severe illness from COVID-19.

People with medical conditions aged 18-49 years
People aged 18–49 years with underlying medical conditions may get a booster shot of Pfizer-BioNTech vaccine based on their individual benefits and risks. Adults aged 18–49 years who have underlying medical conditions are at increased risk for severe illness from COVID-19. However, that risk is likely not as high as it would be for adults aged 50 years and older who have underlying medical conditions. People aged 18–49 years who have underlying medical conditions may get a booster shot after considering their individual risks and benefits. This recommendation may change in the future as more data become available.

Employees and residents at increased risk for COVID-19 exposure and transmission

People aged 18–64 years at increased risk for COVID-19 exposure and transmission because of occupational or institutional setting may get a booster shot of Pfizer-BioNTech vaccine based on their individual benefits and risks. Adults aged 18–64 years who work or reside in certain settings (e.g., health care, schools, correctional facilities, homeless shelters) may be at increased risk of being exposed to COVID-19, which could be spreading where they work or reside. Since that risk can vary across settings and based on how much COVID-19 is spreading in a community, people aged 18–64 years who are at increased risk for COVID-19 exposure and transmission because of occupational or institutional setting may get a booster shot after considering their individual risks and benefits. This recommendation may change in the future as more data become available.

Examples of workers who may get Pfizer-BioNTech booster shots

- First responders (e.g., healthcare workers, firefighters, police, congregate care staff)
- Education staff (e.g., teachers, support staff, daycare workers)
- Food and agriculture workers
- Manufacturing workers
- Corrections workers
- U.S. Postal Service workers
- Public transit workers
- Grocery store workers

List could be updated in the future

Find a COVID-19 Vaccine

Find a COVID-19 Vaccine: Search vaccines.gov, text your ZIP code to 438829, or call 1-800-232-0233 to find locations near you.

- Check your local pharmacy's website to see if vaccination walk-ins or appointments are available.
- Contact your state or local health department for more information.

Frequently Asked Questions

When can I get a COVID-19 vaccine booster if I am NOT in one of the recommended groups?

Additional populations may be recommended to receive a booster shot as more data become available. The COVID-19 vaccines approved and authorized in the United States continue to be effective at reducing risk of severe disease, hospitalization, and death. Experts are looking at all available data to understand how well the vaccines are working for different populations. This includes looking at how new variants, like Delta, affect vaccine effectiveness.

What should people who received Moderna or Johnson & Johnson's Janssen (J&J/Janssen) vaccine do?

The Advisory Committee on Immunization Practices (ACIP) and CDC's recommendations are bound by what the U.S. Food and Drug Administration's (FDA) authorization allows. At this time, the Pfizer-BioNTech booster authorization only applies to people whose primary series was Pfizer-BioNTech vaccine. People in the recommended groups who got the Moderna or J&J/Janssen vaccine may need a booster shot. More data on the effectiveness and safety of Moderna and J&J/Janssen booster shots are expected soon. With those data in hand, CDC will keep the public informed with a timely plan for Moderna and J&J/Janssen booster shots.

If we need a booster shot, does that mean that the vaccines aren’t working?

No. COVID-19 vaccines are working well to prevent severe illness, hospitalization, and death, even against the widely circulating Delta variant. However, public health experts are starting to see reduced protection, especially among certain populations, against mild and moderate disease.
What are the risks to getting a booster shot?

So far, reactions reported after getting the Pfizer-BioNTech booster shot were similar to that of the 2-shot primary series. Fatigue and pain at the injection site were the most commonly reported side effects, and overall, most side effects were mild to moderate. However, as with the 2-shot primary series, serious side effects are rare, but may occur.

Am I still considered “fully vaccinated” if I don’t get a booster shot?

Yes. Everyone is still considered fully vaccinated two weeks after their second dose in a 2-shot series, such as the Pfizer-BioNTech or Moderna vaccines, or two weeks after a single-dose vaccine, such as the J&J/Janssen vaccine.

What is the difference between a booster shot and an additional dose?

A booster shot is administered when a person has completed their vaccine series and protection against the virus has decreased over time. Additional doses are administered to people with moderately to severely compromised immune systems. This additional dose of an mRNA-COVID-19 vaccine is intended to improve immunocompromised people’s response to their initial vaccine series.

Your CDC COVID-19 Vaccination Record Card and Booster Shots

At your first vaccination appointment, you should have received a CDC COVID-19 Vaccination Record card that tells you what COVID-19 vaccine you received, the date you received it, and where you received it. Bring this vaccination card to your booster shot vaccination appointment.

If you did not receive a CDC COVID-19 Vaccination Record card at your first appointment, contact the vaccination site where you got your first shot or your state health department to find out how you can get a card.

Learn more about what to do if you need a copy of your CDC COVID-19 Vaccination Record card.

Related Pages

› Understanding How COVID-19 Vaccines Work

› Ensuring COVID-19 Vaccines Work

› Frequently Asked Questions about COVID-19 Vaccination

› Examples of Workers Who May Get Pfizer-BioNTech Booster Shots

For Healthcare and Public Health

Clinical Considerations for Use of Pfizer-BioNTech COVID-19 Vaccine Booster Dose

More Information

ACIP Presentation Slides, September 22-23, 2021
General Information

Name: mRNA-1273

Manufacturer: ModernaTX, Inc.

Type of Vaccine: mRNA

Number of Shots: 2 shots, 28 days apart
Some immunocompromised people should get 3 shots.

Booster Shots: At this time, people who got the Moderna vaccine are not eligible for a booster shot. More data on the effectiveness and safety of Moderna booster shots are expected soon. With those data in hand, CDC will keep the public informed with a timely plan for Moderna booster shots.

Who Should Get Vaccinated

- The Moderna vaccine is recommended for people aged 18 years and older.
- Learn more about how CDC is making COVID-19 vaccine recommendations.

Who Should NOT Get Vaccinated

- If you have had a severe allergic reaction (anaphylaxis) or an immediate allergic reaction, even if it was not severe, to any ingredient in an mRNA COVID-19 vaccine (such as polyethylene glycol), you should not get an mRNA COVID-19 vaccine.
- If you had a severe or immediate allergic reaction after getting the first dose of an mRNA COVID-19 vaccine, you should not get a second dose of either of the mRNA COVID-19 vaccines (Moderna or Pfizer-BioNTech).
- A severe allergic reaction is one that needs to be treated with epinephrine or EpiPen or with medical care. Learn about common side effects of COVID-19 vaccines and when to call a doctor.
- An immediate allergic reaction means a reaction within 4 hours of getting the shot, including symptoms such as hives, swelling, or wheezing (respiratory distress).

If you aren't able to get an mRNA COVID-19 vaccine, you may still be able to get a different type of COVID-19 vaccine. Get more information for people with allergies.
Possible Side Effects

In the arm where you got the shot:  
- Pain  
- Redness  
- Swelling

Throughout the rest of your body:  
- Tiredness  
- Headache  
- Muscle pain  
- Chills  
- Fever  
- Nausea

These side effects happen within a day or two of getting the vaccine. They are normal signs that your body is building protection and should go away within a few days.

Learn more about possible side effects after getting a COVID-19 vaccine.

Other Authorized and Recommended COVID-19 Vaccines in the United States.

- Pfizer-BioNTech  
- Johnson & Johnson's Janssen

You should get a COVID-19 vaccination as soon as possible. All currently authorized and recommended COVID-19 vaccines are safe and effective, and CDC does not recommend one vaccine over another.

COVID-19 vaccines are not interchangeable. If you received a Pfizer-BioNTech or Moderna COVID-19 vaccine, you should get the same product for your second shot.

Safety Data Summary

- In clinical trials, reactogenicity symptoms (side effects that happen within 7 days of getting vaccinated) were common but were mostly mild to moderate. Few people had reactions that affected their ability to do daily activities.  
- Side effects throughout the body (such as fever, chills, tiredness, and headache) were more common after the second dose of the vaccine.  
- Cases of myocarditis and pericarditis in adolescents and young adults have been reported more often after getting the second dose than after the first dose of one of the two mRNA COVID-19 vaccines, Pfizer-BioNTech or Moderna. These reports are rare and the known and potential benefits of COVID-19 vaccination outweigh the known and potential risks, including the possible risk of myocarditis or pericarditis.  
- CDC will continue to provide updates as we learn more about the safety of the Moderna vaccine in real-world conditions.

Learn more about vaccine safety monitoring after a vaccine is authorized or approved for use.

How Well the Vaccine Works

- Based on evidence from clinical trials, in people aged 18 years and older, the Moderna vaccine was 94.1% effective at preventing laboratory-confirmed COVID-19 infection in people who received two doses and had no evidence of being previously infected.  
- The vaccine was also highly effective in clinical trials at preventing COVID-19 among people of diverse age, sex, race, and ethnicity categories and among people with underlying medical conditions.  
- CDC will continue to provide updates as we learn more about how well the Moderna vaccine works in real-world conditions.
The COVID-19 pandemic is not over, and it may not be over for a while. There are three easy ways to help your community reach immunity.

1. **Get vaccinated.**
   - No matter which vaccine you get, all available COVID-19 vaccines are effective at preventing serious and potentially deadly effects from COVID-19 while also lowering your chances of infection with the virus.
   - Most clinics are now able to provide vaccines for everyone 12 years of age and older.

2. **Get the second dose.**
   - If you receive the Pfizer or Moderna vaccine, you need to get a second dose a few weeks later. The second shot is especially important, as it provides the full protection you want from a vaccine.

3. **Continue to protect yourself and your loved ones.**
   COVID-19 vaccines are effective at protecting you from getting sick. Based on what we know about COVID-19 vaccines, people who have been fully vaccinated can start to do some things that they had stopped doing because of the pandemic.

   You are not considered fully vaccinated until two weeks after you receive the 2nd dose of the Pfizer or Moderna vaccine, or 2 weeks after receiving the single dose Johnson & Johnson’s Janssen vaccine.

   Until then, there are three easy steps to stay safe:
   - Wear a mask.
   - Wash your hands.
   - Watch your distance (6 feet or more)

   Protecting yourself will help to protect those around you who may not be able to get vaccinated.

For more information on vaccine safety, community supports, and continued protection against COVID, visit [https://www.ihs.gov/vaccine](https://www.ihs.gov/vaccine)

Together, we can reach community immunity.
Myths about the COVID Vaccine

**MYTH: Getting the vaccine will give you COVID.**

**FACT:** This is absolutely false. To become ill with COVID, there must be contact with the coronavirus. None of the vaccines available contain coronaviruses so they don’t have what is needed to cause infection. Building up immunity takes time and so it is possible to contract the virus either before you get the vaccine or while your body is still building protection from the vaccine. That’s why wearing a mask is so important.

**MYTH: You don’t need a vaccine if you’ve had COVID.**

**FACT:** We don’t know how long immunity lasts once you recover from the virus, but there is a possibility of catching the virus a second time, so the vaccine is still important. If you’ve had COVID, you may receive the vaccine after your symptoms have gone away and you have finished your isolation period. If you received certain medicines when you had COVID, you may need to wait to be vaccinated. Talk to your provider about what’s right for you.

**MYTH: The vaccine will change my DNA.**

**FACT:** Your DNA is the blueprint for your body and is very difficult to change. The Pfizer and Moderna vaccines contain a different type of genetic material called messenger RNA, or mRNA. Your cells break down the mRNA after a short period of time. And mRNA does not affect or interact with your DNA in any way.

**MYTH: I can’t get the vaccine if I want to have a baby.**

**FACT:** There is no evidence the vaccine does anything to a baby during pregnancy, nor that it does anything to the mother’s body to prevent pregnancy in the future. For men, there is no evidence to suggest it affects the sperm or male reproductive organs either, meaning it won’t prevent someone from becoming a father. Your provider can help answer any specific questions.

For more information on vaccine safety, community supports, and continued protection against COVID, visit [https://www.ihs.gov/vaccine](https://www.ihs.gov/vaccine)

Together, we can reach community immunity.

Facts based on the CDC page Myths and Facts about COVID-19 Vaccines.
To maximize protection from the Delta variant and prevent possibly spreading it to others, get vaccinated as soon as you can and wear a mask indoors in public if you are in an area of substantial or high transmission.

What You Need to Know about Variants

Updated Sept. 20, 2021

Discussions about the Delta Variant: Viruses constantly change through mutation, and new variants of a virus are expected to occur. Sometimes new variants emerge and disappear. Other times, new variants persist. All variants of the virus that causes COVID-19 are being tracked in the United States and globally during this pandemic.

Vaccines continue to reduce a person’s risk of contracting the virus that cause COVID-19, including this variant. Vaccines are highly effective against severe illness, but the Delta variant causes more infections and spreads faster than earlier forms of the virus that causes COVID-19.

Top Things You Need to Know

1. Variants are expected. The best way to slow the emergence of new variants is to reduce the spread of infection by taking measures to protect yourself, including getting a COVID-19 vaccine when available.
2. Vaccines can keep you from getting sick, being hospitalized, or dying from COVID-19.
3. All COVID-19 tests can detect all variants, but they will not tell you which variant you have.

Vaccines

- FDA approved or authorized COVID-19 vaccines protect against Delta and other known variants.
- These vaccines protect people from getting infected and severely ill, and significantly reduce the likelihood of hospitalization and death.
- We don’t yet know how effective the vaccines will be against new variants that may arise.

Symptoms

- Most variants cause similar COVID-19 symptoms.
- Some variants, such as the Alpha and Delta variants, may cause severe illness and death.

Masks

- Wearing a mask is one effective way to reduce the spread of Delta and other variants.
- People who are not fully vaccinated should wear a mask indoors in public at all levels of community transmission.
- CDC recommends that people who are fully vaccinated wear a mask indoors in areas of substantial or high transmission.
• Wearing a mask is most important if you have a weakened immune system or if, because of your age or an underlying medical condition, you are at increased risk for severe disease, or if someone in your household has a weakened immune system, is at increased risk for severe disease, or is unvaccinated. If this applies to you or your household, you might choose to wear a mask regardless of the level of transmission in your area.
• If you have a condition or are taking medications that weaken your immune system, you may not be fully protected even if you are fully vaccinated. You should continue to take all precautions recommended for unvaccinated people unless advised otherwise by your healthcare provider.
• People who are NOT vaccinated, should continue to take steps to protect themselves.

Testing
• All tests work for all variants, but they will not tell you which variant you have.
• As new variants emerge, scientists will continue to evaluate how well tests work.

Types of Variants
Scientists monitor all variants but may classify certain ones as Variants Being Monitored, Variants of Concern, Variants of Interest or Variants of High Consequence based on how easily they spread, how severe their symptoms are, and how they are treated.

Some variants seem to spread more easily and quickly than other variants, which may lead to more cases of COVID-19. An increase in the number of cases will put more strain on healthcare resources, lead to more hospitalizations, and potentially more deaths.

Variants of Concern in the US

**Delta** - B.1.617.2
First Identified: India
Spread: Much faster than other variants
Severe Illness and death: May cause more severe cases than the other variants

Vaccine: Infections happen in only a small proportion of people who are fully vaccinated, even with the Delta variant. Vaccine breakthrough infections are expected, but vaccines are effective at preventing most infections. However, preliminary evidence suggests that fully vaccinated people who do become infected with the Delta variant can spread the virus to others. All approved or authorized vaccines are particularly effective against severe illness, hospitalization, and death.

Treatments: Certain monoclonal antibody treatments are less effective against this variant.

Related Pages
• Variant Proportions
• SARS-CoV-2 Sequences
Get ready! Medicare’s Open Enrollment starts October 15.

You can enroll in Medicare health and drug plans from October 15 – December 7. Get ready for Medicare’s Open Enrollment with these 5 tips:

1. **Check your mail.** You may get important notices from Medicare or Social Security. If you’re in a Medicare plan, you’ll get an Annual Notice of Changes (ANOC) telling you of any changes in coverage, costs, or service area. Note any 2022 changes to your health coverage or any **Extra Help** you may get to pay for prescription drugs.

You may also get brochures and other marketing materials from insurance companies that offer Medicare health and prescription drug plans. Remember — plans aren’t allowed to call or come to your home without an invitation from you. [Find out how to protect yourself from Medicare fraud.](#)

2. **Think about your Medicare coverage needs for 2022.** Carefully review your current Medicare coverage, and note any upcoming changes to your costs or benefits. Decide if your current Medicare coverage will meet your needs for the year ahead. If you like your current coverage, and it’s still available for 2022, you don’t need to take any action to keep it.

3. **Review your 2022 “Medicare & You” handbook.** It has information about Medicare coverage and Medicare plans in your area. If you want to get your handbook electronically, you can go paperless by [logging into (or creating) your secure Medicare account](#).

4. **Preview 2022 health and prescription drug plans.** We make it easy to compare coverage options and shop for health plans. For a personalized search, [log in or create an account](#) (if you have a Medicare Number) to create or access a list of your drugs, compare your current Medicare plan to others, and see prices based on any help you get with drug costs.

5. **Get personalized help in your community.** You may be able to find free information and events online, or get help from health insurance counselors in your area by phone, like your [State Health Insurance Assistance Program](#).

Visit [Medicare.gov](#) to sign up to get important news & updates by email from Medicare.
Rhode Island

SHIP
State Health Insurance Assistance Program

Navigating Medicare

CONTACT YOUR SHIP
Senior Health Insurance Program (SHIP)

<table>
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<tr>
<th>Call</th>
<th>1-888-884-8721</th>
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<td>TTY</td>
<td>401-462-0740</td>
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<tr>
<td>Website</td>
<td><a href="http://oha.ri.gov/">http://oha.ri.gov/</a></td>
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Narrangansett Indian Health Center & United Way’s 211Van

When: First Thursday of each month

October 7, November 4, December 2

**more dates following into 2022

Where: 51 Old Mill Road, Charlestown, RI **lower parking area

Time: 1pm to 4pm

Contact:
Narragansett Indian Health Center
Office of Community Health Programs
51 Old Mill Road, Charlestown, RI 02813
401 364-1263 ext. 107

*Daycare, financial assistance, a mental health counselor, or if you need any other kind of community-based service in Rhode Island, 2-1-1- is available to help you and your family.

IN ADDITION TO HEALTHCARE SERVICES, THE HEALTH CENTER OFFERS THIS OPPORTUNITY TO LEARN ABUT OTHER RESOURCES AVAILABLE THROUGHOUT THE STATE

A representative from United Way 2-1-1 in Rhode Island will be present to help connect individuals with the information and services they need, confidentially and for free.