**Reaching Immunity Takes a Community**

Good morning and thank you for joining us today. I'm Reggie White and I serve as senior vice president of commercial markets and CareFirst administrators at CareFirst. I have the pleasure of delivering welcome comments to our esteemed panel and to all of you watching today at home virtually.

You know, those on the webinar who know me, well, know that sometimes I can be just a little bit technology challenged, so as I went through my last-minute prep with our communications team yesterday, and all the do's and don'ts of this webcast relative to my lighting and the resolution and being near a wi-fi signal, I actually got more nervous about the technology than actually delivering comments to the 700-plus folks.

We expect on the phone today…and my son this morning didn't really help me out. He said, "Dad, you know what, do a great job but don't mess up." So anyway, we're thrilled to convene this panel of partners from across the region to discuss topics on the mind of employers in today's evolving healthcare pandemic environment, ranging from vaccine hesitancy to the role we as community leaders play in safeguarding the health and safety of our employees and the communities where they live and work. And for me, this discussion that will ensue tied to vaccine hesitancy carries significant and real-time personal meaning.

My mother, who is 77 and lives in Southwest Florida, has not yet taken the step to be vaccinated. And obviously this pains me and my family, but I know she has deep fears about going through the process. And growing up in the household, I know where these fears started. You see, I grew up in a household with a father that had some very deep-seated trepidation with healthcare providers, tied to some not-so-distant history around medical mistreatment and medical experimentation, primarily within communities of color. My father even knew a family in Alabama that was directly impacted by the infamous 1940s Tuskegee Experiment, so we grew up hearing these views in my household, and I know it impacted many members in my family and certainly impacts my mother's views on vaccinations today.

Yet there is good news. Through continued conversations with my mother, through talking about experiences of others in our family relative to their vaccination success, and even pulling a last-minute Hail Mary by involving her minister at her small Southwest Florida church, we think we've got her to a place where she's becoming comfortable, and we hope to have her vaccinated in the next few weeks, and we certainly thank God for that.

So, in closing, we hope that you find this session enlightening and filled with perspectives that will inform and enrich your efforts to encourage broad vaccination adoption rates among your own employees. And if you feel like you might need a little assistance, give me a call, because I know a very persuasive minister at a tiny Southwest Florida church that I would certainly be happy to send your way.

And with that I would like to introduce our moderator for today, CareFirst Vice President of Commercial Markets and Client Management, my friend and colleague, Mary Penczek.

Thanks so much Reggie, I really appreciate the commentary and especially the personal side of this pandemic that a lot of us forget that we have individual ways of what we're dealing with these vaccinations, so I appreciate the personal touch there. I'm really excited to lead this important conversation today, and along with my counterpart, Tim Matthews, I'm responsible for all our employer

groups in the Mid-Atlantic corridor, and this topic is the single biggest topic that employers are grappling with.

You know, as a neighbor and leading regional employer, CareFirst has been laser focused on supporting our employees, members, partners and communities impacted by the COVID-19 virus and planning for what comes next. So now as COVID-19 vaccines are being rolled out, there is a clear opportunity for all of us to step forward together so we can reach the target vaccination rates needed to turn this pandemic around.

We hope this discussion will provide valuable insight on how we can thoughtfully discuss the critical role vaccines play, address concerns, fears and hesitancies related to being vaccinated, and help those that we're responsible for prepare to take the next step when it's their turn.

So let me introduce our panel today. With us today, we have Dr. Michelle Gourdine, interim chief medical officer and senior vice president for population health and primary care at the University of Maryland Medical System. Dr. Gourdine oversees the system's efforts to develop and implement population health strategies and deliver primary care services in hospitals, clinics and other care sites. In addition to serving as a clinical assistant professor at the University of Maryland School of Medicine, she is a senior associate in the Department of Health Policy and Management at the Johns Hopkins Bloomberg School of Public Health. Welcome, Dr. Gourdine.

Mary, thank you so much. It's a pleasure to be here.

Joining us from Lidl, an international supermarket chain with US headquarters in Arlington, Virginia, is Eoin Byrne, vice president of human resources. Eoin’s career includes a strong operational background in retail. He has also spent time at Lidl in Ireland, the UK and their international headquarters in Germany. Eoin’s particular areas of interest include the future of total well-being, employee engagement and employer brand. Welcome, Eoin.

Thank you. It's a pleasure to take part.

A third welcome to Carole Braithwaite. She is the senior director of compensation and benefits from Asbury Communities, one of the nation's largest not-for-profit senior living organizations. Carole has more than 15 years of leadership experience in human resource management and is responsible for the overall compensation and benefits program across Asbury Communities. Carole also develops and implements strategies, policies and programs to support Asbury's strategic initiatives. A big welcome to you, Carole.

Thank you very much.

And our last panelist is CareFirst’s own Angela Celestin, who is our executive vice president and chief human resources officer. During the span of her career, Angela has led HR and employee development activities in the consumer product and financial services industries. She has spearheaded change management practices and managed transformational cultural initiatives. She is responsible for shaping the employee experience and driving HR thought leadership throughout CareFirst.

Thank you to all of our panelists today. Let's jump right in. Dr. Gourdine, if we can begin with you. Can you talk to us about where we are in the pandemic, sort of the road that lies ahead and the importance of all of us coming together to get the vaccine.

Sure, Mary, happy to do so. I actually took a look at the statistics this morning, just to sort of frame this part of the conversation and to let us understand where we are at this point almost a year into the pandemic here in the United States. In the US, we've got more than 28,200,000 cases that have been identified, and as we know we crossed a grim milestone this week of more than 500,000 deaths in the United States from COVID. Relative to vaccination, we've got almost 14 percent of our population vaccinated across the United States so far. Zooming into Maryland, we've diagnosed more than 370,000 cases of COVID here in the state. We've had more than 7,700 Marylanders to die from COVID, and so far about 13 percent of the population has received one dose of the vaccine and roughly 6.5 percent have received both doses of the two vaccines that we have available. That kind of frames out where we are right now.

Let me talk a bit about the road ahead. The way I like to think about that is to think about the three Vs of vaccinations, variants and vigilance. So starting with vaccines, because this is really important and this is really the central topic of our conversation today. These are really important tools to provide us hope that perhaps we are at the beginning of the end of this pandemic and this horrible impact across our country. Obviously, we need to get vaccines in arms and we've been working very hard to make sure that we do that. In Maryland, we're following the state's risk-based, tiered approach to rolling out the vaccine, which acknowledges the fact that right now we don't have sufficient vaccine supply to vaccinate the entire population in the state of Maryland or in the country for that matter. So it made sense to target those people who are most at risk for getting the vaccination and that is what those fears represent.

Variants. A lot of people have talked about variants. First of all, you know variants are a natural occurrence with any virus. As viruses continue to replicate or reproduce themselves, they also continue to create various mutations, which is what causes the variants that we are now seeing. We understand there are multiple variants of COVID that currently exist. The ones that most of us have heard about are the UK variant, the South African variant and the Brazilian variant. There is a lot that we do not know about these variants, but what we do know is that early research shows that the two vaccines that are available now—the Pfizer vaccine and the Moderna vaccine—can provide protection against these variants.

There is more research to be done. Manufacturers of these vaccines are also looking at the possibility of creating certain booster shots to improve protection against the variants. So there's more to come in our knowledge about all of this. But that is what brings us to our third v: vigilance, because that is our greatest protection. Vigilance in wearing masks even after you're fully vaccinated, still wearing those masks. Vigilance in washing your hands and hand sanitizing. And finally vigilance in social distancing and avoiding large gatherings indoors.

So the three Vs—vaccinations, variants, vigilance—are really going to be the order of the day and the road ahead for us.

Mary, that's awesome and a great way to keep those things top of mind for all of us, right? I like that, three Vs. Angela, from an employer perspective and given the current status of the vaccine rollout, can

you talk about the responsibility CareFirst has as an employer and a leader at this critical time, obviously, and how that influenced the direction you took with us as employees and the vaccine.

Absolutely and thank you for having us. You know, we've launched an effort with a very simple goal: do what we can to ensure that we have enough people get vaccinated so that we can put an end to this pandemic. We have over 7,000 CareFirst BlueCross BlueShield associates who live, who shop, who engage in this DC, Maryland, Virginia, West Virginia community, and even as far north as Pennsylvania, as far south as North Carolina. We also have families that rely on us. They rely on us for information about health. So by standing up and taking a pledge to get the vaccine, we are serving as role models in our communities

We know that and, as Dr. Gourdine just mentioned, vaccines that the rollout…there's a very limited supply. We know that, so we're starting our discussions with just educating, informing and mobilizing as many people as we can who are ready to roll up their sleeves and get the COVID-19 vaccine when there is ample supply and when it's their turn. You know, it is incumbent upon us as an employer to stand up and declare our intention. It is incumbent of us as an employer in this region to demonstrate that the best way for all of us to get better is to actually do it together.

And so last week, our CEO, Brian Pieninck, asked all associates to join him and his commitment to get vaccinated as soon as they can and once they are eligible. So CareFirst, we ask all of our employees…and this is our employees, it's our contingent workers…to sign a better together pledge to commit to getting vaccinated when they're able to. And this is to protect themselves but it's also to protect those that they love and to protect their community. So for every employee who signs the pledge by March 12th—and we specifically said the 12th because it's been a year for many of us since we've been home, since we went home and those of us were able to work from home, it's been a year on March 12th—that we will, for every employee who signs the pledge, make a $100 contribution to a community partner to further their efforts related to vaccinations

And so that's a potential contribution of $700,000. And while we're not able to influence anyone's eligibility to get the vaccine, we're going to remove any barriers possible by giving associates, any barriers, we're going to give them up to four hours of paid time off for each shot that's required when it's their turn. And so for associates who may have already had one or two of their doses of the vaccine, we also encouraging them to take the pledge. We want them to take to take the pledge, too. We have a diverse workforce. Some of our employees are not medically able to get the vaccine, some have religious beliefs where they're not going to get the vaccine, but we also made it clear that we understand this right that everyone has their individual circumstances and we should talk about this. We should talk to the doctors about whether or not and when to get the vaccine.

But we also are providing comprehensive information over the intranet. We've had live calls with our internal doctors—we have many doctors here at CareFirst BlueCross BlueShield—to help connect the truth about vaccines. And as a health care provider, it is our responsibility to fill these gaps, right, with basic information and very specific information to help employees better engage with some of their physicians, and really debunk any myths that are out there. And you know, employees, they usually have a trustful relationship with their employer and so we're pushing, as an employer, more ways to continue to, you know. provide the information that's needed.

I read an article just yesterday from I think it was the Edelman Index, and it talked about the increase in trust that employees have with their employers between 2020 and 2021. And whereas, you know, other

avenues like the government and the media, trust has declined, I think our employees, if they continue to trust us, we continue to provide them with clear information, is really going to allow them to help sign this pledge in a very informed and thoughtful way.

That's awesome. I will go on the record to let you know I signed the pledge!

That's great. So did I!

Thank you. So I want to talk to Eoin a little bit, because I think this is something that you are pretty passionate about, you know, and something that you gave a lot of consideration towards in in terms of having so many people on the front line in these grocery stores. I'm curious what factors weighed in when you were trying to choose between whether to, sort of, make vaccination almost an employee mandate versus an incentive, and are there other approaches maybe employers should consider.

I think it's certainly a great question, Mary. Of course mandating this vaccine is something that's out there, right? We know legally, morally, it's something that you could do. But what has been very important for us at Lidl us is to consider how can we best play our role as members of the, you know, an essential function. We are grocery store workers at our core. We must go to work every day. The majority of us on this call have what is, despite the anxiety around it, a luxury to be at home right now. The majority of our workforce do not have that luxury. Therefore, it is our responsibility as an employer to make sure we consider and understand that a lot of people have a lot of anxiety around the topic of COVID-19 and anxiety on the topic of a vaccine.

So what for me is very important is, what do we need to guarantee? We need to guarantee that Americans have their groceries. Therefore, in my responsibility, I have to Lidl US, is to make sure that there's workforce stability. Therefore, it's a decision between the carrot and the stick. The stick—when anxiety is there, when tempers are there, where people are anxious—doesn't work. It needs to be about support, it needs to be about encouragement, and therefore at Lidl US, we've decided that it was going to be an incentive. But the decision, to decide to give everybody…and what it is that the US is…a $200 payment for everybody who gets the vaccine.

That starts way back in the story, and our story with COVID starts with our whole ethos around people and that is: at Lidl, we expect a lot. You need to give your best. To be at your best, you have to be well taken care of. That's why we have benefits for everyone—the same benefits for me as for somebody who's working 10 hours in a store. But further to that, we have definitely been first mover in terms of protective equipment in our stores, how our stores operate in order to make sure employees and the customer are safe. So when it comes to PPE, when it comes to hospital-grade filtration systems in all of our sites, when it comes to first-in-the-market…great partnership with CareFirst…specific COVID-19 benefits plan for those who are otherwise uninsured, the story starts there.

It was always an effort to do what would keep you safe. Right now—and the whole topic here is the end of this pandemic—the ultimate, ultimate gesture that we can make is to support you to have this vaccine. To make sure that you are incentivized to have the vaccine with a monetary reward, flexibility around scheduling and with making sure that you've got…yeah, that's scheduling the time to go away and do that, but also to make sure that we are providing you with information.

I really like the question…I really like the answer that Mary gave around the topic of responsibility as an employer. And right now, that's kind of a gray area because you could see your responsibility is going

really far here, or you could say, you know what, this is something that like is a health thing and that's between the state and federal government and on the employee. What I see maybe not as a responsibility but as a great opportunity is for employers to step in there, into that void and provide very detailed information down to the county level on how you actually go about getting this vaccine. It's not enough to just incentivize it. You have to make it simple and clear and a tangible thing that, as an employee, I see a path forward to actually getting this vaccine.

So in terms of whether mandate or incentive, I think it's very clear for the majority of employers who've considered what their needs are—and at Lidl, our need is stability—that really making sure it's incentivized is the right approach. Other considerations and other approaches, for me, have to be around making sure people see a very clear path forward. And for that, communication and executive messaging and leadership are absolutely key.

You know, you talk about the communication and it's a great segue into a question I have for Carole. You know, Carole, when I think about Asbury Communities, the industry of senior care, right, we know that getting the workforce vaccinated quickly was a top priority. Can you describe some of the steps you took to sort of fast track communication with your employees and maybe provide some insight on how you determined the best method to support your vaccination goals?

Oh, thank you, Mary. Yes, I think for us what was, as you mentioned, with being in the senior services space, serving the most vulnerable population, particularly as it pertains to this disease—it was critical for us, first of all, throughout the entirety of the pandemic, to make sure we had clear and open lines of communication with our workforce. And we set up systems in place. We had managers really pointedly going out and having those conversations. Once we knew that the vaccines were coming, and got that initial emergency use authorization, the next thing that was most important was us to figure out a rollout plan.

One of the things…I mean we were incredibly fortunate from the sense that we knew we were going to be first in line in terms of the workers and the population that we serve, so we knew that we had a very short period of time to sort of come up with that plan. What we needed to understand from our workforce was the level of interest and willingness to participate because similar, I think, to a lot of what other employers are struggling with, that notion of that mandate versus a voluntary offering, for us, it was we really needed to have a significant number of our workforce vaccinated as quickly as possible.

And so what we did was we initially pretty much declared a position which was, hey, this is going to ultimately be a requirement for employment further down the line. However, understanding that this is an emergency use authorization, we want to give people the opportunity to declare one way or the other: Do they want to wait? Did they want to go ahead and get it now? That allowed us to understand sort of how much of the workforce was willing to do it early on. And when you're in a healthcare setting, it's interesting, because we had quite a few skeptics and making sure that we had managers in our entire management team down to the line management level aligned in terms of the importance of the vaccination—providing that messaging around safety, providing that messaging around benefits—because we're in a position where we knew we would be able to offer it to our workforce. And so we initially declared the position, rolled out the policy to the workforce, allowed them a window to tell us, right, I want to get it now/I want to wait, and then once we sort of had a sense for how much of the workforce is willing to participate early on, we wanted to make sure that we offered additional incentive to sweeten the deal.

So we actually implemented…we've got a wellness program and we very much support wellness across our associate population and what we did was we offered a fast track to achieving your wellness incentive. So what we said was, hey, usually you've got to go through a year's worth of activities—it's pretty involved—but what we're doing for 2021 is we said, hey, you get the vaccine, you're good for the year. You've met your wellness incentive. And that translates to those on our medical plans as $500 for individuals and $1000 dollars for those with families, recognizing that need and I think it's been pretty effective.

The other change we made was recognizing the pandemic and the need for health insurance. We also made sure the insurance was very affordable and followed up with our entire workforce to say, hey, we want to make sure that you've got insurance. We actually had a requirement that they have insurance, recognizing that there is a higher level of exposure in the work that we do, and we wanted to make sure that everybody was as safe as possible. So these were the things that were able to put in place to quickly respond and get the workforce engaged in it. And today we're at…we started vaccinations. First shot-in-arm for our workforce was December 26th. We're about two months in and we have more than 50 percent of the workforce with both shots in their arms and we've got about another third that are coming up to get their second shots here in the next few weeks. So it's been an incredible response to these episodes.

That's great. You know, and I think about, you know, your industry and there seems to be…the logic would tell you that the workers in that healthcare delivery system get vaccinated. But we know that there's still a lot of skepticism around this—and Reggie touched on it in in his opening—but maybe if I could ask Dr. Gourdine, you know, we know there's skepticism. Can you share some insight into some of the sort of unique hesitancy challenges that impact, you know, the different age groups, neighborhoods, races and cultures, and is there any advice that you can offer these communities?

Sure, and as you stated, Reggie touched on a bit of this. You know, some of the hesitancy is rooted in our history of race relations in this country and certainly rooted in some of the experimentation that took place, thankfully, many years ago but that was very harmful to the Black community, that exposed them to unnecessary risks where the research was not fully explained, and Black Americans were treated as an experiment without their consent.

We've learned a lot from that, and we have grown from that as a health care industry. Much of the lessons that we've learned from all of that have gone into our informed consent processes that we undertake right now, to make sure that every individual who is undergoing a medical procedure of sorts is able to receive the information they need and properly ask questions before consenting. So that's sort of one set of issues around hesitancy.

The other large set of issues, I think, that I've heard in my experience over the past few months really has to do with the process of developing this vaccine. This Operation Warp Speed. People are like, wait a minute. Normally it takes years for vaccines to develop and you mean to tell me that in a matter of months we have these vaccines? What happened? Were corners cut and quite frankly, I, as a physician, had some questions myself. And I recall having a conversation back late summer/early fall with my 80-year-old mother, saying, "Mom if they call you and tell you to get the vaccine, wait because I need to do my own research to understand and be satisfied for myself that no corners have been cut in this process of getting these vaccines to market so quickly."

And I did. I did a lot of study, I did a lot of research, I asked a lot of questions of a lot of people that are a whole lot smarter than I am and the bottom line is this: I am satisfied that there were no corners cut relative to ensuring that this vaccine is safe. There are no corners cut. These vaccines that…relative to whether or not these vaccines are effective. It is clear that they are quite effective. It is clear that they are safe.

What I understood in terms of how we got to market so quickly was that a couple of things happened. One was sort of serendipity. COVID is a member of the family of coronaviruses and research has been done on developing vaccines for that family of viruses for over 10 years. So we have the benefit of that research walking into this horrible pandemic. The other thing I learned was that the corners that were cut were bureaucratic. And so rather than certain processes that happened sequentially, there were many processes that happened in parallel in order to speed up the process.

That made me comfortable enough to call my mother back before December and say, “Hey, look, when it's your turn get it.” Right now, her biggest challenge—she lives in Mississippi—is the supply. And so she's on her Walgreens app every single day down in Mississippi, trying to get registered and scheduled for the vaccine, and you know, hopefully she will be able to get that soon.

But I think that those are the two largest categories of hesitancy, and I think that many of us are doing a lot in order to address them and provide people with the information they need to make a choice to get the vaccine.

Right, thank you so much for your perspective there. You know, I think about that…and maybe I'll open this up to the panel a little bit here…but you know, given the realities of diverse perspectives on vaccines, the level of misinformation that gets circulated…I’m interested if your organizations have adjusted sort of internal communications around these vaccines, or have you made intentional changes with executive leadership messaging to employees? And maybe, Eoin, I'll start with you on this since you were big on the communication factor a little bit earlier.

I think this is really the most important point, this whole idea about how you engage with your workforce. We’re right now at a crunch moment when we need people to take that vaccine. I mentioned earlier about this idea that there is, you know, a vacuum, where there is misinformation, there's sometimes just lack of information. And trust me, this is not a US topic. This is a global topic. I’m talking with my colleagues across Europe every week, and they're having the same struggles here. What we've found that has worked at Lidl US, certainly, in terms of the feedback we're getting from our workforce, is we've pivoted very firmly to make sure our communication from executive level is as authentic and as transparent as possible.

How we've done that? We have asked the question of our workforce directly on our internal comms platforms: Do you intend to get the vaccine? We were very encouraged eight in ten of our respondents said yes. I read this morning an article from SHRM saying 40 percent of employees intend not to. Now maybe that reflects the fact that we are, primarily, frontline workers.

The next topic was to make sure that if somebody had a question that, you know, maybe it was like, hey you're not doing enough, I need this…we encourage those questions to be posed in an open forum. So all messaging capabilities, comment capabilities are turned on on all of our articles. In terms of how we talk to our workforce, we, as a global organization from a German background, we tend to be quite professional and polished. We very much so pivoted to video messages, one of which was our CEO in his

backyard, recording himself on his iPhone, talking to people. No two-three takes, one take. If you take a moment to correct yourself, fine. Make people feel that you are connecting with them and that it's authentic. And I'm talking about the fact that we trust this vaccine, we want you to take it, and we are going to make everything as transparent as possible for you to do it.

Anybody else have any comments in that arena? I think you really articulated that well, Eoin, and it is critically important.

I would just add, Mary that…and Eoin, that's great, great feedback and it's great what you guys are doing… I would just add, we've noticed that that relationship between an associate and their immediate supervisor is a strong one. In many cases, when we've done our engagement surveys that's for that relationship, that trust between the employee and the immediate manager is a strong one. So while the executives or myself…we've been going out, we've been, you know, voicing our commitment through written communications as well as town halls…I really have asked my direct leaders, my managers, to really take time and personally encourage their teams, because I do think that one-on-one relationship that an employee has with their manager is sometimes even stronger than me coming in and talking to all employees and human resources for them.

Angela?

I would say here at Asbury that that relationship with the manager—those first-level managers—with their workforce, I think, that's actually been a key to even having some people who originally declared they would either wait or they didn't want to get it, that changed a lot of minds. I mean, we've got people who originally had declared I don't have an intent, but we had open dialogue. Those managers were able to connect with their associates and explain and address some of the concerns or some of the misinformation that's out there…because there's a lot of it out there…so I think that's been really effective. And we had set up, we have an internet…we have an associate app with more than 80 percent adoption, and so we actually set up a communication hub there with accurate information—really heavily based on the information that the CDC was putting out—to make sure that, you know, we've got a large workforce with a significant number of healthcare workers engaged, and they're able to go someplace for reliable information and be able to sort of answer to some of those rumors that are out there. So I think that was also effective for us.

Mary, if I could just jump in and add to the great comments that were made, agreed. You know, here at The University of Maryland Medical System, we believe that frequent, clear, transparent communication at all levels is just absolutely essential. And foundationally, the intent of that communication is to help facilitate each employee making their own individual choice. Obviously, we hope they choose to get the vaccine. We understand that there are different paths to them getting to that point where they feel comfortable getting the vaccine. And so we want to make sure that they understand: this is not about coercion. It's really about communication. It's about listening to them and hearing from them their concerns and creating that safe environment where they're able to express those concerns.

The other thing that we foundationally emphasize is humility. And the importance of humility really is relative to COVID and to science. The coronavirus—COVID-19—is a new vaccine. We have about one year's worth of knowledge under our belt about this virus. I said new vaccine, I meant new virus. We don't know everything that we're going to know about this virus, and as our knowledge continually evolves, we have to be humble enough to allow our communications and the information that we share

to continually evolve as well. And so that also is the foundation of our communication strategy at The University of Maryland Medical System.

That's great. You know, Angela, when we talked about, right, this whole "It's not coercion," right, as Dr. Gourdine said… when I think about what we did at CareFirst and the concept of the pledge, you know, what other things did you consider, and did you get feedback from the workforce on our campaign, really, in terms of getting the shot in the arm?

Absolutely. You know, this was not an easy decision. We engaged. We set up a task force—it's called the COVID-19 task force—early on, back in March of 2020, and it's a representation of different areas in our business…employees from different areas in our business, from different levels of the organization, from different backgrounds, of different, you know, genders…and we were very intentional about the diversity in this COVID-19 task force. So we asked them to really weigh in on all decisions COVID-19, whether it's business decisions, whether it's, you know, how to better support our associate population at home and the workforce being home and remote.

So we took it to the task force. We said, you know, how should we handle this? And they came back with multiple ways to do this, many of which have been adopted on this call today by different employers in this area. So that the beauty of having, I think, diverse groups of employees across the organization weigh in on key business decisions allows for multiple ideas, different ways of doing things. And then, I think, ultimately, we chose the pledge but we got a lot of great other options that were presented from this task force. And so, you know, it ranged from full mandating to partial mandates if you go into a CareFirst building, to incentivizing through cash or incentivizing with points…all of which were explored fully and then we just we came to the pledge. We thought the pledge was the way to go for us.

But you know, it just goes to show you've got to open up that dialogue, and I think many on this task force…on this meeting today have talked about this. Open up the dialogue so that everyone's voice can be heard and that these decisions are fully vetted, they're debated and then ultimately, you get to a decision that everyone can feel good about.

That's great and, you know, this…the pledge concept, the incentives that you're doing Carole and Eoin and things, you know, this is all part of supporting the effort to get people vaccinated quickly. Obviously, we recognize there are shortages in the distribution of the vaccine at this moment, but to get people in line and commit to take that shot when they're ready is critically important.

We're going to wrap up here in just a minute, but, you know, maybe perhaps, Dr. Gourdine, if there are any other parting words that you could provide around your three Vs, I think we're all experiencing some COVID fatigue, right? People are getting tired of face coverings. They've gotten a little bit lax when it comes to social distancing and testing, and I think they're thinking and hoping, right, that a shot in the arm is the cure, right, and that they can give up these other measures. Can you share some insight again or, sort of, reiterate those three Vs before we close and turn it over to Brian Pieninck?

Sure, Mary, happy to do. So, you know, we talked about the three Vs and I want to focus on vigilance because, even after we receive our vaccines…and i've been vaccinated, I just want to go on record of saying that I have…that that doesn't mean that you can immediately go out and, you know, burn your masks. Although we all can't wait 'til we can do that. I'll be the first in line. But we still have to be vigilant because we are not fully vaccinated yet and we've not reached that point that many people have heard

about and…I'd like to take a moment to explain…and that is herd immunity. And herd immunity is when roughly 75 percent or so of the population is immune from COVID, because that will keep it from spreading from person to person, and that is what we are trying to represent. So until we get to that point, we still need to wear those masks. We still need to wash our hands. We still need to limit those indoor social gatherings. I know we're tired of it, but we want to get to the point where we don't continue to lose our friends, our family members, our co-workers, our members of our community, our kids, and the way to get to what I'm looking forward to, which is to be able to go visit my mother in Mississippi—who I haven't seen in more than a year—go hug my mom. This is the way we get to that. We can't let up. We can't get tired. We're all in this together. We all get it. We're sick of it, but we are on our way to the end of this, but there's a bit more that we all have to remain vigilant in doing, and if we do so, we will get to the light at the end of the tunnel.

Thank you so much. I think we're all waiting for the day where we can hug our family members and see our co-workers again, so that's critically important and I hope you get to do it sooner than later, Dr. Gourdine, thank you. Thank you all for investing your time with us today. It's really been a great and, I think, a very necessary discussion. I'd like to turn it over now to our president and CEO. I'll give a quick intro here.

Brian Pieninck joined CareFirst in April of 2015 as executive vice president of the large group strategic business unit of which I was a part and very fortunate to have him as a leader. On July 21st…I'm sorry, July 1st of 2018, after being unanimously selected by the CareFirst Board of Directors, Brian became our president and CEO. Brian, as a follow-up to the conversation this morning, please tell us about the exciting ways that CareFirst is expanding further on the Better Together campaign.

Yeah, Mary. First, I'd like to say that not as fortunate as I was, an organization where I got to work closely with you. So it continues to be a pleasure and really appreciate your leadership today and leading this discussion and helping to connect our customers consistently to this message and into the work that we're doing together, so, fabulous job today. Really appreciate you and Reggie's voice getting us kicked off today.

Yeah, I'm a big believer that oftentimes the right message reveals itself in the moment—and our marketing team will say that I'm just using that as an excuse to go off script, which is possibly true as well—but I was really struck by this panel discussion, and I think the thing that really impacted me personally…it was the honesty and the humility and the humanness that came through, and the voices of the people that we heard from today. And we've spent a fair amount of time talking about this at CareFirst that crisis, as we say, reveals that the best of who we are, reveals the worst of who we are. And I'd like to spend a few minutes really thinking about the best of who we are and some of those reflections, because I saw that model today in our panel. I really feel like the message that they delivered…it represents the best of who we are. And when we think about who we are, there are more than 450 participants on this broadcast today and there were more than 600 people registered for this today, which is an incredible showing from the community, community organizations and businesses.

And I want to relate for a minute to you, and some of the experience we've had, that there was no script for this, that we all came into this. And when I think about how we felt and what we were doing in February as we move to March and how significantly things changed in our lives both personally and professionally, in that early March time frame, and that they've never gone back to what we had been doing, and how we were feeling before this pandemic started…it was an incredibly abrupt shift and I

have been blown away and proud of how everyone has shown up and I know so many of your organizations.

And I've been incredibly proud of the community response. I've been incredibly proud of how people have really gone out of their way to protect the people that they care about, the people that they're responsible for, the community at large. And this really represents the next step in that progression… being the best that we can be, showing up every day to really move things forward as a community. And what I heard from our panelists, what were some themes that resonated with me about responsibility and opportunity. What is our responsibility? What's our responsibility to the people that work for us? What's our responsibility to our families, our friends, our communities? What's our responsibility to the people that we serve, whether we're a product company or a service company? Whether we're in the healthcare sector or if we're in the hospitality sector, we have a responsibility to folks and, I think, finding our way around that has been part of this journey together.

But I think, consistently, as a community, your organizations and you have shown up and you found your way to your responsibility. But we also have an opportunity in this moment, and I think it's easy to get consumed by all of the challenges that have been revealed in the path to vaccination. How do we reach a protective level of community herd immunity as you heard about today? We have an opportunity to aid in that, and while not all of us can contribute to the amount of vaccine supply—which is absolutely part of the effort, and not all of us can contribute to getting shots in arms—you know, how do we connect people to those vaccines? All of us can contribute to the demand, all of us can contribute to listening, understanding and really guiding people in this journey, so that when they're able, when it's their turn, they want to show up. They understand the importance of showing up and getting connected to a healthcare professional to get that shot in their arm.

We all have an opportunity to do that, and what the data tells us is that there's an incredible amount of hesitancy that still exists in our communities. And when we say our communities, it's all of our workforces, it's all of our customers, the people that we're most responsible for, the people that we have the greatest opportunity and obligation to help, that 30-plus percent that we hear about of folks that are still hesitant around getting vaccinated. Those are people that are in our immediate communities, in our immediate sphere of influence, and we've got an opportunity to do something meaningful and impactful in their lives.

But it requires us to do the things that you heard about from the panelists today. It requires us to be transparent and to communicate, really, just be people. We've all had struggles through this transition. We've all had challenges. We've all been tasked with being even more flexible than we've ever had to be personally and professionally in the past. But we've got an opportunity, I think, to use that experience to better connect with people. And you heard about humility and empathy. How do we acknowledge, you know, as hard as it can be for business leaders and community leaders to just say out loud: I don't have all the answers, I don't have all the answers. I can't tell you with a hundred percent certainty what's going to happen next and how we're going to handle it all. I can tell you is you're going be our number one priority. You are employees. You are contingent workers. You are customers. You're going to be our top priority and we're going to meet the challenges of the moment together. We're going to figure out how to navigate it together.

This is an opportunity to do with empathy. One of the things that I think, that I will hold on to most coming out of this pandemic are the walls that have been torn down between who we are as professionals and who we are as people, as human beings. And I love the story that was told about the

Lidl CEO that just got out there in his backyard and just delivered a message unscripted, directed to an audience to say, hey we're all people, we're all in this together, we're learning how to celebrate differently, we're learning how to grieve differently, we're learning how to work differently, interact differently, but we're all doing it as people first—not as professionals first—but we can relate to that, we can empathize with that, we can continue to move as one community and move forward and come out of this to something different and better post pandemic.

And then, representation and trust. You know, this is an incredibly important part of the conversation in terms of: Can I see myself in you? Do you see me, do you hear me, do you understand what my unique concerns and needs are? Do I trust you with that information, do I trust you to exercise judgment and to make decisions on my behalf? And is there representation of who I am and how I feel within this decision making process, within the group of people who are communicating? And one of the opportunities that CareFirst felt like it had was really to amplify that message. Not all of the messages that we're going to deliver as it relates to vaccine education are to come from CareFirst. Not all the content is going to be developed by CareFirst. We want to take the best of what the community has offered broadly and amplify representation of this message, because every single person that we're trying to reach needs to hear and see themselves in the people that's delivering the message.

And so this concept of representation and how that leads to trust—incredibly important as we continue to move forward—and so I was struck by these themes and by the diversity of the panel in terms of how they've approached this, the conclusions that they've reached. I was also struck by the fact that each of them have come to somewhat different conclusions about the best way to approach it based on their responsibility, their opportunity and their cultural organizations. And I would encourage all of you to think about it the same way. There is no one path to success, to getting us to that minimum of 70 percent vaccination in the community, hopefully reaching beyond that as we move out of this pandemic. So consider who you are, consider who your people are. Listen and learn first and then begin to dialogue and educate as an organization, as a company. We went through this process—and Angela did an amazing job of highlighting that today—and we asked ourselves all the same questions that you're likely asking yourself.

And the conclusion that we came to is that we have a responsibility as an organization that has a vested interest in public health…that's what we do, we have a vested interest in community health and in public health…and as an organization that really operates that way as a business and that embraces that as its culture, we really wanted to focus on the responsibility that each of us had individually and that all of us had collectively, and so we came up with this concept after launching our Better Together campaign, where we redirected our marketing efforts to vaccine education and awareness efforts and reinvesting in vaccine capabilities in local communities and with our partners.

We also wanted to extend that to something that was actionable within our workforce and that was within the business community, and so we came to the conclusion that we had an opportunity to do two things. One is keep our workforce safe and encourage them to get vaccinated, and to keep them safe through vaccination. And the other thing was to extend the mission of our company, to provide access to health care in the community by donating to local organizations who are serving the underserved, organizations that are helping all people equitably to get vaccinated in the local community. And so we inspired and we really appealed to the social conscience of our workforce to say do it because it's the right thing to do for you and your family. Do it because it's the right thing to do for the community.

And so for every person at our organization that gets vaccinated, that takes the pledge, we're going to donate $100 to local charities that are advancing vaccine efforts in local communities with a focus on the underserved portion of those communities. And really proud to share…and Angela provided a bit of this earlier…that after a little over a week, we've got nearly 40 percent of our workforce pledging to get vaccinated, which is just phenomenal.

Now we'll continue to run that internal pledge through March 12th, but today we want to open that pledge opportunity up more broadly to the community and all of your organizations. And we want to offer you the same opportunity that we offered our associates. We want to appeal to your social conscience and, frankly, build on the amazing work that you're already doing. I've watched as your organizations have kept people employed and kept people insured and have helped to address some of the stress and strain in local communities through your own outreach and philanthropic efforts. This is an opportunity to extend that impact, and so we are offering the opportunity for organizations who believe that this is important, who believe this is part of our responsibility to the people that we serve to take the pledge and to do it in a public way. And for every organization in this region that pledges to listen, to learn, to educate, to understand and ultimately motivate people to get vaccinated, we're going to provide resources and we're also going to make a donation of $1000 in your honor to local organizations that are advancing vaccination within the community.

This is a win-win, folks. This is a win-win. And so I'm going to take a few minutes to h walk you through what this looks like. And one of the comments from the panel this morning was you need to make things easy, and I agree with that 100 percent. Let's make doing the right thing easy. And so I'm going to share my screen and show you what it looks like. So this is the landing page. So when we asked you as a follow-up to this meeting to go out and to take the pledge, and to have your brand associated with this opportunity to really support vaccine interests, and ultimately getting to yes with vaccination, you're going to reach a landing page. And it's going to say that…take the Better Together community organization pledge. This is going to be a public site. You can direct your business partners and customers there as well.

And if you scroll down, I talk simply about what we're pledging to do. We will continue to prioritize health and safety. We will listen and communicate openly regularly and with empathy. We will lead by example. And this is an important one: I do truly believe that as organizations and employers, we are setting an example for the people that we interact with, and it's an important example…never, never greater than the one that we have an opportunity to set over the course of the next year. And so you'll have an opportunity to offer your name and title and company and email address. You have to confirm that you are, in fact, not a robot, which is always important. And when you do that, you're going to show up on our pledge page, and we're going to track the pledges that are coming in. So you'll see that we've got a pledge tracker that'll show how many organizations, but it also shows the number in dollars of contributions that we're making to local organizations.

And then you're going to show up as an organization in our pledge tracker. And I'm going to take you out to our pledge wall, so that you can see your brand and the message that you provided, what you want people to see and understand about you as a company on our pledge wall. And so today we were really fortunate to have Asbury and Lidl and University of Maryland Medical System all offer their brand support and their words of encouragement, their words of education, not just as part of the panel but as part of the pledge today. And as a result of that, not only will more people be educated on vaccination, we'll be making contributions in their honor to local organizations who are focused on this effort.

If we go back out to that page, you'll also see that there's an opportunity to learn about the community partners that we are supporting: Casa de Maryland, United way of the National Capital Area, and West Virginia Health, right. We selected organizations that have a unique, vested interest in local communities and, specifically, serving the underserved in those communities. We want this vaccination effort to be equitable. We also provide you with some content that we've developed, as we've redirected our marketing page and marketing efforts to vaccine education and awareness. And so there's an opportunity for interactive content there.

And then, I think as important is…we really wanted to democratize and make available resources to all organizations. We recognize not every organization has the budget or the resources to develop content or educational materials. We also know there's a lot of misinformation out there, so curating content that's appropriate, that's impactful…so we have social media resources, articles about vaccine education, press release documents, executive message templates that can be utilized, and frequently asked questions you'll see as you utilize these materials. This is not about, you know, branding CareFirst. This is about you taking your message forward. And we're going to offer an opportunity for other organizations who have invested in this type of content to put their content out in this resource center. And so the idea here is we want to use the best of what's available—and some of the things that you're developing are amazing. I've seen a lot of this and I've been really fortunate that leaders in local communities have been willing to not only to share what they're doing, but also to say yes, absolutely, CareFirst, go ahead and add it to your resource toolkit so that other people can benefit from this too.

So as you consider joining the pledge, and as you consider following up…the community outreach and email address to send your content, if you want your content added to the resource toolkit, is communitypledge@carefirst.com. And so if you email your documents, your videos, toolkits and resources that you've put together, we are happy to add that here. The idea is…how do we reach as many people as humanly possible? And I think the way that we'll best do that is if we do it together as organizations that have a shared commitment to community.

So that's what it looks like. That's what the experience will be. It's simple, it's easy and we're excited to offer you the opportunity to join this effort. I'll just take a minute and just thank you all. We recognize at the start of a year…especially at the start of a year like this, where we are still very much in the midst of this pandemic and the challenges that that presents, not just to public health but also to your businesses and to your customers…the fact that you would dedicate and commit a couple of hours of your time to us, we are deeply appreciative of that.

I also want to thank our panel presenters today. The unique perspective that they offered, and in the education about the journey that they've been on, their transparency, their knowledge, their skill set, their expertise—but also their recognition that it was really, really important that their voices be heard at this particular moment in time in a really public way, even if only one person today benefits from a comment or an example that was offered, we'll take that. We'll run with that because that's what it's going to look like to really move us past the challenges being experienced in this pandemic. I want to personally thank you all for your partnership in the community as well as your partnership with CareFirst and in your relationship with us beyond the community, and just encourage everybody to continue to focus on what's next, and focus on how we think about our responsibility, and how we seize our opportunity in this moment to lead our community to something better, to lead them as individuals, to lead them collectively, and to emerge from this pandemic a better, stronger, more empathetic and, I think, more united than we've ever been before.

So thank you so much for taking the time today. We really greatly appreciate your investment in us and in yourselves and in our communities, and we look forward to continuing our partnership. Take care.