How Will the COVID-19 Vaccine Be Distributed?

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Key Takeaways

- The first phase of COVID-19 vaccine distribution will prioritize healthcare workers, residents of assisted living facilities, essential workers, adults ages 65 and older, and adults with high-risk medical conditions, in that order.

- It began in December and will likely run until April, May, or June, after which members of the general population may be eligible for vaccination.

- The decision was made by Centers for Disease Control and Prevention officials in a December 1 meeting.

The Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) has released a preliminary plan for COVID-19 vaccine distribution that places healthcare workers and residents of assisted living facilities (such as nursing homes) at the front of the line. Although many kinks still need to be worked out before doctors and nurses can begin administering shots in earnest, experts tell Verywell it’s possible that life could be well on its way back to normal by summertime.
“Assuming we still are good about masking and social distancing [and] we’re able to meet the challenges of distribution and update, and assuming that there are no serious adverse events that occur...then slowly but surely, we should find a lesser and lesser degree of disease and hospitalization and death,” Paul Offit, MD, professor of vaccinology at the University of Pennsylvania’s Perelman School of Medicine, tells Verywell.

What This Means For You

If you do not meet any of these criteria put forth by the ACIP, you may have to wait until late spring or early summer to get the COVID-19 vaccine.

How Was the Plan Introduced?

The plan, titled “Phased allocation of COVID-19 vaccines,” was presented at an emergency meeting of ACIP on December 1. This was two days after the biotechnology company Moderna requested an emergency use authorization (EUA) for its vaccine from the Food and Drug Administration (FDA). (Pfizer, in conjunction with BioNTech, requested an EUA for its vaccine on November 20 and AstraZeneca has yet to request one.)

While far from set in stone, the plan provides insight into what CDC leadership is thinking at this critical juncture in the pandemic.

“Making adjustments as needed will definitely happen,” Offit says. “I think it's going to be a real learning curve here in the first few months until people get comfortable with how this is going to work best.”
Developed by Kathleen Dooling, MD, MPH, a CDC co-leader of the ACIP COVID-19 Vaccines Work Group, the plan relies on a staggered model of vaccine distribution that adheres to several core ethical principles:

1. Maximize benefits and minimize harms
2. Promote justice
3. Mitigate health inequities
4. Promote transparency

The model is divided into several phases and subphases, but the plan, at least in its current incarnation, focuses mainly on Phase 1a, 1b, and 1c. This is likely because “limited vaccine supplies force ACIP to prioritize the vaccine distribution only to the populations identified in phases 1a, b, and c for now,” Zucai Suo, PhD, professor of biomedical science at the Florida State University College of Medicine, tells Verywell.

**Who Will Get Vaccinated When?**

In Phase 1a, those who will receive the vaccine include:

- Healthcare personnel
- Long-term care facility residents
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In Phase 1b, those who will receive the vaccine include essential workers such as:

- Teachers
- Firefighters
- Police officers
- Corrections officers
- Food service workers
- Public transit workers

During Phase 1c, the vaccine will be made available to:

- Adults ages 65 and older
  - Adults with high-risk medical conditions, such as cancer, diabetes, obesity, cardiovascular disease, and chronic respiratory disease

There is still some debate over whether to take race and ethnicity into consideration as well, considering the pandemic’s disproportionate impact on Black and Latinx people.

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The target demographics were chosen based on their level of risk and their importance to the continued functioning of the economy and society. Long-term care facility residents, for example, account for the vast majority—40%—of all COVID-19 deaths to date.

According to the results of an online poll cited in Dooling’s report, the majority of American adults appear to approve of ACIP’s recommendations, ranking healthcare workers and older adults as highest-priority and children and young adults as lowest-priority.

COVID-19 Vaccines: Stay up to date on which vaccines are available, who can get them, and how safe they are.

How Many Doses Are Needed?

Dooling estimates there are around 21 million healthcare personnel in the United States and 3 million long-term care facility residents. The plan does not provide an estimate for the number of people who will be vaccinated in Phase 1b or 1c, but Suo believes essential workers to number around 26 million people and older adults and immunocompromised individuals to number over 100 million people.

Since “each person needs two dosages manufactured by the two companies [Pfizer and Moderna]” of the vaccine, Suo says, Phase 1a will require at least 48 million doses, Phase 1b will require about 52 million doses, and Phase 1c will require over 200 million doses for a total of roughly 300 million doses.


“If single-dosage vaccines like the one been developed by Johnson & Johnson are approved and are commercially available in a few months, the total vaccine doses will drop and fall between 100 to 200 million for Phase 1c,” Suo says.

Next Steps

So what has to happen in order to get the ball rolling? First, Suo says, the FDA needs to approve vaccines for emergency use. The agency granted an EUA for the Pfizer-BioNTech’s vaccine on December 11 and an EUA for the Moderna vaccine on December 18. Second, the two companies will need to manufacture and distribute the number of required vaccine doses to
clinics and hospitals throughout the country. Third, healthcare workers will need to administer them.

But that is easier said than done. There are several barriers to vaccine approval and administration, including but not limited to production rate and storage requirements.

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“[Phase] 1a, 1b, and 1c include probably about 150 million Americans,” Suo says. "For a two-dose vaccine, [that] is 300 million doses. I think it's going to be a while before we make that much. Right now, we only have 40 million doses." In addition, he says, “the Pfizer vaccine has difficult storage, handling, and shipping requirements, because of the need for dry ice.”

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The process of administration, according to Offit, will likely vary from locality to locality, depending on the proximity of “retail pharmacies” and “major hospital and university centers.”

“For example, Philadelphia will probably handle it differently than a very rural, sparsely populated county in the center of the state,” he says.

Both vaccines are being distributed and starting to be administered.

Once Phase 1 is complete—which Offit predicts will be within five months of approval and Suo predicts will be by the end of April—Phase 2 will begin. Then, it will be the general population's turn to play pincushion. By that time, more COVID-19 vaccines will likely have been approved and made commercially available, Suo says.

“For Phase 2, any American who is willing to be vaccinated will be eligible and likely be encouraged to take COVID-19 vaccine shots,” he says.

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The start of Phase 2 is also when Offit thinks local, state, and federal governments will begin to loosen some restrictions. But he cautions against thinking of the vaccine as a quick fix for the pandemic. Only once two-thirds of the population has been vaccinated, he says, will we be able to “really get on top of this virus.”

Article Sources

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The content accurate, reliable, and trustworthy.


5. The Harris Poll. Which of the following groups should receive priority when a COVID-19 vaccine is available?: Survey of 1,399 U.S. adults. Updated August 14-16, 2020.