Historically, AMA policy has offered guidance on routine vaccinations. Now the Association has policy to tackle the challenges that COVID-19 and the safe and effective SARS-CoV-2 vaccines have created when it comes to digital vaccine credential systems (DVCS) and potential vaccine mandates.

There has been a lot of discussion around vaccine credentialing and mandatory vaccination as ways to return to “normal” as states work to reach President Joe Biden’s goal of vaccinating 70% of American adults by Independence Day.

The AMA House of Delegates adopted new policies aimed at ensuring the country approaches DVCS and mandatory vaccination in a well thought out, equitable way.

“Given the high rate of asymptomatic transmission in COVID-19, vaccinating the greatest number of individuals possible is critical. While vaccines are highly effective public health tools, vaccine mandates are a blunt instrument and may carry the risk of eroding trust and undermining public health goals,” said AMA President Gerald E. Harmon, MD.

“We can reach herd immunity with a robust public campaign which would have the benefit of respecting patients’ autonomy and minimize disproportional burdens on marginalized communities,” added Dr. Harmon, a family physician and retired U.S. Air Force major general. “Failure to achieve herd immunity is more likely to result in mandates.”

Delegates adopted policy recommending that decisions to mandate COVID-19 vaccination be made only:

- After a vaccine has received full approval from the Food and Drug Administration through a Biological Licenses Application.
- In keeping with recommendations of the Advisory Committee on Immunization Practices for use in the population subject to the mandate as approved by the director of the Centers for
Disease Control and Prevention.

When individuals subject to the mandate have been given meaningful opportunity to voluntarily accept vaccination.

If implementation of the mandate minimizes the potential to exacerbate inequities or adversely affect already marginalized or minoritized populations.

Delegates also adopted policy to:

- Encourage the use of well-designed education and outreach efforts to promote vaccination to protect both public health and public trust.
- Recommend that vaccination credentials not be provided on the basis of natural immunity or prior SARS-CoV-2 infection.

**Protecting data in vaccine credentials**

A separate AMA Board of Trustees report adopted at the June 2021 AMA Special Meeting explores the pitfalls of DVCS—often referred to by the misnomer “vaccine passports”—and mandatory vaccination and outlines what must be done to help avoid those potential problems.

For example, DVCS use must not outpace vaccine availability. Given the challenges, the AMA board report says “there is still an important role for the federal government to play in establishing, publicizing and enforcing guidelines to which all DVCS must adhere.”

To that end, AMA delegates adopted policy that “encourages the development of clear, strong, universal and enforceable federal guidelines for the design and deployment of digital vaccination credentialing services (DVCS).”

Before decisions are taken to starting using DCVS, however, there should be:

- Widely accessible vaccine.
- Equity-centered protections to safeguard data collected from individuals.
- Provisions to ensure that vaccine credentials do not exacerbate inequities.
- A way to address the situation of individuals for whom vaccine is medically contraindicated.

“The Biden administration has said it is not creating federal digital vaccine credentials. Nonetheless, the federal government must be vigilant on issues of equity and privacy. We can’t leave these decisions to the app marketplace which profits by exploiting user data,” Dr. Harmon said.

The AMA recognizes the critical importance of scientific integrity, transparency and public trust in the fight to contain the global spread of COVID-19 and plan for the authorization, distribution and administration of COVID-19 vaccines. Stay updated with the AMA on COVID-19 and vaccine development.


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Read about the other highlights from the June 2021 AMA Special Meeting.