



December 30, 2020

Howard A. Zucker, M.D., J.D.  
Commissioner of Health  
NYS Department of Health  
Corning Tower  
Empire State Plaza  
Albany, NY 12237

Re: COVID-19 Vaccination for Senior Housing, Home and Community Based Service Providers, and Managed Long Term Care Participants

Dear Commissioner Zucker and Leaders of the Regional Vaccination Networks:

LeadingAge New York's non-profit and public aging and long-term care services members applaud the state's efforts to support the administration of COVID-19 vaccines among long-term care providers and the individuals they serve but want to ensure that New York's most vulnerable populations continue to be included in future planning. On behalf of LeadingAge New York's non-profit and public affordable senior housing, retirement housing, Managed Long Term Care (MLTC), Program of All-Inclusive Care for the Elderly (PACE), and Home and Community Based Services (HCBS) members, I would request that they be prioritized in the New York State Department of Health's (the Department) plans to vaccinate top priority populations. Many LeadingAge New York members can offer efficient means to vaccinate large numbers of people at high risk for negative outcomes from COVID-19 who would have difficulty accessing community clinics. Failing to include these providers and the people they serve in this early planning is likely to mean significant delays in these people accessing the vaccine and, sadly, more hospitalizations and deaths.

LeadingAge New York's housing members include both State and federally subsidized affordable senior housing and retirement housing, and we urge the Department and the Regional Vaccination Networks to engage and prioritize them as further vaccination plans are developed. The seniors living in this housing are often in their 80s, and many need assistance from outside caregivers with activities of daily living. An estimated 38% of all residents currently living in the Department of Housing and Urban Development's (HUD) Section 202 Housing for the Elderly program could be considered "frail" or "near-frail." The age and "frailty" of these individuals put them at grave risk for severe illness from COVID-19, and we would therefore recommend their prioritization in future vaccination plans.

With the importance of these individuals being vaccinated in mind, these housing providers are eager to work with the Department and Regional Vaccination Networks to begin planning vaccination clinics that can occur at their facilities. Furthermore, housing settings in which a large number of seniors live can allow the state to efficiently vaccinate large numbers of people in priority populations in one clinic. While these providers do not have clinical staff, in many cases there are staff available to disseminate information and education, support the clinic, and assist with logistics. The residents of these settings may have difficulty accessing clinics in the community -- particularly in rural settings -- and given their frailty would not be well suited to wait in lines for a vaccination.

LeadingAge New York further urges the Department and the Regional Vaccination Networks to prioritize vaccination for HCBS health care provider staff and the frail, elderly, and chronically ill individuals they serve. Home care and hospice workers include nurses, home health aides, and personal care aides and are typically employed by Certified Home Health Agencies, Licensed Home Care Services Agencies, hospice agencies, and other aging services providers. They have been prioritized for vaccination by CDC's Advisory Committee on Immunization Practices, yet still have not been included on any priority list at the state level. While home care and hospice workers are an integral part of the health care continuum, they also belong to a population vulnerable to COVID-19, as many are from minority

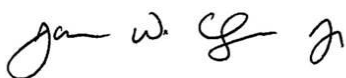
groups, face significant socioeconomic challenges, and deliver care in settings that are vulnerable to community spread. In fact, many home care workers are serving individuals who are COVID-positive in their homes. We ask that you prioritize this health care worker population and the vulnerable individuals they serve in the vaccination queue.

Our providers also deliver services and care via the Nursing Home Transition and Diversion/Traumatic Brain Injury Programs (NHTD/TBI), Naturally Occurring Retirement Communities (NORC/NNORCs), social adult day care programs, and other aging services organizations that might offer potential sites and populations for vaccination. Our members are ready to partner with the state and regional systems to help identify and educate priority populations and help facilitate their vaccination. In some cases, these services provide a logical venue for vaccination clinics. For example, NORC buildings, much like senior housing, provide an ideal setting to vaccinate elderly populations that live in the building.

We also want to ensure that the Department's vaccination plans are appropriately addressing the needs of the roughly 270,000 New Yorkers enrolled in Medicaid MLTC plans. These are among our most vulnerable residents -- older adults and people with disabilities who require personal care services on an ongoing basis. Many are homebound or require one-on-one assistance and special transportation to leave home for medical care. They are vulnerable to infection from the people they live with and the informal and formal caregivers who assist them with activities of daily living. LeadingAge New York's provider-sponsored MLTC members stand ready to partner with the state to assist with the vaccination effort. MLTC plans can assist with education of beneficiaries and their families, identification of individuals who need assistance in accessing the vaccine, and coordination of transportation services to vaccination sites and of in-home vaccination services when available. In addition, PACE programs can serve as convenient and accessible immunization sites for their members.

LeadingAge New York commends the planning that is well under way for this critical effort, and we are eager to learn more so that we can help ensure its success. We would welcome the opportunity to provide further assistance in the development of vaccination plans and policies and to connect the regional hubs with the aforementioned providers. Please keep us apprised as plans evolve, so that we can assist our members in their planning activities and help answer any questions they may have. Thank you very much for your consideration of these issues.

Sincerely yours,



James W. Clyne, Jr.  
President and CEO

cc: Regional Vaccination Networks  
Rachel Baker  
Megan Baldwin  
Alison Birzon  
Beth Garvey  
Adam Herbst  
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