Congress of the United States Washington, A.C. 20515

March 17, 2021

The Honorable Rochelle Walensky Director The Centers of Disease Control and Prevention 1600 Clifton Road, Atlanta, GA 30329

Dear Director Walensky:

Thank you for your efforts to use all of the tools at the federal government's disposal to urgently address the COVID-19 pandemic. One of the initiatives that has been widely considered effective and efficient is the Centers of Disease Control and Prevention's (CDC) Pharmacy Partnership for Long-Term Care (PPLTC) Program, particularly in providing safe on-site vaccinations to those most vulnerable to contracting COVID-19. We write today to urge you to re-start and expand access to the PPLTC.

To date, the program has successfully administered over 7.5 million doses and completed two-dose regimens for nearly 2.7 million of our most vulnerable seniors and health care workers providing care and services at more than 75,000 facilities 1. However, we are gravely concerned about other vulnerable populations of seniors that are at great risk of being overlooked, including the independent living communities (ILCs) at continuing care retirement centers (CCRCs) and federally-supported affordable senior housing communities, such as Section 202, Section 8, and public housing. We have learned that many long-term care facilities (LTCFs) are part of larger CCRCs and have residents in ILCs that would like to receive vaccine safely on-site, but do not qualify to be vaccinated under the PPLTC. These residents meet the age requirements for the current vaccine phases and would be far safer receiving vaccine on-site, instead of traveling to a mass vaccination site; however, they are being turned away by program design.

In October, the U.S. Department of Health and Human Services said that independent living communities, including those that are part of CCRCs, would be part of the program². However, it remains unclear whether the majority of programs have made this transition. It is becoming more critical as we are seeing growing cases of new variants of the virus that are more contagious and dangerous to seniors living in these congregate settings. Many states have adhered to the Advisory Committee on Immunization Practices' (ACIP) prioritization recommendations and are efficiently vaccinating residents and the staff of long-term care facilities under the PPLTC. However, we are concerned that not all vulnerable seniors living in

¹ "COVID Data Tracker - Federal Pharmacy Partnership for Long-Term Care (LTC) Program." CDC COVID Data Tracker, Centers for Disease Control and Prevention, covid.cdc.gov/covid-data-tracker/#vaccinations-ltc.

² "CDC Media Telebriefing Transcript on Operation Warp Speed." *Centers for Disease Control and Prevention - CDC Newsroom*, 23 Oct. 2020, www.cdc.gov/media/releases/2020/t1021-cdc-media-briefing.html.

congregate care settings were prioritized in this grouping. There was confusion over who would be covered by the PPLTC program and wide differences in state and pharmacy administration of the PPLTC program. Despite the tremendous and excellent work of the PPLTC program, more work remains to be done, including on-site vaccine access for residents in 620,000 CCRC homes and another 1.1 million older adults in HUD-supported apartment housing.

Deliberately addressing the need for on-site clinics at HUD-supported senior housing communities also brings vaccine access to a high-risk and underserved population. HUD-assisted renter households are more likely to be Black and to have a disability, and thus have more chronic medical conditions, than non-HUD-assisted renter households³ Partnering with HUDassisted communities for on-site vaccine clinics can help jurisdictions reach populations underserved by current vaccination efforts.

The new Retail Pharmacy Program does not give us confidence that independent living and affordable senior housing communities will not continue to fall through the cracks. Affordable senior housing communities have no relationship with long-term care pharmacies. Any reliance on the Retail Pharmacy Program to ensure on-site clinics at ILCs and affordable senior housing would have to direct pharmacies to administer clinics in these settings. Currently, the Retail Pharmacy Program is not conducive to securing on-site clinics in the highest need settings.

We appreciate the difficult task ahead of you in seeing that vaccinations are equitably distributed. As part of those efforts, we urge you to swiftly review the program and adjust the guidance for participating pharmacies to expressly include ILC residents and staff as eligible for receiving on-site vaccinations, along with HUD-supported apartment communities. Additionally, as you review the guidance for the program, we also ask that you closely review the data collection and dissemination processes both on the state and federal levels of vaccination within the senior living community. Our seniors remain among the most vulnerable to contracting COVID-19 and should be eligible to receive their vaccine doses in the safest manner possible, via an on-site vaccination clinic under the PPLTC Program.

Thank you for your consideration.

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Sincerely,

Alma S. Adams, Ph.D.

Member of Congress

³ Li, Janet. "COVID-19 Risk Factors Among HUD-Assisted Renters." *HUD USER*, www.huduser.gov/portal/pdredge/pdr-edge-trending-020821.html?WT.mc_id=edge_Feb09&WT.tsrc=Email. Accessed 4 Mar. 2021.

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