



March 11, 2021

National Governors Association
444 North Capitol Street, NW
#267
Washington, D.C. 20001

Re: Ensuring ongoing access to COVID-19 vaccines in long term care

Dear Governors,

Thank you for your continued leadership in response to the ongoing COVID-19 pandemic. The American Health Care Association and National Center for Assisted Living (AHCA/NCAL) represents more than 14,000 nursing homes and assisted living communities across the country that provide care to approximately five million people each year. These long term care organizations rely heavily on direction, resources and support from state administrations, and we are deeply grateful for the actions you have taken in response to the COVID-19 pandemic.

As you well know, nursing homes and assisted living communities have been disproportionately impacted by the COVID-19 pandemic. The individuals who reside in these communities are primarily older adults, often with multiple underlying health conditions, which puts them at significantly higher risk for severe infection and deaths. It was because of this that many of you prioritized long term care staff and residents for access to COVID-19 vaccine, a move which we strongly supported. The Centers for Disease Control and Prevention (CDC) also designed the Pharmacy Partnership for Long Term Care Program to ensure swift and easy access to vaccine among this population, which has fully vaccinated more than 2.6 million residents and staff. This program was made even more successful through support and prioritization by your administrations.

Since the rollout of the vaccine, infections in long term care have decreased dramatically. Two recent analyses by the [New York Times](#) and [Kaiser Family Foundation](#) show infection rates in nursing homes are declining at a faster rate than the general population. Another [report](#), published by the Center for Policy Evaluation in Long Term Care, also shows a more rapid decline in cases among both nursing home residents and staff after their vaccination clinics compared to nearby nursing homes that had yet to conduct their clinics.

The Pharmacy Partnership Program is now nearly complete, with most nursing homes completing their third and final clinic this month. Assisted living and other congregate settings for older adults are not far behind. **However, the need for ongoing and rapid access to vaccines in skilled nursing and assisted living continues.** The population in long term care is dynamic. Each week, new admissions move into these communities, many of whom have not yet been vaccinated. New staff and contractors are hired each week who have not been

vaccinated. Finally, existing staff or residents who were initially hesitant but are now willing to get the vaccine also deserve the opportunity to easily access it.

The next phase of vaccine distribution in long term care will now transition to either long term care (LTC) pharmacies or state sponsored programs. These pharmacies are generally closed-door pharmacies that exclusively service long term or congregate living settings. The traditional model of a LTC pharmacy centers around distribution, rather than administration, of medication. The CDC has provided [guidance](#) around the next phase of distribution in LTC, but for the program to be successful, state governments must lend their support.

Specifically, we recommend that states:

- **Allocate vaccine to the LTC pharmacies for administration to LTC facilities:** While some vaccine will be allocated from the federal government, it may not be enough and only select LTC pharmacies are enrolled in the federal program, leaving significant gaps in access to vaccine by LTC pharmacies not enrolled.
- **Prioritize enrollment of LTC pharmacies as COVID-19 vaccine providers:** In many cases, these pharmacies are not currently enrolled because of delays in enrolling in state immunization registries or signed up as vaccine providers. We know that due to the COVID-19 pandemic, many states are struggling to enroll many different types of new providers in vaccine registries. LTC pharmacies need to be prioritized for enrollment.
- **Ensure priority access to state-run vaccination clinics for LTC staff:** Providers are diligently working to increase staff uptake of the vaccine, efforts supported by AHCA/NCAL's [#GetVaccinated](#) campaign. It's well established that improving vaccine confidence and uptake relies on easy access to vaccine. In many states, priority groups have opened to a large population, which is making it difficult for LTC staff to find appointments.
- **Allow COVID-19 vaccine single-shot syringes under state pharmacy requirements:** LTC facilities, on average, admit one new resident and hire one new staff person every week. This can make it challenging to meet the minimum number of doses per vial (10 for Moderna, five for Pfizer and Janssen) needed to deliver at one clinic to prevent wastage. Single shot syringes would allow for rapid access to COVID-19 vaccines by new residents and staff, and more quickly distribute vaccine allocated to the state. This requires state regulations for LTC pharmacies to be waived or modified.
- **Direct hospitals to immunize patients with the Janssen vaccine before discharge to a LTC facility:** Securing a second dose of Moderna or Pfizer can be challenging in the LTC setting, based on the factors laid out above (timing of clinics, allocation of vaccine). Immunizing patients who are discharged from the hospital with the single shot Janssen vaccine would eliminate these challenges and ensure the individual is protected prior to admission to the LTC setting.
- **Work with provider associations to ensure ongoing access to COVID-19 vaccine:** Provider associations can offer important insight on the needs of the LTC community and help identify creative solutions to the challenges identified above.

By taking these actions, you can make sure we continue to protect our most vulnerable and health care heroes who have sacrificed so much over the past year. In addition, you can ensure

that we do not fall back on the tremendous progress we have made in reducing cases and deaths in these congregate living settings, and in the state overall.

Again, we thank you for your tireless work during this challenging pandemic.

Sincerely,

A handwritten signature in black ink, appearing to read "D. Gifford", with a small dot below the end of the signature.

David Gifford, MD, MPH
Chief Medical Officer
American Health Care Association/National Center for Assisted Living