



November 23, 2020

Submitted electronically via:
<https://www.regulations.gov>

Dr. José Romero
Chairman
Advisory Committee on Immunization Practices
Centers for Disease Control and Prevention
National Center for Immunization and Respiratory Diseases
1600 Clifton Road, NE, MS-H24-8
Atlanta, GA 30329-4027

RE: Docket No. CDC-2020-0117, Comments for the November 23, 2020 Advisory Committee on Immunization Practices meeting, Centers for Disease Control and Prevention

Dear Dr. Romero:

The Partnership for Medicaid Home-Based Care (PMHC) appreciates the opportunity to submit comments to the Centers for Disease Control and Prevention (CDC), Advisory Committee on Immunization Practices (ACIP) meeting on November 23, 2020. PMHC's strongly urges ACIP to recommend and clearly define home care workers as a CDC Phase 1A critical population for the allocation of the COVID-19 vaccination.

There are over 3.2 million home care workers providing daily living activity support to more than 8.3 million people in the U.S. During the COVID-19 pandemic, these home care workers have continued to provide essential health sustaining services for seniors and people with disabilities in their homes and who are at increased risk from the coronavirus.

Our concern is that under the most recent CDC *COVID-19 Vaccination Program Interim Playbook for COVID-19 Vaccination Program Jurisdiction Operations*, home care workers, specifically personal care aides and home health aides, are not explicitly mentioned as a Phase 1 or Phase 1A critical populations for vaccinations. Even though healthcare personnel working in healthcare settings are listed as a Phase 1 critical population, this guidance could be interpreted to omit essential healthcare personnel, such as personal care aides and home health aides, as an ineligible critical population under Phase 1 since care is being delivered in the home versus and institution, such as a nursing home or hospital.

Further, the Cybersecurity and Infrastructure Security Agency (CISA) identifies home care workers as critical infrastructure workers. As defined by CISA, home care workers include home

health care, but does not explicitly mention personal care aides, even though home care workers by definition include both personal care aides and home health aides.

The home care workforce consists of personal care aides and home health aides.

- Personal care aides, also referred to as personal care attendants are home care workers “who assist with activities of daily living (ADLs) and/or instrumental activities of daily living (IADLs), and who may also support individuals with employment and other aspects of community and social engagement. Personal care aides are employed either by a home care agency or directly by a consumer or consumer’s family.”¹
- Home health aides are home care workers “who assist consumers with activities of daily living (ADLs) and instrumental activities of daily living (IADLs), and who may also perform certain clinical tasks under the supervision of a licensed clinical professional. In the home care context, nursing assistants may fulfill the same duties as home health aides.”²

The home care workforce, personal care aides and home health aides, are at a significant risk of contracting or spreading the COVID-19. The healthcare services provided by home care aides, visits with patients are more frequent, longer in duration, and very intimate by nature of the assistance being delivered. The personal care services being delivered creates considerable risk of exposure to the coronavirus for both patient and the home care aide.

Home care workers are predominately female (87%), people of color (62%), immigrants (31%), over the age of 55 (32%), and nearly half live in low-income households. Forty-three percent of home care workers rely on public health care coverage, such as Medicaid, and 16% are uninsured.³

Given the demographics of the home care labor force – older females of color - and the historical lack of access to health care coverage, this workforce has a greater risk, but fewer treatment options, than most of their health care worker counterparts.

Additionally, individuals receiving LTSS in the home are at only a slightly less risk than individuals residing in nursing homes for contracting COVID-19. Consumers receiving home-based LTSS are assessed as requiring a nursing facility level of care to qualify for home and community-based care and services, and therefore have the same underlying health conditions of individuals living in long-term care facilities such as nursing homes.

Home care workers providing long term services and supports (LTSS) in the home must be prioritized as a CDC Phase 1 critical population recommended for the COVID-19 vaccination. We urge the Advisory Committee on Immunization Practices (ACIP) to explicitly define home care aides, including both personal care aides and home health aides, that deliver care within the

¹ PHI, *Envisioning the Future of Home Care: Trends and Opportunities in Workforce Policy and Practice*, October 15, 2019, 2.

² Ibid.

³ PHI, *Direct Care Workers in the United States: Key Facts*, September 8, 2020.

home as a critical population eligible for vaccinations under the CDC's Phase 1A for COVID-19 vaccination distribution.

Thank you for your consideration of our request. PMHC welcomes the opportunity to serve as a resource for ACIP. If you have any additional questions or would like further information on home care delivery during the COVID-19 pandemic, please do not hesitate to contact Stacey Smith at 571-294-8936 or ssmith@libertypartnersgroup.com.

Sincerely,

A handwritten signature in black ink, appearing to read "David J. Totaro". The signature is fluid and cursive, with the first name "David" being the most prominent.

David J. Totaro
Chairman

The Partnership for Medicaid Home-Based Care is comprised of organizations representing home care agencies, state and national associations, managed care organizations and other payers, and business affiliates who have come together to improve the quality and integrity of Medicaid funded home and community-based services. Recognizing the integral role of home and community-based care, PMHC is dedicated to advancing and supporting public policies that strengthen the Medicaid program.