



Council of the District of Columbia Committee on Health Performance Oversight Hearing FY
2020-2021 for the Department of Health Care Finance

Testimony of Disability Rights DC at University Legal Services
Lyndsay Niles, Managing Attorney

March 4, 2021

Disability Rights DC at University Legal Services (DRDC) appreciates the opportunity to provide testimony regarding the Department of Health Care Finance's (DHCF) performance in FY 2020-2021. DRDC is the designated protection and advocacy agency for the District of Columbia. We advocate on behalf of District residents with disabilities to promote their rights to live in the community and be free from harm.¹

We know COVID-19 poses a real and immediate threat to the lives of senior citizens and people with disabilities, particularly Black District residents with disabilities, who are far more vulnerable to COVID-19 than the population at large.² Although DC Health is at the helm in administering the District's vaccination program, DHCF has a critical role to play and must take adequate responsibility in ensuring equitable access to the COVID-19 vaccine for Medicaid beneficiaries. My testimony focuses on DHCF's inadequate response to facilitate equitable COVID-19 vaccine distribution for DC Medicaid long-term care beneficiaries, particularly residents in nursing facilities, assisted living facilities, EPD Waiver beneficiaries, and State Plan Personal Care Aide (PCA) beneficiaries in natural homes. My testimony also highlights concerns that DC may be undercounting cases and virus deaths in nursing facilities and assisted living facilities.

¹ DRDC, along with AARP Foundation Litigation and Terris, Pravlik, & Millian LLP, is plaintiffs' class counsel in *Brown v. District of Columbia*. *Brown* is a class action under Title II of the ADA on behalf of DC residents in nursing facilities who seek transition assistance from the DC government to move back to the community with the Medicaid long-term care services they need. DRDC is also plaintiffs' co-counsel and plaintiff in *MJ v. District of Columbia*, a class action lawsuit under Title II of the ADA and the Medicaid statute on behalf of DC youth with significant mental and behavioral health challenges seeking intensive community-based services to prevent institutionalization.

² *Interim Considerations for Phased Implementation of COVID-19 Vaccination and Sub-Prioritization Among Recommended Populations*, Centers for Disease Control and Prevention, Last accessed on March 3, 2021 at: <https://www.cdc.gov/vaccines/covid-19/phased-implementation.html>; *People with Disabilities*, Centers for Disease Control and Prevention, Last accessed on March 1, 2021 at: <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-disabilities.html>; *If You Are at Higher Risk*, Centers for Disease Control and Prevention, <https://tinyurl.com/vtbebzc>; see also Report of the WHO-China Joint Mission on Coronavirus Disease (COVID-19), <https://www.who.int/docs/default-source/coronaviruse/who-china-joint-mission-on-covid-19-final-report.pdf> at 12.

Throughout the pandemic, nursing facilities have proven to be amongst the most dangerous. Nursing facility residents represent a disproportionate share of the District’s COVID-19 cases and deaths. Since the District started tracking COVID-19 infections and deaths in nursing facilities in the District, about 44% (1058) of District nursing facility residents have tested positive for COVID-19, based on the most recent District data.³ According to DC Health, 210 nursing facility residents passed away due to COVID-19 as of February 25, 2021, meaning approximately 20% of those who contract COVID-19 in a District nursing facility die.⁴ The reported 210 deaths is a significant increase from the reported 172 deaths as of January 14, 2021, and the 163 deaths as of October 1, 2020. This data raises concerns that DC (or its nursing facility contractors) have undercounted the coronavirus-related deaths of nursing facility residents.⁵ Similarly, in the 12 District assisted living facilities, 314 residents have tested positive for COVID-19 and 30 have died as of February 25, 2021, compared to a reported 111 positive cases and 26 deaths of assisted living residents as of January 14, 2021.⁶

On January 26, 2021, DRDC sent a letter to Deputy Mayor Turnage, DHCF, and DC Health, providing recommendations for ensuring equitable access to the vaccine for long term care beneficiaries, as well as posing a series of questions to understand what actions DHCF is taking to ensure and support vaccination access in partnership with its providers.⁷ Despite nursing facility residents and staff being prioritized for vaccination in the early days of vaccine distribution and the significant and tragic loss of life, DHCF reported in response to our letter that as of February 2, 2021, 1,039 long-term care facility residents have received their first dose, representing only 31 percent of long-term care residents.⁸ At the same time, 1,614 long-term care staff have received their first dose, representing only 25 percent of long-term care staff. These vaccination rates are significantly lower than CDC national data from December 18, 2020–January 17, 2021 on the estimated median vaccination rates of residents and staff of nursing facilities enrolled in the Pharmacy Partnership for Long-Term Care Program partners.⁹

³ This approximate percentage reflects the number of residents with confirmed COVID-19 cases in District nursing facilities divided by the approximate total number of nursing facility residents (total bed capacity (2,597) reported by DC Health multiplied by the 92% nursing facility occupancy rate for FY19). DC Health, COVID-19 Surveillance Data, Long-Term Care Facilities (last updated February 25, 2021). <https://coronavirus.dc.gov/data>.

⁴ The nursing facility rate is based on 210 nursing facility resident COVID-19 deaths among the reported COVID-19 cases. DC Health, COVID-19 Surveillance Data (last updated February 25, 2021). <https://coronavirus.dc.gov/data>.

⁵ Between January 14 and February 25, DC Health reported an additional 140 positive cases. Compare DC Health, COVID-19 Surveillance Data (archived January 17, 2021) (reported 918 positive resident cases and 172 total resident deaths) with DC Health, COVID-19 Surveillance Data (last updated February 25, 2021) (reported 1058 positive resident cases and 210 total resident deaths). <https://coronavirus.dc.gov/data>; see also DC Health, COVID-19 Surveillance Data (archived October 1, 2020) (as of October 1, 2020, DC Health reported 715 positive resident cases and 163 resident deaths); Jesse McKinley. “New York severely undercounted virus deaths in nursing homes, a report says,” The New York Times (Feb. 9, 2021). <https://www.nytimes.com/live/2021/01/28/world/covid-19-coronavirus/new-york-severely-undercounted-virus-deaths-in-nursing-homes-a-report-says>.

⁶ DC Health, COVID-19 Surveillance Data, Long-Term Care Facilities (last updated February 25, 2021). <https://coronavirus.dc.gov/data>.

⁷ See attached DRDC Letter to Deputy Mayor Turnage, DHCF, and DC Health Re: COVID-19 Vaccine Distribution Plan Implementation, Jan. 26, 2021.

⁸ See attached Letter from Melisa Byrd at DHCF to DRDC Re: COVID-19 Vaccine Distribution Plan Implementation, Feb. 5, 2021.

⁹ Most participating states had median vaccination rates of nursing facility residents between 60-80%, and approximately 13 states had vaccination rates greater than 80%. 20 states had staff vaccination rates between 40-60%, including Virginia and Maryland. Gharpure R, Guo A, Bishnoi CK, *et al.*, “Early COVID-19 First-Dose Vaccination Coverage Among Residents and Staff Members of Skilled Nursing Facilities Participating in the Pharmacy Partnership for Long-Term Care Program – United States, December 2020-January 2021,” Morbidity and

These low vaccination rates alone show that the DHCF must do more to implement an effective vaccination program in partnership with DC Health for nursing facility residents and staff to mitigate the ongoing serious risk of harm and death.

DHCF also reported that two nursing facilities declined to enroll in the federal long-term care partnership, and accordingly these facilities were not receiving their vaccinations on site by CVS and Walgreens. We understand that DC Health recently resolved this issue and all DC nursing facilities have now administered at least one vaccine clinic, but this is still unacceptable. Even with the long-term care partnership, there are barriers to access. The DC Medical Care Advisory Committee also reported at its February 24, 2021 meeting that it is working on resolving an issue with CVS and Walgreens regarding its refusal to offer a third vaccination clinic to 70 nursing facility staff that now wish to take the vaccine. All nursing facility staff, regardless of when in the vaccination process they decide to seek vaccination, should have easy access to the vaccine. DHCF must immediately work with each nursing facility, governors in MD and VA regarding DC Medicaid beneficiaries in MD and VA facilities, and its pharmacy partners to analyze and address bottlenecks to vaccination that are leaving so many DC long-term care residents and staff exposed to the virus.

Last week, DHCF issued a transmittal regarding provider to beneficiary education and counseling for the COVID-19 vaccine. The transmittal advises providers that Medicaid will reimburse for these services and stated DHCF's expectation that EPD waiver case managers include COVID-19 vaccine counseling as part of their ongoing or monthly care coordination activities.¹⁰ While this guidance is important and necessary, DHCF is not yet monitoring whether these providers are actually following this directive and engaging in a system-wide effort to provide education, outreach, and assistance for all eligible EPD waiver and other Medicaid long-term care beneficiaries to access vaccination appointments. With the recent expansion of vaccination eligibility to people with certain medical conditions, many more EPD waiver, State Plan PCA, and other long-term care beneficiaries will be eligible for the vaccine. DHCF recently completed a phone survey of beneficiaries with at-risk conditions that found over 60 percent of these Medicaid beneficiaries want the vaccine and that vaccine hesitancy can likely be overcome for the remaining beneficiaries with direct outreach and education.¹¹ In light of the ongoing technological issues with DC's vaccine portal, now more than ever these beneficiaries need DHCF to lead outreach and assistance efforts to access vaccination.¹² In response to our letter, DHCF was also unable to provide DRDC any vaccination rate data on EPD Waiver

Mortality Weekly Report 2021;70:178–182, Figure 2 (February 5, 2021).

<https://www.cdc.gov/mmwr/volumes/70/wr/mm7005e2.htm>.

¹⁰ DHCF Transmittal # 21-07, "Provider to Beneficiary Education and Counseling for the COVID-19 Vaccine," February 23, 2021, available at

<https://dhcf.dc.gov/sites/default/files/dc/sites/dhcf/publication/attachments/Transmittal%2021-07%20Provider%20to%20Beneficiary%20Education%20and%20Counseling%20for%20the%20COVID-19%20Vaccine.pdf>.

¹¹ Medical Care Advisory Committee, DHCF Senior Deputy Director/Medicaid Director Report, at 23 (Feb. 24, 2021), available at

https://dhcf.dc.gov/sites/default/files/dc/sites/dhcf/page_content/attachments/Medicaid%20Director%27s%20MCA%20Report%2002.24.21.pdf.

¹² Cat Zakrzewski. "The Technology 202: D.C.'s vaccination portal failed three days in a row. It's part of a bigger problem[.]" The Washington Post (March 1, 2021).

<https://www.washingtonpost.com/politics/2021/03/01/technology-202-dc-vaccination-portal-failed-three-days-row-it-part-bigger-problem/>.

beneficiaries, State Plan home health beneficiaries, and home health aide staff. Without comprehensive data, DHCF cannot maintain that it is making sure the system is equitable for the at-risk long-term care community. And as the D.C. Long-Term Care Ombudsman testified, transparency on vaccinations for all long-term care staff is essential, especially for home health staff who service this highly vulnerable population.

We appreciate how difficult it is for the District to vaccinate hundreds of thousands of residents, while also reaching those most at risk. But with the reported over 200 nursing facility residents and 30 assisted living residents dead due to COVID-19, DHCF must meet its obligations to protect and ensure vaccine access for this vulnerable population. To address these life threatening access gaps, we urge DHCF, in partnership with DC Health, or alternatively DC Council in its oversight capacity to: (1) immediately commission an independent investigation on an expedited basis to analyze why the vaccination rate of residents and staff in long-term care facilities is so low and to detail corrective actions on how DC must address the barriers to vaccination; (2) immediately commission an independent investigation on an expedited basis to determine whether DC is undercounting nursing facility resident COVID-related cases and deaths, including those deaths of DC residents who were transferred from a nursing facility to a hospital and died there; (3) DHCF should conduct ongoing monitoring of all its providers' efforts to ensure they are providing effective outreach and education, including outreach by EPD waiver case managers and home health agencies, and ongoing monitoring to track that providers are directly assisting beneficiaries seeking vaccination to make appointments, and (4) DHCF must comprehensively track vaccination rate data regarding all DC Medicaid long-term care providers and beneficiaries, including those in community-based settings, and make this data available to the public.

Thank you for the opportunity to testify and I am happy to answer any questions.



VIA EMAIL: wayne.turnage@dc.gov; melisa.byrd@dc.gov; laquandra.nesbitt@dc.gov

January 26, 2021

Deputy Mayor Wayne Turnage
District of Columbia Office of the Mayor
1350 Pennsylvania Avenue NW
Washington, DC 20004

Melisa Byrd, Senior Deputy Director
DC Department of Health Care Finance
441 Fourth St. NW, Suite 900S
Washington, DC 20001

Dr. LaQuandra Nesbitt, Health Director
DC Health
899 North Capitol Street, NE
Washington, DC 20002

Re: COVID-19 Vaccine Distribution Plan Implementation

Dear Deputy Mayor Turnage, Ms. Byrd, and Dr. Nesbitt:

As you know, Disability Rights DC at University Legal Services (DRDC) is the designated protection and advocacy program for the District of Columbia that represents DC residents with disabilities. Although the COVID-19 vaccine provides hope for so many vulnerable District residents with disabilities and the staff that serve them, we understand the District faces considerable challenges because the demand for the vaccine significantly exceeds the supply.

We appreciate your efforts to facilitate the COVID-19 vaccine distribution for the approximately 98,000 Department of Health Care Finance (DHCF) beneficiaries in phases 1-A, 1-B, and 1-C populations, which include long-term care facility staff and residents, home health providers, individuals 65 years and older, and a broad group of adults 16-64 with high-risk conditions and co-morbidities.¹ DRDC is encouraged that these phases of the District's current

¹ DC Health, "Vaccination Program Phases With Tiers", Jan. 11, 2021, https://coronavirus.dc.gov/sites/default/files/dc/sites/coronavirus/page_content/attachments/Vaccination-Program-Phases-with-Tiers.pdf; DHCF, Presentation to the Medical Care Advisory Committee, Dec. 16, 2020, https://dhcf.dc.gov/sites/default/files/dc/sites/dhcf/page_content/attachments/Medicaid%20Director%27s%20MCA

vaccination plan include these populations, which should also allow many people with disabilities in natural homes to request appointments to get vaccines. However, the current appointment request process, which is on a first-come, first-served track, does not ensure equitable distribution of the vaccine to the disability community in the District, who are disproportionately at risk of severe effects or death from COVID-19.²

The District recently responded to DC leaders' serious concerns that the coronavirus vaccine access is not reaching majority-Black wards, particularly Wards 5, 7, and 8 by setting aside vaccine appointments for residents who are 65 years of age and older and/or health care workers and who live in priority zip codes covering most of Wards 1, 4, 5, 7, and 8.³ As DC Health acknowledges, even with this set aside, vaccine appointments are filling up very quickly.⁴ DC residents are also encountering technical glitches via the online portal and long hold times on the coronavirus call center, preventing them from scheduling appointments.⁵ What is more, the District's plan to open up vaccine access, as early as February, to hundreds of thousands of DC residents who are overweight (BMI over 25), habitual smokers, and/or have other preexisting conditions will further exacerbate the logistical as well as supply and demand challenges.⁶ Accordingly, we request that the District and DHCF take the following steps to support vaccine access to District residents with disabilities in the following ways:

- Because the District does not intend to entirely vaccinate one priority group before moving on to the next priority group, DHCF should ensure, in partnership with DC Health, that the Walgreens and CVS pharmacies offering on-site COVID-19 vaccination services for nursing facilities and assisted living facilities set aside enough doses for staff and residents at these facilities;
- DHCF should ensure, in partnership with DC Health, that the Walgreens and CVS pharmacies publicly report immunizations of nursing facility residents and staff and assisted living residents and staff through DC Health's new Immunization Information System;
- DHCF, in partnership with the Department of Aging and Community Living, should prioritize communication, outreach, and assistance with registration and making vaccine appointments as necessary to EPD Waiver beneficiaries, State Plan Personal Care Assistance (PCA) beneficiaries, and those Medicaid long-term care beneficiaries who otherwise receive home health services from paid (Services My Way) or unpaid caregivers;

[C%20Report%2012.16.20%20.pdf](#); "Chronic Conditions Included in the D.C. Coronavirus Vaccination Plan", The Washington Post, Jan. 21, 2021, https://www.washingtonpost.com/local/dc-politics/list-chronic-conditions-dc-vaccine/2021/01/20/c83cbb92-5b87-11eb-8bcf-3877871c819d_story.html.

² The Centers for Disease Control, "COVID-19: People with Disabilities", last updated Jan. 20, 2021, <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-disabilities.html>.

³ "D.C. Leaders Spar Over Coronavirus Vaccine Access for Poorer Residents", The Washington Post, Jan. 13, 2021, https://www.washingtonpost.com/local/coronavirus-vaccine-virginia-maryland-dc/2021/01/13/96ac06fa-559c-11eb-a08b-f1381ef3d207_story.html; "D.C.'s Vaccination Plans, a Month In", Washington City Paper, Jan. 20, 2021, <https://washingtoncitypaper.com/article/506260/dr-ankoor-shah-discusses-d-c-s-vaccine-rollout/>.

⁴ "D.C.'s Vaccination Plans, a Month In", Washington City Paper, Jan. 20, 2021, <https://washingtoncitypaper.com/article/506260/dr-ankoor-shah-discusses-d-c-s-vaccine-rollout/>.

⁵ "First of Vaccinations for DC Residents Over 65 Beset with Technical Snags", DCist, Jan. 12, 2021, <https://dcist.com/story/21/01/12/dc-coronavirus-vaccine-portal-seniors-technical-website/>.

⁶ "All Overweight DC Residents Will Get Priority for the Coronavirus Vaccine. Experts are Skeptical.", The Washington Post, Jan. 21, 2021, https://www.washingtonpost.com/local/dc-politics/dc-vaccine-overweight-smokers/2021/01/20/bd6cb53c-5a74-11eb-a976-bad6431e03e2_story.html.

- DHCF should issue guidance to its long-term care provider network and Medicaid EPD Waiver and State Plan PCA beneficiaries to provide specificity on who is included among adults 16-64 with high-risk conditions;
- DHCF should issue a long-term care provider bulletin or other directive, requiring home health agencies and EPD waiver case managers to provide education, outreach, and assistance with registration and making vaccine appointments as needed to EPD Waiver beneficiaries and State Plan PCA beneficiaries to facilitate their access to the vaccine;
- DHCF should ensure that both the information and education about the administration of the vaccine are accessible to Medicaid long-term care beneficiaries and in plain language and alternate formats;
- DHCF should ensure equitable access to vaccines for Medicaid long-term care beneficiaries who cannot leave their homes, including allowance for contracted nurses to vaccinate individuals who cannot leave their homes and require the provision of other reasonable accommodations to people with disabilities to facilitate access.

The above protections for these at-risk, disability populations are particularly important because the District’s current plan does not consider the different challenges individuals with disabilities may face when attempting to access the vaccine or receive the necessary information to make an informed decision about whether to obtain a vaccination. Indeed, many individuals with disabilities are unable to leave their homes for various reasons, such as age-related disabilities, physical disabilities, and psychiatric disabilities. Moreover, people with communication-related disabilities cannot have equal access to the vaccine and provide informed consent without reasonable accommodations for their disabilities. Digital appointment requests are often not accessible to people with disabilities and lack of access disproportionately affects DC residents in Wards 5, 7, and 8.⁷ COVID-19 exacerbates this problem because digital access is essential to getting information about how to sign-up for the vaccine for people with disabilities who remain isolated in their homes or are unhoused. Additionally, many District residents with disabilities have complex needs and health conditions that may create understandable hesitancy about taking the vaccine. These barriers further support the need for robust outreach, education, and assistance with requesting appointments.

We urge DHCF to partner with DC Health and other sister agencies to take immediate action to address these issues. Please respond to this letter by February 2, 2021 describing how the District and DHCF will implement its COVID-19 vaccination plan for long-term care Medicaid beneficiaries in long-term care facilities, natural homes, other home-community based settings. We also ask that you respond to the following questions:

1. How is DHCF and its long-term care providers addressing the recommendations outlined in this letter, including:
 - a. What specific steps is DHCF taking to ensure Medicaid long-term care beneficiaries have access to information about COVID-19 vaccines and to successful appointment assignments at accessible vaccination sites, including affordable, accessible transportation?

⁷ According to Connect.dc’s digital inclusion initiative:

- Approximately 25% of District households do not have broadband internet service
- The average home broadband adoption rate of Wards 1, 2, 3, 4, and 6 is 85%
- The average rate in Wards 5, 7, and 8 is less than 65%
- District broadband adoption rates are correlated with income, education, age, and *disability status*.

Available at <https://connect.dc.gov/page/fact-sheet>.

- b. What is DHCF's role in helping overcome vaccine hesitancy in the long-term care provider and disability community?
 - c. What is the role of EPD Waiver case management and home health agencies (HHA) regarding communication and outreach about the vaccine to beneficiaries?
 - d. What specific steps are EPD Waiver case management and HHAs taking to provide information about the vaccine to its beneficiaries, what specific information are these agencies providing, and in what format(s)?
2. How many nursing facilities' staff and residents and assisted living facilities' staff and residents received their first dose of the vaccine to date? How many nursing facilities' staff and residents and assisted living facilities' staff and residents received their second dose of the vaccine to date?
 3. When does DHCF expect nursing facility staff and residents and assisted living staff and residents to be fully vaccinated?
 4. What percentage of nursing facility staff and residents and assisted living staff and residents have been vaccinated, including those that have received their first dose, to date?
 5. How is the District, in coordination with Governor Hogan and Governor Northam, ensuring that DC Medicaid beneficiaries residing in Maryland and Virginia nursing facilities will be vaccinated and when?
 6. How is DHCF partnering with DC Medicaid-funded nursing facilities and assisted living facilities regarding implementation of vaccine distribution?
 7. When does DHCF expect EPD Waiver and PCA State Plan beneficiaries to be fully vaccinated?
 8. How many HHA staff and EPD Waiver case management agency staff have received their first dose of the vaccine to date? How many HHA staff and EPD Waiver case management agency staff have received their second dose to date?
 9. What percentage of HHA staff and EPD Waiver case management agency staff have been vaccinated, including those that have received their first dose, to date?
 10. Are any HHAs requiring mandatory staff vaccinations? If so, which HHAs?

We acknowledge that this is a difficult and unprecedented time and appreciate your attention to this exigent issue.

Sincerely,



Lyndsay Niles
Managing Attorney

cc: Ieisha Gray, Director of Long Term Care Administration (ieisha.gray@dc.gov)

GOVERNMENT OF THE DISTRICT OF COLUMBIA
District of Health Care Finance



Office of the Senior Deputy Director/Medicaid Director

February 5, 2021

Lindsay Niles
Managing Attorney
Disability Rights DC

Re: COVID-19 Vaccine Distribution Plan Implementation

Dear Ms. Niles:

We write in response to your January 26, 2021 letter to Wayne Turnage, Director, Department of Health Care Finance (DHCF), Dr. LaQuandra S. Nesbitt, Director, Department of Health (DC Health), and Melisa Byrd, Senior Deputy/Medicaid Director, DHCF.

In your letter, Disability Rights DC (DRDC) offered several recommendations for the District to support access to the COVID-19 vaccine for District residents with disabilities. DRDC also requested responses to several questions about DHCF's role in providing COVID-19 vaccine outreach and education to long term care providers and Medicaid beneficiaries. Additionally, DRDC's letter requests specific information from DC Health on vaccination rates and the progress of the vaccination effort in the disability community and amongst their care providers. Finally, DRDC's letter requests detail on the steps the District is taking to ensure equitable access to the COVID-19 vaccine as the vaccination effort continues.

DRDC Question 1(a-b):

The District shares DRDC's concern about the impact that potential hesitancy to get vaccinated could have on the disability community. In collaboration with DC Health, Department on Disability Services (DDS), DHCF's Managed Care Organization (MCO) partners, and a DHCF contracted vendor, DHCF has engaged in an extensive COVID-19 outreach and education campaign for high-risk individuals, beginning in the Summer of 2020. DHCF implemented a phased-outreach approach, with an initial focus on sharing and explaining stay at home guidelines, essential activities, social distancing guidelines, and health care planning recommendations. Through this campaign, DHCF conducted direct outreach (via automated calls, phone banks, mail, and text messaging) to over 110,000 high risk beneficiaries.

DHCF's focus in recent weeks has shifted to executing specific outreach that espouses the benefits of the COVID-19 vaccination in plain language, accessible to all Medicaid beneficiaries.

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The goal of the campaign is to facilitate direct outreach to approximately 6,000 Fee-For-Service (FFS) beneficiaries in the upcoming weeks and 50,000 FFS beneficiaries over the coming months.

DHCF, as represented by Medical Director Pamela Riley M.D., participates on the DC Health Scientific Advisory Committee for the Development and Implementation of a Safe, Effective, and Equitable COVID-19 Vaccine Distribution Program. DHCF follows guidance established by DC Health in its phased Vaccination Plan, in order to identify those eligible for the COVID-19 vaccine and to whom outreach should be targeted. As DRDC's letter states, vaccination eligibility in the District is currently limited to Medicaid and Alliance beneficiaries who fall within the Vaccination Plan's Phase 1-A, 1-B, and upcoming 1-C categories, so those groups are being prioritized.

DRDC Question 1(c-d); 5:

DRDC's letter poses a number of questions about DHCF's efforts to ensure access to the COVID-19 vaccine, specifically for those with disabilities. DHCF has made a number of [reimbursement and coverage changes](#) since March 2020 to ensure access to services for beneficiaries and provider reimbursement for COVID-19 related services (e.g. testing, treatment, vaccine administration) during the public health emergency. DHCF is also coordinating with DC Health to encourage provider-patient outreach and ensure providers are aware of how they can receive payment for counseling/educating Medicaid beneficiaries on the benefits of the COVID-19 vaccine. DHCF is preparing additional guidance to highlight Medicaid reimbursement opportunities for certain providers who conduct COVID-19 vaccine outreach to their patients (e.g. Health Homes, FQHCs, LTCSS, Adult Day Health Programs).

DRDC's letter queries about steps DHCF is taking to ensure affordable, accessible transportation to vaccination appointments. Medicaid beneficiaries in the District have access to non-emergency transportation for all their medical appointments at no cost to the beneficiary, including vaccination appointments. Across the Medicaid program, in both fee for service and managed care, we are working to ensure same-day notice and transportation for beneficiaries scheduling vaccine appointments.

DHCF is working with Medicaid providers to encourage members of the disability community to get vaccinated. DHCF meets regularly (weekly, monthly, and quarterly meetings) with long term care providers (waiver providers, home health agencies, nursing facilities, and ICFs) located in the District, Maryland, or Virginia. DHCF and DDS ensure long term care providers are aware of the process to get their staff vaccinated and ensure long term care providers are assisting beneficiaries in navigating the vaccination process established by the health agencies where they are located. Representatives from Department of Aging and Community Living and DC Health are frequently in attendance during these meetings as well. DHCF shares relevant COVID-19 information with long term care providers via Informational Bulletins published to the DHCF [website](#), including [setting-specific guidance](#) established by DC Health. DHCF is also sharing information about on-site vaccinations in senior housing.

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Home health providers, facility providers, Adult Day Health Programs, and 1915(c) waiver case managers interact with Medicaid beneficiaries on a daily basis and are counseling beneficiaries based on the toolkits and COVID-19 information available on <https://coronavirus.dc.gov/>.

DRDC Question 2-4:

DC Health notes that healthcare workers are not required to report their vaccination status directly to DC Health. Further, employment status and employer are not collected from individuals by the COVID-19 vaccine providers in the District, so these data elements are not available for analysis in the District's Immunization Information System (Immunization Registry).

As of the week beginning February 2, 2021, 1,039 long term care facility residents have received their first dose based on information available to DC Health. This number represents an estimated thirty-one percent (31%) of the long-term care resident population. At the same time, 1,614 long term care staff have received their first dose. This number represents 25% of long-term care staff.

DHCF and DC Health note that the long-term care population is in constant flux due to frequent admissions, transfers, and discharges. Therefore, the District is unable to estimate when all long-term care residents will be fully vaccinated.

DRDC Question 6:

DC Health and DHCF are in continuous communication with nursing facility and assisted living providers with regard to COVID-19 vaccinations; sharing information on how staff and residents can be vaccinated, DHCF also notes that COVID-19 vaccination for providers and residents in LTCFs is being made available free of charge through the federal Pharmacy Partnership for Long-Term Care Program in addition to District efforts. With the exception of two nursing facility sites, the District's long term care facilities are all enrolled in the federal long-term care partnership and are receiving their vaccinations on site by CVS and Walgreens. Therefore, CVS and Walgreens are responsible for submitting data on the number of residents and staff vaccinated and entering individual level data for each staff person into the Immunization Registry.

DC Health is experiencing delays in receiving data from one of the providers participating in the federal partnership, so the data above (in response to DRDC Question 2-4) is likely an underrepresentation of the number of residents and staff who have been vaccinated to date. Each long-term care facility will receive a total of three COVID-19 vaccination clinics. Vaccination clinics will be ongoing through late-February, early-March to allow sufficient time for beneficiaries/authorized representatives to provide consent for the COVID-19 vaccine and for staff questions regarding the vaccine to be adequately addressed prior to each clinic.

DRDC 7-9:

DC Health and DHCF are unable to provide vaccination rates for beneficiaries receiving services under the 1915(c) Elderly and Persons with Physical Disabilities Waiver and State Plan Home

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Health benefit and providers at this time. DC Health will work with other District agencies and healthcare employers to periodically collect data on vaccination rates for employees, including those who work in DDS regulated intermediate care facilities and community residence facilities, Department of Behavioral Health regulated mental health community residence facilities, and licensed Home Health Agencies.

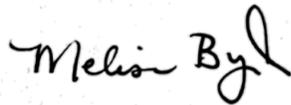
Additionally, DC Health is working with DDS to facilitate vaccinations for people enrolled in 1915(c) waiver programs administered by DDS and intermediate care facilities. DDS and DC Health are only two weeks into operation of the initiative, so there is no substantive data to be provided on vaccination rates at this time.

DRDC Question 10:

DHCF and DC Health actively encourage all providers and beneficiaries to get vaccinated where possible, understanding that some beneficiaries and provider staff with complex health conditions or compromised immune systems may not be able to be vaccinated. DHCF and DC Health are unaware of any Home Health providers who are mandating staff vaccinations.

Should you have any questions, please do not hesitate to contact Ieisha Gray, Director, Long Term Care Administration at 202.557.8199 or ieisha.gray@dc.gov or me.

Sincerely,

A handwritten signature in black ink that reads "Melisa Byrd". The signature is written in a cursive, flowing style.

Melisa Byrd
Senior Deputy Director/Medicaid Director