# **COVID-19 Vaccine Access for Older Adults**

# **and People with Disabilities Who are Homebound**

Access to the COVID-19 vaccine for older adults is being prioritized across the country, due to the vulnerability to more serious illness from the virus among this population. However, for the up to 15 million older adults and individuals with health conditions or disabilities who cannot easily leave their homes, access is challenging or impossible. The size and characteristics of the population, the barriers to access and the optimal approaches to overcoming those barriers are not fully understood. In addition, the roles of various governmental agencies and non-governmental organizations in ensuring access to the COVID vaccine are not clear.

The majority of older adults with multiple underlying medical conditions, as well as those with functional or cognitive impairment, live in the community and not in elder care or other specialized facilities. And while older adults living in such facilities have—rightly—been prioritized for vaccinations, this is not the case for equally vulnerable older adults who cannot leave their homes. Unfortunately, there are challenges in identifying who these individuals are, and state and local governments have no clear path to ensure they will be able to find all of them, nor how to address the complexities of increasing the numbers of certified vaccinators and accessing and appropriately handling sufficient vaccines for multiple home visits that are geographically dispersed.

Vaccinating this population is made even more challenging because of the variation in definitions, vaccination policies, reimbursement difficulties, and workforce needs within and across states.

But state and local public health departments across the country, working in partnership with the aging network, hospital systems, and other community partners, are turning their attention to this population and considering a variety of innovative and practical solutions. These include approaches such as:

* Supporting those organizations that know and already provide services to those in the population including Visiting Nurse Associations, Area Agencies on Aging and Meals on Wheels programs
* Partnering with fire departments and emergency personnel to vaccinate those who must remain at home
* Engaging tribal elders, church leaders, and other known trusted parties to identify and consider how best to reach the population
* Improving educational outreach to tackle vaccine hesitancy and misinformation
* Training and certifying medical, nursing and pharmacist students as vaccinators
* Using geomapping to group at-home vaccine recipients into multi-hour visit windows
* Vaccinating family caregivers during the visit in order not to waste doses
* Advancing legislation that requires protocols for getting vaccines to those at home
* Prioritizing use of the Johnson & Johnson vaccine for people at home
* Increasing Medicare reimbursement or specialized COVID funding to cover costs for travel and patient monitoring or increasing the pool of vaccinators

TFAH will continue to explore the challenges and identify and promote solutions over the next few months and invites input and sharing of resources to help ensure that this vulnerable population is vaccinated as soon as possible. To share best practices and policy solutions, please email afphs@tfah.org.