

December 3, 2020

Vivek Murthy, co-chair  
David Kessler, co-chair  
Marcella Nunez-Smith, co-chair  
Biden-Harris Transition COVID-19 Advisory Board

*Via email*

Dear Drs. Murthy, Kessler, and Nunez-Smith,

The undersigned organizations are dedicated to advocating for the health and well-being of older adults across the country. Over the last eight months, we have advocated for policies to protect the lives of older adults during the COVID-19 pandemic. We are writing now with two requests. First, that individuals with expertise in aging and disability be included on all COVID-related boards and taskforces; and second, that you form a COVID-19 taskforce focused on addressing the ongoing crisis in our long-term care systems.

We applaud the transition team for its immediate release of a COVID-19 plan and formation of the COVID-19 Advisory Board. We are pleased that the plan prioritizes protecting older adults and others at high risk, including by establishing a COVID-19 Racial and Ethnic Disparities Task Force. Considering the devastating impact of COVID-19 on older adults and people with disabilities, we recommend the following additional steps be taken:

1. **Include individuals whose primary expertise is in aging and disability on all COVID-related boards and taskforces.** Older adults are at most risk for serious illness and death from COVID-19—representing 80% of all deaths nationwide—with older adults of color dying at rates 3 to 5 times that of white older adults.<sup>1</sup> LGBT older people, many of whom have chronic conditions, are less likely to have health insurance and continue to fear or face discrimination in the provision of health care.<sup>2</sup> Yet policies that address the high risk older adults and people with disabilities face, particularly the compounding impacts of age, disability, race, sexual orientation, and gender identity, have not been prioritized. For example, the Centers for Disease Control (CDC) has not yet published a specific symptom list for older adults, despite mounting evidence that COVID-19

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<sup>1</sup> Centers for Disease Control and Prevention, “Deaths by Age Group,” accessed on Nov. 25, 2020, available at <https://covid.cdc.gov/covid-data-tracker/#demographics>. Centers for Disease Control and Prevention, “Health Disparities: Race and Hispanic Origin,” Figure 3b, accessed on Nov. 25, 2020, available at [https://www.cdc.gov/nchs/nvss/vsrr/covid19/health\\_disparities.htm](https://www.cdc.gov/nchs/nvss/vsrr/covid19/health_disparities.htm).

<sup>2</sup> Gruberg, S., “An Effective Response to the Coronavirus Requires Targeted Assistance for LGBTQ People,” Center for American Progress, Apr. 9, 2020, available at <https://www.americanprogress.org/issues/lgbtq-rights/news/2020/04/09/482895/effective-response-coronavirus-requires-targeted-assistance-lgbtq-people/>.

presents differently for older adults than younger populations.<sup>3</sup> At the same time, many states and hospitals have created discriminatory care rationing guidelines that would deny life-saving treatment to individuals based solely on age and disability, and could also discriminate against people of color.<sup>4</sup>

Because of the high risk to older adults and people with disabilities, the COVID-19 advisory board and all COVID-related taskforces must include both aging and disability experts, including gerontologists, geriatricians, and individuals with disabilities. As vaccines are distributed, such expertise will become even more critical to both ensure their efficacy for older adults and people with disabilities and their equitable distribution.

- 2. Form a COVID-19 taskforce focused on addressing the ongoing crisis in our long-term care system.** COVID-19 deaths in nursing homes represent more than 40% of total deaths and cases are again on the rise in congregate settings.<sup>5</sup> Facilities with more Black and Hispanic residents are more likely to report deaths and outbreaks than facilities with more white residents.<sup>6</sup> Many facilities are still not providing rapid testing, and direct care providers do not have adequate access to personal protective equipment.<sup>7</sup> Although most older adults and people with disabilities want to receive care in their homes where they are safer, many cannot because of insufficient services at home. Therefore, expanding access to HCBS must be made a key component to the COVID-19 response.

Considering the complexity of addressing COVID-19 in residential congregate settings and ensuring access to HCBS, we recommend the formation of a COVID-19 advisory group specifically focused on long-term services and supports (LTSS). The LTSS advisory group must include robust consumer representation and participation.

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<sup>3</sup> Knopp, P., et al., "Presenting features of COVID-19 in older people: relationships with frailty, inflammation and mortality," *European Geriatric Medicine*, Jul. 30, 2020, available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7391232/>.

<sup>4</sup> Justice in Aging, "COVID-19 Resources for Advocates: Care Rationing," accessed on Nov. 25, 2020, available at <https://justiceinaging.org/covid-19-resources-for-advocates/>.

<sup>5</sup> Centers for Medicare & Medicaid Services, "COVID-19 Nursing Home Data," accessed on Nov. 25, 2020, available at <https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg/>.

<sup>6</sup> Kaiser Family Foundation, "Racial and Ethnic Disparities in COVID-19 Cases and Deaths in Nursing Homes," Oct. 27, 2020, available at <https://www.kff.org/coronavirus-covid-19/issue-brief/racial-and-ethnic-disparities-in-covid-19-cases-and-deaths-in-nursing-homes/>

<sup>7</sup> AARP, "AARP Nursing Home COVID-19 Dashboard," Updated Nov. 11, 2020, available at <https://www.aarp.org/ppi/issues/caregiving/info-2020/nursing-home-covid-dashboard.html>; See also, Rau, J., et al., "Nursing Homes Still See Dangerously Long Waits for COVID Test Results," *Kaiser Health News*, Nov. 12, 2020, available at <https://khn.org/news/article/nursing-homes-still-see-dangerously-long-waits-for-covid-test-results/>.

We look forward to engaging actively with the transition team's planning and policy work and welcome the opportunity to discuss these recommendations further. Please contact Kevin Prindiville ([kprindiville@justiceinaging.org](mailto:kprindiville@justiceinaging.org)) and Amber Christ ([achrist@justiceinaging.org](mailto:achrist@justiceinaging.org)) for follow up or questions regarding this letter.

Sincerely,

Caring Across Generations  
Center for Medicare Advocacy  
Community Catalyst  
Families USA  
Justice in Aging  
Medicare Rights Center  
National Academy of Elder Law Attorneys  
National Consumer Voice for Quality Long-Term Care  
National Council on Aging  
SAGE  
Social Security Works