

**Meadows Institute COVID-19 Regulatory & Reimbursement Newsletter**

***Letter to Providers #56: State and Federal Updates – May 14, 2021***

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With federal and state health care policies changing in response to COVID-19, the Meadows Mental Health Policy Institute (Meadows Institute) is issuing *COVID-19 Regulatory & Reimbursement Newsletters* to support providers. In these newsletters, we highlight recent changes and extensions to regulatory and reimbursement rules, as well as newly published or updated guidance and answers to frequently asked questions.

These newsletters, along with additional information on mental health resources during a pandemic, are posted here: <https://mmhpi.org/work/covid19/>. If you would like to have additional organizations added to our distribution list or have follow up questions on the content, please email Rachael McLaughlin at [rmclaughlin@mmhpi.org](mailto:rmclaughlin@mmhpi.org).

## Texas Updates

### Updates on Flexibilities and Emergency Rules

#### Texas Board of Nursing to Continue Telephonic Renewal of Prescriptions for Chronic Pain

<b>Date</b>	May 3, 2021
<b>Summary</b>	The Texas Board of Nursing extended through July 3, 2021 an emergency rule allowing an Advanced Practice Registered Nurse (APRN) to treat chronic pain with scheduled drugs, such as opioids, through use of telemedicine if a patient is an established chronic pain patient of the APRN, is seeking a telephone refill of an existing prescription, and the APRN determines that the telemedicine treatment is needed due to the COVID-19 pandemic.
<b>Link</b>	<a href="https://www.bon.texas.gov/emergency_amendments_to_rule_217.24_May3.asp">https://www.bon.texas.gov/emergency_amendments_to_rule_217.24_May3.asp</a>

### Outpatient Treatment Services Via Electronic Means for Adolescents in CDTFs During the COVID-19 Pandemic

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<b>Date</b>	May 7, 2021
<b>Summary</b>	The Health and Human Services Commission (HHSC) posted letter GL 21-3002, regarding the adoption of an emergency rule amendment for outpatient treatment services via electronic means for adolescents. The emergency rule amendment temporarily permits currently licensed Chemical Dependency Treatment Facilities (CDTFs) to provide outpatient treatment services through electronic means to adolescent clients to reduce the risk of COVID-19 transmission and ensure continued access to treatment. If you have questions, please contact <a href="mailto:HCR_PRT@hhs.texas.gov">HCR_PRT@hhs.texas.gov</a> .
<b>Link</b>	<a href="https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-21-3002.pdf">https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-21-3002.pdf</a>

### Vaccination Data Reporting Emergency Rule Extensions for NF

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<b>Date</b>	May 11, 2021
<b>Summary</b>	HHSC has extended an emergency rules related to COVID-19 vaccination data reporting for nursing facilities (NF). This <a href="#">rule</a> was set to expire on May 11, 2021. The extension took effect on May 11, 2021 and will expire on July 9, 2021. Email <a href="mailto:LTCPolicy@hhs.texas.gov">LTCPolicy@hhs.texas.gov</a> or call (512) 483-3161 for questions about this rule.
<b>Link</b>	<a href="https://hhs.texas.gov/about-hhs/communications-events/news/2021/05/nf-covid-19-vaccination-data-reporting-emergency-rule-extended-july-9">https://hhs.texas.gov/about-hhs/communications-events/news/2021/05/nf-covid-19-vaccination-data-reporting-emergency-rule-extended-july-9</a>

## Retainer Payments for HCS Program Providers

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<b>Date</b>	May 3, 2021
<b>Summary</b>	HHSC received approval from the Centers for Medicare & Medicaid Services (CMS) to make retainer payments to Home and Community-based Services (HCS) program providers. A retainer payment is a payment made by HHSC to an HCS program provider for supervised living (SL) or residential support (RSS) for a day during the period of March 20, 2020 to October 23, 2020 that a person did not receive SL or RSS because the person was temporarily living away from the three-person residence or four-person residence to reduce the risk of COVID-19 transmission. HHSC makes retainer payments for up to 90 days per person. HHSC has adopted an emergency rule, effective April 30, 2021, at 40 T.A.C. Section 9.193, which allows an HCS program provider to submit an electronic service claim for a retainer payment. Providers can begin billing retainer payments through the CARE system effective May 2, 2021.
<b>Link</b>	<a href="https://apps.hhs.texas.gov/providers/communications/2021/letters/IL2021-21.pdf">https://apps.hhs.texas.gov/providers/communications/2021/letters/IL2021-21.pdf</a>

## Vaccine Updates

### Adolescents Ages 12 to 15 Years Now Eligible To Be Vaccinated

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<b>Date</b>	May 12, 2021
<b>Summary</b>	The Texas Department of State Health Services (DSHS) has notified vaccine providers that they should begin to administer the Pfizer-BioNTech COVID-19 vaccine to adolescents from 12 to 15 years old, in line with federal guidance. The notice comes after the <a href="#">Food and Drug Administration (FDA)</a> authorized the vaccine for adolescents on May 10, 2021, and the Advisory Committee on Immunization Practices recommended it for this age group. For further information about this vaccine expansion, the FDA published fact sheets for <a href="#">healthcare providers</a> and <a href="#">recipients and caregivers</a> and updated their <a href="#">frequently asked questions (FAQs)</a> on the Pfizer COVID-19 vaccine.
<b>Link</b>	<a href="https://www.dshs.texas.gov/news/releases/2021/20210512.aspx">https://www.dshs.texas.gov/news/releases/2021/20210512.aspx</a>

## COVID-19 Vaccine Administration Procedure Codes 0001A and 0002A Are Now Benefits for People 12 Years of Age and Older

<b>Date</b>	May 11, 2021
<b>Summary</b>	<p>This is an update to the article titled "<a href="#">COVID-19 Vaccine Administration Procedure Codes 0001A and 0002A Are Now Benefits</a>," which was posted on December 14, 2020. Effective May 10, 2021, in accordance with the FDA's issuance of updated age restrictions for the Emergency Use Authorization (EUA) for the Pfizer COVID-19 vaccine, coverage of vaccine administration procedure codes 0001A and 0002A is expanded for Medicaid, Healthy Texas Women, Family Planning Program, and the Children with Special Health Care Needs (CSHCN) Services Program for people who are 12 years of age and older. Vaccine procedure code 91300 is informational only, while the vaccine is distributed to providers free of charge.</p> <p>For more information, call the Texas Medicaid and Healthcare Partnership (TMHP) Contact Center at (800) 925-9126 or the TMHP-CSHCN Services Program Contact Center at (800) 568-2413.</p>
<b>Link</b>	<a href="https://www.tmhp.com/news/2021-05-11-covid-19-vaccine-administration-procedure-codes-0001a-and-0002a-are-now-benefits">https://www.tmhp.com/news/2021-05-11-covid-19-vaccine-administration-procedure-codes-0001a-and-0002a-are-now-benefits</a>

## Pediatric Provider Enrollment

<b>Date</b>	May 7, 2021
<b>Summary</b>	<p>With the the expansion of the Pfizer COVID-19 vaccine's EUA to include adolescents ages 12 year and older, DSHS is encouraging all pediatric providers to enroll in the COVID-19 Vaccine Program <a href="#">here</a>. The enrollment requires facilities to complete the Centers for Disease Control and Prevention (CDC) COVID-19 Vaccination Program Provider Agreement and include specific contact and storage information.</p> <p>DSHS sent a <a href="#">letter to more than 3,000 pediatric providers</a> enrolled in the Texas Vaccines for Children Program as well as the Texas Medical Association, Texas Pediatric Society, and other provider groups inviting them to enroll. In addition, DSHS issued a <a href="#">pediatric provider packet</a> with information and tips on enrolling as a vaccine provider. Providers can start the enrollment process at <a href="https://www.dshs.texas.gov">EnrollTexas!Z.dshs.texas.gov</a>.</p>
<b>Link</b>	<a href="https://www.dshs.texas.gov/news/releases/2021/20210507.aspx">https://www.dshs.texas.gov/news/releases/2021/20210507.aspx</a>

### Providers to Order Vaccine Doses; Shift From Receiving Allocations

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<b>Date</b>	May 6, 2021
<b>Summary</b>	DSHS issued a news release announcing its shift from COVID-19 vaccine allocation to ordering, given sufficient supplies of the vaccine in Texas. DSHS will no longer allocate COVID-19 vaccine to providers on a weekly basis. Rather, DSHS will fill vaccine orders from providers as they come in and ship vaccine from the DSHS Pharmacy or place orders with the CDC on a daily basis. Also, providers no longer need to use every dose in the week they receive it but should store it under the conditions that will maximize its shelf life. As noted above, DSHS is also encouraging providers to vaccinate anyone who wants to be vaccinated, even if that means opening a new vial for that person without knowing whether all doses will be used. Information regarding the “Every Person Counts” guidance can be found <a href="#">here</a> . As a result of the change to regular vaccine ordering, DSHS will no longer post weekly allocation tables. The state will also retire the weekly report on vaccine doses reported by providers as wasted.
<b>Link</b>	<a href="https://www.dshs.state.tx.us/news/releases/2021/20210506.aspx">https://www.dshs.state.tx.us/news/releases/2021/20210506.aspx</a>

### State Launches Vaccine Call Center

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<b>Date</b>	May 6, 2021
<b>Summary</b>	Governor Abbott announced the launch of the State Mobile Vaccination Team Call Center. Texas businesses or civic organizations can call (844) 90-TEXAS and select option 3 to schedule a visit from a state mobile vaccine team to vaccinate employees, visitors, or members. To qualify for a visit, a business or civic organization must have 10 or more employees, visitors, or members who voluntarily choose to be vaccinated. Texans returning from travel are also encouraged to call the hotline and select option 1 to request a state mobile vaccination team to visit their home.
<b>Link</b>	<a href="https://gov.texas.gov/news/post/governor-abbott-tDEM-and-tMD-launch-state-vaccine-call-center-to-connect-organizations-businesses-with-mobile-vaccine-teams">https://gov.texas.gov/news/post/governor-abbott-tDEM-and-tMD-launch-state-vaccine-call-center-to-connect-organizations-businesses-with-mobile-vaccine-teams</a>

## Monoclonal Antibody Therapy Codes M0239 and Q0239 No Longer Benefits

<b>Date</b>	April 30, 2021
<b>Summary</b>	<p>On April 16, 2021, FDA revoked the EUA for bamlanivimab when administered alone. FDA determined that the known and potential benefits of bamlanivimab, when administered alone, no longer outweigh the known and potential risks. Effective April 30, 2021, antibody therapy procedure codes M0239 and Q0239 are no longer benefits of Texas Medicaid and the CSHCN Services Program. Bamlanivimab used with etesevimab is still authorized and can be submitted with procedure codes M0245 and Q0245.</p> <p>For more information, call the TMHP Contact Center at (800) 925-9126 or the TMHP-CSHCN Services Program Contact Center at (800) 568-2413.</p>
<b>Link</b>	<a href="https://www.tmhp.com/news/2021-05-03-monoclonal-antibody-therapy-codes-m0239-and-q0239-no-longer-benefits-effective">https://www.tmhp.com/news/2021-05-03-monoclonal-antibody-therapy-codes-m0239-and-q0239-no-longer-benefits-effective</a>

## Regional Advisory Committee PPE Distribution Ends May 17

<b>Date</b>	May 6, 2021
<b>Summary</b>	<p>Since March 2020, the North Central Texas Trauma Regional Advisory Council (NCTTRAC) has been distributing state-sourced personal protective equipment (PPE) to regional partners at the request of DSHS. With the PPE supply chain largely returning to normal, NCTTRAC will be demobilizing the PPE distribution mission this month and will revert back to the State of Texas Assistance Request process. NCTTRAC will shut down its <a href="#">PPE Request Portal</a> on May 17, 2021 and support for COVID-19 will be demobilized on May 31, 2021.</p>
<b>Link</b>	<a href="https://ncttrac.org/wp-content/uploads/files/public-files/covid-19/documents/NCTTRAC%20PPE%20Distribution%20Ending%20May%2017%20-%20Notice.pdf">https://ncttrac.org/wp-content/uploads/files/public-files/covid-19/documents/NCTTRAC%20PPE%20Distribution%20Ending%20May%2017%20-%20Notice.pdf</a>

## Federal Updates

### American Rescue Plan: Coronavirus State and Local Fiscal Recovery Fund

<b>Date</b>	May 10, 2021
<b>Summary</b>	<p>The American Rescue Plan Act provides \$350 billion in emergency funding to the U.S. Department of Treasury (DOT) for state, local, territorial, and Tribal governments to:</p> <ul style="list-style-type: none"><li>• respond to the COVID-19 public health emergency, or its negative economic impacts, including by providing assistance to households, small businesses, and nonprofits, or aid to impacted industries;</li><li>• respond to workers performing essential work during the pandemic by providing premium pay to eligible workers of the State, territorial or Tribal government performing essential work or by providing grants to eligible employers that have eligible worker;</li><li>• provide government services, to the extent COVID-19 caused a reduction of revenues collected in the most recent full fiscal year of the State, territorial, or Tribal government; or</li><li>• make necessary investments in water, sewer, or broadband infrastructure.</li></ul> <p>Known as the Coronavirus State and Local Fiscal Recovery Fund, \$195.3 billion is available for states and \$130.2 billion is available for local governments, including cities and counties. Counties will receive direct payments based on each county's share of U.S. population, with additional adjustments for Community Development Block Grant (CDBG) recipients. Cities with a population of at least 50,000 will receive direct payments from DOT utilizing a modified CDBG formula. On May 10, 2021, DOT released official allocation numbers:</p> <ul style="list-style-type: none"><li>• Texas counties will receive \$5.7 billion in direct payments.</li><li>• Texas metropolitan cities will receive \$3.4 billion in direct payments.</li><li>• The State of Texas will receive a separate allocation of \$15.8 billion.</li></ul> <p>Funding from the Coronavirus State and Local Fiscal Recovery Fund is subject to the requirements specified in the <a href="#">Interim Final Rule</a> released by DOT on May 10, 2021. 50% of Coronavirus State and Local Fiscal Recovery Funds are being sent out, now. The remainder will be sent out in 12 months. Funds must be spent by December 31, 2024.</p>
<b>Link</b>	<p><a href="https://home.treasury.gov/policy-issues/coronavirus/assistance-for-state-local-and-tribal-governments/state-and-local-fiscal-recovery-funds">https://home.treasury.gov/policy-issues/coronavirus/assistance-for-state-local-and-tribal-governments/state-and-local-fiscal-recovery-funds</a></p>



## CMS Increases Rate for Monoclonal Antibodies

<b>Date</b>	May 6, 2021
<b>Summary</b>	<p>CMS announced it has increased the Medicare payment rate for administering monoclonal antibodies to treat beneficiaries with COVID-19, continuing coverage under the Medicare Part B COVID-19 vaccine benefit. Beneficiaries pay nothing out of pocket, regardless of where the service is furnished – including in a physician’s office, health care facility, or at home. As of May 6, 2021, the national average payment rate increased from \$310 to \$450 for most health care settings. In support of providers’ efforts to prevent the spread of COVID-19, CMS will also establish a higher national payment rate of \$750 when monoclonal antibodies are administered in the beneficiary’s home, including the beneficiary’s permanent residence or temporary lodging (e.g., hotel/motel, cruise ship, hostel, or homeless shelter). CMS published an <a href="#">infographic</a> of the coverage updates and updated their FAQs on Medicare <a href="#">fee-for-service</a>. Additional information about monoclonal antibody treatments is available <a href="#">here</a>.</p>
<b>Link</b>	<a href="https://www.cms.gov/newsroom/press-releases/cms-increases-medicare-payment-covid-19-monoclonal-antibody-infusions">https://www.cms.gov/newsroom/press-releases/cms-increases-medicare-payment-covid-19-monoclonal-antibody-infusions</a>

## COVID-19 Waiver for Ground Ambulance Services

<b>Date</b>	May 5, 2021
<b>Summary</b>	<p>CMS released a COVID-19 waiver that allows Medicare to reimburse ground ambulances for treating a patient in place without transport to a medical facility. The waiver requires:</p> <ul style="list-style-type: none"><li>• the ground ambulance service was furnished in response to a 911 call;</li><li>• the patient would have been transported to a destination permitted under Medicare regulations, but the transport did not occur because of community-wide emergency medical services (EMS) protocols due to the COVID-19 public health emergency (PHE);</li><li>• and the patient's condition required the level of service provided and would normally require transport by ambulance, absent the EMS PHE protocols.</li></ul>
<b>Link</b>	<a href="https://www.cms.gov/files/document/covid-waiver-medicare-ground-ambulance-services-treatment-place.pdf">https://www.cms.gov/files/document/covid-waiver-medicare-ground-ambulance-services-treatment-place.pdf</a>

## Vaccine Updates

### Additional Efforts to Get America Vaccinated

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<b>Date</b>	May 11, 2021
<b>Summary</b>	Several new efforts are underway to get more Americans vaccinated. Ride-sharing companies Lyft and Uber will provide free rides to anyone going to a vaccination site to get vaccinated. Some of the nation's largest community colleges will host vaccination sites for students, staff, and local communities throughout May and June. Funding is immediately available through the Federal Emergency Management Agency (FEMA) for states to fund more on-the-ground efforts to promote vaccinations in their communities, including phone banking, door-to-door canvassing, and pop-up vaccination sites in workplaces and churches.
<b>Link</b>	<a href="https://www.whitehouse.gov/briefing-room/statements-releases/2021/05/11/fact-sheet-president-biden-to-announce-additional-efforts-to-get-america-vaccinated-including-free-rides-to-vaccination-sites-from-lyft-and-uber-vaccination-clinics-at-community-colleges-and-addit/">https://www.whitehouse.gov/briefing-room/statements-releases/2021/05/11/fact-sheet-president-biden-to-announce-additional-efforts-to-get-america-vaccinated-including-free-rides-to-vaccination-sites-from-lyft-and-uber-vaccination-clinics-at-community-colleges-and-addit/</a>

### HHS and HUD Joint Effort to Increase Access to COVID-19 Vaccinations

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<b>Date</b>	May 5, 2021
<b>Summary</b>	The U.S. Department of Health and Human Services (HHS) and the U.S. Department of Housing and Urban Development (HUD) announced a joint-agency effort to increase access to COVID-19 prevention and treatment services, including testing and vaccinations, among disproportionately affected communities. This program will leverage the Health Center COVID-19 Health Vaccine Program, which currently provides a direct supply of vaccines to nearly 800 health centers across the country. HHS and HUD expect the effort to reach over 6,000 multifamily housing properties, 6,700 homeless shelters, and approximately 7,500 public housing properties across the country to respond to and stop the spread of COVID-19.
<b>Link</b>	<a href="https://www.hhs.gov/about/news/2021/05/05/hhs-secretary-becerra-hud-secretary-fudge-announce-joint-effort-increase-access-covid-19-vaccinations.html">https://www.hhs.gov/about/news/2021/05/05/hhs-secretary-becerra-hud-secretary-fudge-announce-joint-effort-increase-access-covid-19-vaccinations.html</a>

## \$40 Million to Support Emergency Home Visiting Assistance for Families Affected by the COVID-19 Pandemic

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<b>Date</b>	May 11, 2021
<b>Summary</b>	HHS, through the Health Resources and Services Administration (HRSA), awarded approximately \$40 million in emergency home visiting funds to states, territories, and the District of Columbia to support children and families affected by the COVID-19 pandemic. The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program supports the delivery of coordinated and comprehensive, high-quality, voluntary, evidence-based home visiting services to children and families living in communities at risk for poor maternal and child health outcomes. The Texas Department of Family Protective Services received \$2,619,173 through MIECHV. More information on the recipients and award amounts can be found <a href="#">here</a> .
<b>Link</b>	<a href="https://www.hhs.gov/about/news/2021/05/11/hhs-awards-40-million-american-rescue-plan-funding-support-emergency-home-visiting-assistance-families-affected-covid-19-pandemic.html">https://www.hhs.gov/about/news/2021/05/11/hhs-awards-40-million-american-rescue-plan-funding-support-emergency-home-visiting-assistance-families-affected-covid-19-pandemic.html</a>

## CMS Launches Campaign to Increase COVID Vaccine Acceptance of Employees

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<b>Date</b>	May 11, 2021
<b>Summary</b>	CMS has debuted their first social media video as part of their ongoing COVID response efforts to support the long-term care community. The video highlights staff, or Community Champions, who were not sure about receiving the COVID-19 vaccine at first and are now in favor of the vaccine. These Community Champions now encourage their peers to get vaccinated. HHSC and CMS would like providers to <a href="#">share the Community Champions video</a> with staff.
<b>Link</b>	<a href="https://hhs.texas.gov/about-hhs/communications-events/news/2021/05/cms-launches-campaign-increase-covid-vaccine-acceptance-staff">https://hhs.texas.gov/about-hhs/communications-events/news/2021/05/cms-launches-campaign-increase-covid-vaccine-acceptance-staff</a>

## CMS Expanding Efforts to Grow COVID-19 Vaccine Confidence and Uptake Amongst Nation's Most Vulnerable

<b>Date</b>	May 11, 2021
<b>Summary</b>	<p>CMS issued a <a href="#">rule</a> that will ensure long-term care (LTC) facilities and residential facilities serving clients with intellectual disabilities educate and offer the COVID-19 vaccine to residents, clients, and staff. These requirements apply to LTC facilities and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs-IID) and align with existing requirements for influenza and pneumococcal vaccines in LTC facilities.</p> <p>The rule also requires LTC facilities to report weekly COVID-19 vaccination status data for both residents and staff. The new vaccination reporting requirement will not only assist in monitoring uptake amongst residents and staff but will also aid in identifying facilities that may be in need of additional resources or assistance to respond to the COVID-19 pandemic.</p>
<b>Link</b>	<a href="https://www.cms.gov/newsroom/press-releases/cms-expanding-efforts-grow-covid-19-vaccine-confidence-and-uptake-amongst-nations-most-vulnerable">https://www.cms.gov/newsroom/press-releases/cms-expanding-efforts-grow-covid-19-vaccine-confidence-and-uptake-amongst-nations-most-vulnerable</a>

## CDC Reports and Updated Guidance

### New CDC Guidance on Transmission

<b>Date</b>	May 10, 2021
<b>Summary</b>	<p>CDC updated its guidance on COVID-19 transmission, focusing on the fact that the virus spreads via small respiratory droplets and particles in the air. The new guidance states that the SARS-CoV-2 virus can be inhaled even when you are more than six feet away from an infected person. CDC previously said most infections were contracted through "close contact, not airborne transmission." CDC said transmission can occur through contact with contaminated surfaces or by touching the eyes, nose or mouth with hands that have the virus on them, though this mode of transmission is more uncommon.</p>
<b>Link</b>	<a href="https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html">https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html</a>

## Demographic and Social Factors Associated with COVID-19 Vaccination Initiation Among Older Adults

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<b>Date</b>	May 11, 2021
<b>Summary</b>	After the first 3.5 months of the U.S. COVID-19 vaccination program, 79.1% of adults aged 65 years and older had received at least one dose or more, with higher vaccination initiation among men. Counties with lower vaccination initiation rates had higher percentages of older adults with social vulnerabilities. Monitoring demographic and social factors affecting COVID-19 vaccine access for older adults and prioritizing efforts to ensure equitable access to COVID-19 vaccine are needed to ensure high coverage among this group.
<b>Link</b>	<a href="https://www.cdc.gov/mmwr/volumes/70/wr/mm7019e4.htm?s_cid=mm7019e4_w">https://www.cdc.gov/mmwr/volumes/70/wr/mm7019e4.htm?s_cid=mm7019e4_w</a>