

# Vaccine Distribution in Public and Private Low Income and Affordable Senior Housing

## Frequently Asked Questions

Last Updated on January 25, 2021

On Wednesday, January 13<sup>th</sup> the Baker-Polito Administration announced that **both residents and staff of public and private low income and affordable senior housing** are priority populations for [Phase Two of vaccine deployment](#) in the Commonwealth of Massachusetts, which we anticipate to begin later in February. This prioritization is limited to age restricted housing sites as defined below.

This document expands on the [guidance released on January 13th](#) to give owners and property managers of public and private low income and affordable senior housing more information and considerations regarding arranging vaccinations for residents and staff. This document will be updated periodically as more information on the vaccine rollout and timeline is available.

### Vaccination Options for Eligible Properties:

1. Owners/managers may leverage existing pharmacy partnerships or an existing relationship with a medical or community health provider to offer an onsite clinic; or
2. Owners/managers may contact their Local Board of Health (LBOH), if the Board is running clinics, to discuss capacity to provide an onsite clinic; or
3. Residents and staff may schedule an appointment at a provider location, pharmacy, or a Mass Vaccination Site. While these sites are currently holding clinics for Phase 1 priority populations, most sites will serve Phase 2 priority populations in the future as well. All current vaccination sites can be found [online](#); additional pharmacy, provider and Mass Vaccination sites will come on line in the coming weeks.

To learn more about the currently available COVID-19 vaccines, please visit the CDC websites on the [Moderna](#) and [Pfizer](#) vaccines. Both vaccines require two doses for an individual to be fully vaccinated. It is necessary that the second dose be the same as the first dose. Individuals must receive their second dose within a specified time frame and from the same location that they received their first dose. Additionally, each recipient of a vaccine must be observed by a medically trained professional for at least 15 minutes following the dose.

## Frequently Asked Questions

### Is my property considered “public and private low income and affordable senior housing”?

For the purposes of this guidance, the following age-restricted property types are eligible, if they not been assisted through the [Federal Pharmacy Partnership Program](#) with CVS or Walgreens:

- Public housing properties designated primarily for older adults that are owned/operated by Local Housing Authorities. This includes those public housing properties owned by a Local Housing Authority but managed by a private company.
- Privately owned rental properties designated for older adults that are financed in whole or part through resources made available from the Massachusetts Department of Housing and Community Development (DHCD), MassHousing, or the U.S. Department of Housing and Urban Development (HUD), and in which the majority of units are restricted to residents earning less than 80% of Area Median Income.

For information about which *individuals* are eligible, see the eligibility section at end of FAQ document.

### What is the Federal Pharmacy Partnership Program? Can we arrange to have CVS and Walgreens come and host an onsite vaccination clinic through this program?

The Center for Disease Control and Prevention (CDC) launched the [Federal Pharmacy Partnership Program](#) (FPPP) to deploy vaccines to Long Term Care Facilities, including nursing homes, rest homes, assisted living residences, and continuing care retirement communities. The CDC included a select few affordable senior housing properties in the FPPP rollout (i.e., properties funded through the HUD Section 202 Supportive Housing for the Elderly program), [but per the CDC, other low-income affordable housing was not eligible for the FPPP](#). There may be an opportunity to partner with a local CVS, Walgreens or other pharmacy to run a similar clinic at your site, but it will not be through the FPPP. A list of facilities eligible for the FPPP can be found [here](#).

### Do residents or staff have to pay for the vaccine?

**No.** The vaccine is being provided free of charge to all individuals. Insurance companies are also committed to not charging any out-of-pocket fees or co-payments related to COVID-19 vaccine administration, and all health care provider sites that receive COVID-19 vaccine must agree to not charge patients any out-of-pocket fees or deny anyone vaccination services. Residents/staff will be asked to present their insurance card for the vaccine, but no one who lacks health insurance will be turned away.

Can residents or staff who are undocumented immigrants receive the vaccine for free?

**Yes.** The vaccine itself is free for all Massachusetts residents. Health insurance (including Medicare and Medicaid) will cover the cost of administering the vaccine. For patients without health insurance, health care providers may request reimbursement from the federal government for the cost of administering vaccine to undocumented immigrants.

Getting the vaccine will not adversely impact a resident/staff member's immigration status. The federal government has confirmed that it will not consider COVID-19 treatment (including a vaccine) as part of a determination of whether someone is a "public charge" or as it relates to the public benefit condition for certain individuals seeking an extension of stay or change of status, even if the vaccine is paid for by Medicaid or other federal funds.

There are some residents who don't have health insurance currently. Do you need to have health insurance in order to get vaccinated?

**No**, no one can be denied the vaccine regardless of current insurance status. Vaccination providers may, however, request insurance information from those who have it.

Must residents and staff get vaccinated or is this optional?

**The COVID-19 vaccine is voluntary.** Staff and residents of public and private low income and affordable senior housing are not required to get vaccinated. However, for public health and safety, owners/managers should disseminate and display educational resources to encourage residents and staff to get vaccinated. We encourage you to review the [Commonwealth's COVID-19 Vaccine Frequently Asked Questions](#).

Public and Private Low Income and Affordable Senior Housing is now prioritized in Phase 2. When will this start?

The state anticipates that public and private low income and affordable senior housing will be able to start vaccinating in February. Your vaccination partner will likely not be able to give a you date to schedule an onsite clinic until after that time.

What can I do now while I wait for public and private low income and affordable senior housing to be eligible to start vaccinating?

There are several steps an owner/manager can begin now to prepare residents and staff for vaccination and, if appropriate, prepare the property for an onsite clinic.

- Partner with service coordinators, service providers, [local Council on Aging](#), [Aging Services Access Points](#) (ASAPs), tenant councils, and any other local stakeholders to educate residents on the vaccines and vaccination process. Resources to share include the [COVID-19 vaccine FAQ](#) and [the COVID-19 vaccine distribution timeline](#). It is critical to

start educating residents and staff as soon as possible, to improve vaccine take-up rates and address concerns about safety and efficacy without leaving tenants feeling rushed or overwhelmed.

- Review all the FAQs below and determine the approach you think would work best for the property, staff, and residents:
  - Partner with a local health partner to organize and hold an onsite vaccination clinic in the building for residents and staff
  - Partner with a local health partner to organize and hold a vaccination clinic at a different location that is close and easily accessible to residents and staff
  - Provide information and direct residents and staff to COVID-19 vaccine locations open to eligible recipients
- Begin reaching out to potential partners for onsite clinic to understand availability and other requirements.

### How can an Owner/Manager find a partner for vaccination clinics?

Owners/managers may contact existing health care partners, including local pharmacies who have provided regular flu vaccine clinics, and/or local hospitals, health care practices, community health centers, university health centers, ambulance providers or visiting nurse agencies to determine if these partners have the capacity to operate a vaccination clinic onsite at the housing property or the ability to arrange for a special vaccine clinic for your residents at a mutually agreeable location. If you have previously had a flu vaccine clinic onsite, reaching out to that partner is a logical place to start.

Owners/managers may also contact Local Board of Health to ask if there is capacity to come on site to administer vaccines or for the local board of health to dedicate part of a scheduled clinic for your residents.

If an owner/manager is having trouble finding a partner for an onsite clinic, please contact [seniorhousingvaccine@mass.gov](mailto:seniorhousingvaccine@mass.gov)

### What should an Owner/Manager consider when determining whether to host an onsite vaccination clinic in the building?

A number of factors, including what will best meet the needs of your residents, space, and logistical support, should be considered when making this decision.

### Partnership with Local Healthcare Partners

Reach out to potential healthcare partners for onsite vaccination to see if they will be willing to come onsite to vaccinate residents and staff once Phase Two begins and what paperwork they will need from residents. Partners must be willing to come onsite to the building and offer the clinic for both doses – spaced at least 3 weeks apart.

Questions to ask a potential partner include, but are not limited to, the following:

- What are your space requirements?
- What assistance will you need with set up and staffing?
- What paperwork is needed to arrange for an onsite clinic?
- What paperwork is needed from resident/staff who want to get vaccinated? Do you require consent forms? If so, can you provide these forms in advance? How many copies are needed of each form and do all signatures need to be originals?
- Can any consent forms or other vaccine related documents be provided in different languages beyond English?
- Do you require insurance cards? If so, do you need paper copies, or can you scan insurance cards on site?
- Do you need a roster or count of individuals to be vaccinated? How far in advance of clinic do you need this information?
- Can you tell me how many staff you plan to bring and how long do you anticipate it will take to run a clinic at this property?

Owners/managers may want to start working with residents to gather consent forms and insurance documentation now.

If a healthcare partner is unable to provide an onsite vaccination clinic, consider alternative arrangements such as providing a special clinic exclusively for your residents/staff at the partner's office/store. For example, a local pharmacy may be willing to open an hour early in order to provide vaccines to your residents and staff.

### Physical Space and Layout

Identify potential spaces for onsite vaccination. The owner/manager will be responsible for providing adequate space for immunizations and post-immunization observation. Usually this includes a medium sized community room, with areas for vaccination and post-vaccination observation (for at least 15 minutes), all at least 6 feet apart from each other.

If there is not adequate community space in the building, consider going from unit-to-unit. For example, you could have residents place a chair in the hallway in front of their unit and ask the vaccination team to move down the hallway administering vaccines and monitoring post-vaccination (assuming good sightlines down the hallway).

Another option if there is not adequate space in the building is to consider having an offsite clinic at a nearby site that is easily accessible by residents, such as a Senior Center, Library etc. Owners/managers may want to consider arranging for transportation to bring residents to an offsite vaccination clinic.

### How should an Owner/Manager prepare for an onsite vaccination clinic?

Work with your identified partner to set up vaccination protocol, including space, timing, and needed outreach to residents. Confirm that your partner can also manage the 15-minute post-immunization observation period. Alternatively, contact your local Board of Health or Fire Department to see if they can provide medically trained staff for this role.

Ensure that adequate staff are available for clinic for set up, clean up, and to bring residents to and from clinic. This may require paying overtime for certain staff.

Finish gathering required paperwork, if any.

Provide roster of eligible residents and staff to vaccination partner, if needed. Make sure to include information about any volunteers who are assisting with the clinic so that they may get vaccinated as well.

Work with residents and staff to share information about the timing of clinics and distribute available materials about the vaccine and what to expect. Work with service providers including service coordinators, council on aging, or aging services access points to communicate with resident in advance and day of clinic, collect paperwork, etc.

Make a plan for how to accommodate those residents who are frail or unable to leave their apartment for medical reasons and who cannot travel to the community space for the vaccination.

### What does an Owner/Manager need to do on the day of the vaccination clinic?

The owner/manager will be responsible for managing logistics, scheduling, and resident flow. This includes developing a clear path for residents that allows for social distancing throughout the process.

The owner/manager should work with partner to accommodate residents that are unable to leave their apartment, which might include providing for door-to-door distribution of vaccine and attendant staffing for observation, if needed.

### What if an Owner/Manager needs additional help on the day of the vaccination clinic?

Local community based organizations, including local [Councils on Aging](#) and [Aging Services Access Points](#) (ASAPs) may be available to assist you at the clinic.

### Will an Owner/Manager be able to schedule a clinic immediately?

Owners/Managers, as noted above, should work with partners to set up and schedule clinics for when these properties become eligible in Phase Two. There may not be sufficient vaccine

supply, however, for vaccination clinics at all affordable senior housing properties immediately at the start of Phase Two. Owners/managers should remain patient and continue to work with their local vaccination partner as they request their vaccine allocation and schedule clinics.

#### What if some residents refuse the vaccine?

**The COVID-19 vaccine is voluntary.** Owners/managers should anticipate that some of the residents may feel uncomfortable with the vaccine. Linguistically and culturally appropriate outreach from staff or partners may help to bridge this gap. Please see [frequently asked questions](#) for ideas on how to communicate regarding benefits and safety of the vaccines. Owners/managers may also want to encourage residents to discuss the vaccine with their primary health care provider.

#### Are Owners/Managers of public and private low income and affordable senior housing required to hold an onsite clinic?

While this population may best be served by onsite clinics, we understand the logistical issues and administrative tasks may present significant challenge for some owners/managers.

If not able to hold a clinic at a mutually agreeable location, owners/managers can provide information and direct residents/staff to open vaccination sites. Residents and staff may schedule an appointment at a provider location, pharmacy, or a Mass Vaccination Site once the Commonwealth announces the beginning of Phase Two. Current vaccination sites can be found [here](#). Additional pharmacy, health care providers, and mass vaccination sites will come on line in the coming weeks.

Owners/managers should be prepared to provide a letter indicating they are a resident or staff of an eligible property in group one of phase two, if needed as documentation at a vaccination site.

#### What is the cost of doing a clinic and is there any funding available?

There is no fee to hold an onsite clinic, and there should not be any payment from owner to the vaccine provider.

There is no special funding available for owners/managers to set up onsite clinics. Many health providers or pharmacies will be able to seek reimbursement for vaccine administration through health insurance or other government programs.

Potential costs/investments for the property may include the following: additional staffing hours needed to prepare for clinic, equipment rentals of chairs and tents for the clinic, the printing of materials, etc.<sup>1</sup>

### Are there any reporting requirements?

The Commonwealth will request that owners/managers of properties served by this program complete an online form with the results of their on or offsite clinic. Additional information on this form will be released in the coming weeks. We appreciate your effort to provide this reporting, which will help guide state agencies as we track and adjust the vaccine rollout policy.

### Questions on Eligibility:

I thought that the first populations prioritized for Phase two are those individuals who are age 75 or older, are age 65 or older, or have two (2) or more co-morbidities. Is this initiative limited to residents and staff of this housing that meet those definitions?

People who are 75 or older, people who are 65 and older, and people who are living with [two or more co-morbidities](#) are also priority populations in phase two. **All residents and staff** of public and private low income and affordable senior housing, not just those that are 75 and older, 65 and older, or have 2+ co-morbidities, are also considered a priority population for Phase Two.

Some of my residents are 75 or older and eligible for vaccines ahead of the rest of the residents in the building, should they wait for an onsite clinic?

Residents 75 and older may go to Mass Vaccination sites or other providers offering vaccines starting on Monday, February 1<sup>st</sup>. All current vaccination sites can be found [online](#); additional pharmacy, provider and Mass Vaccination sites will come on line in the coming weeks.

If they choose not to get vaccinated at one of these community options, residents who are age 75 and older will still be eligible for vaccination if an owner/manager decides to organize an onsite clinic at the senior housing property. Owner/Managers should inform residents of their options for vaccination. Keep in mind that vaccines require two doses for an individual to be fully vaccinated and it is necessary that the second dose be the same as the first dose.

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<sup>1</sup> For state-aided public housing, DHCD anticipates that most Local Housing Authorities will either bear no costs or be able to absorb this cost within operating budgets, [CARES Act Funding](#), or operating reserves. If you expect to bear significant costs for an onsite clinic and your operating reserve level is below 35%, please contact your Housing Management Specialist for assistance. DHCD will ensure cost is not a barrier for an onsite clinic in state-aided housing.



For public and private low income and affordable senior housing, who can receive a Vaccination when we move into Phase 2?

All residents of an eligible development (as described above) may receive the vaccine as part of phase two.

All staff of an eligible development may receive the vaccine as part of phase two.

Who is considered a “resident” of public or private low income and affordable senior housing?

“Residents” include those household members currently on the lease for a rental unit in public and private independent affordable senior housing, including any younger residents that live in a building that is predominantly senior housing

What about residents that are younger and disabled (e.g., not over the age of 75). Are they considered a resident?

Yes. All residents of an eligible property would be able to receive a vaccine.

Is a minor who is part of a household considered a resident?

Minor household members who are live in an eligible property are considered “residents” but must be eligible per the vaccine manufacturer guidelines. Minor household members who are live in an eligible property are considered “residents” but must be eligible per the vaccine manufacturer guidelines. The Pfizer vaccine is currently approved for people 16 years of age and older. The Moderna vaccine is currently approved for people 18 years of age and older.

I am an Owner/Manager of multiple buildings. If I arrange for a vaccination clinic in an eligible property (as described above), can I invite residents who live in other buildings to attend?

At this time, this program is focused on residents and staff of eligible properties (described above). This guidance may be updated in the future.

Who are considered staff of public or private low income and affordable senior housing?

“Staff” includes all persons, paid or unpaid, working or volunteering at each of the qualified housing locations, who have the potential for exposure to residents or to infectious materials, contaminated environmental surfaces, or contaminated air.

Are individuals that volunteer occasionally in the building, such as volunteers that staff the front desk, considered “staff”?

Yes, if they are regularly scheduled for shifts in the building, they are eligible for the vaccine.

If a resident has a personal care aide that helps them on a regular basis, is that individual considered staff?

Yes. Please note that personal care aides and other home-based health care workers are already eligible to be vaccinated under [Phase 1](#).

What about people who live in buildings that don't meet the definition in #1 above?

Those individuals will be eligible based on their demographic attributes (age, underlying medical conditions, etc.) in this or later phases. For more information, please visit <https://www.mass.gov/info-details/when-can-i-get-the-covid-19-vaccine>.