



December 18, 2020

RE: Prioritizing Vaccinations for Home Dialysis Patients and Their Health Care Providers

To Our Nation's Governors,

The Alliance for Home Dialysis (Alliance) is a coalition of home dialysis stakeholders representing patients, clinicians, providers, and industry that promotes activities and policies that facilitate treatment choice in dialysis care, while addressing systemic barriers limiting access for patients and their families to the many benefits of home dialysis. As such a coalition, we are writing to request that you urge your state health department to prioritize Phase 1 distribution of COVID-19 vaccines to dialysis patients, including those who dialyze at home, and their health care providers, with particular focus given to staff in dialysis facilities.

On December 1, 2020, the Advisory Committee on Immunization Practices (ACIP) met to make their initial recommendations for the COVID-19 vaccination program. ACIP decided on two groups to be prioritized for the first vaccine doses available: healthcare personnel and residents of long-term care facilities.¹ While the Alliance agrees that both of these populations are undoubtedly deserving of placement in the first prioritization group, we were concerned to see that vulnerable individuals with end-stage renal disease (ESRD), including those who rely on home dialysis, were omitted from that group.

The pandemic has illustrated that individuals with ESRD are at dire risk of experiencing a severe illness or mortality stemming from COVID-19. Researchers have identified a strong association between COVID-19 and increased risk of severe illness or death in individuals with ESRD.² In fact, patients on dialysis that develop COVID-19 experience a short-term mortality rate of 20% or higher.³ Dialysis patients also often live with multiple comorbidities, such as heart disease or diabetes, which are associated with more severe COVID-19 disease progression and poorer outcomes.⁴ Additionally, the CDC recognizes that racial minorities, who also happen to suffer from higher rates of ESRD, are disproportionately affected by COVID-19.⁵ Risk of infection is also a considerable issue for dialysis patients. Data from France indicated that during a 7-week surge in cases, the estimated incidence of COVID-19 in the general population was 0.2%, whereas the prevalence in dialysis patients was 3.3%.⁶ While ESRD patients who dialyze at home are afforded an important opportunity to avoid COVID-19 exposure, these vulnerable individuals are still susceptible to severe illness and mortality in the event they do contract COVID-19.

¹ <https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/COVID-02-Dooling.pdf>

² <https://jasn.asnjournals.org/content/31/7/1409>

³ <https://www.kidney-international.org/action/showPdf?pii=S0085-2538%2820%2931203-5>

⁴ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7314621/>

⁵ <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-race-ethnicity.html>

⁶ <https://www.kidney-international.org/action/showPdf?pii=S0085-2538%2820%2931203-5>

The National Academies of Sciences (NAS) has recommended that Phase 1 vaccine prioritization groups include individuals with comorbidities and underlying conditions that put them at significantly higher risk as well as high-risk health care workers.⁷ Moreover, ACIP has identified four ethical guiding principles to inform vaccination allocation – (1) maximize benefits/minimize harm; (2) mitigate health inequities; (3) promote justice; and (4) promote transparency. We believe the National Academies’ recommendation and these principles make clear that ESRD patients belong in the first round of prioritization.

Clinicians and other health care providers are working diligently to protect dialysis patients and reduce the spread of COVID-19. However, both patients and health care professionals need assistance in this challenging mission. By vaccinating both ESRD patients and the health care providers who care for them, we will be taking an important and necessary step toward thwarting this disease and reducing adverse health outcomes. Therefore, we ask that you request your state health department to specify that dialysis patients and the health care professionals and staff who provide services to them be included in the first phase of your state’s vaccine distribution plan.

The Alliance appreciates the work the NGA has done to combat the virus and support home dialysis patients during the pandemic. It is critically important that as vaccines are approved and become available this winter, that states take the next logical step and prioritize vaccinating this highly vulnerable population.

Thank you for your attention to these important matters. Please let us know if we can be of any additional assistance.

Sincerely,

A handwritten signature in cursive script, appearing to read "Stephanie Silverman", with a horizontal line extending to the right.

Stephanie Silverman
Executive Director

⁷ National Academies of Sciences, Engineering, and Medicine. 2020. *Framework for equitable allocation of COVID-19 vaccine*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25917>.



American Association of Kidney Patients
American Kidney Fund
American Nephrology Nurses Association*
American Society of Nephrology*
American Society of Pediatric Nephrology
Baxter*
Cleveland Clinic
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Dialysis Patient Citizens*
Fresenius Medical Care*
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