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Vermont Health Care Organizations Support Prioritizing Incarcerated Persons For COVID-19 Vaccine

The Vermont Medical Society, Vermont Association of Hospitals and Health Systems, Bi-State Primary Care Association, Vermont Program for Quality in Health Care, Vermont Care Partners, Vermont State Dental Society, Vermont Academy of Family Physicians, American Academy of Pediatrics Vermont Chapter and the Vermont Psychiatric Association are dedicated to advancing and protecting the health of all Vermonters. Out of that mission, we write today to thank you for your ongoing commitment to science and data-driven COVID-19 policies. We are also writing to strongly urge you to continue this data-driven approach and prioritize incarcerated individuals for COVID-19 vaccination.

Prioritizing prison staff for vaccine distribution is a step in the right direction but will not adequately stem the spread of COVID-19 within Vermont’s correctional institutions and between prisons and adjacent communities. Due to pre-existing virus in correctional settings, potential for transmissible infection by vaccinated individuals, and variable uptake of vaccine by prison staff, a disproportionately high risk of infection will remain for incarcerated persons. People

who are incarcerated are at high risk of contracting COVID-19 due to cramped conditions and circumstances that do not allow for mitigation strategies, such as distancing. Nationally, and in Vermont, prisons and jails have been the locations of large viral outbreaks. Research has shown that in addition to the risk to individuals who are incarcerated, prisons and jails serve to incubate and disseminate the virus into the general community, because employees move between jails and prisons and the community (Barsky, B. Reinhart. E. Farmer, P. et al. *Vaccination plus Decarceration- Stopping COVID-19 in Prisons and Jails*. New England Journal of Medicine. March 3, 2021.) Prioritized vaccination for prison staff may slow, but will not halt, the spread of virus between prison and community.

According to the non-partisan Marshall Project, one in four people in Vermont's prisons had been infected with COVID-19, which is 10 times the rate of other Vermonters. (Nationally, people who are incarcerated are 5.5 times as likely to be infected with SARS-CoV-2 as the general population in the United States and face three times the risk of death from Covid-19 (Barsky et al. NEJM.)) We are grateful that there have been no documented COVID-19 related deaths among Vermont prisoners. The current plan of vaccine access for incarcerated people by age band and chronic illness means disproportionate burden of COVID infection and sequelae will continue to impact incarcerated Vermonters who are ten times as likely to contract COVID-19 than the Vermonters living in the community.

The American Medical Association, the largest association of physicians in the United States, among other prominent national organizations, has called for incarcerated people to be prioritized in receiving access to safe, effective COVID-19 vaccines. (*AMA policy calls for more COVID-19 prevention for congregate settings*. <https://www.ama-assn.org/press-center/press-releases/ama-policy-calls-more-covid-19-prevention-congregate-settings>.) Black people, who are at a heightened risk of both contracting and dying from COVID-19, constitute only 1.4% of the state population but 9.5% of the Vermont prison population and approximately 20% of positive COVID-19 cases in corrections, as of the latest data on the DOC website. (*Daniel Felde: When the vaccine arrives, Vermont must prioritize incarcerated people*. 12/2/2020. VT Digger; see also https://doc.vermont.gov/sites/correc/files/documents/COVID19RiskFactors_6-15-20.pdf) Vaccination prioritization for people who are incarcerated is an issue of health equity and medical justice as well as a practical and common sense approach to slowing the spread of Coronavirus.

In Vermont there are fewer than 1500 individuals incarcerated. (<https://doc.vermont.gov/content/population-data>). Logistically, it may be more practical to offer vaccine to whole prison and jail populations at once than to coordinate vaccination by age. As wards of the state, the state also has a different level of responsibility for incarcerated people and their welfare, than the general population. Because of new vaccine preparations coming online, Vermont may have access to more vaccine doses than anticipated. This may allow for vaccination of incarcerated persons in Vermont without causing delays to other groups.

Thank you again for your ongoing commitment to respond to the latest needs and data in Vermont's response to COVID-19. The State's small size and nimbleness in response is no doubt one of the factors why our positivity rate and mortality rate has remained low. We ask you to respond to the latest outbreak in Newport by disseminating the increasing supply of vaccine that the State is receiving to this vulnerable population.

Please reach us at any time at president@vtmd.org if we can respond to any further questions.