

The Honorable Frank Pallone Jr.
Chair, House Energy and Commerce
Committee
2125 Rayburn House Office Building
Washington, DC 20515-6115

The Honorable Cathy McMorris Rodgers
Ranking Member, House Energy and
Commerce Committee
2125 Rayburn House Office Building
Washington, DC 20515-6115

The Honorable Richard Neal
Chair, House Ways and Means Committee
1102 Longworth House Office Building
Washington, DC 20515

The Honorable Kevin Brady
Ranking Member, House Ways and Means
Committee
1102 Longworth House Office Building
Washington, DC 20515

The Honorable Ron Wyden
Chair, Senate Finance Committee
219 Dirksen Senate Office Building
Washington, DC 20510-6200

The Honorable Mike Crapo
Ranking Member, Senate Finance
Committee
219 Dirksen Senate Office Building
Washington, DC 20510-6200

To the Honorable Chairs and Ranking Members:

The 60 undersigned advocacy organizations are writing to ask for your support of HR 2080, the Seniors Access to Vaccines Ensured (SAVE) Act of 2021. This commonsense legislation will create a temporary Medicare non-emergency medical transportation (NEMT) benefit during the length of the public health emergency to transport seniors and persons with disabilities to and from COVID vaccination appointments. This legislation would be limited to those beneficiaries that do not already qualify for NEMT through dual-eligibility status and do not have access to other transportation options.

According to data from the Kaiser Family Foundation, only about 12 percent of Medicare beneficiaries are full Medicare-Medicaid dual-eligibles and, thus, have coverage for Medicaid's non-emergency transportation benefit. This means over 30 million Medicare beneficiaries do not have access to medical transportation through Medicare.¹ While many of these beneficiaries have other transportation options, this temporary benefit will provide a lifeline to the small subset of beneficiaries unable to get to and from their vaccination appointments. This could be particularly important for our rural constituents who may lack access to adequate public transportation to reach vaccination sites.

It is vital that we do everything we can to protect our most vulnerable seniors. According to data from the Centers for Disease Control and Prevention (CDC), individuals aged 65-74 are five times more likely to be hospitalized and 90 times more likely to die from COVID-19 than younger

¹ <https://www.kff.org/medicaid/state-indicator/dual-eligible-beneficiaries/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>

individuals.² The SAVE Act of 2021 will help make sure these high-risk individuals have access to the protection they need.

In addition, data from the American Hospital Association (AHA) indicates that the lack of medical transportation is the leading cause of patient no-shows.³ Although we have seen a bipartisan commitment to addressing social determinants of health like transportation in recent years, we must ensure that this commitment extends to seniors and persons with disabilities having adequate access to COVID-19 vaccines. If we expect to protect seniors and persons with disabilities and reach adequate immunization levels, we must remove every possible barrier to getting vaccinated.

We thank you in advance for giving this request your fullest consideration.

Sincerely,

AIDS Action Baltimore
AIDS Alabama
AIDS Alabama South
AIDS Foundation of Chicago
Allies for Independence
American Academy of HIV Medicine
American Association of People with Disabilities
American Association on Health and Disability
American Federation of County and Municipal Employees
American Kidney Fund
American Network of Community Options and Resources
American Public Transportation Association
American Therapeutic Recreation Association
Amida Care
The Arc of the United States
Association of Programs for Rural Independent Living (APRIL)
Autistic Self Advocacy Network
California Dental Association
Center for Autism and Related Disorders
Center for Public Representation
Children's Health Fund
Community Catalyst
Community Transportation Association of America
Dialysis Patient Citizens
Disability Rights Education and Defense Fund

² <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/older-adults.html>

³ <https://www.acuity-link.net/social-determinants-of-health-minding-the-transportation-gap-in-healthcare>

Easterseals
Equality NC
Families USA
First Focus Campaign for Children
Global Alliance for Behavioral Health and Social Justice
Greater WI Agency on Aging Resources, Inc. (GWAAR)
Justice in Aging
HIV Dental Alliance
HIV Medicine Association
Hudson Valley Community Services
Lakeshore Foundation
Los Angeles LGBT Center
Lutheran Services in America
Medicare Rights Center
Mental Health America
National Adult Day Services Association (NADSA)
National Alliance on Mental Illness
National Association for Children's Behavioral Health
National Association of Area Agencies on Aging (N4A)
National Association of Nutrition and Aging Services Programs (NANASP)
National Council on Aging
National Healthcare for the Homeless Council
Nevada Disability Coalition
Pennsylvania Council on Independent Living
Planned Parenthood of California
Schizophrenia and Related Disorders Alliance of America
SKIL Resource Center
The Michael J. Fox Foundation for Parkinson's Research
The Transportation Alliance
Treatment Action Group
Treatment Communities of America
United Spinal Association
WI Association of Mobility Managers (WAMM)
Wisconsin Aging Advocacy Network (WAAN)
Wyoming Patients Coalition

cc:

Samantha Satchell, Professional Staff Member
House Energy and Commerce Committee

Caleb Graf, Deputy General Counsel
House Energy and Commerce Committee

Amy Hall, Staff Director
House Ways and Means Committee
Jay Gulshen, Professional Staff Member
House Ways and Means Committee

Beth Vrabel, Deputy Chief Counsel/Senior Health Counsel
Senate Finance Committee

Brett Baker, Deputy Health Policy Director
Senate Finance Committee