



December 2, 2020

Alex M. Azar II  
Secretary  
Department of Health and Human Services  
Attention: CMS-9912-IFC  
P.O. Box 8016  
Baltimore, MD 21244-8016

Dear Secretary Azar,

The American Optometric Association (AOA) represents more than 44,000 doctors of optometry, optometric professionals, and optometry students. Throughout the pandemic our doctors have been providing eye health and vision care to patients across our country. The AOA appreciates the opportunity to comment on the Interim Final Rule regarding implementation of section 3713 of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) (Pub. L. 116-136). With the COVID-19 vaccination potentially being administered as early as this year, this rule is of critical importance.

### **Vaccine Reimbursement**

The Department of Health and Human Services (HHS) has indicated that Medicare payment rates for COVID-19 vaccine administration will be \$28.39 to administer single-dose vaccines. For a COVID-19 vaccine requiring a series of 2 or more doses, the initial dose(s) administration payment rate will be \$16.94, and \$28.39 for the administration of the final dose in the series. HHS has clarified that these rates recognize the costs involved in administering the vaccine, including the additional resources involved with required public health reporting, conducting important outreach and patient education, and spending additional time with patients answering any questions they may have about the vaccine. We fully support the proposal to compensate health care workers, even if the vaccine is furnished to the provider at no cost. Health care providers have taken on incredible risk and additional costs to continue to offer health care to all Americans throughout the pandemic. The administration of the vaccine is a continuation of this work and should be adequately reimbursed.

We also support policies in place to ensure vaccine administration reimbursement under additional payers such as Medicaid and private payers. We agree with HHS that Medicare reimbursement should be the minimum reasonable amount reimbursed for provision of the vaccine. We also support this reimbursement model for out of network providers as outlined in the Rule. These are reasonable policies that we are hopeful will ensure many Americans are able to quickly receive the vaccination once available.

### **Vaccine Administration**

It is appropriate for HHS not to impose federal level restrictions on the provider types eligible to provide the COVID-19 vaccination. We also strongly support the HHS directive to states to “Assess the provider types that can administer immunizations in your state” and “consider whether there should be expansions of providers, including mass immunizers.”<sup>1</sup> Doctors of optometry are the primary care eye doctor.

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<sup>1</sup> <https://www.medicaid.gov/state-resource-center/downloads/covid-19-vaccine-toolkit.pdf>

Ninety-nine percent of Americans live in a county with a doctor of optometry.<sup>2</sup> Overall more than 90% of the U.S. Medicare beneficiary population lives within 15 minutes of a doctor of optometry.<sup>3</sup> Doctors of optometry in some states are eligible by their scope of practice to provide vaccinations. Additionally, doctors of optometry in 19 states<sup>4</sup> are already authorized to administer injections. In an additional 22 states, doctors of optometry are authorized to provide anaphylaxis through injection. Thousands of doctors of optometry are CPR certified as required by the state law, and many more seek this certification as part of their overall commitment to best serving patients. Providing doctors of optometry administration authority for the COVID-19 vaccine would mean bringing quick and easy access to the vaccine to 99% of the population, and 90% of our country's most vulnerable patients. We continue to work with state officials to ensure doctors of optometry can provide vaccinations and appreciate the support of HHS to encourage a much needed reevaluation of each state's allowed immunizers.

## **Vaccine Prioritization**

The range of key roles and responsibilities of doctors of optometry, as part of the COVID-19 public health response, include diagnosis and treatment of vision and eye health emergencies, ocular and adnexa injuries and disorders. Doctors of optometry also respond to traumatic concussions, remove foreign bodies in the eye, provide biologic and tissue sampling, treat traumas/lacerations, provide general diabetes and hypertensive care and basic primary medical care.<sup>5</sup> Our AOA Health Policy Institute (HPI) data describe that during less than one month early in the pandemic, doctors of optometry provided urgent and emergency care to approximately 206,627 individuals.<sup>6</sup> Doctors of optometry also reported 60% of the patients they treated during the early stages of the pandemic would have otherwise sought care at an emergency department or urgent care center had the optometry practice not been providing essential, urgent or emergency care during the surveyed time period. Our data further describe a 300% increase in doctors of optometry reporting that they or their staff had been diagnosed or tested positive for COVID-19 (during a three-month period from June to September). Our doctors have played, and continue to play, a high-risk front-line role in supporting Americans throughout the current public health emergency.

Communities rely on America's doctors of optometry and other physicians to be there for them in times of emergencies. Whether that emergency develops in the form of a natural disaster, such as a flood or hurricane, or as a virus, like SARS-CoV-2, doctors of optometry and other front-line providers are prepared to fulfill their commitment to their patients. While our doctors and their staff will continue to do all they can to address eye and vision care needs in our communities, we believe that ensuring health care workers, including doctors of optometry and their staff, are prioritized for vaccinations in phase 1a is critical to the overall health of our country. Already, 43% of doctors of optometry report a health decline in their patients with chronic conditions due to the lack of regular care since the pandemic.<sup>7</sup>

We understand that HHS is relying on state public health departments to assess how best to prioritize the vaccination. When evaluating potential interruptions to the normal supply of essential services, specific provisions for the uninterrupted integration of vision and eye health resources by doctors of optometry and their staff should be prioritized. The CDC has also recommended that populations of focus for initial

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<sup>2</sup><https://www.aoa.org/AOA/Documents/Advocacy/HPI/County%20Data%20Demonstrates%20Eye%20Care%20Access%20Nationwide.pdf>

<sup>3</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5608548/>

<sup>4</sup> <https://communityforvision.com/ce-requirements-state/>

<sup>5</sup> [https://www.aoa.org/AOA/Documents/Advocacy/HPI/HPI\\_Doctors%20of%20Optometry%20in%20COVID-19%20Preparedness%20Response%20and%20Recovery.pdf](https://www.aoa.org/AOA/Documents/Advocacy/HPI/HPI_Doctors%20of%20Optometry%20in%20COVID-19%20Preparedness%20Response%20and%20Recovery.pdf)

<sup>6</sup> <https://www.aoa.org/AOA/Documents/Advocacy/HPI/Emergency%20Department%20Diversion%20Brief.pdf>

<sup>7</sup> <https://www.aoa.org/AOA/Documents/Advocacy/HPI/Nationwide%20Pandemic%20Impact%20on%20Optometry%20Practices%20HPI%203rd%20Survey%20Report.pdf>

COVID-19 vaccine doses should include health care personnel. We believe doctors of optometry and their staff members should be prioritized for the vaccine as part of the health care team in order to continue to best serve the eye health needs of Americans.

The AOA's member doctors stand ready to assist the public and aid the nation's health care community in the response to the COVID-19 outbreak. If additional information is needed, please contact Kara Webb, Director of Coding and Regulatory Policy, at [kcwebb@aoa.org](mailto:kcwebb@aoa.org).

Sincerely,

A handwritten signature in black ink that reads "William T. Reynolds O.D." The signature is written in a cursive style with a clear "O.D." at the end.

William T. Reynolds, O.D.  
AOA President