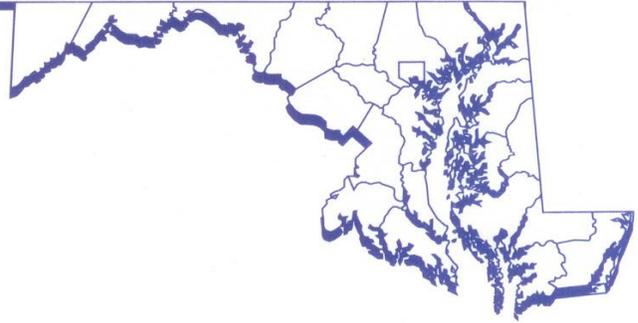


Maryland Association of
COUNTY HEALTH OFFICERS

an affiliate of Maryland Association of Counties, Inc.



March 22, 2021

Acting Deputy Secretary Chan:

The COVID-19 pandemic has further exposed the persistent, significant health inequities and disparities in our state. These disparities are evident in COVID-19 related cases and deaths in Maryland and they are evident in vaccine coverage. When we examine how race, ethnicity, and geography direct and influence life expectancy for Marylanders, the picture worsens. Each jurisdiction has its own unique health disparities, overlaid with additional negative influencers such as income or immigration status that further complicate the reality in each community. Following last year's unrest and calls for justice, MACHO established an Equity Committee and began work on outlining what that work should look like. This letter represents the beginning of this work.

Long-standing systemic health and social inequities have put many people from racial/ethnic minority groups and low-income communities at higher risk of contracting and experiencing significant COVID-19 related illness. Inequities in the social determinants of health, such as healthcare access, affecting these groups are interrelated and influence a wide range of health and quality-of-life outcomes and risks. To achieve health equity, particularly in the context of the pandemic response and vaccine distribution, barriers must be removed so that everyone has fair access to vaccines and their improved health outcomes.

We urge Maryland to take the following actions to improve vaccine distribution equity and to lay the foundation for longer-term work to address the systemic influences on equity:

- Provide a detailed strategy to focus vaccination distribution to low income neighborhoods and communities that may lack the technology infrastructure for online registration platforms;
- Prioritize equity, as much as speed, in vaccine dose distribution;
- Publish disaggregated vaccination data by vaccine provider and county;
- Consider alternative options for distribution/allocation based on highly impacted zip codes within each jurisdiction;
- Consider alternative models of prioritization, such as age-based distribution, or having lower age requirements for racial and ethnic minorities, given the disproportionate impact of COVID-19 and disparities by life expectancy; and
- Optimize local allocations of vaccine as regional vaccine sites necessitate access to private transportation and jobs that allow for extended time off.

Respectfully submitted,
Maryland Association of County Health Officers