

CANCER LEADERSHIP COUNCIL

A PATIENT-CENTERED FORUM OF NATIONAL ADVOCACY ORGANIZATIONS
ADDRESSING PUBLIC POLICY ISSUES IN CANCER

March 1, 2021

Jose Romero, MD
Chair
Advisory Committee on Immunization Practices
Centers for Disease Control and Prevention
1600 Clifton Road NE, Mailstop A27
Atlanta, GA 30329-4027

Re: CDC 2021-0021, Advisory Committee on Immunization Practices (ACIP),
February 28-March 1, 2021

Dear Dr. Romero:

The undersigned organizations representing cancer patients, providers, and researchers are writing to offer our perspective on progress in the COVID-19 vaccination of cancer patients and others with serious health conditions. We also recommend actions that could be taken to accelerate the vaccination of cancer survivors, who are at risk of poor outcomes from COVID-19.

We appreciate the work of the Advisory Committee on Immunization Practices (ACIP) during the coronavirus pandemic; we realize that the committee's workload has been significant as you developed an allocation plan for COVID-19 vaccines and have now reviewed and recommended usage of three COVID-19 vaccines subject to emergency use authorization. We commend the evidence-based approach that you have taken to the difficult decisions related to the use of COVID-19 vaccines, decisions that you had to make on an emergency basis.

The Centers for Disease Control and Prevention (CDC) has identified cancer as one of several serious conditions that place adults of any age at increased risk of serious illness from the virus that causes COVID-19.¹ This identification is consistent with the evidence regarding the increased risk of serious COVID-19 illness among cancer patients, with growing evidence of an especially significant risk for hematological cancer patients and lung cancer patients.

¹ List of People with Certain Medical Conditions, accessed on February 28, 2021, at <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>.

Individuals with high-risk medical conditions are recommended for vaccination in phase 1c of the vaccination program.² We have previously urged the ACIP to provide additional guidance to the states recommending that they adhere to the allocation phases outlined by ACIP and to ensure that access to vaccines for those with serious conditions is not delayed while those not included in phase 1 of the vaccination program receive vaccines.

In the few weeks since we identified the pressing need for cancer patients to be vaccinated, these individuals have been confronted by confusing allocation rules and overloaded and hard-to-navigate registration systems for booking vaccination appointments. The 1c phase of the vaccination program has not provided cancer patients access to vaccine in many states. Instead, some states have indicated that they will expand vaccination categories by lowering the eligible age for vaccination, and it has been suggested that more states may follow that system. This age-based system will bypass the evidence-based priority for people with serious underlying health conditions. This will place access to vaccines out of the reach of more and more cancer patients, with access available only when they qualify by age. An age-based vaccination allocation roll-out will delay unreasonably the access of younger adults with cancer to COVID-19 vaccines.

It has also been suggested that at least some states see an age-based allocation system as easier to administer than one that requires some Americans to demonstrate that they are eligible for vaccines due to a serious underlying medical condition. We urged the National Academy of Medicine and we have urged the ACIP to provide guidance to states on implementation of a system that would make it easy for patients to provide evidence of, or attest to, their underlying medical condition. Because the states have no guidance on this issue, some seem to be willing to avoid altogether providing access to vaccines based on serious health conditions.

We propose a solution to the problem of ensuring that those receiving vaccines because of their cancer diagnosis truly qualify under phase 1c. We recommend that states be encouraged to distribute vaccines to cancer care providers for those providers to vaccinate their patients in situations where the practices are willing and able. Engaging cancer care providers would address the challenge of how patients demonstrate that they have a serious underlying health condition qualifying them for vaccination in states that require it. In addition, it will ensure that cancer patients have a discussion with their care team about whether they should receive a COVID-19 vaccine. We do not believe the logistics of this proposal – shipping locations, estimates of vaccine need for cancer patients, and distribution to providers in all areas of a state, including underserved areas – are insurmountable. We realize it will not be possible for all cancer care providers to offer this service. Therefore, any implementation should be voluntary. This structure could prove effective in many communities. Our diverse community of providers, patients, and researchers stands ready to assist with technical expertise and on-the-ground presence.

² Evidence Table for COVID-19 Vaccines Allocation in Phase 1b and 1c of the Vaccination Program, accessed on February 28, 2021, <https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19/evidence-table-phase-1b-1c.html>.

We make these recommendations fully aware of limits on the vaccine supply and the impact of supply limitations on the ability to accelerate the pace of vaccination. We also acknowledge the progress that the nation is making in its vaccination effort, with more vaccinations occurring almost every day. Finally, we know that cancer patients are not alone in their wish to be vaccinated as soon as possible. We simply ask that a priority group for vaccination identified early in the allocation process – those with serious health conditions – not be ignored by states because they prefer an age-based allocation system.

Thank you for considering our advice regarding cancer patients' access to COVID-19 vaccination.

Sincerely,

Cancer Leadership Council

Academy of Oncology Nurse & Patient Navigators
American Society for Radiation Oncology
Association for Clinical Oncology
CancerCare
Children's Cancer Cause
Family Reach
Fight Colorectal Cancer
International Myeloma Foundation
LUNgevity Foundation
Lymphoma Research Foundation
National Coalition for Cancer Survivorship
Ovarian Cancer Research Alliance
Prevent Cancer Foundation
Susan G. Komen