



December 17, 2020

Demetrios Kouzoukas  
Principal Deputy Administrator, CMS  
Director, Center for Medicare  
U.S. Department of Health and Human Services  
Hubert H. Humphrey Building  
200 Independence Avenue, SW  
Washington, DC 20201

Re: Vaccine Administration in the Dialysis Patient and Provider Community

Dear Deputy Administrator Kouzoukas:

The Renal Physicians Association (RPA) is the professional organization of nephrologists whose goals are to ensure optimal care under the highest standards of medical practice for patients with kidney disease and related disorders. RPA acts as the national representative for physicians engaged in the study and management of patients with kidney disease. Part of RPA's mission is to promote excellence in the delivery of high-quality kidney care within an environment that supports patient access to care and safety.

We are writing to urge CMS to take every measure necessary to facilitate the administration of vaccines for COVID-19 to dialysis patients and the dialysis health care workforce. RPA recommends that the following specific steps be taken to achieve this objective: (1) assign all dialysis patients and dialysis workforce members to the '1a' category of vaccine distribution to optimize the safety of dialysis patients and the dialysis facility staff with whom they have regular and close proximity interactions; (2) designate dialysis facilities as an approved site for vaccine administration, to leverage the existing infrastructure to ensure that this highly vulnerable patient population and the frontline workers providing their care receive their vaccinations as expeditiously as possible; and (3) communicate to all 50 states and the associated public health jurisdictions the urgency of addressing the logistics of vaccine distribution to the dialysis patient and workforce community.

Further, we urge CMS to include patients with chronic kidney disease (CKD) and those who have received kidney transplants in the 1a category as well. Not only would inclusion in that

category reflect high quality patient care, it would also be a fiduciarily responsible decision for the Medicare program, as prospective and past expenditures across the spectrum of kidney disease would likely be positively affected by early vaccination of these patient sub-populations.

RPA appreciates the deep commitment of this Administration to kidney care in the U.S. and we believe that implementation of the objectives outlined above would represent a logical extension of the truly historic accomplishments in changing the kidney care paradigm that have occurred in recent years.

As always, RPA welcomes the opportunity to work collaboratively with CMS in its efforts to improve the quality of care provided to the nation's kidney patients, and we stand ready as a resource to CMS in its future work on issues related to vaccine administration during the public health emergency. Any questions or comments regarding this correspondence should be directed to RPA's Director of Public Policy, Rob Blaser, at 301-468-3515, or by email at [rblaser@renalmd.org](mailto:rblaser@renalmd.org).

Sincerely,

A handwritten signature in black ink, reading "Jeffrey A. Perlmutter, MD". The signature is fluid and cursive, with a stylized "J" and "P".

Jeffrey A. Perlmutter, MD  
President