



CONGRESSIONAL HISPANIC CAUCUS  
117<sup>TH</sup> CONGRESS

April 22, 2021

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Xavier Becerra  
Secretary  
U.S. Department of Health and Human Services (HHS)  
Washington, DC 20201

Jeffrey Zients  
White House Coronavirus Response Coordinator  
Washington, DC 20230

CC: Co-chairs Dr. David Kessler, Dr. Vivek Murthy, and Dr. Marcella Nunez-Smith

Dear Secretary Becerra and Mr. Zients,

We write to you with great concerns regarding the ongoing coronavirus (COVID-19) pandemic and COVID-19 vaccinations and testing in Hispanic and immigrant populations in our districts and across the country. The COVID-19 pandemic has highlighted long-standing systemic health, social, and economic inequities that continue to disproportionately impact Hispanics and immigrants. We urge the Biden-Harris Administration to swiftly work to ensure that Hispanic and immigrant communities have equitable access to COVID-19 vaccines and testing. The distribution of vaccinations and ongoing testing is necessary to protect the lives and livelihoods of all Americans.

Hispanics are more likely to be infected, more than three times as likely to be hospitalized, and more than twice as likely to die from COVID-19 compared to their White counterparts.<sup>1</sup> Additionally, a large portion of our nation's undocumented immigrant population continues to serve as a critical part of our essential workforce.<sup>2</sup> The disproportionate and unjust burden of the coronavirus pandemic on Hispanics demonstrates the need for the Biden-Harris Administration to work to help eliminate these inequities and ensure the well-being of Hispanic and immigrant communities.

<sup>1</sup> <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-race-ethnicity.html>

<sup>2</sup> <https://www.americanprogress.org/issues/immigration/reports/2020/12/02/493307/protecting-undocumented-workers-pandemics-front-lines/>

There are unique barriers that Hispanic and immigrant communities face regarding vaccination and testing, including a lack of reliable information in their languages, misinformation, and fear of deportations. Absent adequate

communication, these communities may be hesitant to access critical COVID-19 services and share personal information out of fear of potential consequences, such as the inability to adjust their immigration status due to public charge policies.<sup>3</sup>

We are grateful for President Biden's leadership and the steps the Administration and HHS have taken to address vaccine equity and testing to help stop the spread of the coronavirus. Efforts to overcome health inequities during the pandemic can be especially challenging. As CHC Members, we have compiled further steps and recommendations that can help the Administration's COVID-19 Task Force and HHS address vaccine and testing equity in Hispanic and immigrant communities:

- The Biden-Harris Administration should directly fund a greater number of trusted community organizations connected to Hispanic and immigrant communities to directly communicate the importance of getting vaccinated and help overcome the barriers they face.
- The Department of Health and Human Services (HHS) should provide robust and dedicated funding for outreach and education efforts focused on Hispanic and immigrant communities.
- HHS should work with vaccine providers to limit the collection of personal data, ensure that any data that needs to be collected is protected, and prohibit data collection on immigration status or place of birth to address vaccine hesitancy.
- HHS should ensure that no one is denied a vaccine because they lack identification or eligibility documentation.
- HHS should ensure that the Centers for Disease Control and Prevention (CDC) has a plan for when and how to translate and disseminate COVID-19 documents in other languages and ensure that people with Limited English Proficiency (LEP) have access to interpretation services at testing, treatment, and vaccination sites.
- HHS should increase education efforts about location of available COVID-19 treatments for individuals who test positive, including awareness and resources for providers who treat vulnerable populations and improved and more immediate coordination of testing and treatment.
- HHS must issue and enforce standards that ensure immigrants are not adversely affected by the creation of vaccine certification documents or "passports," including ensuring data security is ironclad and unavailable to data aggregation companies or law and immigration enforcement, that such documentation is equally available to limited English proficient populations, and that no one has their movement or access to services restricted as a result of vaccine inequities.
- HHS should work to increase the number of mobile vaccination sites in underserved communities, including rural, farmworker, and communities with large immigrant populations.
- HHS and the CDC should systematically apply feedback from immigrant and minority populations to design and continuously improve vaccine management and other preventive health programs.

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<sup>3</sup> <https://protectingimmigrantfamilies.org/immigrant-eligibility-for-public-programs-during-covid-19/>

- The CDC should uplift states that have stated proactively that immigration status does not affect a person’s eligibility to get vaccinated and encourage other states to follow suit.
- The CDC should develop and disseminate best practices for vaccination sites in areas with large immigrant populations.
- The Health Resources and Services Administration (HRSA) should ensure that providers, as well as state and local jurisdictions, understand that there are no immigrant eligibility restrictions for the provider relief fund (PRF), and that Social Security Numbers, driver’s licenses and ID cards are not required to process a claim. Similarly, any provider asking for this information must make clear that it is optional to recipients.
- The Department of Labor (DOL) and the Occupational Safety and Health Administration (OSHA) should ensure that food and agriculture industries are included in vaccine priority groups and encourage states to follow that guidance. In addition, DOL should encourage employers to provide their employees paid time off for the purpose of receiving the COVID-19 vaccine to safeguard public health.
- The Department of Homeland Security (DHS) should work with HHS to disseminate translated, community-facing information stating that it will not engage in immigration enforcement at or near COVID-19 testing or vaccination sites, including hospitals and clinics, and that there are no immigration consequences, such as public charge, from receiving COVID-19 vaccines, testing or treatment.
- HHS should work with its Mexican counterpart, or the U.S.-Mexico Border Health Commission, to develop a binational COVID-19 plan addressing contact tracing, testing, and vaccine distribution on both sides of the southern border.
- DHS and the HHS Office of Refugee Resettlement must have agency-wide plans to vaccinate people in their custody and children in their care and adhere to basic humanitarian standards that go beyond relying on local community health departments for vaccine provisions.

It is critical that the Biden-Harris Administration do everything in its power to ensure immigrant and Hispanic communities can access COVID-19 vaccines. The CHC stands ready to assist the task force in these efforts.

Sincerely,

Raul Ruiz, M.D.  
Chair  
Congressional Hispanic Caucus

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First Vice-Chair  
Congressional Hispanic Caucus

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Jesús G. "Chuy" García  
Member of Congress