



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Refugee Resettlement | 330 C Street, S.W., Washington, DC 20201
www.acf.hhs.gov/programs/orr

COVID-19 Vaccinations and the Role of ORR Grantees

Dear Colleague Letter 21-05

February 26, 2021

Dear Colleague:

This Dear Colleague Letter (DCL) promotes vaccine equity for resettled refugees during the U.S. COVID-19 vaccination campaign, by: (a) clarifying current ORR policies supporting vaccination efforts and (b) encouraging existing ORR grantees to provide outreach, education, and support to ORR-eligible populations about the importance and means of getting vaccinated against COVID-19.

COVID-19 Vaccine Rollout and Vaccine Coverage

The Centers for Disease Control and Prevention (CDC) provides [recommendations](#) about who should be vaccinated first since the initial U.S. vaccine supply is limited. Although CDC makes recommendations, each state prepares and implements its own plan for prioritizing and providing vaccinations. ORR-eligible populations may be included in various phases under these CDC recommendations and state vaccination plans. ORR-eligible populations may be:

- **Healthcare personnel or residents of long-term care facilities** (Phase 1a), who should be offered the first doses of COVID-19 vaccines
- **Frontline essential workers** (Phase 1b) in the food, agriculture, and manufacturing industries or as grocery store and daycare workers
- **Aged 75 years old or older** (Phase 1b) or **aged 65 –74 years** (Phase 1c)
- **Aged 16–64 years with underlying medical conditions** (Phase 1c)
- **Other essential workers** (Phase 1c), such as in food service and construction

[ORR PL 21-01](#) allows states to use RMA funds to cover the costs of the COVID-19 vaccine, including vaccine administration, if it is not covered by another federally funded program (e.g., Medicaid). However, during the pandemic emergency, the federal government is already providing the vaccine free of charge to all people living in the United States, though vaccination providers can be reimbursed for vaccine administration fees by the patient's public or private insurance company, or for uninsured patients, through the [COVID-19 Uninsured Program](#).

Role of ORR Grantees

ORR encourages its grantees to utilize every opportunity in their regular activities to complement the U.S. COVID-19 vaccination campaign, by helping ORR-eligible populations understand the benefits of the COVID-19 vaccine, when they are eligible to receive the vaccine, and how and where they can get vaccinated.

In accordance with [ORR PL 16-05](#), ORR encourages State Refugee Coordinators (SRCs) and Refugee Health Coordinators (RHCs) to collaborate with health departments, vaccination providers, and community organizations, to facilitate ORR-eligible populations' access to

COVID-19 vaccines as states implement their rollout plans. SRCs/RHCs should ensure service providers have culturally and linguistically appropriate vaccine education materials. The [CDC COVID-19 in Newly Resettled Refugee Populations](#) and the CDC-funded [National Resource Center for Refugees, Immigrants, and Migrants \(NRC-RIM\)](#) websites are key resources for up-to-date and accurate information.

During this pandemic emergency, ORR encourages its grantees to incorporate COVID-19 vaccine education, outreach, and assistance in their regular or expanded programs and activities:

- The **initial medical screening** is an opportunity for screening providers to provide education about COVID-19 vaccine benefits. ORR encourages SRCs/RHCs to ensure every screening clinic includes appropriate education about the importance of the COVID-19 vaccines and information on how to get vaccinated, especially if clients are eligible under their state's vaccination plans.
- The [Refugee Health Promotion \(RHP\)](#) program not only allows for routine health promotion, but also specifically allows for health promotion activities during times of crisis (e.g., pandemics). ORR encourages state refugee programs to assess for any gaps in vaccination support services (e.g., case management, interpretation, transportation, outreach, and education) where RHP may be used to improve vaccine access.
- The [Preferred Communities \(PC\)](#) program provides intensive case management for clients who may have underlying medical conditions that put them at higher risk for complications from COVID-19. PC programs should ensure clients receiving intensive case management are aware of the benefits of vaccines and when they are eligible to receive the vaccine, should assist them in making vaccination appointments, and should provide support services as appropriate.
- [Ethnic Community Self-Help](#) grantees and other ethnic community-based organizations (ECBOs) can play a crucial role in vaccine education and outreach to alleviate vaccine hesitancy among ORR-eligible populations.
- The [Matching Grant \(MG\)](#) program helps ORR-eligible populations prepare for jobs that may be as frontline essential workers or in other essential work. MG programs should incorporate vaccine education into their employment services as appropriate.
- The [Refugee Support Services \(RSS\)](#) program often helps ORR-eligible populations prepare for jobs as frontline essential workers or in other essential work. RSS programs should incorporate vaccine education into their employment services as appropriate.
- The [Services to Older Refugees \(SOR\)](#) program serves the population hardest hit by COVID-19. SOR programs should conduct vaccine education and provide direct assistance in getting elderly populations vaccinated as appropriate.

In addition, ORR grantees should continue to promote other measures to mitigate the spread of COVID-19 by emphasizing hand washing, maintaining physical distance from others, and wearing face masks, as well as to support testing and contact tracing efforts.

Refugee service providers should work with their state refugee programs to address barriers disproportionately impacting their clients' ability to access COVID-19 vaccines. If SRCs/RHCs

are unable to resolve these challenges, please contact Curi Kim, Director of the Division of Refugee Health, at Curi.Kim@acf.hhs.gov.

Sincerely,

Kenneth Tota
Acting Director
Office of Refugee Resettlement