



1919 University Avenue W., Suite #500 | Saint Paul, MN 55104
1-866-554-5381 | Fax: 651-644-5539 | TTY: 1-877-434-7598
aarp.org/mn | aarpmn@aarp.org | twitter: @aarpmn
facebook.com/AARPMinnesota

February 23, 2021

The Honorable Tim Walz
Governor, State of Minnesota
130 State Capitol
75 Rev Dr. Martin Luther King Jr. Blvd.
St. Paul, MN 55155

Dear Governor Walz:

AARP Minnesota, on behalf of its nearly 640,00 members and Minnesotans of all ages, is calling on state leaders to continue to make improvements to its statewide COVID vaccination plan.

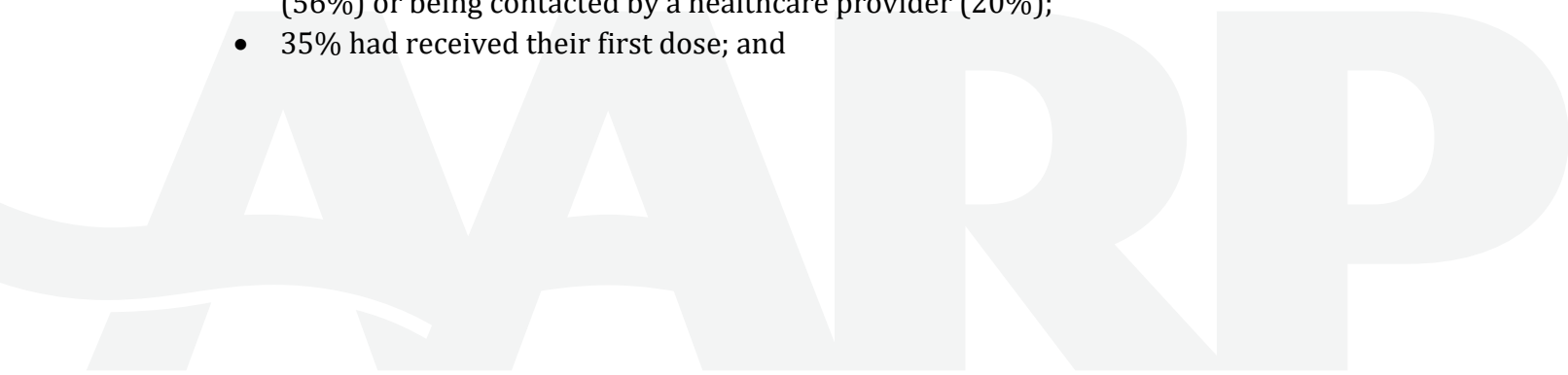
We are encouraged by the milestones and progress of last week, including eclipsing the one million mark for vaccination, the continued downward trends in COVID-related deaths and hospitalizations, the work to vaccinate residents and staff in long term care, and the launch of the Minnesota Vaccine Connector. We thank both you and Commissioner Malcolm for your leadership.

We are writing to you today to share key insights from communications with AARP members about their efforts to get a vaccine, and to call on you to make specific improvements to Minnesota's vaccine administration plan.

Findings from AARP MN Member Experiences with COVID-19 Vaccinations

To date, our state's vaccination rollout has left too many feeling frustrated and confused. A recent online questionnaire fielded between 2/12 and 2/15 by email to AARP members across Minnesota reflected just that. More than 1,700 AARP members completed the questionnaire. Key take-aways included:

- 76% of respondents had tried to make an appointment by either trying themselves (56%) or being contacted by a healthcare provider (20%);
- 35% had received their first dose; and



- 4% had received their second dose.

These numbers show a strong eagerness among AARP members and older Minnesotans to get the COVID-19 vaccine and mixed results for attaining one. But perhaps more revealing were the anecdotes and personal stories shared by several hundred of the respondents. Those stories reveal a public confused and frustrated about why decisions have been made and the system they are left to navigate, and demoralized when their efforts to secure a vaccine come up empty.

“Every avenue I’ve tried is a waste of my time...My Dr is not giving shots...My health insurance says wait for a phone call. The MN covid site leads to some places that are supposedly giving vaccine shots but when I go online & try to schedule one of them I’m told there are none available.” – Darrell, Plymouth

“VERY FRUSTRATING!!!! System by MN DOH is very chaotic and fragmented to many different (some non-existent) avenues to receive a shot. There should be a more efficient singular way to sign up for a vaccine. The selection of recipients could then be prioritized by relative vulnerability to severe Covid outcome. Those signed up should be able to be updated on a daily basis as to where they are on the list and contacted well in advance to arrange an appointment. Too many will not get the vaccine in a timely manner the way it is going now!!!” – Bryce, North Oaks

We also see more acute challenges such as a lack of transportation as a barrier to receiving the vaccine.

“I called and they gave me a choice of location I could go to that was the closest to where I live but I don’t drive to that area (I am limited to locations because of my age and if I don’t know the area, I get lost, and I couldn’t find someone that could take me so I didn’t make the appointment). I am going to call again tomorrow to see if there is a closer location I can drive to and see if I can get the vaccine. I think people my age (82 plus) who still drive have trouble driving to unknown locations.” – Kay, Minneapolis

And finally, we see people who recognize that even if they have been able to secure an appointment, they are lucky and privileged to have done so – raising issues around access to technology, time to navigate the system and a need to focus on equity.

“I’ve been frustrated by the lack of clarity in the process. I now have an appointment for mid-March at a small clinic in a predominantly Latinx neighborhood. I found out about this from a friend who found out about it through a friend. How typical that a vaccine location chosen to benefit an underserved population is benefiting people of white privilege who have connections, time and technology on their side.” – Carol, St. Paul

Action Steps for Minnesota

Minnesotans age 50 and older continue to make up 98% of COVID-related deaths. Older Minnesotans – all Minnesotans – need clarity and confidence in a system that works for them.

- 1) **Make the Connector a one-stop shop for information AND appointments** – While the MN Vaccine Connector is a significant step in the right direction, we must work quickly toward a centralized, equitable, accessible, user-friendly, vaccination appointment system that is a one-stop means for scheduling a vaccination for all consumers. We know of such systems being implemented in Indiana, Virginia and New Mexico that are worth exploring as examples. This is key to ensuring transparency, effective vaccine distribution and program management. Critical elements of an improved Connector should include the following:
 - a) a buildout of the existing MN Connector to include both information and sign-up for vaccination requiring only minimum personal information;
 - b) a parallel, centralized, well-staffed, toll-free phone number to ensure all citizens are able to find and register for vaccination appointments by telephone;
 - c) options for homebound individuals that bring the vaccine to them i.e. mobile clinics or transportation services to vaccination sites as aligned with the state's prioritization for vaccines;
 - d) an effective system for scheduling a second dose of the vaccine, as required; and
 - e) a process to identify any accessibility issues that may need to be addressed.
- 2) **Enhance and expand communication efforts** – State and local governments should pro-actively reach out to those eligible for the vaccines.
 - a) Multi-channel: The outreach should include a wide range of communications channels, including direct mail, earned media, paid media, telephone, social media, email, in-person, and mobile clinics if available.
 - b) Outbound calls: Caller ID should specify official government name (e.g. "State Health Department") so recipients don't think it is a scam.
 - i. Callers should identify themselves, provide a callback # for verification purposes, and note that the vaccine is free.
 - c) Continue to enlist trusted partners, particularly in hard to reach communities.
 - d) Be persistent: The outreach should continue to resolution, which can either be someone registering for vaccination or declaring that they won't. There should be a reasonable number of attempts before outreach is suspended.
- 3) **Expand data reporting to include vaccination by race and ethnicity** – AARP renews its call for MN to report the numbers and percentages of Minnesotans, by race and ethnicity, that have been vaccinated.

4) **Continue to prioritize older Minnesotans** – Since the start of the pandemic, nearly 98 percent of the deaths from COVID-19 have been among people 50 and older. The data clearly show that the older people are, the higher risk they face if they contract COVID-19. As you consider the next groups eligible for vaccination in Minnesota, we strongly urge you to ensure that older Minnesotans are given priority access to vaccines, in addition to those individuals receiving care in nursing homes and other long-term care facilities. We also strongly urge the state to prioritize those individuals who receive long-term services and supports in their own homes and communities and the staff and caregivers who provide that care.

Thank you for your attention to these issues. While supply of vaccine continues to be a challenge, Minnesota can and must continue to improve its vaccination plan. AARP is conducting extensive outreach to members across Minnesota to ensure they have the information they need to get vaccinated when they are eligible and ready. Please don't hesitate to call on us further if we can be of assistance.

Sincerely,

A handwritten signature in black ink, appearing to read 'Will Phillips', with a stylized, flowing script.

Will Phillips

State Director, AARP Minnesota

CC: Jan Malcolm, Commissioner, MN Department of Health