



Wisconsin Department of Health Services: Priority Group 1b

Summary

Tentative start date	Eligibility group, in priority order
March 1, 2021	<ul style="list-style-type: none"> • Education and Child Care • Individuals enrolled in Medicaid Long-Term Care programs • Public facing essential workers • Non-frontline health care personnel • Congregate Living

Final Phase 1B recommendations:

Beginning on or around March 1, 2021, subject to change based on vaccine availability, the individuals listed below will become eligible to receive the COVID-19 vaccine.

The Department of Health Services (DHS) asks that only those who are at significant risk due to public-facing positions with considerations of frequency, intensity, and duration of contact, and ability to mitigate, come forward to receive vaccine. Employees who are able to work from home, perform most tasks outdoors, or have limited engagement with the public are asked to delay vaccination until supply is robust.

Education and child care

- All staff in regulated child care, public and private school programs, out-of-school time programs, virtual learning support, and community learning center programs
- All staff in Boys and Girls Clubs, YMCAs.
- All staff in preschool and Head Start through K-12 education settings.
- Faculty and staff in higher education settings who have direct student contact.

Individuals enrolled in Medicaid long-term care programs

- IRIS (Include, Respect, I Self Direct)
- Family Care
- Katie Beckett and Children’s Long Term Care Waiver, when the member’s age allows them to qualify for vaccine

Some Public-Facing Essential Workers

This category includes:

- **911 operators**

- **Utility and communications infrastructure:** Workers who cannot socially distance and are responsible for the fundamental processes and facilities that ensure electric, natural gas, steam, water, wastewater, internet, and telecommunications services are built, maintained, generated, distributed, and delivered to customers.
- **Public transit:** Drivers or employees (supervisor or maintenance person who rides the bus, or a public-facing service agent) who have frequent close contact with members of the public, limited to:
 - Public and commercial intercity bus transportation services.
 - Municipal public transit services, including municipal or county contracted shared-ride service providers.
 - Those employed by specialized transit and paratransit services for seniors, disabled persons, and low-income persons.
- **Food supply chain**
 - Agricultural production workers, such as farm owners and other farm employees.
 - Critical workers who provide on-site support to multiple agricultural operations, such as livestock breeding and insemination providers, farm labor contractors, crop support providers, and livestock veterinarians.
 - Food production workers, such as dairy plant employees, fruit and vegetable processing plant employees, and animal slaughtering and processing employees.
 - Retail food workers, such as employees at grocery stores, convenience stores, and gas stations that also sell groceries.
 - Hunger relief personnel, including people involved in charitable food distribution, community food and housing providers, social services employees who are involved in food distribution, and emergency relief workers.

Non-frontline health care essential personnel: Staff who perform essential roles within health care organizations by maintaining cyber security; perform cleaning functions; scheduling; critical HVAC functions related to maintaining proper air flow in health care settings and refrigeration functions related to vaccine storage; health care critical supply chain functions, including those involved in the production, manufacturing and distribution of vaccine; public health; and emergency management.

Congregate Living: Residents of congregate living settings and on-site facility staff. This category includes:

- **Employer-based:** Housing provided by an employer for unrelated individuals who share living quarters.
- **Housing serving the elderly or people with disabilities:** Adult family home, community-based residential facility, residential care complex, state center for the disabled, intermediate care facilities for individuals with intellectual disabilities (ICFs/IDDs), mental health institute, and county-based center for the disabled.
- **Shelters for those who are homeless or in need of refuge**
- **Transitional housing:** A project that is designed to provide housing and appropriate supportive services to homeless persons to facilitate movement to independent living when such facilities include shared bedrooms
- **Incarcerated individuals:** Individuals in jails, prisons, and transitional housing.

Mink Husbandry

DHS continues to recommend that vaccination of additional individuals should be prioritized over wasting vaccine.

If vaccine supply is constrained such that additional sub-prioritization is necessary (in no particular order):

Individual demographic characteristics and medical conditions have been identified that place individuals at higher risk of severe illness from COVID-19 infection.^{1,2} As such, vaccinating entities *should* consider using these factors if additional sub-prioritization is necessary. Of note, logistics may necessitate sub-prioritization to occur only at the level of adequately large population cohorts.

Demographic

- Black, Latinx, Native American
- Socioeconomic vulnerability

Medical Conditions

- Asthma
- Cancer (active)
- Chronic kidney disease
- Chronic lung disease, such as chronic obstructive pulmonary disease (COPD)
- Chronic metabolic disease
- Diabetes
- Heart conditions, such as cardiovascular disease, heart failure, coronary artery disease, or cardiomyopathies
- Hypertension
- Immunocompromised conditions
- Solid organ transplant resulting in immunocompromised state
- Obesity (body mass index (BMI) of 30 kg/m² or higher)
- Sickle cell disease
- Smoking
- Intellectual or developmental disability³
- Pregnancy

The prioritization scheme chosen by vaccinating entities should be clear and transparent and attempt to reduce (rather than reinforce) inequities whenever possible.

Of note, vaccination does not negate the need for continual adherence to best practices of distancing, masking, hand-hygiene, testing, isolation and quarantining.

¹ Centers for Disease Control and Prevention. *People with Certain Medical Conditions*.

<https://www.cdc.gov/coronavirus/2019-ncov/ne.ed-extra-precautions/people-with-medical-conditions.html>. Accessed January 9, 2021

² Kambhampati AK, O'Halloran AC, Whitaker M, et al. *COVID-19–Associated Hospitalizations Among Health Care Personnel — COVID-NET, 13 States, March 1–May 31, 2020*. *MMWR Morb Mortal Wkly Rep* 2020;69:1576–1583. DOI: <http://dx.doi.org/10.15585/mmwr.mm6943e3>

³ A FAIR Health, West Health Institute and Marty Makary, MD, MPH. (2020). *Risk Factors for COVID-19 Mortality among Privately Insured Patients*. New York, New York: FAIR Health 2020.