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Date: March 11, 2025

To: Chair Patterson, Vice-Chair Hayden, and
Members of the Senate Committee On Health Care

From: LeadingAge Oregon

Subject: Opposition to SB 1030 - Requiring annual vaccine clinics in residential care facilities

LeadingAge Oregon, an association of housing and long-term care providers, opposes SB 1030. We fully support vaccine access, which is critically important for older adults, particularly those living in communal settings. However, while ensuring access to vaccines is a worthy goal, this bill would create significant operational and financial challenges for residential care communities, especially smaller providers and those in rural areas.

Communities Facilitate Vaccine Access

Residential care facilities prioritize resident health and safety and already take proactive steps to support vaccine access, including:

- Coordinating transportation to vaccine clinics,
- Educating residents and families on vaccine availability and benefits, however many decline.

Additionally, residents regularly visit their healthcare providers, where vaccines are also offered. Facilities that have the capacity to host on-site clinics, typically larger communities with multi-level care settings, already do so. However, mandating an annual clinic for each community fails to account for the significant logistical and financial barriers communities would face in making this a universal requirement.

Real-World Challenges of On-Site Vaccine Clinics

Organizing a vaccine clinic is not a simple process and requires extensive coordination with pharmacies and healthcare providers. Key challenges include:

- Pharmacies often require a minimum number of participants to justify sending staff on-site, making compliance difficult, if not impossible, for smaller communities.
- There is a shortage of pharmacies and providers willing to offer on-site clinics, particularly in rural areas. This bill does not address those resource constraints.
- Vaccine supply and availability fluctuate throughout the year, adding another layer of unpredictability to implementing this mandate.

Payer Source and Insurance Challenges

Beyond logistical hurdles, this bill fails to address the complexities of payer sources and insurance coverage for vaccines in residential care settings:

- Residents may have different insurance plans, Medicare coverage, or private pay arrangements, creating billing complications for providers.
- Many pharmacies will not bill multiple insurance plans for a single clinic, forcing providers to either absorb the costs or require residents to seek vaccines elsewhere.

We fully support efforts to ensure older adults have access to vaccines, but SB 1030 fails to address the very real-world challenges that make a sweeping mandate impractical for every RCF setting, in every location to comply with.

For these reasons, we respectfully oppose SB 1030.

Respectfully submitted,

Kristin Milligan
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