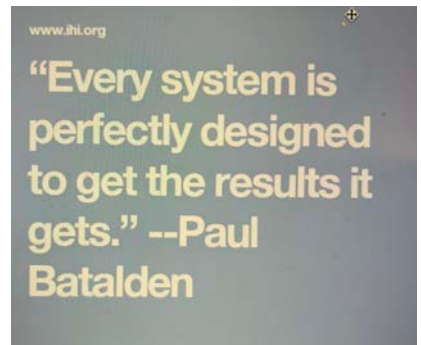




# Ethics and Equity Considerations



- Tipping point of gathered equity information & “ethical consensus”
- Engagement of politicians and healthcare leaders
- PLAN for EQUITY using ETHICAL FRAMEWORKS (reduction of health disparities)
- Missed opportunities: scarce resource allocation (ICU, vaccines), hospital transfers

◆ WSJ NEWS EXCLUSIVE | INVESTIGATIONS

## Some California Hospitals Refused Covid-19 Transfers for Financial Reasons, State Emails Show

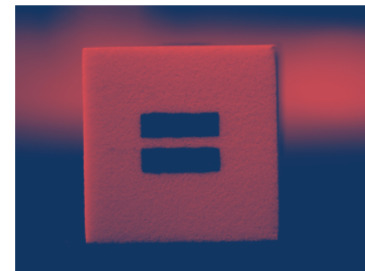
Denials expose ways hospitals put finances ahead of pandemic response as coronavirus hospitalizations continue to surge

By [Melanie Evans](#), [Alexandra Berzon](#) and [Daniela Hernandez](#)

Updated Oct. 19, 2020 1:37 pm ET



Insights | Health Equity



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## Four Recommendations To Efficiently And Equitably Accelerate The COVID-19 Vaccine Rollout

### Fairly Prioritizing Groups for Access to COVID-19 Vaccines



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**The supply of any successful vaccine** for coronavirus disease 2019 (COVID-19) will initially be limited. Who should have access first? The US National Academy of Medicine (NAM) has proposed a framework for COVID-19 vaccine allocation.<sup>1</sup> Others have discussed distributing vaccine among countries.<sup>2</sup> This Viewpoint delineates how ethical values should guide prioritization of a COVID-19 vaccine among populations within the US. The

spread of infection, and indirect health and socioeconomic benefits to those protected from harm as health system and societal functioning improve. The 3 ethical values favor prioritizing 3 groups: health care workers; other essential workers and people in high-transmission settings; and people with medical vulnerabilities associated with poorer COVID-19 outcomes, such as diabetes, pulmonary disease, cardiac disease, and obesity.

/hblog202102