Emergency Mail-in Voting in Rhode Island: Protecting Civic Participation During COVID-19 and Beyond

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**ABSTRACT**

The COVID-19 pandemic challenges safe and equitable voting in the United States’ 2020 elections, and in response, several states including Rhode Island (RI) have made significant changes to election policy. In addition to increasing accessibility of mail-in voting by mailing applications to all registered voters, RI has suspended their notary/witness requirement for both the primary and general election. However, RI’s “emergency” voting process still plays a crucial role in allowing voters who missed the mail-in ballot application deadline, such as those unexpectedly hospitalized in the days leading up to the election, to still cast their ballot. COVID-19 has also forced RI to modify its emergency voting procedures, most notably allowing healthcare workers to serve on bipartisan ballot delivery teams. This commentary highlights these salient updates to voting procedures and serves as a primer as to how interested health care workers may navigate this process alongside patients and lead in the arena of patient voting rights.

**KEYWORDS:** COVID-19, public health, patient advocacy, health policy, patient voting

**Introduction**

The COVID-19 pandemic has strained the United States health care system, taking 190,262 lives nationally as of this writing and more than 1,000 in Rhode Island (RI) alone. With upcoming elections at both the state and federal levels, COVID-19 also presents additional public health challenges. Recent research has suggested an increased risk of viral transmission at crowded election polls, such as one study demonstrating a statistically significant link between voting in April’s Wisconsin primary and increases in COVID-19 cases in the state. In addition to unsafe conditions potentially deterring voters from in-person voting (particularly frontline workers and vulnerable populations), the virus also magnifies accessibility issues for hospitalized patients.

More than 52,503 patients nationwide have been hospitalized for COVID-19, the overwhelming majority being 18 and older. Significant racial disparities have also been observed in the pandemic, with hospitalization rates for Native Americans, Blacks, and Hispanics/Latinos being 4–5x that of white Americans. Amidst several studies suggesting that voters who are hospitalized, ill, or face a disability are underrepresented in the general voting populace, the pandemic may exacerbate these existing inequities in voter participation.

Given these concerning trends, national dialogue surrounding safe and accessible voting has focused on expanding mail-in voting availability. Eligibility requirements, deadlines, and procedures for absentee voting vary greatly between states, but RI is one of many no-excuse absentee states, where anyone can request an absentee ballot for any reason. Additionally, due to COVID-19, RI has joined a small collection of states in sending mail-in applications to all registered voters for the primary and general elections. However, a more specialized process, used in almost 40 states, is emergency absentee voting, wherein voters experiencing an unexpected hospitalization or medical emergency after the normal absentee ballot request deadline may still apply to receive an absentee ballot (Table). In several states including RI, emergency absentee voting processes have also been altered by election process changes spurred by COVID-19. Emergency voting procedures remain essential to protecting voting rights for patients who miss RI’s 10/13/20 mail-in ballot application deadline – such as those intending on voting in-person but experiencing an unexpected hospitalization – as well as voters separated from their mail-in ballots due to unexpected hospitalization. Accordingly, the goals of this commentary are threefold: to highlight election changes made within RI due to COVID-19, to describe RI’s emergency absentee process, and to provide a primer as to how interested health care workers may navigate this process alongside patients and lead in the arena of patient voting rights.

**How has COVID-19 impacted RI election processes?**

COVID-19 introduced several notable changes for the 2020 elections. For RI’s presidential primary, delayed from 4/28/20 to 6/2/20, the state mailed absentee ballot applications to all registered voters and suspended the notary or witness requirement. For the general election, the state once again mailed absentee ballot applications to all registered voters and continued the suspension of a notary or witness requirement. The mail-in ballot application deadline remains 10/13/20, three weeks before election day. Additionally,
although RI normally delivers emergency ballots to patients in hospitals or other long-term care facilities (e.g., nursing homes) using bipartisan teams sent by the local Board of Canvassers, infection control-minded restrictions in hospital visitation have compelled the RI Board of Elections to grant health care workers (HCWs), also working in bipartisan pairs, the ability to be sworn in to assist with these responsibilities for all 2020 elections, including the general election. These policy changes will impact the safety of voting from both the home and the hospital come November.

How does emergency mail-in voting in RI work?
For the general election, RI’s “emergency mail ballot” is a process designed for voters experiencing a medical emergency who were unable to submit an absentee ballot application by the regular deadline of 4:00 pm EST on 10/13/20 [Table]. Beginning on 10/14/20, hospitalized patients have until 11/2/20 at 4:00 pm EST to fill out and submit an emergency mail ballot application. Applications are available for download [https://elections.ri.gov/voting/emergency.php] when the emergency period begins. Voters can submit their application through an “agent” or by mail. Agents are personal representatives designated by the voter, such as a family member, to carry out in-person document delivery between the voter and their local Board of Canvassers. If approved, a hospitalized voter would obtain their ballot through personal ballot delivery via a bipartisan in-person team sent from their local Board of Canvassers, who would be assisted by hospital employees for 2020 elections due to COVID-19. This team would also automatically handle returning the voter’s filled-out ballot to be counted. Additionally, a voter who has been discharged from the hospital after the regular absentee deadline whose mobility continues to be reduced may obtain their emergency ballot by their agent or mail and have until 8:00 pm EST on 11/3/20 to return it to the State Board of Elections [Cranston, RI], similarly by agent or mail [time of delivery, not postmark]. Within RI’s guidelines, health care workers and family members of loved ones affected by medical emergencies may also utilize this emergency absentee mail ballot process, if prevented from voting in-person on election day. No physician affidavit is required for the emergency application, as is the case in other states.

How can health care workers navigate this process?
Several studies elucidating the link between public policy and health outcomes have advocated for health care workers (HCWs) to improve political participation among their patients. Emergency absentee voting represents a promising, non-partisan way to achieve this. Approaching election day, interested HCWs may offer information on emergency voting processes to patients, especially those expressing concerns about being able to vote. This should be approached akin to consenting patients for a procedure, respecting patients who decline and are not interested in voting. For

<table>
<thead>
<tr>
<th>Step or Deadline</th>
<th>Description</th>
<th>How This Applies in RI</th>
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<tbody>
<tr>
<td><strong>Deadline:</strong> Deadline for state’s regular absentee ballot application</td>
<td>Patients hospitalized after this deadline can apply for an emergency absentee ballot using their state’s process</td>
<td>RI’s deadline is 21 days before an election at 4 PM</td>
</tr>
<tr>
<td><strong>Step 1:</strong> Fill out and submit an emergency absentee ballot application</td>
<td>Across all 50 states, there are 3 possible methods of submission: mail, in-person via an agent, or long-distance (phone, electronic portal, etc.)</td>
<td>RI allows emergency absentee ballot applications to be submitted by mail or in-person via an agent</td>
</tr>
<tr>
<td><strong>Deadline:</strong> Deadline for state’s emergency absentee ballot application</td>
<td>There is usually a deadline before election day for the application itself to be submitted</td>
<td>RI’s emergency absentee application deadline is the day before an election at 4 PM</td>
</tr>
<tr>
<td><strong>Step 2:</strong> Obtain the emergency absentee ballot</td>
<td>Across all 50 states, there are 4 possible methods of obtaining the ballot: mail, in-person via an agent, long-distance (ex. electronic portal), or personal delivery by a bipartisan team</td>
<td>RI allows patients to obtain emergency absentee ballots by mail, in-person via an agent, or personal delivery by a bipartisan team</td>
</tr>
<tr>
<td><strong>Step 3:</strong> Return the filled-out emergency absentee ballot</td>
<td>Across all 50 states, there are 3 possible methods of obtaining the ballot: mail, in-person via an agent, or personal delivery by a bipartisan team</td>
<td>RI allows patients to return their emergency absentee ballot through all 3 methods</td>
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<tr>
<td><strong>Deadline:</strong> Deadline for state’s emergency absentee ballot</td>
<td>The filled-out ballot has to be returned by a certain time, most often an evening time on election day</td>
<td>RI’s emergency absentee ballot deadline is election day at 8 PM</td>
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1 Certain states have varying rules on whether a voter’s agent is required to be a family member and may set a maximum limit on the number of applications a single agent is allowed to handle. In RI, it is not mandatory for a voter’s agent to be a family member and there is no limit on the number of applications each agent can handle.

† If a patient is confined in a hospital, the only possible way of obtaining their ballot is through a bipartisan team. Otherwise, if a patient is recovering at home, they can obtain their ballot through their agent or by mail.

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**Table. The Protocol for a Typical Emergency Absentee Voting Process**

This table outlines the typical process for patients to vote by an emergency absentee ballot, including specific details for RI’s process.
interested patients, hospitals can take several steps to make this process as convenient as possible, such as printing readily available emergency mail ballot applications or potentially serving as agents for patients without family to do so. Additionally, serving as their facility’s volunteers to facilitate bipartisan ballot delivery teams represent another tangible way for HCWs to assist in emergency voting processes. Due to low patient awareness of emergency absentee processes, HCWs serve an integral role in improving general public knowledge of these procedures through the provision of informational pamphlets or flyers with the guidelines and deadline reminders, which may also benefit colleagues and caregivers of hospitalized patients qualifying for these processes in RI. Finally, to allay potential concerns over the process, HCWs may benefit from staying up-to-date with the evidence surrounding mail-in voting, which has been shown to have near-zero risk for fraud and no biased impact on partisan turnout.7,14

Several voting organizations within RI, such as Common Cause RI and the American Civil Liberties Union of Rhode Island, are actively leading efforts to advocate for voter rights and improve turnout. Another such example is Patient Voting, a non-partisan organization to increase voting among patients who are projected to be hospitalized through election day by providing information on obtaining emergency absentee ballots. Patient Voting was initially founded in Rhode Island by Dr. Kelly Wong, an emergency medicine resident at Brown University, and the authors of this commentary are volunteers. Its website [https://www.patientvoting.com] serves as a centralized resource for protocols in all 50 states, due to variable availability of this information online. Given the necessity in certain states of making several back-and-forth trips between a hospital and local elections office for these processes, Patient Voting also connects patients to ballot delivery options and coordinates volunteers to serve as a patient’s agent, in states where these apply. For the November election, Patient Voting plans to implement similar efforts in RI hospitals, such as the provision of informational flyers and readily available emergency ballot applications.

Dr. Donald Berwick, a former Administrator of the Centers for Medicare and Medicaid Services and President emeritus of the Institute for Healthcare Improvement, contended in a recent commentary on a “morally guided campaign for better health” that “restoring order, dignity, and equity to US democratic institutions” may be a moral prerogative for HCWs.19 Because our patients’ wellness is influenced by a myriad of environmental and socioeconomic factors outside of medical care, safeguarding their ability to reshape these factors through the ballot box – especially amidst a pandemic that has already posed challenges to voting systems nationwide – may function as another way to serve their health. ☀

References

Acknowledgment
We would like to thank Jennifer Regan at the Rhode Island Board of Elections for verifying the accuracy of this paper’s information on the state’s emergency absentee process.
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Disclosures
Disclaimer: All of the authors of this commentary are affiliated with Patient Voting, a nonpartisan organization focused on assisting hospitalized patients with emergency absentee voting.
Funding and Conflict of Interest: The authors report no funding concerning the materials or methods used in this study or the findings specified in this paper.
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