



CONSORTIUM FOR CITIZENS WITH DISABILITIES

CCD Long Term Services and Supports Task Force 2021 Federal Agency Priorities

The [LTSS Task Force](#) addresses the services and supports that enable individuals with disabilities of all ages to live in their own homes and communities, known as Home and Community-Based Services (HCBS). HCBS, which are primarily provided through Medicaid, are necessary for the community integration, full participation, independent living, and economic self-sufficiency for many people with disabilities and older adults and makes it possible for them to fully exercise their civil and human rights. The Task Force federal agency priorities include:

U.S. Department of Health and Human Services

Centers for Medicare & Medicaid Services

- ***Home and Community Based Services Settings Rule:*** Prioritize strong implementation of the HCBS Settings Rule, including by providing additional guidance, technical assistance (TA) to states, and ongoing monitoring, with a focus on the heightened scrutiny process.
- ***COVID19 Protections:*** Expand regulations regarding mandatory COVID19 reporting, notification of residents, and testing of residents and staff in nursing homes to all Medicaid-funded or certified institutional and congregate settings. Prioritize funding and TA to states to transition individuals from, and divert individuals from entering, institutional and large congregate settings where COVID19 risks are highest.
- ***HCBS Improvements:*** Work with states and stakeholders on strategies for unwinding emergency waivers and Appendix Ks and permanently incorporating beneficial changes into HCBS programs; allow Appendix Ks up to 12 months after the PHE.
- ***Electronic Visit Verification:*** Issue guidance to extend implementation deadlines due to COVID19, address concerns about privacy, clarify that EVV is not required in adult foster care or shared living arrangements, and permit dual verification strategies.
- ***HCBS Quality Measures:*** Finalize and work with states to implement core quality measures for HCBS that emphasize person-centered services, compliance with the HCBS Settings Rule, equity in access to HCBS, and best practices.
- ***Preadmission Screening and Resident Review (PASRR) Regulations:*** Revise and reissue for additional notice and comment the PASRR NPRM to address the serious concerns of stakeholders that the NPRM weakens the statute's diversion and transition provisions.

- *Rescind Harmful Medicaid Guidance:* Rescind CMS’s “Healthy Adult Opportunity” guidance, and rescind/disapprove any state 1115 proposals to use block grants or per capita caps in Medicaid. Rescind CMS’ guidance permitting work requirements and rescind/disapprove any state proposals with work requirements. Rescind CMS’ guidance and waivers that increase funding for psychiatric institutional placements instead of investing in community-based behavioral health care.
- *Public charge rule:* Collaborate with the Department of Homeland Security to rescind the public charge rule, particularly its consideration of Medicaid (including HCBS), and ensure the new rule complies with *Olmstead* requirements.
- *Equity in Access to HCBS:* Work with ACL and OCR to identify racial and other inequities in HCBS and develop strategies for addressing those inequities, including requiring states to develop equity plans for their HCBS programs, providing TA and funding for outreach to Black, Indigenous, and other communities of color, including non-native English speakers and LGBTQ+, and providers that serve them, and prioritize transition efforts in institutions disproportionately with residents from those communities.
- *Olmstead:* Provide guidance on how states can further *Olmstead* implementation in their Medicaid systems, particularly in light of COVID19 laying bare the risks of institutional and large congregate settings; work with the Department of Justice to support their *Olmstead* enforcement activities.
- *HCBS 1915(c) budgeting and transparency:* Require states to explain how a person’s needs will be met when they hit a service cap; create transparency requirements around LTSS assessment tools and use of budgets/calculations of budgets.
- *Linkages with housing:* Collaborate with the U.S. Department of Housing and Urban Development (HUD) regarding targeting affordable, integrated, accessible housing to people transitioning from, or at risk of entering, institutions; provide technical assistance to states about leveraging Medicaid for housing-related supports.
- *Workforce:* Together with ACL, work with states and stakeholders to develop strategies to address workforce shortages in Medicaid HCBS programs.

Administration for Community Living (ACL)

ACL was created to be a force across the federal government to advance community living for people with disabilities and older adults. Recently, ACL has focused heavily on older adults to the detriment of people with disabilities and has failed to consistently prioritize community living for all. ACL should give equal focus to disability and aging, prioritize policies that advance community living for all, and work to bridge gaps between the two communities. ACL should also prioritize research to identify, and policies to address, inequities in access to HCBS and coordinate interagency initiatives

including with CMS, OCR, and the National Institute of Health's Institute on Minority Health and Health Disparities.

Office for Civil Rights

- *COVID19 Vaccine Allocation*: Ensure that people with disabilities and older adults, particularly those in any institutional or congregate setting or receiving HCBS in a setting where it is not possible to socially distance, are prioritized for the COVID19 vaccine and are not discriminated against in violation of federal disability laws; engage in culturally competent, accessible outreach to ensure that people with disabilities and older adults are given information to make an informed choice about the vaccination; ensure long-term care facilities do not discriminate against people who decline vaccination. See [principles](#).
- *Visitation in Institutional and Congregate Settings*: Work with CMS on expanding guidance regarding nursing home visitation, including when in-person supports are required under federal disability laws, to all Medicaid-funded or certified institutional and congregate settings; prioritize enforcement of visitation violations in a range of institutional and other congregate settings.

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