



**CONSORTIUM FOR CITIZENS  
WITH DISABILITIES**

Comments for Commission on Safety and Quality in Nursing Homes, July 17, 2020

The Consortium for Citizens with Disabilities (CCD) is the largest coalition of national organizations working together to advocate for federal public policy that ensures the self-determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society. The undersigned co-chairs of the CCD Long Term Services and Supports Task Force write to urge the Commission to: 1) address strategies for decreasing unnecessary congregate placements, 2) include recommendations addressing the needs of people with disabilities and older adults living in all types of congregate facilities– not just nursing facilities.

People with disabilities and older adults face a particularly high risk of complications and death if exposed to COVID-19, and that risk is elevated in institutional and congregate settings. Thus, conversations around safety must center diversion to prevent unnecessary admissions and transitions back to the community, as we noted in a [May 5, 2020 letter](#) to HHS and CMS regarding this Commission. Emphasizing diversion and transition also helps avoid unnecessary institutionalization, vindicating the civil rights individuals with disabilities to live in community-based settings.

One of the most important ways to prevent unnecessary admissions and promote discharges during the COVID-19 crisis is to increase access to home and community based services (HCBS). State Medicaid programs

and nursing facilities must work together closely to identify residents who could and would choose to live in the community, and states must provide support and resources to enable them to do so. This is not the time to waive reviews that help identify candidates for transition, including PASRR and the Minimum Data Set Review. Additionally, the Commission should explore ways states currently are or could be using Money Follows the Person to help transition people out. Last, dedicated funding for HCBS, such as the funding proposed in the HEROES Act, is crucial, and would help more people with disabilities and older adults receive the services they need in their homes and communities, allowing them to better protect their health during this pandemic. We need to invest in state HCBS systems not only during this acute crisis, but beyond.

While there has been understandable focus on the outbreaks and deaths in nursing facilities, people with disabilities and older adults face increased risks in all institutional and congregate settings. The Commission is engaged in important work to identify frameworks for enhanced oversight and quality monitoring, improve care delivery, identify new sources of data to enable coordination and mitigate infection and future emergencies. We urge the Commission to also clearly articulate the need for such initiatives in any congregate setting where people with disabilities reside, and to promote strategies that can be applied across settings, including psychiatric hospitals and Intermediate Care Facilities.

Thank you for the opportunity to provide comments. We would be happy to provide you with any of the documents referenced in this letter, or other additional material. If you have any questions, please contact Jennifer Lav ([lav@healthlaw.org](mailto:lav@healthlaw.org)).

Sincerely,

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