

United States Senate

May 13, 2020

The Honorable Alex Azar
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

The Honorable Seema Verma
Administrator
Centers for Medicare and Medicaid Services
U.S. Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

Dear Secretary Azar and Administrator Verma:

We are writing because the novel coronavirus (COVID-19) pandemic is causing an immediate crisis among the providers of high quality, long-term supports and services to people with intellectual and developmental disabilities and autism across the country financed through Medicaid Home and Community Based Services (HCBS) waivers and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF-IID). We specifically request that you ensure these providers receive a meaningful level of financial relief from the Public Health and Social Services Fund (PHSSF).

The situation these providers confront is extremely challenging. In a recent survey of over 1,600 community providers serving individuals with intellectual / developmental disabilities (I/DD) conducted by the American Network of Community Options and Resources (ANCOR), 68% of respondents reported having had to close one or more service lines, resulting in a 32% average loss of revenue. Additionally, 52% of all organizations surveyed reported having increased staff overtime expenses. On average, respondents reported an additional \$28,000 in monthly expenses (e.g., PPE, cleaning supplies, etc.)¹

Direct Support Professionals (DSPs) are confronting equipment shortages of every kind including masks, face shields, gloves and gowns. Further, assisting people with disabilities with activities of daily living – dressing, bathing, toileting – often makes it impossible for staff to “social distance.” An additional survey conducted by ANCOR highlights the challenges: 62% of I/DD providers stopped taking new referrals and/or were closing programs while state stay-at-home orders are exacerbating staff turnover rates well in excess of 50%. The vast majority of ANCOR providers had less than three (3) months of cash reserves.²

As you know, the Coronavirus Aid, Relief, and Economic Security (CARES) Act (P.L. 116-136) included \$100 billion in funding for the PHSSF. Subsequently, Congress provided an additional \$75 billion for the PHSSF through the Paycheck Protection Program and Health Care Enhancement Act. However, we are concerned that Medicaid providers of services to persons with disabilities have largely been excluded from HHS’ provider allocations thus far.

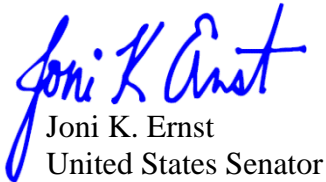
¹ https://www.ancor.org/sites/default/files/impact_of_covid-19_on_organizations_serving_individuals_with_idd.pdf

² https://www.ancor.org/sites/default/files/ancor_direct_support_workforce_crisis_fact_sheet.pdf

As you continue to allocate these funds, it is critical that a meaningful level of support be delivered to providers of Medicaid Home and Community Based Services (HCBS) and Intermediate Care Facilities for Individuals with Intellectual Disabilities. For state Medicaid agencies that contract with managed care organizations (MCOs) it is also important to stipulate that this financial relief be provided directly to the Medicaid providers of services to persons with disabilities.

Dedicating these funds for disability community providers from the Public Health and Social Services Fund would be an important step in providing needed support and services to millions of people with disabilities living in the community. We will continue to work together to support and strengthen HCBS to help ensure that people with disabilities are able to remain in their homes and workers who provide direct services received the support that they need to help mitigate the risks of COVID-19. Thank you for your attention to this urgent matter.

Sincerely,



Joni K. Ernst
United States Senator

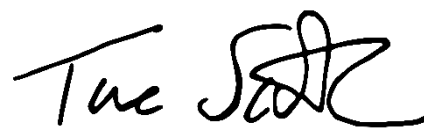

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