

Guidance to Support Community Providers to Respond to CMS' *Make Your Voice Heard* Request for Information

Reference Guide: *Make Your Voice Heard* Request for Information

The Centers for Medicare & Medicaid Services (CMS) has issued a request for information (RFI) seeking comments from the public on the following topics: accessing health care and related challenges, understanding provider experiences, advancing health equity, and the impact of the COVID-19 Public Health Emergency (PHE) Waivers and Flexibilities.

This is a unique opportunity to weigh in directly with CMS about the challenges you are experiencing and offer recommendations. We encourage you to enter your public comment and share widely with other providers in your network. In this reference guide, we have included data from ANCOR's recent workforce survey and ANCOR's response to the House Energy and Commerce Committee's recent RFI on disability policy and CMS's RFI on access standards. We have provided the following data to highlight opportunities to emphasize the impact of the direct support workforce crisis in your response pursuant to understanding provider experiences and the impact of the COVID-19 PHE, which we hope will be helpful to you as your draft your comments.

The information is requested through a survey link with text boxes for response. Please note that there are no save functions that allow you to return to your entries later, so best practice is to write your responses in advance and copy into the response fields. The deadline for response is **Friday, November 4, 2022**.

Reference links:

- [CMS' News Release](#)
- [PDF of the Full Text](#)
- [Submission Survey](#)

The Direct Support Workforce Crisis

Although our research indicates that the direct support workforce crisis was a significant challenge long before the COVID-19 pandemic, data from the [2022 State of America's Direct Support Workforce Crisis](#) confirms that these problems have been amplified by the pandemic and are also at the root of service and program closures, service launch delays, struggles adhering to quality standards and more. With the conclusion of one-time federal pandemic relief funding, community providers face a fiscal cliff that puts access to community-based services in jeopardy of complete collapse.

This RFI provides an opportunity for community providers to share directly with CMS how the direct support workforce crisis and looming fiscal cliffs have impacted your ability to provide community-based services.

Understanding Provider Experiences

From the RFI: *"CMS wants to better understand the factors impacting provider well-being and learn more about the distribution of the health care workforce. We are particularly interested in understanding the greatest challenges for health care workers in meeting the needs of their patients, and the impact of CMS policies, documentation and reporting requirements, operations, or communications on provider well-being and retention."*

In your response, consider referencing the data (in orange below) from the [2022 State of America's Direct Support Workforce Crisis](#) to highlight how the direct support workforce crisis has impacted your ability to

provide community-based services. We have also included prompting questions (in bulleted lists below) to help you tell your story highlighting how these data points have impacted your experience offering high-quality community supports and services.

Sixty-three percent (63%) of community providers are discontinuing programs and services. Fifty-five (55%) of providers are considering additional service discontinuations due to current rates of high turnover and vacancy. Seventy-one (71%) of case managers indicated it was difficult to connect families with services due to lack of available providers.

- Is your organization having difficulty continuing certain services due to the high rates of turnover and vacancy? What does the mean for the future of community services?
- Is your organization having difficulty connecting families with services due to lack of available providers? What is the impact for families waiting for services?

Ninety-two percent (92%) of community providers are struggling to achieve quality standards. This is a 13.6% increase in the last year alone.

- Is your organization struggling to meet its goals for quality services? Is your organization prepared to meet new federal and state regulatory requirements (e.g. HCBS Settings Rule)?

From the RFI: *“Recommendations for CMS policy and program initiatives that could support provider well-being and increase provider willingness to serve certain populations.”*

Please consider referencing the following recommendations included in ANCOR’s response to the House Energy and Commerce Committee’s recent RFI on disability policy and CMS’ RFI on access standards:

- Expressly include HCBS waivers and managed care in the equal access provision, including guidance to states on how to evaluate access to HCBS.
- Require payment rates to be reviewed at least every three (3) years and include an automatic annual inflation adjustment.
- Direct states to collect and track workforce metrics including workforce volume (availability), workforce stability (retention/turnover), and compensation (wages and benefits).
- Support creation of a standard occupational classification for direct support professionals (DSPs).

Impact of the COVID-19 Public Health Emergency Waivers and Flexibilities

From the RFI: *“CMS wants to understand the impact of waivers and flexibilities issued during the COVID-19 PHE, such as eligibility and enrollment flexibilities, to identify what was helpful as well as any areas for improvement, including opportunities to further decrease burden and address any health disparities that may have been exacerbated by the PHE.”*

Consider referencing the data (in orange below) from the 2022 *State of America’s Direct Support Workforce Crisis* and use the prompting questions to further craft your organization’s own story highlighting how the direct support workforce crisis has impacted your ability to provide community-based services.

The most common workforce-related uses of federal pandemic relief funding were one-time wage increases and bonuses. Seventy-five percent (75%) of community providers indicated investing relief funding into one-time workforce bonuses.

- Did your organization invest federal relief funding into the workforce? Why or why not?
- What prevents community providers from investing one-time federal relief funding into permanent wage increases?

Sixty-six percent (66%) of community providers are concerned vacancy and turnover rates will increase with the end of the PHE declaration.

- Is your organization reliant on the availability of increased federal funding and emergency regulatory flexibilities (e.g. ARPA funding, Appendix K flexibilities) to maintain basic operations with reduced staffing?
 - Describe the use of funding or flexibilities that has enabled that maintenance of basic operations.
- Are community providers in your state facing a fiscal cliff with the termination of the PHE declaration? What will that mean for your workforce?

From the RFI: *“Recommendations for CMS policy and program focus areas to address health disparities, including requested waivers/flexibilities to make permanent; any unintended consequences of CMS actions during the PHE; and opportunities for CMS to reduce any health disparities that may have been exacerbated by the PHE.”*

In your comments, please consider referencing the below recommendations included in ANCOR’s response to the House Energy and Commerce Committee’s recent RFI on disability policy and CMS’ RFI on access standards:

- Support extension of the temporary 10% FMAP bump for HCBS included in the American Rescue Plan Act (ARPA) to address the direct support workforce crisis.
- Support permanent reauthorization of the Money Follows the Person program.

For More Information

Email [Lydia Dawson](#), ANCOR’s Director of Policy, Regulatory & Legal Analysis.