March 29, 2023

The American Network of Community Options and Resources (ANCOR) appreciates the opportunity to provide comment on the Committee’s work to reauthorize the Pandemic and All-Hazards Preparedness Act (PAHPA).

Founded more than 50 years ago, ANCOR is a national, nonprofit association representing 2,000 private community providers of long-term supports and services to people with intellectual and developmental disabilities (I/DD), as well as 56 state provider associations. Combined, our members support more than one million individuals with I/DD across their lifespan and are funded almost exclusively by Medicaid. Our mission is to advance the ability of our members to support people with I/DD to fully participate in their communities.

The impact of the COVID-19 pandemic on I/DD services cannot be overstated: the pandemic accelerated an already severe direct care workforce crisis, leading providers to grapple with increasing rates of turnover among staff and a growing workforce shortage, often forcing providers to ultimately discontinue programs and services. First and foremost, ANCOR requests legislative measures to invest in and strengthen the direct care workforce as means to bolster...
the current health care system and protect against further erosion of the health care system’s infrastructure in the wake of a future pandemic.

The remainder of ANCOR’s comments will focus on the topic of how Congress can ensure better coordination and policy from the Department of Health and Human Services (HHS) and other federal agencies related to the public health emergency.

**Improve Facilitation of Information to Providers**

ANCOR’s providers appreciate the role the Administration for Strategic Preparedness and Response (ASPR) has played during the COVID-19 public health emergency in disseminating information to states; however, many providers reported that during a critical period in which the administration was constantly furnishing new and updated guidance, information was often not distributed in a way that would reach every provider and stakeholder in a timely manner. Providers also report that guidance was often lacking in clarity relating to the specific type of service or entity it covered.

Moreover, during the COVID-19 pandemic providers faced the challenge of integrating guidance from various federal entities, not only from APSR, but also from the Centers for Medicare and Medicaid Services (CMS), the Centers for Disease Control and Prevention (CDC), and the Department of Labor Occupational Safety and Health Administration (OSHA), into operational mitigation and safety practices. While each entity's guidance was invaluable, the lack of unified language and approach created confusion and wasted time for providers as they often needed to seek clarification or decipher best practices on their own. For example, the CDC’s guidance was based on the type of care provided in a setting, while ASPR's guidance was based on the type of provider operating in the setting.

As a result, ANCOR would recommend that a collaborative approach be taken to develop guidance structures and norms across federal entities. These structures can then be in place as a foundation to ensure consistent communication and guidance across federal entities. ANCOR also recommends that ASPR, along with CMS, CDS, and OSHA convene forums to solicit feedback from stakeholders and ensure that each type of service provider, including Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), are represented.

**Provide Clarification About Winding Down the Public Health Emergency**

With the termination of the COVID-19 public health emergency (PHE) declaration drawing near, providers are bracing themselves for the roll-back of additional federal funding and regulatory flexibilities that were authorized during the PHE. Providers are concerned that the wind-down of such measures, such as expanded service settings and the ability to provide temporary direct support wage increases, which have helped sustain access to I/DD services, will lead to a decrease in accessibility after the termination of the PHE. Providers’ concerns are also rooted in uncertainty about when certain regulatory flexibilities or requirements will terminate, and
which can be made permanent. ANCOR recommends Congress use PAHPA to provide guardrails and guidance in winding down future public health emergencies.

ANCOR appreciates the leadership of this Committee and the opportunity to provide comment on improving pandemic and emergency response and readiness through PAHPA. For additional information or questions, please contact Elise Aguilar, Direct of Federal Relations, at eaguilar@ ancor.org.

Sincerely,

Elise Aguilar
Director of Federal Relations