

NADSA Public Policy Alert



Participation Creates Power!

Congress Considers Making HCBS a Medicaid Entitlement; Advocacy Will Be Needed to Assure Adult Day Services Are Included

Dear NADSA Member:

This is a long-awaited opportunity! Making HCBS a Medicaid entitlement will remove the continual anxiety of states choosing to reduce budgets by eliminating ADS, which is now an optional service.

NADSA Members need to advocate strenuously to assure ADS/ADHC is specifically included in the list of services contained in the legislative text. There are several references of services provided by ADS/ADHC but it would be better to have specificity. We have until April 26th to offer recommendations and comments. Every ADS/ADHC provider should do so. NADSA will offer comments and will provide textual guidance for individual providers to offer comments. **Please watch your inbox and the NADSA website for information on how to provide comments to ensure ADS/ADHC is specifically included in the legislative text.**

The following is the press release that provides additional information about the draft legislation.

FOR IMMEDIATE RELEASE:

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Dingell, Hassan, Casey, Brown Release Draft Proposal for HCBS Access Act

Lawmakers seek feedback on proposal to make home and community-based services mandatory under Medicaid, end the institutional bias in long-term care

WASHINGTON, D.C. – Congresswoman Debbie Dingell (D-MI), Senator Maggie Hassan (D-NH), Senator Bob Casey (D-PA), and Senator Sherrod Brown (D-OH) today released a discussion draft of the *HCBS Access Act* for stakeholder feedback. The proposal seeks to mandate HCBS in Medicaid to provide critical services, creating national, minimum requirements for home and community-based services, and make it possible to enhance those services and the long-term care workforce. <u>See here for discussion draft text</u> and <u>here for a memo seeking stakeholder input</u>.

Under our current long-term care system, too many people cannot access the care they need in their homes and communities even though these are the environments where most people prefer to receive care. The patchwork system that currently exists through Medicaid HCBS waivers, where access to services depends on the state in which you live, undermines the much-needed creation of a durable system. States have been using a waiver process to provide long-term services and supports for almost forty years.

To build on the discussion draft, the offices are currently seeking feedback on:

- Provider pay and rate structures of States for HCBS;
- Workforce development, including but not limited to, wages and benefits for direct service workers and personal care attendants as well as training and recruitment;
- HCBS infrastructure in States that support family caregivers, provider agencies, and independent providers, including but not limited to, housing, transportation, employment and enrollment systems and processes;
- Other related policies and programs, such as Money Follows the Person and spousal impoverishment protections.
- Many other critical items to further expansion and improve access to HCBS for those who desire the supports.

The offices ask that any feedback be provided, in writing, by Monday, April 26 by sending your comments to <u>HCBSComments@aging.senate.gov</u>.

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