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**Duane Mayes**  
PAST PRESIDENT  
Alaska

March 18, 2020

The Honorable Mitch McConnell  
Majority Leader  
United States Senate  
U.S. Capitol Building, Room: S-230  
Washington, DC 20515

The Honorable Nancy Pelosi  
Speaker  
United States House of Representatives  
U.S. Capitol Building, Room: H-232  
Washington, DC 20515

The Honorable Charles Schumer  
Minority Leader  
United States Senate  
Hart Senate Office Building, Room: 419  
Washington, DC 20510

The Honorable Kevin McCarthy  
Minority Leader  
United States House of Representatives  
U.S. Capitol Building, Room: H-204  
Washington, DC 20515

Dear Majority Leader McConnell, Minority Leader Schumer, Speaker Pelosi, and Minority Leader McCarthy:

On behalf of ADvancing States, I am writing you regarding Congressional responses to the coronavirus disease 2019 (COVID-19). ADvancing States is a nonpartisan association of state government agencies that represents the nation's 56 state and territorial agencies on aging and disabilities. We work to support visionary state leadership, the advancement of state systems innovation, and the development of national policies that support home and community-based services for older adults and persons with disabilities. Our members administer a wide range of services and supports for older adults and people with disabilities, including administering the Older Americans Act (OAA) and Medicaid long-term services and supports (LTSS). Together with our members, we work to design, improve, and sustain state systems delivering long-term services and supports for people who are older or have a disability and for their caregivers.

We first want to express our appreciation for the relief packages that have been introduced and passed thus far. We are grateful that you recognized the importance of OAA nutrition programs and allocated an additional \$250 million for feeding older adults impacted by the pandemic. We also appreciate the increase in Medicaid matching funds, which will greatly assist with the financing of LTSS in addition to the primary and acute services needed to address COVID-19. As you are seeking additional ways to address both the disease and the social and economic challenges arising from the spread of the coronavirus, we have several recommendations to further support the older adults and people with disabilities receiving LTSS as well as the workers, family members, and friends who are delivering services during this challenging time.

We specifically want to reiterate our prior recommendation to ensure that personal protective equipment (PPE) is available for a wide range of individuals who are responsible for delivering face-to-face and hands-on assistance to older adults and people with disabilities, including:

- Direct care workers, such as certified nursing assistants home health aides, and personal care attendants—who provide the majority of paid LTSS in the U.S.;
- Adult protective services (APS) workers, Long-term Care Ombudsmen, Preadmission Screening and Resident Review (PASRR) staff, and other coordinators who often must go into individuals' homes or facilities to conduct investigations in person;
- Local government or nonprofit staff, such as those at Area Agencies on Aging (AAAs), who provide the bulk of the services under the OAA that provide critical services for older adults such as home-delivered meals, caregiver supports, and case management.

Without these workers our nation's LTSS system will be hard pressed to continue to deliver services and supports to those who most need it and workers in the system will place themselves and those they are serving at greater risk.

*Recommendation:* We recommend that workers such as direct care workers, APS, and other aging and disability network staff be provided with funding to purchase PPE for frontline workers as well as priority status, alongside health care workers, for securing available equipment.

Due to the higher risk of infection that many of these providers experience, coupled with low pay and limited sick leave, there are also reports of workers that are hesitant or resistant to providing services out of fear of becoming ill themselves. Additionally, a number of LTSS providers are not employees of agencies and are self-employed so may not qualify for sick leave proposals under consideration in Congress. At this point, there is significant need for support to ensure that there are sufficient workers to reduce reliance on congregate delivery methods.

*Recommendation:* Provide funding to support health care, sick leave, and other services to ensure that direct care workers are able and willing to continue providing care.

A significant portion of the LTSS workforce are also parents who care for children in their homes. As schools, childcare facilities, and other congregate centers around the country close to reduce the spread of disease, these workers are increasingly left with limited options to secure childcare in order to go to work.

*Recommendation:* Provide resources for states and localities to create or strengthen childcare options for medical professionals, emergency workers, and LTSS workers.

We are also seeing an increase in calls from older adults seeking guidance, assistance, and information about COVID and related resources. Aging and Disability Resource Centers (ADRCs)/ No Wrong Doors and their partners are frequently the first stop for information and referral/assistance older adults, individuals with

disabilities, and their caregivers. During the outbreak, there has been a lot of confusion and misinformation spread throughout social media, rumors, and individuals attempting to institute scams. State agencies and their partners at ADRCs and 211s are able to distribute fact-based information on COVID-19 to the general public. Yet these programs are significantly under-resourced—only \$8 million was appropriated for ADRCs nationwide in FY2020.

*Recommendation:* Include increased funding for ADRCs/NWD and their partners in order to help connect older adults and people with disabilities to necessary services and with accurate information.

As the stark realities of this outbreak are coming into clarity, it is increasingly evident that older adults and those with underlying health conditions will likely need to have extended periods of self-isolation until the pandemic is under control. This applies to all individuals in these categories, not just those with potential exposure to a person known to carry COVID-19. This will require additional supports beyond the standard services provided by Medicaid and the OAA. Specifically, we note that each program has limits on the number of meals that can be provided to an older adult. The Centers for Medicare and Medicaid Services (CMS) continues to advise states that they cannot provide three meals a day. OAA meals are largely limited to five meals a week, essentially providing only one meal for each weekday.

*Recommendation:* Congress should provide time-limited authority to deliver 21 meals per week through both the OAA and Medicaid LTSS programs, with additional funding to ensure that all individuals in need can access the nutrition supports.

State agencies are currently responding to the COVID crisis, which is evolving extremely rapidly, and an adequate response requires diverting staff from other programmatic and policy areas. This is reducing state agencies' ability to implement new requirements, especially in their LTSS programs. There will likely be delays in operationalizing some new requirements, particularly the Electronic Visit Verification (EVV) requirements contained in the 21<sup>st</sup> Century Cures Act and the HCBS Settings Requirements included in the 2014 HCBS Final Rule.

*Recommendation:* Congress should include language to delay the effective date of EVV and the HCBS Settings requirements by no less than 1 year for each provision.

Lastly, we want to stress how important it is for state leaders to have accurate and timely information during this period of crisis. The Administration for Community Living funds a wide range of technical assistance centers under the OAA and related statutory authorities, which target issues important to certain populations such as older adults of different ethnic and racial backgrounds, program-specific areas, and whole host of nuanced policy and program areas. These centers have been key partners in disseminating Federal guidance, such as frequently asked questions, during this crisis. These centers can also provide a locus for the exchange of best practices and ideas between and among states. Unfortunately, no such center exists that serves state



agencies. This has created substantial challenges for states that are attempting to respond to a crisis that is unfolding by the hour.

*Recommendation:* Provide funding for a technical assistance center that is targeted towards state aging and disability agencies and can be used to ensure that the states are best suited to respond to this, and any subsequent, disaster.

We appreciate the bipartisan efforts to address COVID-19 and strongly encourage Congress to pass a bill to that contains the funding and policy recommendations herein.

If you have any questions regarding this letter, please feel free to contact Damon Terzaghi at [dterzaghi@advancingstates.org](mailto:dterzaghi@advancingstates.org) or Adam Mosey at [amosey@advancingstates.org](mailto:amosey@advancingstates.org) or 202-898-2578.

Sincerely,

A handwritten signature in blue ink that reads "Martha Roherty".

Martha Roherty  
Executive Director  
ADvancing States

Cc: Members of the U.S. Senate  
Members of the U.S. House of Representatives