

To: All Stakeholders

From: The Offices of Sens. Hassan, Brown, and Casey and Rep. Dingell

Re: Discussion Draft of the Home and Community Based Access Act (HAA)

Date: March 16, 2021

Our offices are broadly disseminating a **discussion draft** of a bill we call the *Home and Community-Based Services Access Act* (HAA). We are releasing this to gather comments and suggestions due by April 26, 2021.

We ask that you review the discussion draft and provide our offices with comments, in writing, by April 26. Send comments to HCBSComments@aging.senate.gov.

Members of multiple communities, including people with disabilities, older adults, families, workers, and civil rights advocates have highlighted the patchwork home and community based services (HCBS) system that currently exists through Medicaid HCBS waivers. The current system is an artifact of a law that is over 55 years old and never envisioned community-based supports for older adults and people with disabilities. This HCBS patchwork is built on waivers that does not serve everyone in need of long-term services and supports and does not adequately support the work force.

It is time to establish a baseline criteria for the delivery of HCBS across the country and to make those foundational services an entitlement under Medicaid. Creating a minimum set of services, that states can enhance, and requiring HCBS as part of Medicaid for those who are eligible, will help states create a network of providers and workers to deliver critical services and support. It will also eliminate the long waiting lists for services experienced by many eligible people in an estimated 41 states across the country.

Furthermore, despite the growing demand for HCBS, the current system does not support a robust workforce. Low wages, inadequate benefits, and high turnover all drive high job vacancy rates and worker shortages that further inhibit access to long-term services and supports for those most in need. It is time to create a strong, stable HCBS infrastructure across the country that will support the needs of the people it serves and values the workers who provide those services.

For those reasons and many more, our offices offer this discussion draft for comments. We ask for comment on all parts of the draft and would especially appreciate comments on these topics:

- The minimum services and standards to be provided by state HCBS;

- Methods to ensure state Medicaid rates are sufficient to support required services and supports and to provide adequate pay for direct care workers, including personal care attendants and other in-home care providers;
- Workforce development and support, including but not limited to, wages and benefits for direct service workers and personal care attendants, as well as recruitment, organizing, training and retention strategies;
- HCBS infrastructure in states that support family caregivers, provider agencies and independent providers;
- An HCBS infrastructure that:
 - Supports workforce development and activities to address workforce shortages, recruitment, turnover, career development and the provision of qualifications and on-going professional development;
 - Ensures direct service workers are provided a voice in policy decisions and are able to join a union and collectively bargain;
 - Facilitates communication among those receiving services, Medicaid HCBS program staff, and direct care workers in order to strengthen the delivery system and respond to emergencies; and
 - Enables eligible Medicaid recipients to connect with qualified home care workers who fit the needs of older adults and people with disabilities, and provides other supports to those navigating the long-term care systems.
- The role of managed care in providing HCBS, in particular, issues such as network adequacy standards and ensuring that consumers can retain maximum autonomy to direct their care.
- Components of the long-term care infrastructure in states that support all types of providers, including paid and unpaid caregivers, and provider agencies.
- Other related policies and programs, such as Money Follows the Person, the Program of All-Inclusive Care for the Elderly (PACE), and spousal impoverishment protections.

We hope this discussion draft is the first step to creating HCBS support for all those who are eligible and choose HCBS.

Please provide your comments and suggestions by sending them to HCBScomments@aging.senate.gov by April 26, 2021. We look forward to your feedback on the discussion draft.