

April 3, 2020

Gov. Tony Evers 115 East Capitol Drive, #1 Madison, WI 53707

Senate Leader Fitzgerald State Capitol, Room 211 South Madison, WI 53707

Senate Minority Leader Shilling State Capitol, Room 206 South Madison, WI 53707

CC: Legislative Members
DHS Secretary Designee Palm

Speaker Robin Vos State Capitol, Room 217 West Madison, WI 53708

Assembly Minority Leader Hintz State Capitol, Room 201 West Madison, WI 53708

Dear Governor Evers, Senators Fitzgerald and Shilling, Representatives Vos and Hintz:

On Wednesday April 2nd, the Governor released a summary of a second legislative COVID-19 response package. Survival Coalition writes to urge the Legislature to respond rapidly to address the needs of the 85,000 people with disabilities and older adults in Wisconsin's Home and Community Based long-term care system (Family Care, IRIS, CLTS).

Flexibility to respond to the evolving COVID-19 crisis now is essential. The workforce needs assurances of protective equipment and hazard pay to continue supporting people in their homes where they are safest and reduce pressure on the medical system. The home and community-based (HCBS) small businesses in Wisconsin's provider network need assistance now and going forward to remain afloat during and after the COVID-19 crisis. Many small businesses reimbursed by Medicaid for HCBS services have already closed offices for the safety of their clients and have been forced to lay off workers with specialty expertise working with people with disabilities or older adults.

Without immediate flexibility to provide remote services or respond to new challenges directly related to COVID-19, many are saying they are weeks or days away from going out of business permanently. It is imperative that community employment, day service, transportation, specialized therapy, rehabilitative and habilitative service providers, and other home and community based long term care providers are sustained, can continue to keep their workforce and vulnerable people safe, and are able to quickly resume quality services once the pandemic has ended.

A legislative COVID-19 response package must address and be adequately funded to ensure:

Nondiscrimination in triage policies



- Overtime and hazard pay for direct care, home health, residential, and other workers who are
 providing more hours of service or incurring risk of COVID-19 infection during the course of their
 duties
- Access to Personal Protective Equipment for direct care and home health workers
- Retainer payments for provider organizations to maintain fiscal viability
- Allowances to provide and be reimbursed for services provided remotely
- Allowance for employment service, day service, and other professionals working for long term care agencies to do alternative work that benefits long term care participants
- Supplemental funding for the personal care and home health workers providing services in the homes of Family Care, IRIS, CLTS participants.
- Flexibility for provider agencies to address emerging needs as the COVID-19 pandemic continues including:
 - Access to plain language information on COVID-19 and changes to public programs that effect people with disabilities and older adults
 - Facilitating information access for people with disabilities who do not have phones, internet service, or necessary technology
 - Providing cares and services for long term care participants who have tested positive for COVID-19
 - Providing cares and services for long term care participants housed in isolation facilities for COVID-19
 - Antibody testing, when available, of long-term care workers to determine when COVID-19 exposed or infected workers can safely return to work.
 - Allow flexibility to allow providers to provide services in multiple/any applicable setting"
- Extend existing prior authorizations and waive prior authorization requirements for new service needs.
- Ensure people with disabilities and older adults have access to a 90-day medication and medical supply fills.
- Ensure people with disabilities and older adults have transportation services, and can access essential services and get to necessary medical appointments.
- Allow use of mail order pharmacies, remove limits on refills authorized via telehealth visits, and remove restrictions on mail order pharmacies across state lines.
- Remove short fill terms, such as those imposed under the Controlled Substance Act prohibitions, strict prior authorization requirements.
- If laid off workers use unemployment benefits, waive re-employment service sessions and reimburse the employer agency for its increase in unemployment costs.



Survival Coalition provided specific recommendation on <u>items to include in the Appendix K amendment</u> and 1135 waiver on March 18th. We urge the legislature to expedite these waiver requests and approve them to be submitted to the Centers for Medicaid Services (CMS) without delay. To date fifteen states have had 1915(c) Appendix K waivers¹ approved by CMS to help states respond to COVID-19 crisis, and 44 states have had 1135 waivers approved.

It is critical the state ensure the home and community based workforce can continue to provide services so older adults and people with disabilities to the 85,000 older adults, people with physical disabilities, people with intellectual disabilities can stay in their homes and out of expensive Medicaid-funded institutions.

Survival Coalition is comprised of more than 30 statewide disability organizations that advocate and support policies and practices that lead to the full inclusion, participation, and contribution of people living with disability.

Sincerely,

Survival Co-Chairs:

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¹ https://www.medicaid.gov/resources-for-states/disaster-response-toolkit/home-community-based-services-public-heath-emergencies/emergency-preparedness-and-response-for-home-and-community-based-hcbs-1915c-waivers/index.html