CCD Long Term Services and Supports Task Force 2023 Federal Agency Priorities

The LTSS Task Force addresses the services and supports that enable individuals with disabilities of all ages to live in their own homes and communities, known as Home and Community-Based Services (HCBS). HCBS, which are primarily provided through Medicaid, are necessary for the community integration, full participation, independent living, and economic self-sufficiency for many people with disabilities and older adults and makes it possible for them to fully exercise their civil and human rights.

Commitment to Anti-Racism and Equity

CCD LTSS TF commits to considering the equity impact of any legislative proposal we support, and to incorporating anti-racism into all our work, in accordance with the LTSS anti-racism principles and objectives. As a task force, invite speakers and share readings to educate ourselves about white privilege and anti-racism. We also commit to discussing and considering the equity impact of major legislative or policy positions prior to taking a position as a task force. Data collection, analysis, and publicly transparent reporting is critical to monitoring and measuring access to HCBS. The CCD LTSS Task Force supports efforts to create a comprehensive, consistent, federal standard for demographic collection and ensure that states have the resources to necessary to meet the standard. The antiracism subcommittee meets regularly to review policy positions and priorities to ensure that racial equity is embedded in our work, and suggest additional priorities.

The Task Force federal agency priorities include:

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services

- **Home and Community Based Services Settings Rule**: Prioritize strong implementation of the HCBS Settings Rule, including by providing additional guidance, technical assistance (TA) to states, and ongoing monitoring, with a focus on the heightened scrutiny process.

- **HCBS Improvements**: Work with states and stakeholders on strategies for unwinding emergency waivers and Appendix Ks and permanently incorporating beneficial changes into HCBS programs and support states in making this transition. If Better
Care Better Jobs Act or other similar legislation passes, work with stakeholders, and CMS to implement the improvements.

- **HCBS Quality Measures**: Finalize and work with states to implement core quality measures for HCBS that emphasize person-centered services, compliance with the HCBS Settings Rule, equity in access to HCBS, quality measures linkage between HCBS and general health and behavioral health, in order to promote more integrated whole-person health and wellness, and best practices.

- **Comment on Medicaid Waivers that Threaten Community Integration**: Rescind CMS’ guidance and waivers that increase funding for psychiatric institutional placements instead of investing in community-based behavioral health care. Encourage CMS and HHS to support states to expand robust HCBS for people with mental health disabilities.

- **Equity in Access to HCBS**: Work with ACL and OCR to identify racial and other inequities in HCBS and develop strategies for addressing those inequities at the intersection of marginalized identities, including requiring states to develop equity plans for their HCBS programs, providing TA and funding for outreach to Black, Indigenous, and other communities of color, including non-native English speakers and LGBTQ+, and providers that serve them, and prioritize transition efforts in institutions disproportionally with residents from those communities.

- **Olmstead**: Provide guidance on how states can further *Olmstead* implementation in their Medicaid systems, particularly in light of COVID-19 laying bare the risks of institutional and large congregate settings; work with the Department of Justice to support their *Olmstead* enforcement activities.

- **Linkages with housing**: Collaborate with the U.S. Department of Housing and Urban Development (HUD) regarding targeting affordable, integrated, accessible housing to people transitioning from, or at risk of entering, institutions; provide technical assistance to states about leveraging Medicaid for housing-related supports.

- **Workforce**: Together with ACL, work with states and stakeholders to develop strategies to address workforce shortages in Medicaid HCBS programs.

- **Advocate for Coverage of LTSS in all forms of health insurance**: Work with CMS to create standards to ensure that all health insurance covers services necessary for community integration.

- **Advocate for Increased Access to LTSS**: Work with CMS to develop and provide guidance which measures and assesses access to HCBS, including whether needed services are being prior authorized, what proportion of authorized hours are being filled, and whether provider capacity is sufficient.
Administration for Community Living (ACL)

- Ask ACL to prioritize research to identify, and policies to address, inequities in access to HCBS and coordinate related interagency initiatives including with CMS, OCR, and the National Institute of Health’s Institute on Minority Health and Health Disparities.

- Work with ACL to ensure that moving forward, CDC and CMS definitions of “long term care” settings and congregate settings include the full range of congregate settings in which people with disabilities may live, and that protections for people with disabilities are applied equitably and meaningfully to all included settings.

- Medicaid Buy-In for Workers with Disabilities: ACL should continue and expand upon its work to help people, including those transitioning to adulthood, understand options to engage in the workforce while receiving Medicaid funded LTSS.

Office for Civil Rights

- Vaccine Allocation: Ensure that people with disabilities and older adults, particularly those in any institutional or congregate setting or receiving HCBS in a setting where it is not possible to socially distance, continue to be prioritized for necessary vaccines or booster shots and are not discriminated against in violation of federal disability laws; engage in culturally competent, accessible outreach to ensure that people with disabilities and older adults are given information to make an informed choice about the vaccination; ensure long-term care facilities do not discriminate against people who decline vaccination. See principles.

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