



June 1, 2021

Commissioner Deidre S. Gifford, MD, MPH
Department of Social Services
55 Farmington Avenue
Hartford, CT 06105

Dear Commissioner Gifford:

I write today on behalf of the Home Care Association of America Connecticut Chapter, which represents home and community-based services (HCBS) providers across the state. We bring personal care into the homes of seniors and persons with disabilities so they can remain independent and healthy.

On May 13, 2021, the Centers for Medicare and Medicaid Services (CMS) provided guidance to State Medicaid Directors about how a temporary 10-percentage point increase in the federal medical assistance percentage (FMAP) for certain Medicaid expenditures can be used for HCBS, effective April 1, 2021, as outlined in Section 9817 of the American Rescue Plan Act of 2021. The guidance notes that states must use the additional funds equivalent to the amount of federal funds attributable to the increased FMAP to **implement or supplement** the implementation of one or more activities to **enhance, expand, or strengthen HCBS under the Medicaid program**. States are required to submit their initial HCBS spending plans to CMS by June 13, 2021.

More often people are choosing to receive personal care and assistance at home as they age, rather than going into a skilled nursing facility. Not only is home-based care the preferred option, but it is significantly less costly to state Medicaid programs than institutional care.

During the COVID-19 pandemic, in-home care became even more essential, and our industry responded. While the demand for HCBS is increasing exponentially, our supply of caregivers is not.

Right now, our country is facing a new epidemic: the lack of willing and qualified workers. The home care industry is not immune to this struggle. Many agencies are forced to cut hours or turn away clients because we do not have the caregivers to staff

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the cases. This means that some seniors will not receive the assistance they need to eat right and some adults with disabilities will not have the help they depend on to get in and out of bed.

We write today to offer several suggestions about how Connecticut can use the available 10% increase in FMAP dollars. Our primary suggestion is to use the funds to increase Medicaid reimbursement rates for personal care services, so that we can recruit and retain the workers who provide essential care at home to our clients. CMS expects that an agency that receives payment under such an increased rate will increase the compensation it pays its nurses and aides. This is critical, since a shortage of caregivers and personal care assistants leads to an increase in more costly institutional care settings, and prevents vulnerable seniors from receiving services in their preferred setting – at home.

Using the additional funds to support an increase in Medicaid reimbursement rates will enable home care agencies to compete with other potential employers for the workers we need.

In addition to a rate increase, we also offer several other suggestions to enhance, expand, or strengthen Medicaid HCBS:

- **Workforce Recruitment:** Conduct activities to recruit and retain home care workers. Offer incentive payments to recruit and retain home care workers and direct-support professionals.
- **Leave Benefits:** Provide paid sick leave, paid family leave, and paid medical leave for home care assistants who are not already included in the service rate/rate methodology.
- **Specialized Payments:** Provide hazard pay, overtime pay, and shift differential pay for home care workers who are not already included in the service rate/rate methodology.
- **Increased Access to HCBS:** Provide new or additional Medicaid HCBS services or increase the amount, duration, or scope of HCBS to reduce the risk of institutionalization, especially during the pandemic.
- **Supports for Family Caregivers:** Support family care providers of eligible individuals with needed supplies and equipment, which may include items not typically covered under the Medicaid program, such as PPE and payment as a service provider.
- **Educational Materials:** Prepare information and public health and educational materials in accessible formats for individuals (including formats accessible to people with low literacy or intellectual disabilities) about HCBS and all available options.

We appreciate your consideration and welcome the opportunity to work with you on any new initiatives to strengthen the HCBS program for Connecticut residents who rely on it.

Sincerely,



Mark McGoldrick
Chairman

c: Kate McEvoy, Esq., Director, Division of Health Services
Sen. Cathy Osten, Co-Chair, Appropriations Committee
Rep. Toni Walker, Co-Chair, Appropriations Committee