Changes in HCBS Programs in Response to COVID-19

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Medicaid-funded home and community-based services (HCBS) are essential for low-income older adults to remain in their homes and receive the services they need, especially during the COVID-19 pandemic. HCBS waivers allow a state to provide home and community-based services as an alternative to nursing facility care. HCBS under a waiver are broadly defined by federal law; as a result, specific services and service levels vary from state to state, depending on states' choices. Possible services include, but are not limited to, personal care, case management, homemaker services, home health aide services, adult day health care, assisted living, and respite care.

In response to the COVID-19 emergency, states are receiving federal approval for modifying their Medicaid HCBS waivers in a variety of ways. The changes include modifications to:

- Access & eligibility
- Services (including remote services)
- Payment to family members and legal representatives
- Provider qualifications
- Processes for level of care evaluations and reassessments
- Payment rates
- Person-centered service plans
- Incident reporting requirements
- Support during hospitalization
- Expanding opportunities for self-direction

Justice in Aging has developed and is frequently updating <u>a table</u> that summarizes modifications to state HCBS programs for older adults.

For more detailed information for your particular state, CMS has <u>developed a website</u> which includes: 1) a template Appendix K form for the current COVID-19 emergency and 2) copies of states' approved Appendix K modifications.

Additional Resources

- <u>CMS Approved COVID-19 Appendix K Waivers</u>
- <u>CMS Disaster Preparedness Toolkit</u>
- Justice in Aging COVID-19 Resources

KFF COVID-19 Issues and Policy Options for LTSS

Case consultation assistance is available for attorneys and professionals seeking more information to help older adults. Contact NCLER at <u>ConsultNCLER@acl.hhs.gov</u>.

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