

## Equitable COVID-19 Funding Is Urgently Needed for Americans with Complex Medical Needs

### *Medicaid Providers Who Care for People with Intellectual & Developmental Disabilities are at Risk of Being Omitted from Federal Response*

National home and community-based care providers like The MENTOR Network serve individuals with intellectual and developmental disabilities and brain and spinal cord injuries. These individuals often rely on 24-hour care by in-home care providers, and if they contract COVID-19, they will end up in local hospitals where already strained staff will struggle to meet their complex medical needs.

The direct support professionals, nurses, and therapists caring for these individuals are the heroes on the frontlines of the pandemic and are at risk of becoming overly strained as this crisis unfolds. The individuals being supported by these essential caregivers depend on their life-sustaining care 24 hours a day, 7 days a week, 365 days a year.

We are concerned that this essential group of Medicaid-funded providers will not receive essential support from the U.S. Department of Health and Human Services (HHS). As you know, Medicaid is funded by both the federal and state governments, but providers get paid through the states. Because most of these providers are Medicaid only, it is challenging for the Centers for Medicare & Medicaid Services (CMS) to identify and reach them with resources directly.

### A Broad Range of Voices Are Raising the Alarm



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“With HHS’ allocation of the first tranche for Medicare services announced earlier this week, we expect the Department with soon follow suit with a second tranche of funding for Medicaid services that will specifically include providers of long term care for people with intellectual and developmental disabilities, distribution of which we strongly encourage follows a similar model as the one established for Medicare, providing payments (i.e., not loans) in amounts equal to 6.2% of providers’ 2019 Medicaid revenue.”



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“...Using the expedited Medicare fee-for-service electronic funds transfer pathway does not account for the real and pressing concerns of safety-net providers that are on the frontlines of serving the nation’s poorest and most vulnerable people, but may not have high Medicare revenue. Given that the purpose of the relief fund is to reimburse providers for health care expenses related to COVID-19 not covered by other revenue sources, these providers should be prioritized when distributing the remaining \$70 billion in federal funds.”



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“Medicaid Directors are confronting an unprecedented crisis. Many of the providers who serve our 72 million members are at risk of closing their doors in a matter of days or weeks due to extraordinary costs (e.g. staffing, PPE) and loss of typical visit volume.

...Medicaid programs have the infrastructure in place today to avert this crisis and have successfully employed this strategy with select providers during other disaster events. If we wait, core components of the Medicaid delivery system could fail during, or soon after, this pandemic.”



“There are over 3.2 million home and community-based service (HCBS) direct care workers providing essential services to more than 8.3 million people in the U.S....”

Failure to receive these health sustaining services will lead to the exacerbation of chronic conditions or disability, leading to emergency department visits and/or hospitalization, the avoidance of which is critical during this crisis. HCBS recipients should not be exposed to greater risk of COVID-19 infection and health care resources need to be prioritized for the care and treatment of COVID-19 active patients.”

## Recent Coverage

### The New York Times

#### **‘It’s Hit Our Front Door’: Homes for the Disabled See a Surge of COVID-19**

“As the coronavirus preys on the most vulnerable, it is taking root in New York’s most sprawling network of group homes for people with special needs.”

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### THE NEW ORLEANS ADVOCATE

#### **For families with developmentally disabled members, coronavirus presents new challenges, fears**

“...Kylie, who will turn 15 next month was born with schizencephaly, isn’t able to walk or talk and uses a feeding tube for her nutrition.

‘A simple cold or even allergies, it takes her two to three weeks just to recover from that.’

The threat of coronavirus, has made the St. Bernard parish family even more vigilant.”

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### Iowa City Press-Citizen

PART OF THE USA TODAY NETWORK

#### **Area group homes grappling with ever-growing pandemic problems**

“COVID-19 represents a change in plans for an industry that has already been facing the challenges of a pre-virus crisis.

‘There is a nationwide shortage of direct support professionals and that has been there before this,’ said Sorenson. ‘We’re always hiring; we’re still hiring now.’”

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# THE WALL STREET JOURNAL.

## Coronavirus Strains Safety Net for People with Disabilities

“Many of the social resources that people with disabilities rely on at group settings like long-term care facilities are strained,” said Jim DeBeaugrine, whose brother-in-law Peter Prater has Down syndrome.

‘It’s not just a risk – it’s all consuming,’ said Mr. DeBeaugrine, a consultant on disability issues and former Florida disabilities agency head. ‘It’s affected our workforce, it’s affected all the natural support systems that our people have come to rely on. It’s affecting providers’ ability to provide services that are critical.’”

[Read the full article](#)



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# The Washington Post

## Group homes for disabled adults grapple with the spread of coronavirus

“Working at a group home for adults with intellectual disabilities is often strenuous. But during the coronavirus pandemic, Thomas said, each day feels like walking a tightrope — a thin one, with no safety net.

When she steps into the three-bedroom condominium in suburban Montgomery County, Md., to feed, bathe and care for the three disabled residents, she worries about what she may have carried inside. And after her eight-hour shift, when she returns to her apartment in nearby Layhill, she wonders whether she might have brought anything home to Keith, her 16-year-old son.”

[Read the full article](#)

