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PENNSYLVANIA

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## United States Senate

**WASHINGTON, DC 20510-3805** 

April 30, 2020

The Honorable Seema Verma Administrator Centers for Medicare & Medicaid Services Department of Health and Human Services 7500 Security Boulevard Baltimore, MD 21244

Dear Ms. Verma:

I write to request the Centers for Medicare and Medicaid Services (CMS) issue guidance to hospitals and other medical settings to allow Direct Service Providers (DPSs), including family members who serve in such capacity, access to these facilities when an older adult or a person with a disability is admitted.

In the Coronavirus Aid, Relief, and Economic Stimulus (CARES) Act, passed on March 27, Sec. 3715 permitted direct support professionals and personal care attendants who provide services and supports to people receiving services from 1115 Medicaid waivers to continue to receive supports when in acute care and in-patient settings such as hospital and rehabilitation centers. Congress expressly to permitted HCBS services to continue in acute care and in-patient settings is to ensure the essential background information and communication abilities provided by DSPs, including family members serving in that capacity. DSPs make it possible to provide the most efficient and effective health care services for those using wavier services. This practice is beneficial for hospital personnel and to the individual receiving medical care.

While millions of older adults and people with disabilities receive services and supports in their own homes from direct service providers, over 70 percent continue to receive those services from family members. It is critical that family members, who have essential knowledge regarding the health background and communication needs of relatives, be considered as DSPs while their relative is in acute care or other medical settings.

Acute care settings are confusing, stressful situations for anyone. They are even more so for an older adults or a person with a disability. The relationship, communication skills and background knowledge that DSPs, whether provided by a community services agencies or family members, can improve the care provided in a hospital or other medical care setting.

I was dismayed to learn that certain facilities continue to place restrictions on DSP access when older adults or a person with a disability been admitted. For an individual who may rely on a DSP to help them communicate, this decision removes an essential member of the care team. In addition to assisting with communication, the DSP often has an extensive medical history of the

individual. Including DSPs as members of the team treating the older adult or person with a disability will result in more complete information about the patient, better communication with the patient and more positive health outcomes.

Additionally, when a family member serves as a DSP, they must be granted the same rights to support the older adult or person with a disability as those who are not a family member. I have heard from a number of constituents in Pennsylvania that refusing access to family members serving as DSPs continues to be an issue at hospitals and other medical care settings across the state. This policy must be clarified.

The COVID-19 public health emergency has required unprecedented actions to save lives and keep Americans safe. It is critically important for hospitals to continue to restrict non-essential access to patients. However, DSPs, including family members who serve as a DSP, for older adults and people with disabilities must be viewed as part of the health care team and granted access to provide needed supports.

I request that CMS issue guidance to all acute care settings providing health care services to patients receiving Medicaid to permit DSPs, including family members who service in that capacity, to the acute care setting. Guidance from CMS will ensure that acute care and other medical settings comply with the CARES Act while continuing to address the health care needs of older adults and people with disabilities. I look forward to your actions to clarify this policy.

Sincerely,

Robert P. Casey, Jr. United States Senator

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