# COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES REQUEST FOR INFORMATION

#### **Related to**

Enhancing, Expanding and Strengthening Home and Community Based Services in Massachusetts using American Rescue Plan Act Funding

# **Response Form**

# **Issued: April 16, 2021**

#### **Respondent Information Cover Sheet**

Include the following information for the individual who should be contacted for purposes of discussing any aspect of the Respondent's completed Response Form:

First Name: [Ellen]

Last Name: [Attaliades]

Title: [President and CEO] Organization: [Association of Developmental Disabilities Providers (ADDP)/Coordinator of the Adult Foster Care (AFC) Advisory Group]

**Respondent Principal Address**: [1671 Worcester Road]

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- I am responding to this RFI on behalf of the Organization listed above: Yes: [X] No: []
- The information in this response is my own individual opinion: Yes: [] No: []

Total pages in the response (including cover sheet): [5]

**Response to RFI Questions:** 

**EOHHS Request for Information**: Enhancing, Expanding and Strengthening Home and Community Based Services in Massachusetts using American Rescue Plan Act Section 9817 Funding

Respondent Name: [Ellen Attaliades]Organization (if applicable) [ADDP / AFC Advisory Group]Response to: Topic Area # (see page 6 of RFI): [1: Access to HCBS Services and Supports]

Short title that briefly describes your proposal: [Support the Service System Safety Net]

Program(s) and/or service (s) impacted: [Adult Foster Care Programs]

Investment type:  $\Box$  One-time <u>X</u> Short-term (less than 12 months)  $\Box$  On-going

Estimated investment: \$[AFC Caregiver Stipend - \$125/Month Per Individual Served Beginning March 2020 until the Public Health Emergency Ends]

#### Describe your proposal below.

The Adult Foster Care (AFC) Advisory Group represents a number of statewide trade and advocacy organizations and provider members who provide Adult Foster Care services. The Advisory Group is comprised of the Association Developmental Disabilities Providers (ADDP), Mass Council for Adult Foster Care (MCAFC), Mass Home Care, The Arc of Massachusetts, Advocates, Nonotuck, Senior Link, Seven Hills, Somerville Cambridge Elder Services, Tempus Unlimited and TriValley, Inc. Outlined below please find our recommendations regarding the use of enhanced home and community-based services one-time funding that is available to states through the ARPA.

The AFC program contributes to MassHealth's LTSS delivery system, providing more than 13,000 MassHealth members and their live-in caregivers with culturally competent and comprehensive support, and Medicaid-funded payors with a cost-capped alternative to other models of care, including costly facility-based care. The AFC community capacity that has developed in the Commonwealth over the past decade has contributed meaningfully to deterring and reducing nursing facility utilization, ensuring that the impact of COVID-19 on nursing facility populations was not even more devastating than we have experienced to date.

During the pandemic, the AFC program has provided consistent and trusted care team support to AFC caregivers and the MassHealth members to whom they provide care. Unlike direct care workers in most Medicaid and State-funded LTSS programs, AFC caregivers have not received any relief from the State during this public health emergency; MassHealth and MassHealth MCOs have not extended "hazard pay", interim increases in stipends, or other financial relief in recognition of the extraordinary efforts, burden and personal risks that AFC caregivers have endured during the crisis, especially during this time when day programs, respite and other supports have been unavailable.

During this past year, many caregivers had to balance work, home life, and caregiving without any additional support. In order to protect the individuals to whom they provide care from COVID-19, caregivers remained extremely isolated and, in many cases, made sacrifices to their own wellbeing. In general, caregivers faced challenges to their mental health, their physical health, and their financial health. In the National Alliance for Caregiving's Caregiving in the U.S. 2020 study, one out of five caregivers said that they felt isolated. This number is expected to have increased as the pandemic continued.

Consistent with other caregiver models, the AFC Advisory Group proposes that caregivers receive a

stipend known as a "Difficulty of Care Payment" of \$125 per month per individual served or \$1500. annually, pro-rated by the number of months worked from March 2020, *until the public health emergency ends*.

It is our hope that this additional stipend will not only serve as recognition for the outstanding work AFC caregivers have performed throughout the pandemic to keep AFC members safe and healthy, but it will also provide these caregivers with the opportunity to care for themselves, such as seeking additional respite, addressing financial challenges faced during the pandemic, or investing in their health and wellness.

**EOHHS Request for Information**: Enhancing, Expanding and Strengthening Home and Community Based Services in Massachusetts using American Rescue Plan Act Section 9817 Funding

Respondent Name: [Ellen Attaliades] Organization (if applicable) [ADDP / AFC Advisory Group]

Response to: Topic Area # (see page 6 of RFI): [2: Technology and Infrastructure]

Short title that briefly describes your proposal: [Build Technology Capacity of AFC Community-Based Providers]

Program(s) and/or service (s) impacted: [AFC Programs]

Investment type:  $\Box$  One-time <u>X</u> Short-term (less than 12 months)  $\Box$  On-going

Estimated investment: \$[Provider Agency Allocation Based on Number of AFC Individuals Served]

### Describe your proposal below.

During the COVID-19 pandemic, people have relied on technology more than ever before. Ensuring that all AFC caregivers and members have appropriate technological devices and access to the internet has allowed AFC agencies to stay better connected through email and video conferencing. Internet access has allowed members and caregivers the ability to stay connected to families and friends and to stay connected to their neighborhoods and communities, especially during times of social distancing. Internet access has allowed people to pursue their interests, work on self-care goals, continue friendships and develop relationships. Additionally, with the rise of telehealth, it has provided the opportunity for people to continue to see their doctors and receive care, and even have access to specialists who may be out of their geographic location.

To continue the use of technology, including the provision of remote and virtual services, the state must build capacity for technology. There is a need to not only purchase hardware, software and provide internet access but also to provide training for provider staff, individuals, and family members on how to operate and integrate technology. In many cases there are language and cultural barriers that keep people from accessing the internet and virtual supports which must be addressed.

The AFC Advisory Group recommends that each AFC agency receive a designated technology allocation based on the number of members served to be used to expand their technology capacity.

**EOHHS Request for Information**: Enhancing, Expanding and Strengthening Home and Community Based Services in Massachusetts using American Rescue Plan Act Section 9817 Funding

Respondent Name: [Ellen Attaliades] Organization (if applicable) [ADDP]

Response to: Topic Area # (see page 6 of RFI): [4: HCBS Workforce]

Short title that briefly describes your proposal: [Workforce Expansion and Development]

Program(s) and/or service (s) impacted: [AFC Workforce / All Community-Based Provider Agencies]

Investment type:  $\Box$  One-time <u>X</u> Short-term (less than 12 months)  $\Box$  On-going

Estimated investment: \$[5,000 Per Full-Time Employee Recruitment/Retention Bonuses, \$12M Student Loan Forgiveness, \$250,000 for Marketing / PR Campaign]

### Describe your proposal below.

## A. <u>AFC Workforce Expansion</u>: <u>Caregiver Definition Policy Change</u>

The COVID-19 pandemic has brought to light more than ever the importance of least restrictive care. Hospitals, nursing homes, and doctor's offices became places that were unsafe or inaccessible. The people who are supported by AFC are eligible for congregate care settings such as nursing homes. The AFC program allows them to be cared for in the home, which greatly protected them from COVID-19. Nursing homes and long-term care facilities have been in a state of crisis throughout the pandemic, with AARP reporting that nursing home resident deaths make up 27% of the total COVID-19 deaths in Massachusetts since January 2021 (https://www.aarp.org/ppi/issues/caregiving/info-2020/nursing-home-covistates.html). The number of AFC members who were exposed to or contracted COVID-19 was significantly less than both nursing home residents, as well as the general population.

Adult Foster Care (AFC) keeps families together by providing a safe, nurturing home for people with disabilities with a member of that person's family, which can include immediate or extended family. This means that people who need help are able to stay with their families in the familiar comfort and stability of their own homes and communities.

Currently in Massachusetts, spouses are not allowed to be AFC caregivers. Due to the human service industry's inability to hire staff which has resulted in a workforce crisis of epic proportions, the AFC Advisory Group recommends a change in policy that would allow for spouses and legally responsible relatives to function as paid caregivers. Seventeen other states currently allow spouses as paid caregivers, as does the Federal Veterans Health Administration. Medicaid recognizes the importance of keeping families together by offering programs designed to support family caregivers. We believe this change in policy strengthens families, provides the least restrictive setting for care for AFC members, and expands the number of caregivers at a time where there is a critical shortage of caregivers.

### B. <u>Workforce Development</u>

Although ongoing workforce concerns have plagued the human service industry for decades, over the past few months, members represented by the AFC Advisory Group are reporting a workforce crisis of epic proportions. Pandemic-related extensions of unemployment, federal stimulus funding and competing higher paying non-human service jobs are contributing factors to this workforce shortage.

As the State transitions out of the pandemic back to a "normal economy" and in an effort to respond to the current workforce crisis, *The Collaborative* has developed an overall industry proposal for providing

recruitment and retention bonuses to build back the human services workforce across all state agency services.

*The Collaborative* is comprised of four statewide trade associations: Association of Behavioral Healthcare (ABH), Association of Developmental Disabilities Providers (ADDP), the Children's League, and the Providers' Council. In total, we represent over 400 human service providers.

The Collaborative's proposal includes three major workforce investments in the human services field:

- 1) <u>Provision of Staff Recruitment and Retention Bonuses</u> We recommend that community-based providers receive \$5,000 per full-time employee to assist in workforce development efforts to be used for both recruitment and retention bonuses. These bonuses would apply to purchase-of-service provider staff and Medicaid-funded positions for staff earning less than \$60,000 and purchase-of-service and Medicaid-funded nurses and clinicians earning less than \$90,000. They would be structured for payment at different intervals during the year (for example, upon hire, after 6-months of satisfactory work performance and after 12 months of satisfactory work performance) to ensure staff continue to stay on at their positions over the course of a year.
- 2) <u>Creation of Human Services Student Loan Repayment Trust</u> In an effort to provide human services staff with relief from student loan payments and promote staff retention in the field, we recommend the creation of a trust funded at \$12 million over a two-year period.
- 3) <u>Development of Workforce Marketing and Public Relations Strategy</u> In an effort to attract staff to work in the human services sector, we are requesting funding to develop a multi-faceted marketing and public relations strategy.

For more detailed information, please refer to The Collaborative's response to the EOHHS ARPA RFI.

The AFC Advisory Group recommends that the Collaborative's workforce development proposal outlined above be applied to AFC staff.