

February 25, 2022

Alissa Deboy
Director, Disabled and Elderly Health Programs Group
Center for Medicaid and CHIP Services
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Director Deboy:

The Consortium for Citizens with Disabilities (CCD) is the largest coalition of national organizations working together to advocate for federal public policy that ensures the self-determination, independence, empowerment, integration, and inclusion of children and adults with disabilities in all aspects of society free from racism, ableism, sexism, and xenophobia, as well as LGBTQ+ based discrimination and religious intolerance. CCD's Long Term Services and Supports (LTSS) Task Force has been tracking with great interest the implementation of Section 9817 of the American Rescue Plan Act (ARPA). This FMAP enhancement provides much-needed investments to the historically underfunded Medicaid Home and Community Based Services (HCBS) program. The investment has the potential to be life-changing for individuals who use Medicaid-funded community-based supports.

As befits legislation responding to a crisis like the COVID-19 pandemic, Section 9817 was passed with a tight timeline for implementation. We recognize that CMS is tasked with reviewing an unprecedented volume of state submissions, between spending plans, revisions to those plans, and amendments to waivers and state plans. Between this challenge and the need to make technical changes to enable states to draw down funds, the timeline for spending these crucial funds has become compressed.

We are concerned that, as a result of this, many states may face challenges in effectively implementing and carrying out their spending plans before the CMS-imposed spending deadline of March 31, 2024. These spending plans focus on some of the most important issues facing the HCBS system, especially tackling the rapidly worsening

direct support workforce crisis through rate increases, hazard pay, recruitment bonuses, and other strategies. It is especially crucial that states use this funding in a manner that best responds to the unprecedented and unexpected challenges the pandemic continues to bring.

It is vital that states have the opportunity to maximize the impact of this dearly needed funding. Successful implementation of Section 9817 has the potential to address a number of crises exacerbated by the pandemic and set our system on a path toward increasingly individualized services, expanding access, and ameliorating racial inequities. Rushed implementation would not just be an opportunity lost but potentially very damaging for state HCBS systems and the people who rely on them. For this reason, the undersigned members of CCD's LTSS Task Force request that CMS extend the March 31, 2024 deadline for states to expend funds attributable to the increased FMAP for HCBS authorized by Section 9817 of ARPA, as long as the state continues to comply with the maintenance of effort provision. States would retain the option to complete their spending by the current deadline, but this added flexibility would facilitate states' ability to implement their spending plans in the most impactful way possible.

Should you have any questions, please feel free to reach out to Jennifer Lav at lav@healthlaw.org.

Sincerely,

American Association on Health and Disability

American Music Therapy Association

American Therapeutic Recreation Association

ANCOR

Association of People Supporting Employment First (APSE)

Association of University Centers on Disabilities

Autism Society of America

Autistic Self Advocacy Network

Autistic Women & Nonbinary Network

Cure SMA

Easterseals

Family Voices

Justice in Aging

Lakeshore Foundation

Muscular Dystrophy Association

National Alliance for Direct Support Professionals

National Association of State Head Injury Administrators

National Down Syndrome Congress

National Health Law Program

National Multiple Sclerosis Society

National Respite Coalition

RespectAbility

TASH

The Arc of the United States World Institute on Disability