



## Medicaid HCBS and PACE Weekly: Recap of Leading Age Updates

August 12, 2022

**LeadingAge Coronavirus Calls Next Week. All calls are at 3:30 PM ET. Can providers really use TikTok for frontline staff training? And COVID data of all kinds – how can it help us with staffing and inform our thinking about how to support team members?** On **Monday, August 15**, **Teepa Snow** will join the Update Call to talk about her Positive Approach to Care and her use of TikTok videos as training resources. We'll hear how providers have used the videos and some ways to support exhausted staff members. She'll also share her thoughts about the impact of the pandemic on people with brain change. **Ashley Kirzinger, Director of Survey Methodology at the Kaiser Family Foundation** will return to the LeadingAge Update Call on **Wednesday, August 17**. She will discuss new data KFF has collected on vaccines, the differential impact of the pandemic on different groups within the population and related equity issues, and talk about how analyses of the data can support aging services providers as they work to improve staff recruitment and retention. If you haven't registered for LeadingAge Update Calls, [you can do so here](#). You can also find previous call recordings [here](#). Note that to access recordings of the calls you need a LeadingAge password. Any staff member of any LeadingAge member organization can set up a password to access previous calls and other "members only" content.

**Register Today for the 2022 LeadingAge Annual Meeting + EXPO!** Ready to explore new strategies for building momentum in Denver? Join your peers and experts across aging services for conversations that fuel progress at the LeadingAge Annual Meeting + EXPO. Registration and hotel blocks are now open so reserve your seat and [join us in Denver, October 16-19](#). **We will be hosting an Adult Day Services, HCBS and PACE huddle.**

**LeadingAge article on HCBS Quality Measure Set Next Steps:** On July 21, 2022, CMS released the first ever set of Medicaid home and community-based services (HCBS) quality measures, which will provide quality of care and outcomes comparison data built around the pillars of access, rebalancing, and community integration, with a focus on equity. This LeadingAge [article](#) shares updates from CMS and HCBS quality experts on the next steps of implementation, and the role providers can take.

**50-State Review of Access to State Medicaid Program Information for People with Limited English Proficiency and/or Disabilities ahead of PHE unwinding.** This KFF [issue brief](#) reviews the accessibility of information for people with LEP and people with disabilities provided through state Medicaid websites and call center automated phone trees as of June 16, 2022. The analysis shows that while states have taken some steps to support access to information and applications for people with LEP and people with disabilities, gaps in accessibility remain.

**Unwinding Pandemic-Era Medicaid Policies Requires Teamwork:** Medicaid leaders may soon face the challenge of rethinking policies created during the PHE, which is set to expire in October. This episode of [The Medicaid Leadership Exchange Podcast](#) explores opportunities being used by Medicaid leaders in New Hampshire and Louisiana, including codifying waivers related to telehealth and streamlining services and support for Medicaid beneficiaries.

**Developing Successful Volunteer Opportunities in Dementia Programs:** This NADRC webinar will be held on Tuesday, August 30, 2022, from 1:00 p.m. to 2:00 p.m. ET and will discuss how volunteers can provide support to organizations serving people with dementia and their caregivers through helping them expand their capacity for long-term sustainability. The discussion will focus on how selected dementia programs recruit, train, and retain volunteers by providing them with meaningful work. Register [here](#).

**The Value Of Supplemental Benefits In Medicare Advantage:** This [Health Affairs article](#) contends that as policy makers debate the future role of private Medicare plans, they need to take into consideration the preferences of Medicare beneficiaries and build on current innovations, such as supplemental benefits, including those meeting social needs such as meals, nutrition, respite, adult day services, transportation, and in-home support services. The authors suggest that the way forward in evaluating supplemental benefits includes agreeing on outcomes of interest, considering a CMMI demonstration, and addressing workforce limitations, because “fulfilling the promise of supplemental benefits ultimately depends on much larger problems in our health and long-term care service economy. CMS and Congress can start to address workforce capacity through technical assistance, career development programs, and caregiver supports.”

**New COVID Community Guidance (NOT FOR HEALTHCARE SETTINGS).** CDC released updated COVID guidance today for community settings. Guidance updates are based on this [Morbidity and Mortality Weekly Report](#). (See details from CDC in item #12 below.) **The new guidance does not apply to healthcare settings**, though we are told we are getting closer to seeing updates for healthcare settings too. There has been confusion in the past about which guidance different LeadingAge member settings should follow. Nursing homes (including residents, staff, and visitors) will continue to follow the healthcare settings guidance. CDC is currently in discussion about which guidance other settings, such as assisted living, should follow. We will share updates as they are released.

**CDC Guidance on Monkeypox.** Keeping monkeypox on your radar...don't forget to review the CDC recommendations [here](#). While you may be watching for monkeypox related to resident sexual contact, be mindful of other ways in which this virus might spread, including other physical contact or high-

**FROM CDC:**

**Summary of Guidance for Minimizing the Impact of COVID-19 on Individual Persons, Communities, and Health Care Systems.** [CDC published an MMWR on guidance for minimizing the impact of COVID-19 on individual persons, communities, and health care systems](#). High levels of immunity and availability of effective COVID-19 prevention and management tools have reduced the risk for medically significant illness and death. To prevent medically significant COVID-19 illness and death, persons must understand their risk, take steps to protect themselves and others with vaccines, therapeutics, and nonpharmaceutical interventions when needed, receive testing and wear masks when exposed, receive testing if symptomatic, and isolate for ≥5 days if infected. Medically significant illness, death, and health care system strain can be reduced through vaccination and therapeutics to prevent severe illness, complemented by use of multiple prevention methods to reduce exposure risk and an emphasis on protecting persons at high risk for severe illness.