



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

July 15, 2022

**Coronavirus Update Calls for Week of July 18. All calls are at 3:30 PM ET.** LeadingAge members who provide care and services in the community have overcome unique challenges to care for the older adults they serve. On Monday, July 18, Dr. Richard Pitts, Chief Medical Officer at CalOptima will join us to talk about how **HCBS and PACE providers** are working to ensure consumer and staff access to vaccinations, treatments, and other essential services in California. Next Wednesday, we will welcome Dr. Michael Wasserman to discuss his latest article on the importance of developing leadership skills in aging services and how we can integrate long term care in local planning to prepare for the future. 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.

**States' choices about which Medicaid pathways to cover are an important baseline, as well as an advocacy opportunity, for older adults' access to Medicaid coverage.** From March through May 2022, the Kaiser Family Foundation conducted a survey of Medicaid state eligibility officials. KFF has provided two policy briefs based on the data that this LeadingAge [article](#) summarizes, with the background and findings most pertinent LeadingAge state partners and members.

**Medicaid social care programs implementation:** State Health and Value Strategies (SHVS) published [findings](#) from a series of interviews with state Medicaid leaders about how to monitor the implementation of social care programs to improve health, decrease costs, and advance health equity. The findings come from a two-part research project conducted by the Social Interventions Research and Evaluation Network at the University of California, San Francisco.

**FDA Authorizes Pharmacists to Prescribe PAXLOVID with Certain Limits:** The FDA issued an [emergency use authorization \(EUA\)](#) for PAXLOVID ([nirmatrelvir co-packaged with ritonavir](#)) for the treatment of mild-to-moderate COVID-19 in certain adults and pediatric patients at high risk for progression to severe COVID-19, including hospitalization or death. On

July 6, the [FDA revised the EUA](#) to let pharmacists prescribe and dispense PAXLOVID to eligible patients without seeing a doctor or other clinician.

**July 19 National Stakeholder Call with CMS Administrator.** On July 19 from 1 – 2pm ET, CMS Administrator Chiquita Brooks-LaSure, CMS Principal Deputy Administrator and Chief Operating Officer Jon Blum, and other members of the CMS leadership team will provide an update on “CMS’ recent accomplishments and how [its] cross-cutting initiatives are advancing CMS’ Strategic Plan.” This call will provide an opportunity to learn more about how stakeholders can partner with CMS to help implement its Strategic Plan and key initiatives. RSVP [here](#).

**Telehealth in Practice: Driving Efficiencies & Improving Outcomes** - This webinar with the LeadingAge Learning Hub, on Thursday, July 21 at 2:00 p.m. ET, will focus on the application of Telehealth/RPM in different care settings, including in home care to drive staff efficiencies, support care management, including chronic care management, and enhance engagement, even socialization!. [Join us to learn from two provider use cases](#).

**LeadingAge’s Workforce Now Advocacy Campaign Rolls Out.** The [press release](#) announcing the launch of the Workforce Now Advocacy Campaign lays out the action needed from Congress and the Administration around issues older adults and their families face.

“Too many older adults and their families face challenges in accessing essential care and services to remain independent, safe and healthy because of a lack of qualified workers. Without sufficient staff in nursing homes, hospices, life plan communities, home health agencies, affordable senior housing, and other community-based services, there is no care,” said Katie Smith Sloan, president and CEO, [LeadingAge](#), the association of nonprofit providers of aging services. “We appreciate the Administration’s commitment to workforce investments, and applaud the efforts to strengthen funding for vital home and community-based services. But our country must learn from past mistakes. Chronic underinvestment in and longstanding disregard for aging services—and primarily the valuable workers who are its core—created an opportunity for COVID to wreak havoc. That must not continue. We’ve got to repair, rebuild and reinvigorate this sector. The strategic deployment of ARPA funds for states and local governments is a step worth celebrating but Congress and the Administration have their own work to do to ensure older adults are not left behind. Our new advocacy campaign, Aging Services Workforce Now, lays out action needed around the issues older adults and their families face.”

**New PHI Report Addresses State Hazard Pay and Sick Leave Policies for Direct Care Workers During COVID-19.** Today, PHI released a new research report, [“Essential Support: State Hazard Pay and Sick Leave Policies for Direct Care Workers During COVID-19.”](#) This report details findings from a recent study on hazard pay and paid sick leave policies enacted across all 50 states and Washington, D.C., from March 2020 to August 2021 (the first 18 months of the COVID-19 pandemic). The purpose of the study was to document how states responded to the

challenges faced by direct care workers and other essential workers during one of the most devastating health crises in recent history, and to generate lessons for the future. As well as developing a comprehensive catalogue of relevant state policies, PHI explored their impact on the direct care workforce through a modest set of quantitative analyses using publicly available data from the Current Population Survey. Overall, this review found that:

- 17 states implemented at least one hazard pay policy and four states implemented a new paid sick leave policy during the study period.
- Of the 14 states that already had an existing paid sick leave policy in place, four made amendments or issued supplementary policies.
- Just 10 states implemented both types of policies: California, Connecticut, Massachusetts, Michigan, New Jersey, Oregon, Rhode Island, Vermont, Virginia, and Washington State.

Read the full report [here](#).

**LTQA Webinar: A Fresh Look at Caregiving: Direct Care Workforce Solutions.** Join the Long-Term Quality Alliance (LTQA) on July 26, 2022, from 2-3 pm ET for an interactive webinar, “A Fresh Look at Caregiving: Direct Care Workforce Solutions.” The webinar will address how the long-term care sector is facing a crisis in the supply of direct care workers, worsened by the COVID-19 pandemic. Additionally, how increased need and demand for services in the home is fueling a workforce shortage, which is having a direct effect on the ability of those in need to access services and for organizations to deliver needed care and support. There will be an opportunity to address a need to think differently about the compensation, skills development, mobility, and value placed on this workforce, which provides critical services to a diverse and complex population. Speakers include: Carol Raphael (Manatt), Carrie Amero (AARP), Robyn Stone (LeadingAge), and Joe MacBeth (NADSP). Registration is available [here](#).

**USC study reveals that everyday stressors, traumatic events, job strain & discrimination prematurely weaken immune cells, potentially increasing a person’s risk of disease.** “As the world’s population of older adults increases, understanding disparities in age-related health is essential. Age-related changes in the immune system play a critical role in declining health,” said lead study author Eric Klopach, a postdoctoral scholar in the USC Leonard Davis School of Gerontology. Improving diet and exercise behaviors in older adults may help offset the immune aging associated with stress. Review the study and associated article [here](#) and [here](#).

**Poverty rates among CO Black and Latino older adults.** [Chasing Progress](#), a Colorado News Collaborative project on social, economic, and health equity among Black and Latino Coloradans, analyzed the Census Bureau's 5-year American Community survey data from 2010, 2015 and 2020, a period of historically long economic expansion bookended by the Great Recession and the onset of the pandemic. As reviewed in this [article](#), Denver’s poverty rate for older adults, defined as people aged 65 and over, decreased from 15.4% to 10.5%. But the data also showed continued disparities among Black and Latino older adults when compared to

white older adults. Experts point to several reasons for Denver's declining poverty rates among Black and Latino older adults such as spending more time in the workforce and the plethora of programs available to help supplement daily expenses for food and medical care.