

TESTIMONY OF

QUALITY TRUST FOR INDIVIDUALS WITH DISABILITIES

Before the Council of the District of Columbia

Committee on Human Services

Department on Disability Services FY22 Budget Oversight Hearing

June 7, 2021

Good morning, Chairperson Nadeau and members of the Committee on Human Services. My name is Morgan K. Whitlatch, and I am the Legal Director of Quality Trust for Individuals with Disabilities. Quality Trust is an independent nonprofit advocacy organization that has been advancing the interests of DC residents with intellectual and developmental disabilities since 2002. Our mission is to help people solve problems, achieve personal goals, and meaningfully contribute within their community. Quality Trust does this in part by advocating for people who may seek or are receiving services and supports through the Department of Disability Services (DDS), including the Developmental Disabilities Administration (DDA). We also serve as an independent monitoring organization assessing the quality of services and assistance provided to people supported by DDA. It is through our monitoring, lay advocacy, legal service, and outreach activities that we have come to understand the needs of children and adults with developmental disabilities and their families in the District of Columbia.

We would like to begin our testimony by thanking Chairperson Nadeau and each of this Committee's members for supporting the introduction of DC Bill 24-0268, the "Developmental Disability Eligibility Reform Amendment Act of 2021." This critical bill would require reform of DDA eligibility requirements, so that adults with developmental disabilities who have significant, lifelong support needs in three or more major life activities will no longer be denied eligibility for DDA services they need, simply based on an assessed IQ score. This reform is long overdue, and you will hear today from people with disabilities and family members who fervently agree. In this budget testimony today, we would like to highlight that the current FY2021 budget and the Mayor's proposed FY 2022 budget already include funding for the home and community based (HCBS) Medicaid Waiver to support this reform. Based on DDS data shared at a public forum on May 28, 2021, under the FY2021 budget, there are currently vacant Waiver slots – 16 in the comprehensive People with Intellectual and Developmental Disabilities (IDD) Waiver and 29 in the Individual and Family Supports (IFS) Waiver. Moreover, the Mayor's proposed FY 2022 budget provides funding for 20 additional slots in the comprehensive IDD Waiver and 30 additional slots in the IFS Waiver. These already-budgeted slots should be filled by qualifying people with developmental disabilities who need them, including those whose assessed IQ may fall above 69. In the name of equity, the District must reform its outdated, overly restrictive, and fundamentally unfair DDA eligibility requirements.

Quality Trust is pleased that the Mayor's Fiscal Year 2022 budget for DDS does not propose any cuts to existing support and services for people with disabilities served by DDA and the Rehabilitation Services Administration (RSA). Both administrations provide critical services to District residents with disabilities and must be supported to grow in their capacity to effectively do so. However, as a number of others have testified in more detail today, the Mayor's budget falls short in that it fails to fully fund the Direct Support Professional (DSP) Payment Rate Act of 2019, which is necessary to support recruitment, retention, and performance recognition of a workforce that is critical to the health, safety, well-being, and growth of DC residents with intellectual and developmental disabilities. Quality Trust supports the full funding of this Act. But money alone is not enough to improve the quality of the DDA service system. The investment and respect associated with recognizing the important role DSPs play in the lives of District residents with disabilities must go both ways. Service providers must be held – and must hold their own staff – accountable for the impact they have in the lives of people with disabilities. They must take responsibility for addressing the service system issues that continue to undermine the health and quality of life of the people they support.

For example, as you know, the COVID-19 pandemic has had a devastating and disproportionate impact on the people supported by DDA.¹ Yet, based on DDS data shared at a public forum on June 4, 2021, current rates of provider staff who have been vaccinated are not where they should be across the DDA system. Only 51% of provider staff have been fully vaccinated, and there is high variability across individual providers, ranging from providers with 0% of staff vaccinated to at least one provider with almost 100%. 29 out of 91 providers have staff vaccination rates of 70% or better, and 8 providers have rates under 25%. During the worst throes of this pandemic, when people with intellectual disabilities who live in DDA placements were generally confined to their homes, it was staff performing their critical duties that brought the virus in to them. Now that a vaccine is available, DDS, providers, and staff have a responsibility to take steps to ensure that staff are vaccinated at higher and consistent rates. This is particularly needed because the nature of staff's work often prevents them from socially distancing from a supported person, some of whom cannot wear masks. It is true that the overall rate of vaccination of people supported by DDA is increasing.² However, the vaccination rate percentages vary depending on where a person lives, with those in natural homes being the lowest.³ In addition, as DC Health has recognized,⁴ people who are immunocompromised may not be fully protected, even if they are fully vaccinated.

We applaud DDS for taking some steps to address the issue regarding staff vaccination rates, including requiring providers to report staff vaccination rates, which we have been told will soon be published on the DDS website by provider name. People receiving DDA services will then be able to make informed decisions about which provider they want to support them, which may, in turn, incentivize providers to find ways of encouraging staff to get vaccinated. However, more

¹ As of June 30, 2021, 429 people supported by DDA have tested positive for COVID-19, and 57 of them (13.3%) have died. In the District of Columbia as a whole, 49,068 people have tested positive, and 1,136 (2.3%) have died. See <https://coronavirus.dc.gov/data>,

² According to DDS data shared at the June 4th public forum, overall, 73% of people supported by DDA have received at least one vaccination dose.

³ Based on DDS data from the June 4th public forum, the percentages of for people supported by DDA who have received at least one COVID-19 vaccine dose are: 96% in Intermediate Care Facilities, 92% in Residential Habilitation homes, 82% in Supported Living; 75% in host homes, and 55% in natural homes.

⁴ See https://coronavirus.dc.gov/sites/default/files/dc/sites/coronavirus/page_content/attachments/COVID-19_DC_Health_Guidance_for_Supported_Living_CRF_Settings_5-03-21.pdf (see page 2); https://coronavirus.dc.gov/sites/default/files/dc/sites/coronavirus/page_content/attachments/Updated_PP_E-for-Healthcare-Facilities_5-19-21.pdf (see pages 1-2).

action is needed, at both the DDS and provider level, to create financial and other incentives for provider staff to be vaccinated, so that the health and safety of people supported are better protected.

The current DDS budget does not reflect all the federal funds that will be available to the District under the American Rescue Plan Act, which includes a 10% enhanced federal match for home and community-based services (HCBS), like those provided under DDA's comprehensive IDD waiver and IFS Waiver. We understand from Director Reese's comments at a May 28th public forum that stakeholder input will be sought on the District's plan to spend these one-time funds. These funds are designed to create opportunities "for states to strengthen the HCBS system in response to the COVID-19 Public Health Emergency (PHE), increase access to HCBS for Medicaid beneficiaries, adequately protect the HCBS workforce, safeguard financial stability for HCBS providers, and accelerate long-term services and supports (LTSS) reform . . ." ⁵ We look forward to seeing and commenting on the draft plan that is developed and due to be submitted to the Centers for Medicare and Medicaid Services in mid July 2021. In anticipation of that opportunity, we urge consideration be made to:

- Supporting the funding of the DSP Wage Act of 2019 to expand wage increases to DSPs in DDA waiver settings
- Supporting the funding of incentives, outreach, and education to promote higher COVID-19 vaccination rates of provider staff
- Expanding telehealth options and virtual health programming referenced in the Mayor's budget beyond licensed facilities, so that people on the DDA waiver who live in supported living, host homes, or their own or family homes will have timely access to these important services. We hope that this will result in a decrease in the number of unnecessary emergency room visits and inpatient hospitalizations for people with intellectual and developmental disabilities.
- Amending the DDA home and community-based waivers to include an option for self-directed services and supports, an initiative that was tabled in recent years, in part because of the start-up costs
- Exploring ways in which to further promote innovation in the distribution and use of technology under the DDA HCBS Medicaid Waivers.

In closing, Quality Trust urges that there be no cuts to Mayor's proposed budget for DDS for Fiscal Year 2022. Rather, we would like to see enhancements that support the DSP workforce and increase COVID-19 vaccination rates among staff and of people receiving DDA supports who live in natural homes. Quality Trust is hopeful that this budget will provide a foundation for DDS/DDA to continue effective supports for the people it currently serves and begin the work needed to supporting others in need of support who are not currently eligible. We will continue to urge the Mayor and DDS to work collaboratively with stakeholders to address the unmet needs of other DC residents with developmental disabilities. As always, Quality Trust is ready and available to assist in that process.

Thank you, and I am happy to answer any questions.

⁵ <https://www.medicaid.gov/federal-policy-guidance/downloads/smd21003.pdf> (see page 1).