



## PHE Ends, Final Rule Starts: What This Means for I/DD Providers

With the end of the Public Health Emergency (PHE) and an election year looming, there are changes in the works and on the horizon that will impact I/DD providers, their teams, and their clients. Here are top issues you need to get on your radar:

- 1. Proposed Medicaid Access Rule.** This proposed rule is intended to take “a comprehensive approach to improving access to care, quality and health outcomes, and better addressing health equity issues.” These improvements would help increase transparency and accountability, and help “promote active beneficiary engagement” in state Medicaid programs. “We believe that this expanded access rule will be finalized soon. The federal government has weighed in on Medicaid access standards before, but I/DD had always been left out,” said Esmé Grewal, Vice President of Government Relations, BrightSpring Health Services. This new proposal would seek to make sure that reimbursement for providers and services is supported to provide equal access to other non-Medicaid funded services in a geographic area, Grewal said, “Under this proposal, states would need to have public websites displaying rates for certain HCBS services. We never had this level of transparency before.”
- 2. Providers Be Aware - 80/20 Proposal.** Within the above referenced proposed Medicaid Access rule, there is a concerning proposal that would require at least 80% of Medicaid reimbursement to go to direct care worker wages, with just 20% of the rate allowed to pay for things like administrative staff, technology and office services, licensing, training, quality, and other essential costs. While this is only being proposed for certain subsets of HCBS services (personal care, home health, and homemaker services), CMS is asking the public whether to expand it to I/DD (habilitation services) so it is essential for I/DD providers to be responsive to this rule. “We have never seen wage setting in federal Medicaid rulemaking at this level. It is unprecedented, and we need to keep an eye on it,”

Grewal said, adding, “This is something providers should be very wary of in terms of the precedence the Federal government is putting forth on wage setting. We have to come together as an industry and push back on this, and the messaging should be that providers want to see higher wages for their workforce but are limited in terms of what existing reimbursement allows for management of wage, administrative, and other costs.”

**TAKE ACTION:** You don’t have to be savvy about regulations or a seasoned advocacy expert to reach out to policymakers and make your voice heard on this issue. ANCOR, the leading national I/DD provider association, makes it easy by providing you with a quick and easy online tool to weigh in. **Grewal encourages providers to take two minutes to weigh in by July 3 before it’s too late!** <https://www.ancor.org/actions/act-on-access-rule/>

- 3. Final rule addresses COVID vaccination and testing.** At the end of May, CMS announced the final rule on Omnibus COVID-19 Health Care Staff Vaccination Requirements. In short, this rule removes the requirement for staff and patient COVID-19 testing and vaccination, but finalizes requirements for facilities like Intermediate Care Facilities to “educate and offer” COVID-19 vaccines to residents, clients, and staff.
- 4. Implications of the end of the Public Health Emergency (PHE).** “There is much positivity around the end of the PHE. Extremely lowered infections rates are a positive outcome for I/DD providers and their patients and clients,” said Grewal. “They can get out in the community more and focus on social determinants of health. We are returning to some level of normalcy attached to the knowledge we gained from the pandemic.” One aspect of the PHE’s end that requires immediate attention is redetermination and helping to ensure that patients/clients are confirmed as eligible Medicaid beneficiaries. Grewal said, “There is much



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focus on redetermination. States have prepared for this and stayed in contact with the federal government about what this would look like and providers have worked to remain alert on various state plans and processes.” Another issue is that some funding that brought dollars into I/DD programs will come to an end. States must use all American Rescue Plan Act funding that temporarily provided an extra 10% FMAP to HCBS programs by March of 2025. “This will require us to advocate for future investment in these programs,” Grewal said.

## Sharing Stories, Magnifying Messaging

“Although people are eager to move on from the pandemic, we aren’t too far removed from the stories, successes, and lessons learned. I/DD providers can boast significant successes in terms of keeping clients and workers alike safe and effectively providing services in a very challenging time,” said Grewal. There is an opportunity to share these stories with legislators and policymakers to keep the positive focus on funding for this care sector.

Consider partnering with families to share stories with local, state, and federal policymakers, Grewal said, “Providers are really the implementors of the Americans with Disabilities Act, ensuring the rights afforded to these individuals by making sure services are provided and families are connected.” It can be very powerful to partner with families to show what these services look like and what they mean to Medicaid beneficiaries and their families.

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