Responding to the COVID-19 Crisis: Impacts on the Disability Community

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Disproportionate impact

- Likely to have a longer shelter in place than most
- Elevated risk of infection due in part to:
  - support services
  - public transportation
  - underlying conditions
  - congregate settings
  - poverty and socioeconomic factors
Disproportionate impact

- Healthcare disparities
- Workforce shortages
- Technology issues and the digital divide
- Prioritization of people with disabilities
- Support for and prioritization of PCAs, DSPs, and safety net providers
Community partners and resources

• **Free digital resource site** to help individuals and care providers address mental health needs resulting from the COVID-19 pandemic
  • Psych Hub

• Programs to help with food, transportation, health, housing, job training and a range of other resources
  • Aunt Bertha

• Support for food pantry efforts (new and existing)
  • Kelly’s Kitchen and Portlight Strategies partnered with Centers for Independent Living
  • Feeding America
Congressional Action on COVID-19 and Income Supports

The **Families First Coronavirus Response Act** (COVID #2 / Families First)
- Emergency Paid Sick Days
- Emergency Paid FMLA Leave

The **Coronavirus Aid, Relief, and Economic Security Act** (COVID #3 / CARES)
- Economic Impact Payments
- Unemployment Insurance
  - Pandemic Unemployment Assistance (PUA)
  - Pandemic Unemployment Compensation (PUC)
Economic Impact Payments

**Non-Filers**
- Some Social Security Recipients
- Supplemental Security Income Recipients (SSI Kids)
- Supplemental Nutrition Assistance Program (SNAP) Recipients
- Millions of Workers

**Filers**
- Some Social Security Recipients
- Medicaid Expansion Recipients
- Millions of Workers
About the Direct Care Workforce

- 4.5 million home care workers and nursing assistants
- Work across settings: private homes, nursing homes, residential care
- Paid frontline of support for older adults and people with disabilities
- 8.2 million job openings in direct care between 2018 & 2028
An Increasingly **Diverse** Direct Care Workforce (2018)

The typical home care worker is a woman in her 40s—many are immigrants and/or women of color. **The demographics are changing.**

- **86%** WOMEN
- **26%** IMMIGRANT
- **59%** PEOPLE OF COLOR
- **41** MEDIAN AGE
- **1 million** IMMIGRANTS

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SOURCE: PHI (2020). For detailed citations and information about PHI’s research methodology, please contact info@phinational.org.
The COVID-19 Crisis
Key Barriers for Direct Care Workers

- Essential yet undervalued
- Limited access to PPE, supplies, and general resources
- Inadequate compensation and benefits
Key Barriers for Direct Care Workers

- Essential yet undervalued
- Limited access to PPE, supplies, and general resources
- Inadequate compensation and benefits
- Growing workforce shortages
- Data collection limitations: “hot spots” and worker availability
- Training needs to build pipeline and train on COVID-19
Policy Response Options

• Collaborate with community leaders
• Partner with local and national community organizations
• Maintain open and on-going dialogue with people with disabilities
• Work with AHIP, the MLTSS Association, ADvancing States, and others
Some recommendations to Congress from Anthem’s National Advisory Board (NAB):

- **Support Personal Care Attendants (PCAs), Direct Support Professionals (DSPs), and other homecare workers** who assist individuals with activities of daily living (ADLs) and instrumental activities of daily living (IADLs)

- **Equal access to health care treatment and services** by reinforcing and communicating obligations, under current law (the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, Section 1557 of the Affordable Care Act)

- **Provide exceptions to restrictive hospital visitor policies**

- **Include coverage of peer support services** for people with mental health and substance use disorders (MH/SUD) including telehealth and peer support groups for addiction recovery.

- **Allow Medicaid and Medicare health plans to dispense a 90-day supply of medications or facilitate early and/or mail order refills of psychiatric prescriptions**
Paid Sick Days and Leave

• Emergency Paid Sick Days: 2 weeks, broadly available for Coronavirus related reasons, including people with disabilities who must self-isolate and their caregivers

• Emergency Paid FMLA Leave: 12 weeks (2 unpaid, covered by the sick days), for parents whose children have lost a usual source of care (schools, child care, or other care)
  • Not included:
    • People with disabilities who are at high risk of complications from COVID
    • Caregivers who are not parents, including children who take care of their parents, siblings, grandparents, etc.
CARES Act, Sec. 2104: “(h) DISREGARD OF ADDITIONAL COMPENSATION FOR PURPOSES OF MEDICAID AND CHIP.—The monthly equivalent of any Federal pandemic unemployment compensation paid to an individual under this section shall be disregarded when determining income for any purpose under the programs established under titles XIX and title XXI of the Social Security Act (42 U.S.C. 1396 et seq., 1397aa et seq.).” – March 27, 2020

Centers for Medicare and Medicaid Services: “How should a state handle Medicaid beneficiaries who are eligible based on receipt of Supplemental Security Income (SSI) in 1634 states who become ineligible for SSI? Does the state need to continue Medicaid coverage if it receives a notification from State Data Exchange interface (SDX) that the individual was terminated from SSI?” – April 12, 2020

See, Families First Act, Sec. 2008 (b).
What Can Government Do?
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State Leaders

- Improve compensation for workers
- Provide essential workers with free childcare
- Ensure access to personal protective equipment (PPE)
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**State Leaders**

- Improve compensation for workers
- Provide essential workers with free childcare
- Ensure access to personal protective equipment (PPE)
- Fill the gaps in emergency paid sick leave policies
- Disseminate training on COVID-19 to all direct care workers
- Build pipelines into direct care jobs
- Expand access to health care, including COVID-19 testing and treatment
What Can Government Do?

**Federal Leaders**

- Coronavirus Relief for Seniors and People with Disabilities Act
- Ensure access to paid sick leave
- Implement immediate recruitment campaigns
Federal Leaders

- Coronavirus Relief for Seniors and People with Disabilities Act
- Ensure access to paid sick leave
- Implement immediate recruitment campaigns
- Explore online training (entry-level, COVID-19); competency evaluations
- Increase funding to providers to enhance the training infrastructure
- Consult with worker organizations to understand the needs of workers
- More data across the sector on COVID-19 infections and deaths
Questions from the Audience

Please submit questions in the Q&A box.
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