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Washington Update

Check out the **PVAction Force** page to view our latest alerts and a list of key legislation.

PRESIDENT SIGNS EXECUTIVE ORDER ON INCREASING ACCESS TO HIGH-QUALITY CARE AND SUPPORTING CAREGIVERS

On April 18, the President signed an Executive Order (EO) titled, "Increasing Access to High-Quality Care and Supporting Caregivers," that included more than 50 directives to nearly every cabinet-level agency to expand access to affordable, high-quality care, and provide support for care workers and family caregivers. PVA's National President Charles Brown was on stage with the President for the signing. Executive Director Carl Blake and Associate Executive Director for Government Relations Heather Ansley were also in attendance at the White House Rose Garden ceremony.

The EO directs the VA Secretary to consider expanding the existing Veteran Directed Care (VDC) program to all VA medical centers by the end of fiscal year 2024 and provide an implementation plan for this expansion by June 2023. VDC provides veterans with a budget to hire their own workers, which are often family members, to meet their daily needs to help them live at home or in their communities.

In addition to expanding VDC, VA was asked to consider piloting a new, self-directed care program in no fewer than five new sites that provides veterans with a budget for personal care assistance while reducing their administrative burdens related to managing the care. VA will also consider adding 75 new interdisciplinary teams to its Home-Based Primary Care program, which would

allow the Department to serve an additional 5,600 veterans in their homes.

In addition to the VA-related provisions, the EO contained a number of directives to other federal agencies to reduce the costs of child care and long-term care, enhance job quality for direct care workers, and offer training and technical assistance to support family caregivers, as well as professional direct support personnel. Among those actions were the following:

The Secretary of Health and Human Services (HHS) was asked to expand efforts to improve care workers' access to health insurance; consider rulemaking to expand access to home and community-based services under Medicaid; provide guidance, technical assistance, and provider and resident education — and rulemaking on nursing home staffing transparency to promote adequate staffing at nursing homes; consider new health care payment and service delivery models focused on dementia care that would include family caregiver supports such as respite care; and, with the Secretary of Labor, conduct a review and report by April 2024 on gaps in knowledge about the home and community-based workforce serving people with disabilities and older adults.



- The Secretary of Labor was also charged with conducting and publishing an analysis of early childhood and home care workers' pay in comparison to the pay of other workers with similar levels of training and skill; issuing guidance to help states and localities conduct their own analyses of comparable pay rates for care workers in their respective jurisdictions; and issuing compliance assistance and best practices materials to promote fair workplaces and ensure the parties know their rights and responsibilities.
- HHS, Labor, and Education were asked to expand training pathways and professional learning opportunities to increase job quality, improve quality of care, and attract new entrants into the care workforce.
- The Treasury Department and Commerce Department were tasked with conducting outreach on federal resources available to assist small businesses in offering retirement plans, including a per-employee credit of up to \$1,000, to ensure that the care workforce, including individuals and small businesses, are aware of federal retirement assistance for which they may be eligible.
- The Administrator of the Small Business
 Administration (SBA) was encouraged to publish
 a guide on how individuals in the care workforce
 may start and sustainably operate care
 businesses locally and through SBA
 programming.
- The Director of the Consumer Financial Protection Bureau was asked to issue guidance addressing financial institution practices that may increase the burden on the care workforce, discourage their work, and adversely impact their financial well-being.
- The Secretary of Agriculture was directed to use the Rural Partners Network and issue guidance with HHS promoting opportunities to increase

access to child care and long-term care in rural and Tribal communities.

The EO also asked agencies overseeing federally-assisted projects to identify and issue guidance on funds that can be used for child care and long-term care to support workers being trained for and working on those federally funded initiatives. Agencies are to consider asking applicants for federal job-creation or workforce development funds to offer affordable and reliable child care and long-term care for workers carrying out federally-assisted projects and consider giving preference to applicants that use the funds for this purpose. You can read the EO in its entirety here.

SENATE ATTEMPT TO PASS HCBS BILL FALTERS

A Senate attempt to move forward a legislative package that included much of the Elizabeth Dole Home Care Act (S. 141) faltered when the chamber failed to obtain the necessary 60 votes. Voting occurred largely along party lines with 41 Republican Senators and 1 Democratic Senator opposing the measure. The complete results of the vote can be viewed here.

In mid-February, the Senate Veterans' Affairs Committee advanced all but one provision of the Elizabeth Dole Home Care Act, which makes sweeping changes to the way VA delivers home and community-based services to veterans. The approved language would, among other things, expand the Veteran Directed Care and similar programs to all VA medical centers, create a pilot program to provide home health aide services for veterans that reside in communities with a shortage of home health aides; and require VA to establish a warm handoff process for veterans and caregivers who are discharged from or are ineligible for the Program of Comprehensive Assistance for Family Caregivers.

The approved language was rolled into a legislative package as an amendment to S. 326, which renamed that bill the Veterans Programs Improvement Act of 2023. The legislative package also includes language allowing VA to conduct and support research on the efficacy and safety of using cannabis to treat veterans with certain conditions, as well as other provisions that







would bolster mental health care for both veterans and their caregivers.

Much of the opposition to the bill stems from provisions that would have allowed VA to research the effectiveness of using cannabis. There is a growing body of evidence that cannabinoids are useful for treating conditions like chronic pain, and PVA supports VA research into the efficacy of its use.

The Senate Majority Leader switched his vote from "yea" to "nay" at the last minute, so he could preserve his right to call the bill to the floor again at a later date. In the coming days, PVA will be working with congressional staff to garner additional support for the bill, and we fully anticipate there will be another attempt to advance it in the near future.

<u>Please contact your Senators and urge them to support</u> the Veterans Programs Improvement Act.

PVA Issues Statement in Response to Consideration of Debt Limit Legislation in the House

On April 26, PVA issued a statement in light of the House's consideration of the Limit, Save, Grow Act of 2023. This legislation would reduce spending across the federal government by returning to fiscal year (FY) 2022 spending levels for FY 2024 and limiting future growth. In exchange for these reductions and targeted rescissions, the federal debt limit would be raised until March 2024. Although we have received assurances from some Republican leaders, including House Veterans' Affairs Chair Mike Bost (R-IL), that veterans' funding will not be a target of these cuts, the pending legislation provides no specific protections for the services and supports PVA members and their families depend on. The bill narrowly passed the House. Next steps are uncertain.

PVA continues to believe that efforts to address the federal deficit must provide concrete protections for veterans, their families, and caregivers, which means explicit direction that VA's budget will not suffer significant cuts. We also urge Congress to remember that veterans with significant disabilities depend upon

many other federal services and supports outside of the VA that protect their disability civil rights, employment support, affordable accessible housing, as well as provide benefits that help their families and caregivers.

SENATE VETERANS' AFFAIRS COMMITTEE HOLDS LEGISLATIVE HEARING

On April 26, PVA submitted a statement for the record to a <u>Senate Veterans' Affairs Committee legislative</u> <u>hearing</u>. The bills up for consideration included a PVA-supported bill, the Caring for Survivors Act of 2023 (S. 414), which would index the rate of Dependency and Indemnity Compensation payments to 55 percent of a 100 percent service-disabled veteran with a spouse to achieve parity with similar compensation federal employees' survivors receive. Other bills included legislation to establish an Economic Opportunity and Transition Administration at VA and protect veterans from companies that charge veterans for guiding them through the VA's claims process.

<u>Please contact your members of Congress and urge</u> them to support the Caring for Survivors Act.

HOUSE VETERANS' AFFAIRS COMMITTEE HOLDS HEARING ON SUBSTANCE ABUSE DISORDER

On April 18, the House Veterans' Affairs, Health Subcommittee held a hearing titled, "Combatting a Crisis: Providing Veterans Access to Life-Saving Substance Abuse Disorder Treatment." VA testified during the first witness panel. Testifying for VA was Dr. Tamara Campbell, Executive Director of the Office of Mental Health and Suicide Prevention, and Dr. Sachin Yende, Chief Medical Officer for the Office of Integrated Veteran Care. Representing the Office of Inspector General was Dr. Julie Kroviak. The second panel had several organizations that testified on behalf of veterans: Executive Director and Owner of Miramar Health, Thomas Sauer; Daniel Elkins, Independence Fund; and Jen Silva, Wounded Warrior Project.

The Subcommittee questioned the VA about wait times for veterans in crisis, demanding that VA do better to







ensure that veterans are able to access timely care when needed. VA has limited residential substance abuse programs, which impedes their ability to enroll veterans quickly. The maximum standard for enrollment is currently 30 days and Subcommittee members are not satisfied with that timeline. Several members also questioned VA's coordination with community care alternatives for residential treatment. VA pushed back highlighting the various options they provide for treatment including out-patient care; apps; and the peer support network made up of veterans who struggled with substance use disorder.

The second panel stressed that the veterans they represent struggle to receive timely enrollment in necessary programs aimed at substance use disorder within the VA. They also highlighted several barriers for veterans who could find treatment within the community and demanded that VA improve the coordination with community care to get veterans enrolled in treatment programs as quickly as possible. They further stressed that residential rehabilitation care has different MISSION Act eligibility criteria than other specialty care, which they urge the Subcommittee to address.

VA RESETS THE DEPLOYMENT OF THE ELECTRONIC HEALTH RECORD

On April 21, the VA <u>announced</u> that future deployments of the new Electronic Health Record (EHR) will be halted while they prioritize improvements at the five sites that currently use the new EHR, as part of a larger program reset.

During this reset, VA will fix the issues with the EHR that were identified during the recent "assess and address" period, continue to listen to veterans and clinicians about their experience with the EHR, and redirect resources to focus on optimizing the EHR at the sites where it is currently in use: Spokane VA Health Care System, VA Walla Walla Health Care, Roseburg VA Health Care System, VA Southern Oregon Health Care, and VA Central Ohio Health Care System. Additional deployments will not be scheduled until VA is confident

that the new EHR is highly functioning at current sites and ready for expansion to new sites.

VA's decision follows an April 19 House Veterans' Affairs Oversight and Investigation Subcommittee hearing on several pieces of legislation targeted at VA's EHR. One of the bills considered would terminate the EHR Modernization Program.

News of Note

VA Under Secretary for Benefits Confirmed

On April 26, the Senate confirmed <u>Joshua Jacobs</u> to be VA's next Under Secretary for Benefits, marking the first time since 2014 that the Department has a confirmed Under Secretary for each of VA's Administrations: Benefits, Health, and Memorial Affairs. Mr. Jacobs has been serving as the acting VA Under Secretary for Benefits since last July.

PVA Serves as Panelist on Accessible Air Travel

On April 27, Associate Executive Director of Government Relations Heather Ansley participated in a panel on the importance of accessible transportation, including safe and dignified air travel for passengers with disabilities, at the Easterseals Policy and Partnership Forum at the National Press Club in Washington, D.C. The event was moderated by MSNBC's Symone Sanders and featured officials from the Department of Labor and the Department of Transportation, as well as prominent members of the disability community, including Dr. Rory Cooper, founding director and VA senior research career scientist of the Human Engineering Research Laboratories and PVA member. The event followed the release of a new report titled, "State of Disability Equity and Access," which highlights the most pressing issues and solutions to ensure disability equity across the United States.



HEARINGS & MARKUPS

Upcoming Veterans' Committee Activities

Please visit the <u>House</u> and <u>Senate</u> Veterans' Affairs Committee webpages for information on upcoming hearings and markups.