



April 15, 2024

Juliet Marsala, Deputy Secretary  
Office of Long-Term Living  
555 Walnut Street  
6<sup>th</sup> Floor  
Harrisburg, PA 17101

Dear Deputy Secretary Marsala, canceled cancelled

The Coalition for Choice (CFC) is an unincorporated group of organizations that share the common interest of promoting and protecting participant choice. The CFC Mission Statement is as follows:

“To develop and advance self-directed programs of community-based long-term care services and supports for Medicaid eligible people with disabilities and seniors that ensure full participant input, choice, and control in Pennsylvania”.

The Coalition places a high value on participant choice of provider and service model to ensure services meet the individual’s needs.

This letter intends to communicate the Coalition’s ongoing concern about home and community-based services provided through Community HealthChoices and offer support for actions that the Office of Long-term Living can take to secure and promote participant choice.

Consumer-directed Services

As we have communicated before, we note that several factors have contributed to the significant decline in the number of Participants choosing to use the consumer-directed service model since 2011 – from over 22,000 to about 8,000 today.

We applaud the Department's attention to this issue through enacting a Pay for Performance measure in 2024 requiring the CHC managed care organizations to develop strategies to increase the use of the consumer-directed model. We are hopeful that each of the MCOs seeks meaningful input from Participants on changes and approaches that may be effective. We further applaud the Department's intention to review the rates that support this service, described in more detail below.

We recognize that the department has assembled a workgroup to identify systemic solutions to increase participation in this program, but also recognize that the solutions being proposed by the workgroup do not identify the strategic importance of more than one provider of the service as one of the needed improvements, nor does the workgroup identify methods to improve participants' involvement in the management of this service. We urge the department to revisit these areas as it finalizes the recommendations of the workgroup.

#### Rates and Rate Update

We continue to be concerned that the rates for services in OLTL programs are in dire need of updating to reflect the current true cost of recruiting and retaining a quality workforce in its home and community-based services. The rates available in this service system must close the large gap with other front-line workers to become more competitive within the same workforce.

In the short term, while rate review efforts get underway, we strongly encourage OLTL/DHS to include, in the 2024-2025 fiscal year, a rate increase of 10% for Personal Assistance Services, Adult Day Programs, Residential Habilitation Services, and Employment Services. This immediate increase would help to meet the urgent and growing demand by participants for direct care workers in cost-saving community settings to ensure that participants who rely on these services have uninterrupted access to quality services delivered by a stable workforce. Too many DCWs are leaving the OLTL PAS program for employment in other sectors where they can earn higher hourly wages, healthcare coverage, and other benefits that are not available to DCWs under the current rate structure. This 10% increase request is reasonable and has also been relayed to the Governor as well as our legislators. We understand that a study of a subset of rates – particularly the wage portion of the rates – will be undertaken to inform the FY 2025-2026 budget for

the Commonwealth. We applaud this effort, however, we reiterate that the Medicaid fee schedule rates **for all home and community-based services in OLTL programs** must be reviewed and updated, that a schedule of **rate review of at least every three years** is adopted, that the vendor conducting the reviews is required to seek and consider provider input, and **that these rates should comprise the floor for calculation of managed care actuarially sound capitated rates for all services going forward.**

Our coalition commits to using any increased reimbursement for improved service delivery that benefits consumers, understanding that the integrity of the programs are directly related to improving outcomes for recipients and ultimately reducing overall cost of care for the Medicaid system.

The Coalition offers our assistance in the pursuit of any of these suggestions. Thank you for your consideration.

The Coalition for Choice is an unincorporated group of organizations operating at 1700 Market Street, Suite 1005, Philadelphia, PA 19103. Points of contact are Joan W. Martin and Ashley Wiggins, both reached at [info@xtraglobex.com](mailto:info@xtraglobex.com) and 1.703.595.3616. [Coalition for Choice PA](#)

Cc Valerie A. Arkoosh, MD, MPH, Secretary, Department of Human Services

Andrew Barnes, Executive Deputy, Department of Human Services,

Uri Monson, Secretary, Office of the Budget

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PA Senate and House leadership

Governor Shapiro

Anna Keith

John Koehn

Brendan Harris

Coalition for Choice Members

Catharine Weaber, Honor Health/Angels on Call

Kady Predota, PALCO

Ted Mowatt, PA Association of Home and Community Based Services

Carl Berry, PA HCBS

Mia Haney, Pennsylvania Homecare Association

Thomas Earle, Liberty Resources

Mindy Eberhart, PAMS

Misty Dion, Roads to Freedom Center for Independent Living (RTFCIL) of North Central PA

Ford Allison, Team Service Group

Shona Eakin, VFI Community Services

Fady Sahhar, XtraGlobex