

Recent news regarding legislation and regulatory actions affecting veterans and people with disabilities.

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UPDATE ON PVA COVID-19 RESPONSE

On April 9, PVA held a webinar for chapters and members about our response to the coronavirus, including our efforts to work with policy makers in Washington, DC and in VA SCI/D Centers and Regional Offices around the country. The webinar included welcome messages from PVA National President David Zurfluh and PVA Executive Director Carl Blake, as well as brief presentations from Medical Services Director Amanda Milisits; Associate Executive Director of Veterans Benefits, Peter Gaytan; Associate Executive Director of Government Relations, Heather Ansley; and Communications Director Liz Deakin. The main focus of the webinar was to answer questions from our members about their concerns with the pandemic. The webinar recording is available here.

Prior to the webinar, PVA conducted a survey of our members to determine the impact COVID-19 is having on their health and their ability to access health care through VA. Over 1000 PVA members responded to the survey. Information about the survey results is available here.

For the most up to date information about PVA's COVID response and resources, please continue to visit our COVID-19 webpage: https://pva.org/covid-19/.

PVA SEEKS TEMPORARY INCREASE IN A&A

Many PVA members rely on personal care attendants to help them with activities of daily living. However, attendant care is very expensive and often the Aid and Attendance (A&A) benefits provided to eligible veterans do not fully cover this cost. In fact, some PVA members who pay for full-time attendant care incur costs that far exceed the amount they receive as Special Monthly Compensation/Aid and Attendance beneficiaries. In March, a PVA member informed us that his attendant care costs could increase as much as 25 percent as a result of the ongoing COVID-19 crisis. Since that time, we have heard from other members with similar concerns.

PVA's Legislative Team has been working with Congress to address this looming crisis by advocating for a temporary increase in Special Monthly Compensation/Aid and Attendance

Paralyzed Veterans of America

Government Relations Department 801 18th Street, NW · Washington, DC 20006 (800) 424-8200 · (800) 795-4327 · www.pva.org

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benefits by as much as 25 percent to offset higher costs associated with the ongoing health crisis. Our concern is that without proper attendant care our veterans could be forced to seek residential placements, which could endanger their long-term health, and increase VA costs.

After an unsuccessful attempt to include this provision in the third COVID relief bill that passed late last month, we are working with congressional staff to get the provision included in the next relief bill. Lawmakers are expected to begin work on this measure soon, and our efforts center on firming up the need for this proposal. If you use A&A dollars to pay for self-purchased care and you pay more for your care than the amount of money you receive from VA; have seen an increase in the rates you pay for your care that is related to the pandemic; or if you have been told that rates will increase as a result of the pandemic, we need to hear from you immediately. Please send a brief email describing your situation to PVA's National Legislative Director, Morgan Brown, at morganb@pva.org.

News Items of Note

OCR Issues Bulletin on Civil Rights Laws and HIPAA Flexibilities During COVID-19

On March 28, the Office for Civil Rights (OCR) at the U.S Department of Health and Human Services (HHS) issued a <u>bulletin</u> to ensure that entities covered by civil rights authorities keep in mind their obligations under laws and regulations that prohibit discrimination on the basis of race, color, national origin, disability, age, sex, and exercise of conscience and religion in HHS-funded programs, including in the provision of health care services during COVID-19. In response to the HHS guidance, more than 90 national disability and health organizations, including PVA, endorsed a <u>document</u> produced by the Center for Public Representation, The Arc, Bazelon Center for Mental Health Law, Autistic Self Advocates Network, and the Disability Rights Education and Defense Fund for stakeholders to use in their advocacy with states and medical professionals in developing non-discriminatory rationing plans. For background resources on medical rationing, please visit here.

 PVA Works with Disability and VSO Allies to Fix Rebate Check Problems for VA Benefits and SSI Recipients

As part of the third COVID response legislative package, Congress provided for rebate checks to certain Americans who filed tax returns in 2018 or 2019 and Social Security recipients who received an SSA-1099. However, Supplemental Security Income (SSI) beneficiaries and many veterans with disabilities who receive benefits through VA do not typically pay taxes on those benefits. PVA has been working with its partners in the disability and veterans communities to advocate for the Treasury Department, Social Security Administration, and VA to rectify this oversight. On April 3, PVA joined several veterans

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service organizations in a letter to the IRS and VA seeking redress of this issue. That same day, PVA was among over 190 organizations signing onto a <u>disability community letter</u> urging swift assistance for SSI and VA beneficiaries.

Disability Advocates Seek Greater Attention to Community Concerns in 4th COVID Bill

Although there were a number of important provisions included in the third COVID relief bill passed by Congress at the end of March, disability advocates were disappointed that many of their most critical requests were not included in that legislation. Of particular concern were the failure of Congress to designate direct support professionals or personal care attendants as essential personnel during the crisis, ensure paid family and medical leave for those caring for adults with disabilities, and to instill strong protections for people with disabilities in the face of limited health care resources. As Congress prepares to develop a fourth package of COVID relief legislation, PVA and its allies in the disability community sent a letter to the congressional leadership outlining critical elements that should be included to ensure equal treatment for people with disabilities. For more information, please visit: http://www.c-c-d.org/fichiers/FINAL-CCD-Asks-for-COVID-19-Package4.pdf.

Modified SAH Bill Clears Senate

At the end of March, the Senate unanimously passed an amended version of S. 2022. This legislation would bring important reforms to VA's Specially Adapted Housing (SAH) program. As passed, the legislation includes increases in the overall amount of the SAH grant to \$98,492 and the number of times it can be used from three to six. It also establishes a supplemental grant program and provides expanded access to the SAH program to veterans who are blind. Unlike the House version, the Senate bill does not contain language requiring VA to prioritize the claims of seriously ill veterans such as those with ALS. However, PVA made a compelling case for this requirement and the likelihood that Congress would order such a change prompted VA to act on its own to place a greater priority on these claims. We are hopeful that the House will soon pass the amended Senate

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bill.

House Companion to S.2216, the TEAM Veteran Caregivers Act, Introduced

Rep. Andy Biggs (R-AZ) has introduced a companion bill in support of S. 2216, the TEAM Veteran Caregivers Act. For far too long, VA has operated the family caregiver program under the radar, which has led to many veterans being inappropriately dropped from the program without any recourse. This resulted in the VA Secretary on two separate occasions placing a temporary hold on discharging veterans from the program because of "continued concerns expressed by veterans, caregivers and advocates about inconsistent application of eligibility requirements by VA medical centers" of the program.

The TEAM Veteran Caregivers Act would address this issue by requiring the VA Secretary to formally notify veterans and caregivers of clinical determinations relating to eligibility for the caregiver program and afford them their due process rights. The bill would also require the VA Secretary to formally recognize all caregivers of veterans by identifying any caregiver of a veteran in the veteran's health record and temporarily extend benefits for veterans who are determined ineligible for the family caregiver program for 90 days after the date of notification.

VA Officially Pauses EHR Project

VA announced on April 6 that it has paused the rollout of its multibillion-dollar electronic health record (EHR) project on account of the coronavirus pandemic. This is the second time VA has announced a pause. In February, VA pushed back plans to begin end-user training for its new EHR, saying it needed more time to build the system. Despite the pauses, VA Secretary Robert Wilkie says the project is nevertheless progressing. He cites 72 of 73 interfaces being completed, and says a joint Health Information Exchange with the Department of Defense will come online this month.

VA Tele-Hearing Legislation Signed Into Law

H.R. 4771, the VA Tele-Hearing Modernization Act, was signed into law on April 10. This new law allows the Board of Veterans' Appeals to hold hearings via teleconference from locations that are not VA facilities, when requested by the veteran. This law must be put into place within 180 days.

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WEBINARS AND SURVEYS

PVA Survey for ADA 30th Anniversary

As we prepare for the 30th Anniversary of the Americans with Disabilities on July 26, we need your help. Please complete our survey regarding the accessibility experience of people with disabilities who use wheelchairs. The survey link is available <u>here</u>.

National Disability Institute Hosts COVID Listening Sessions

On March 24-25, more than 1,500 individuals participated in two listening sessions, hosted by the National Disability Institute, to learn about the impact of the coronavirus crisis on the disability community. PVA Associate Executive Director Heather Ansley participated in the session on March 25. The listening sessions, as well as supplementary materials, can be found here.