

## Brain Injury Association of America Advocacy During the Coronavirus Pandemic

### **Fight for Non-discrimination in Care Rationing**

The Brain Injury Association of America (BIAA) joined other leading national health, disability, and aging organizations in signing a letter to U.S. Health and Human Services (HHS) Secretary Alex Azar and Office for Civil Rights Director Roger Severino demanding any rationing of health care resources comply with federal nondiscrimination laws. Health care providers must not allocate treatment based on assumptions that a person's disability or age will diminish his or her prospect of survival. Even during the COVID pandemic, BIAA continues to fight to ensure health care providers do not devalue the lives of individuals who sustain brain injuries.

### **Advocacy for Telehealth Therapy**

BIAA submitted a letter to the Office of Management Budget urging regulatory flexibility to the Centers for Medicare and Medicaid Services to cover and reimburse physical therapy, occupational therapy, and speech-language pathology and audiology services provided by licensed professionals to Medicare patients through telehealth, to the extent practicable, during the COVID-19 pandemic.

### **Thanks to Administration Officials**

BIAA signed a letter U.S. Department of the Treasury Secretary Steven Mnuchin, Social Security Administration Commissioner Andrew Saul, and Veterans Affairs Secretary Robert Wilkie thanking them for establishing the new web tool to help identify individuals who do not normally file tax returns but may be eligible for the Economic Impact Payments authorized by the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). Specifically, the web tool helps non-filers sign up for payments if they have children who would be eligible for dependent credits and simplifies the filing process for individuals who have low to no income.

### **Advocacy for Inpatient Rehabilitation Facility Access**

BIAA signed a letter to Center for Medicare and Medicaid Services (CMS) Administrator Seema Verma urging the agency to include inpatient rehabilitation hospitals and units (IRFs) among the required specialty facilities available to Medicare Advantage plan participants. Individuals who sustain brain injuries must have access to comprehensive and intensive rehabilitation services to avoid inappropriate placement in nursing homes.

### **Support for Value-Based Health Plans Under the Affordable Care Act**

In February 2020, BIAA signed a letter to CMS Administrator Verma supporting the

development of insurance plans that would cover only “high-value services” as a way to contain costs. However, we reminded CMS that Section 1557 of the Patient Protection and Affordable Care Act prohibits health plan issuers from discriminating against individuals with disabilities in making coverage decisions, reimbursement rates, incentive programs, and benefit designs.

### **Request to Expand Family and Medical Leave Program under Coronavirus**

BIAA signed a letter to Congressional leaders to expand eligibility for the paid family and medical leave program to include individuals at high risk for adverse complications from COVID-19 and working members of their households, allowing them to remain at home during the pandemic. Currently, paid family medical leave provides support only to those with children or adults with disabilities whose local school district or usual care providers are closed.

### **Support for Real Time Benefit Tool**

BIAA signed a letter to CMS to support the proposed rule that would require Medicare Part D plan sponsors to implement a “Real Time Benefit Tool” (RTBT) that would allow enrollees to view accurate, timely, and clinically appropriate real-time formulary and benefit information. BIAA supports this requirement and urges inclusion of cost-sharing information, formulary alternatives, and utilization management requirements within the information displayed in the RTBT.

### **Opposition to Medicaid Block Grants**

In March, BIAA signed a letter to CMS in strong opposition to a new policy inviting states to apply for block grants and per capita caps, as announced in the agency’s letter to State Medicaid Directors. Block grants and similar per capita caps result in huge federal funding decreases, forcing states to cut benefits or eligibility, and ultimately significantly harming children and adults with disabilities.

### **Advocates Seek Data Collection Mandate**

On May 1, 2020, BIAA joined with other civil rights groups calling on Senate Majority Leader Mitch McConnell, Senate Minority Leader Charles Schumer, House Speaker Nancy Pelosi, and House Minority Leader Kevin McCarthy to require the Centers for Disease Control and Prevention (CDC) to update the COVID-19 surveillance systems to collect data on patients’ race, ethnicity, sex, primary language, sexual orientation, disability status, gender identity, and socioeconomic status in line with federal standards, and as a threshold, comport with the standards identified in the Patient Protection and Affordable Care Act. The public needs to know who has been tested, infected, hospitalized, recovered, and died from this disease, so that we may understand who is most at risk as we emerge from stay-at-home orders.

Policymakers need to know this information so that they can prioritize and distribute resources based on anticipated need.

### **Support for New Bills Introduced in Congress**

BIAA strongly supports the bills introduced by Senator Bob Casey (D-PA) and Representative Debbie Dingell (D-MI), Coronavirus Relief for Seniors and People with Disabilities Act (S. 3544 and H.R. 6305, respectively) to increase funding for states’ home and community-based services for people with disabilities before and after the COVID-19 pandemic. If this legislation passes, the money will go to:

- Wage increases, hazard pay, and paid leave for direct care providers and home health aides

- Home-based coronavirus testing
- Making information about COVID-19 accessible, insuring easy-to-read guides, and American Sign Language (ASL) interpretation
- Getting services to people who are currently on waiting lists
- Ensuring that older adults and people with disabilities can receive care at home if they need it
- Helping family caregivers get equipment, money, and supplies

### **Support for HEROES Act**

On May 13, 2020, BIAA joined with other members of the Injury and Violence Prevention Network in urging Congressional leaders to add funds to the just-introduced Health and Economic Recovery Omnibus Emergency Solutions (HEROES) Act to prevent and respond to injuries and violence arising from the COVID-19 pandemic. According to published reports, falls, firearms, domestic violence, child abuse, and near drownings are all on the rise. Annually, injuries and violence cost the U.S. \$840 billion, which is equal to 85% of the annual federal deficit. Efforts to address injury and violence prevention have long garnered bipartisan and bicameral support. Investments made today will ensure that the COVID-19 pandemic does not further exacerbate the socioeconomic toll of injuries and violence.

### **Advocacy for Future COVID-19 Relief Package**

BIAA and our partners across the health and disability communities urge congressional action on key health care priorities in future COVID legislation. In particular, we are pushing Congress to advance specific policies in the next package that will:

- Ensure access to affordable health insurance coverage for all.
- Provide states, localities, and tribes with the financial support they need to respond effectively.
- Protect the health and safety of the health care workforce.
- Organize national public health capacity.
- Protect all patients' access to care and prohibit price gouging of health care services.
- Prioritize children's health and well-being.

