

**Testimony of Andrew Patterson  
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**Before the Committee on Health  
Council of the District of Columbia**

**Budget Oversight Hearing Regarding the Department of Health Care Finance**

**June 7, 2021**

The Legal Aid Society of the District of Columbia<sup>1</sup> submits the following testimony to urge the Mayor and the Council to ensure that unnecessary barriers to accessing and maintaining enrollment in the District’s Health Care Alliance Program are permanently removed. Our testimony also raises an oversight concern regarding home health aide services that we hope the Committee will investigate further, even as it is considering the FY22 budget for the Department.

**The Council Should Fund the Full Removal of Barriers to Maintaining Health Care Alliance Coverage in FY22**

The Healthcare Alliance Program serves a vital purpose in the District’s public health system, offering health coverage to members of the District’s immigrant communities with low incomes, who might not otherwise be covered. In her upcoming budget, the Mayor should fund the full and permanent repeal of the Alliance’s six-month, in-person recertification requirement and align the program’s renewal requirements with Medicaid.

Temporary Pandemic Protections for Alliance Participants Have Helped Preserve Health Care Access

We commend the Council and the Department of Health Care Finance (DHCF) for the steps that were taken at the start of the pandemic to ensure that individuals enrolled in public health insurance programs, such as Medicaid and the Alliance, did not lose access to those crucially

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<sup>1</sup> The Legal Aid Society of the District of Columbia was formed in 1932 to “provide legal aid and counsel to indigent persons in civil law matters and to encourage measures by which the law may better protect and serve their needs.” Legal Aid is the oldest and largest general civil legal services program in the District of Columbia. Over the last 89 years, Legal Aid staff and volunteers have been making justice real – in individual and systemic ways – for tens of thousands of persons living in poverty in the District. The largest part of our work is comprised of individual representation in housing, domestic violence/family, public benefits, and consumer law. We also work on immigration law matters and help individuals with the collateral consequences of their involvement with the criminal justice system. From the experiences of our clients, we identify opportunities for court and law reform, public policy advocacy, and systemic litigation. More information about Legal Aid can be obtained from our website, [www.LegalAidDC.org](http://www.LegalAidDC.org), and our blog, [www.MakingJusticeReal.org](http://www.MakingJusticeReal.org).

important services. These measures have included temporarily suspending recertification requirements for both programs as the public health emergency has continued. As we are hopefully moving past the worst days of the pandemic, it is important that DHCF and the Council put in place permanent policy changes to ensure that gaps in our public health and safety net programs do not return when temporary public health emergency protections expire. This is especially important for the communities served by Medicaid and Alliance, as the pandemic has exposed the ways in which different populations in the District – including Black and Brown District residents – are disproportionately impacted by public health challenges. It is also important for ensuring that the transition back to regular operations at the Department of Human Services (DHS), which conducts recertifications for a variety of safety net programs, is orderly and responsible.

Fully Funding Bill 23-0890’s Alliance Provisions Will Permanently Ease the Burden on Both Vulnerable District Residents and Overburdened District Agencies

In December, the Council passed Bill 23-0890, the Prescription Drug Monitoring Program Query and Omnibus Health Amendments Act of 2020. This Act contains language that, if funded, would shift the Alliance to an annual recertification schedule and end the requirement that recertifications be done in person with the Department of Human Services. Legal Aid strongly supports B23-0890’s Alliance provisions, and we urge the Mayor to ensure that this law is fully funded in the District’s FY22 budget.

As the Committee is no doubt aware, Legal Aid and other advocates have raised concerns about the burdensome Alliance enrollment and recertification procedures in prior years.<sup>2</sup> In each of these years, we discussed the unconscionably long lines at Economic Security Administration (ESA) Service Centers – with people attempting to complete face-to-face interviews for Alliance coverage making up a significant proportion of these lines. On multiple dates, Legal Aid discovered scores of people queuing up in front of a Service Center early in the morning, with some people reporting that they arrived before 4:00 a.m., and in weather as cold as 22 degrees.<sup>3</sup> We have also testified about numerous people being unable to complete the required face-to-face recertification after being turned away from ESA Service Centers due to limited capacity. Despite these concerns – concerns which are shared by many on the Council as well – prior

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<sup>2</sup> See, e.g., Legal Aid Testimony Regarding Agency Performance Oversight for the Department of Human Services (Jan. 29, 2020), <https://www.legalaiddc.org/wp-content/uploads/2020/02/Legal-Aid-DHS-Oversight-Testimony-FY19-FY20YTD-Alliance-FINAL.pdf>; Legal Aid Testimony Regarding Agency Performance Oversight for the Department of Health Care Finance (Feb. 6, 2019), <https://www.legalaiddc.org/wp-content/uploads/2019/02/Legal-Aid-FY18-19-DCHF-Oversight-Testimony-Health-Care-Alliance-FINAL.pdf>

<sup>3</sup> Legal Aid Testimony Regarding Agency Performance Oversight for the Department of Human Services (Jan. 29, 2020), <https://www.legalaiddc.org/wp-content/uploads/2020/02/Legal-Aid-DHS-Oversight-Testimony-FY19-FY20YTD-Alliance-FINAL.pdf>

legislation to permanently end the six-month, in-person recertification requirement was not funded by either the Mayor or the Council.

B23-0890's Alliance provisions fix critical and long-standing problems with the DC Health Care Alliance by:

1. Removing the requirement for a face-to-face interview while applying for / recertifying for Alliance coverage;
2. Extending the certification period for Alliance enrollees to 12 months; and
3. Allowing for recertifications to be completed by phone and online.<sup>4</sup>

By moving to a one-year recertification period and removing the face-to-face interview requirement, DHS will substantially reduce the likelihood of people losing their DC Health Care Alliance coverage – not because they do not qualify – but because they were unable to comply with excessively burdensome administrative barriers.

While our understanding is that the Mayor's budget proposes shifting the in-person interview requirement to a phone interview, this proposal raises concerns about how such a change would work for Alliance enrollees. Assuming the phone interviews are done with live call center representatives (as opposed to an automated call), it will be critical to fund sufficient staff to allow callers to reliably get through to a live person and complete the interview. Second, sufficient funds to address language access issues must be allocated if call center interviews are to be successful. Finally, simply changing the in-person interview requirement to a phone interview, while not addressing more fundamental problems with the Alliance program, will not fully address (and may even worsen) these long-standing problems for Alliance enrollees. Assuming Alliance enrollees would still be required to submit recertification paperwork to service centers, and to do so on a burdensome, 6-month schedule, then they will still face frequent risks of termination of coverage if they are not able to complete their phone interviews due to long hold times, inadequate staffing of phone lines, and / or insufficient language access resources.

B23-0890 will end the onerous application and recertification requirements that have been imposed for years on some of the District's most vulnerable residents. The Mayor and Council must ensure that the Act's Alliance provisions are fully funded to finally address these long-standing concerns about the DC Health Care Alliance program.

### **DHCF Must Address Delays in Accessing Services My Way**

Services My Way is a program that allows Medicaid recipients who receive home health services through the EPD waiver to choose the people who provide their home health services. It is an especially important program for high need individuals who also have barriers, such as mental illness, behavioral health challenges, or cognitive limitations, that make it hard to receive

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<sup>4</sup> B23-0890, Title II D.C. Health Care Alliance Reform.

services from strangers. By choosing their own health aides, recipients are able to work with people they know and trust,

We have heard, however, from multiple clients, as well as from our community partners, that many people trying to enroll in Services My Way have experienced serious communication challenges with Consumer Direct, the contractor in charge of enrolling people in Services My Way, including lack of communication from staff who are assigned to handle beneficiary enrollment. We have also heard reports of these communication problems leading to people getting stuck in the Services My Way enrollment process and being unable to start receiving their services from their chosen aides. Those individuals must then either receive services from a Home Health Agency while they wait (which may not be equipped to provide them with proper services) or simply go without services why they try to enroll in Services My Way.

It is likely, given the ongoing pandemic, that more recipients of home health services will want to receive those services from people they know and trust going forward. We urge DHCF to investigate these reports, and to ensure that Consumer Direct is properly and timely processing enrollment requests. Additionally, the American Rescue Plan provides increased funding for Home and Community-Based Services, so we urge DHCF and the council to make use of this opportunity by approving necessary funding to ensure that people can be enrolled in Services My Way in a timely fashion.

### **Conclusion**

It is critical that the District not return to the pre-pandemic normal where scores of District residents are waiting in early morning lines at ESA Service Centers to get or maintain Alliance coverage, or where eligible beneficiaries are regularly losing their Alliance coverage because they are unable to navigate these administrative hurdles. We hope the Mayor's budget will include full funding for B23-0890's Alliance provisions, and we strongly urge the Council to provide that funding if the Mayor does not.