
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE RESOLUTION

No. 134 Session of
2025

INTRODUCED BY CERRATO, M. BROWN, HOHENSTEIN, D. MILLER, KHAN,
SANCHEZ, HILL-EVANS, WAXMAN, GUENST, HARKINS, GIRAL, PROBST,
MCNEILL, MADDEN, OTTEN, HOWARD, HANBIDGE AND DEASY,
MARCH 19, 2025

REFERRED TO COMMITTEE ON HUMAN SERVICES, MARCH 19, 2025

A RESOLUTION

1 Directing the Joint State Government Commission to conduct a
2 study and issue a report on the programs administered by the
3 Office of Long-Term Living and the Office of Developmental
4 Programs focused on how to improve the experience of
5 individuals with disabilities that receive a Home and
6 Community-Based Services waiver.

7 WHEREAS, More than 2 million Pennsylvanians have a
8 disability, or approximately one-fourth of Pennsylvanians, which
9 includes mobility and cognitive disabilities; and

10 WHEREAS, Adults with disabilities are more likely to
11 experience other health issues, such as obesity, diabetes and
12 heart disease, than the average adult and they face barriers to
13 independent living and employment; and

14 WHEREAS, Home and Community-Based Services waivers offer
15 resources through a variety of Medical Assistance waivers which
16 support the particular needs of residents of this Commonwealth
17 in community settings, enabling recipients to live in their
18 communities rather than seeking care in an institutional
19 setting, such as an intermediate care facility for individuals

1 with intellectual disabilities, an intermediate care facility
2 for individuals with other related conditions or a nursing
3 facility; and

4 WHEREAS, Home and Community-Based Services waivers were first
5 created by an act of Congress in 1981 that amended the Social
6 Security Act to address a bias in the structure of Medicaid
7 towards providing benefits in institutional settings; and

8 WHEREAS, Congress created the waiver program to allow states
9 to apply for waivers that enable the state to target services to
10 areas of need and particular populations, especially to help
11 recipients remain in their community, rather than residing in an
12 institution; and

13 WHEREAS, Home and Community-Based Services waivers are
14 required to be cost-neutral and, by providing care equivalent to
15 Medicaid care in the community, costs are often lower than under
16 standard Medicaid; and

17 WHEREAS, There are multiple waivers available for home and
18 community-based services in this Commonwealth that vary in their
19 target population and the benefits provided, with waivers
20 available for residents with conditions, including autism and
21 developmental physical disabilities, and older Pennsylvanians;
22 and

23 WHEREAS, Home and Community-Based Services waivers are
24 administered by the Department of Human Services, and some of
25 the programs, like the Community HealthChoices Waiver and the
26 OBRA Waiver, are administered by the Office of Long-Term Living
27 (OLTL), and other programs, like the Community Living Waiver and
28 the Adult Autism Waiver, are administered by the Office of
29 Developmental Programs (ODP); and

30 WHEREAS, Home and Community-Based Services waivers give the

1 Commonwealth the flexibility to offer care that is not typically
2 available under Medicaid so that vulnerable individuals can
3 continue to live in the community rather than an institution;
4 and

5 WHEREAS, In 1978, the Congress of the United States defined
6 developmental disability as a severe, chronic disability due to
7 a physical or mental impairment, manifesting before 22 years of
8 age, likely to continue indefinitely, and resulting in
9 substantial functional limitations in three or more major life
10 activities; and

11 WHEREAS, This definition was updated in 2000 by the
12 Developmental Disabilities and Bill of Rights Act of 2000,
13 emphasizing the need for lifelong, individualized support; and

14 WHEREAS, Pennsylvania has adopted eligibility criteria for
15 Home and Community-Based Services waivers that exclude some
16 individuals who meet the Federal definition of developmental
17 disability, thus preventing them from receiving the necessary
18 services; and

19 WHEREAS, Inadequate service availability and provision can
20 detrimentally affect an individual's health, ability to live
21 independently, work and have self-determined lives; and

22 WHEREAS, Data submitted by the Department of Human Services
23 to the Employment First Oversight Commission shows that in 2023,
24 18% of ODP's Home and Community-Based Services waiver
25 participants 18 to 64 years of age are employed in an integrated
26 setting and earning a minimum wage or higher; and

27 WHEREAS, Supporting access to Home and Community-Based
28 Services waivers, medical assistance and other public assistance
29 is important to the Commonwealth's commitment to health equality
30 and equal participation in our communities; and

1 WHEREAS, The concerns and needs of the individuals who use
2 these programs should be the foremost priority for legislators
3 in delivering assistance to those individuals; therefore be it

4 RESOLVED, That the House of Representatives direct the Joint
5 State Government Commission to conduct a study and issue a
6 report on the programs administered by the Office of Long-Term
7 Living and the Office of Developmental Programs focused on how
8 to improve the experience of individuals with disabilities that
9 receive a Home and Community-Based Services waiver; and be it
10 further

11 RESOLVED, That the study:

12 (1) Report on whether Home and Community-Based Services
13 waivers meet the medical needs of recipients who have a
14 disability, and ways in which care under waivers can be
15 improved to better meet the medical needs of individuals with
16 disabilities, taking into consideration those differences in
17 the needs of individuals with physical disabilities,
18 intellectual disabilities, autism and other developmental
19 disabilities.

20 (2) Report on access to primary, secondary and tertiary
21 prevention health care, medical supplies, nursing services,
22 medically related supports such as tube feedings or catheter
23 changing, and the social determinants of health for
24 individuals with disabilities on Home and Community-Based
25 Services waivers and whether the access adequately meets the
26 needs of individuals with disabilities.

27 (3) Report on the barriers and facilitators to hiring an
28 attendant or direct care worker to be able to provide these
29 supports when a nurse is not available under these waivers.

30 (4) Examine challenges faced by waiver participants to

1 avoid institutionalization and to be supported to remain
2 actively engaged in their community.

3 (5) Report on cases where health or administrative
4 challenges with waivers lead an individual with a disability
5 to seek care in an institution instead of remaining in the
6 community.

7 (6) Examine and compare the service menus in the OLTL
8 versus those in ODP, recognizing that the needs of
9 individuals in both programs may be the same or similar, to
10 include enhanced payments for in-home supports and
11 communication supports, supports brokers, two-to-one staffing
12 ratios, housing transition and tenancy sustaining services,
13 communication specialist, family caregiver training and
14 support, family medical support assistance, Agency With
15 Choice and supports provided during hospitalization.

16 (7) Examine the root causes of the percentages of OLTL
17 participants in competitive integrated employment being one-
18 thirteenth of those served by ODP's waivers.

19 (8) Compare participant-directed worker wage ranges, the
20 ability to offer nonmandatory, benefits, training
21 requirements and enhanced payments for direct care workers in
22 OLTL's OBRA waiver and the Attendant Care Services Act to
23 those for support service workers in the ODP's waivers.

24 (9) Report on ways in which Home and Community-Based
25 Services waivers administrative processes and eligibility
26 criteria could be improved to address the challenges facing
27 individuals with disabilities eight years of age and older to
28 access Home and Community-Based Services waivers.

29 (10) Evaluate ways in which other states have
30 accommodated the diverse needs of individuals with

1 disabilities and altered their public assistance programs as
2 a result, including the utilization of the Federal definition
3 of "developmental disabilities."

4 (11) Report on barriers and facilitators to accessing
5 direct care services for individuals with disabilities on
6 Home and Community-Based Services waivers, including the
7 differing standards for authorizing direct care services
8 among different waivers.

9 (12) Report on the circumstances of dual eligibility for
10 Medicare and Medicaid for an individual with disabilities,
11 and any issues that this raises for the recipient in
12 coordinating provider networks and benefits.

13 (13) Evaluate possible cost savings associated with
14 changes to waivers, including the costs of changes that would
15 address barriers to access.

16 (14) Make recommendations on actions that the Department
17 of Human Services, Department of Health or other State
18 agencies could take to better meet the needs of people who
19 need home and community-based services.

20 (15) Make legislative recommendations on actions that
21 the General Assembly could take to improve access to Home and
22 Community-Based Services waivers.

23 (16) Collect and evaluate data, including satisfaction
24 surveys, interviews with waiver recipients and interviews
25 with advocates of Home and Community-Based Services waivers;
26 and be it further

27 RESOLVED, That the Joint State Government Commission convene
28 an advisory committee which contains the following members:

29 (1) The Secretary of Health or a designee.

30 (2) The Secretary of Human Services or a designee.

1 (3) One member of the Senate designated by the President
2 pro tempore of the Senate.

3 (4) One member of the Senate designated by the Minority
4 Leader of the Senate.

5 (5) One member of the House of Representatives
6 designated by the Speaker of the House of Representatives.

7 (6) One member of the House of Representatives
8 designated by the Minority Leader of the House of
9 Representatives.

10 (7) A representative from the Office of Medical
11 Assistance Programs.

12 (8) A representative from ODP.

13 (9) A representative from OLTL.

14 (10) A representative of a county assistance office or a
15 designee.

16 (11) A representative of an association of community
17 providers of long-term-care living services in this
18 Commonwealth.

19 (12) A representative from two separate disability
20 advocacy groups in this Commonwealth.

21 (13) A representative of an organization representing
22 members of a union that provide services to individuals
23 receiving a Home and Community-Based Services waiver.

24 (14) A representative of a health plan.

25 (15) A representative of a hospital.

26 (16) A member of the Statewide Independent Living
27 Council.

28 (17) A consumer representative from the Long-Term
29 Services and Supports subcommittee of the Medical Assistance
30 Advisory Committee.

1 (18) A representative of the Long-Term Care Council.

2 (19) A family member of an individual who receives a
3 Home and Community-Based Services waiver.

4 (20) An individual receiving services from a Home and
5 Community-Based Services waiver administered by ODP.

6 (21) An individual receiving services from home and
7 community-based services administered by OLTL.

8 (22) A representative of the Employment First Oversight
9 Commission.

10 (23) A representative of an organization that offers
11 personal assistance services or attendant care.

12 (24) A representative who is a service coordinator who
13 serves the OBRA waiver population.

14 (25) A representative who is a service coordinator who
15 serves the Community HealthChoices Waiver population.

16 (26) A health care economist.

17 (27) Any other representatives who are deemed
18 appropriate by the Joint State Government Commission;

19 and be it further

20 RESOLVED, That the advisory committee be dissolved no later
21 than six months after the reporting of findings concludes; and
22 be it further

23 RESOLVED, That the Joint State Government Commission report
24 its findings and recommendations to the House of Representatives
25 no later than 24 months after the adoption of this resolution.