Technology Access During COVID-19: State Aging and Disabilities Initiatives



Executive Summary

The COVID-19 pandemic has significantly impacted the health and wellness of older adults and persons with disabilities living in home and community-based and residential settings. Protecting health and safety brought about the rapid closure of programs serving older adults, persons with disabilities, and many others with health conditions. These populations may now be spending most of their day in their homes with little interaction with the outside world. In response to the challenges and safety concerns of providing in-person services, some agencies moved to virtual service delivery, offering an array of programming using technology and the telephone.

While modes of virtual service delivery are bringing about innovations that may outlast the pandemic, the transition to virtual services has also exacerbated issues with the long-standing digital divide. These issues reflect a variety of factors including access to technology devices, knowledge and comfort with using devices, and access to the Internet. For older adults who don't have access to devices, have difficulty using technology devices, need assistive technology, or are in homes or communities with poor Internet connectivity, the transition to virtual services may create a new digital divide and further the experience of social isolation and inequities in access to programs and services.

State aging and disabilities agencies recognize the importance of technology connectivity to facilitate access to programs, services, and family and friends. This issue brief explores initiatives that state aging and disabilities agencies are engaging in during the COVID-19 pandemic to facilitate access to technology devices and the internet. This brief includes a review of initiatives, funding sources, and partnerships. Data and findings are drawn from the ADvancing States 2020 COVID-19 Membership Survey.

Background and Methodology

In the Spring of 2020, ADvancing States conducted a national survey to explore changes that states have made to their delivery systems, as well as developments and challenges in responding to the COVID-19 pandemic. A web-based survey instrument was used to collect survey responses. The survey was distributed to ADvancing States members in May of 2020 and data collection ended in June of 2020. ADvancing States members include state agencies responsible for a wide range of long-term services and supports (LTSS), including state-funded services, Older Americans Act (OAA) programs, and Medicaid LTSS. As survey questions spanned across several programs, state members were advised that they may need to engage additional state partners on the survey. A total of 55 respondents participated in the survey, representing 45 states.



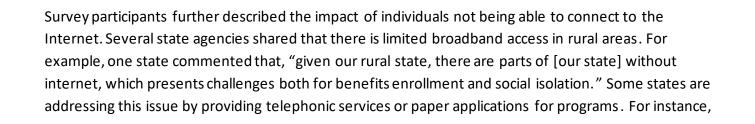
Access to Broadband Internet

During a time when in-person interactions pose health risks due to possible exposure of the virus, lack of access to broadband Internet can have far reaching consequences for older adults, such as challenges enrolling in benefit programs that provide much needed financial assistance for needs like food, health care, and energy assistance; challenges accessing services and being connected to service and health care providers; and challenges with social isolation, including prevention of connection with friends, family, and various support networks. Health and safety guidelines themselves can have the paradoxical effect of increasing social isolation, particularly for older adults. Measures such as physical distancing, stay-at-home or safe-at-home guidance, and limitations on interactions, services, or gatherings in physical settings, while important for limiting disease transmission, can result in greater isolation from others.

State aging and disabilities agencies were asked if individuals that their agency serve have been impacted by a lack of access to broadband Internet. As shown in figure 1, of 46 state respondents, 48% said yes; 39% said they did not know; and 13% said no.

> Internet No 13% Yes 48% Do not know 39%

Figure 1



Individuals Served by State Aging and Disabilities Agencies Impacted by a Lack of Access to Broadband

N=46



one state indicated that, "Paper applications are mailed where broadband is an issue." While rural Internet connectivity was an issue pre-pandemic, the current crisis stresses the importance of, and relationship between, Internet connection and health and wellness for older adults and persons with disabilities.

Additionally, many states shared that a lack of access to the Internet means that older adults are missing out on critical services. As indicated by survey participants, some of these services include telehealth; eligibility interviews for benefit programs; assistive technology use; shop at home options; online applications; virtual wellness and education classes; and overall, opportunities to reduce social isolation whether that be through check-ins with service providers, wellness classes, or online socialization groups. For example, one state commented that, "Some have experienced a barrier to telehealth, and eligibility interviews causing delays in access."

The impact of a lack of connection to the Internet is exacerbated because many libraries, restaurants, and aging programs have closed, limiting options for older adults to connect to the Internet in places where they previously did so. For instance, one survey respondent commented that their state, "does not have broadband across the [the state] and with libraries and restaurants closed there are limited options for finding a location with internet." Furthermore, if older adults have Internet at home, the quality and speed may not be sufficient to support online activities, such as video conferencing.

Internet Connection and Technology Device Initiatives

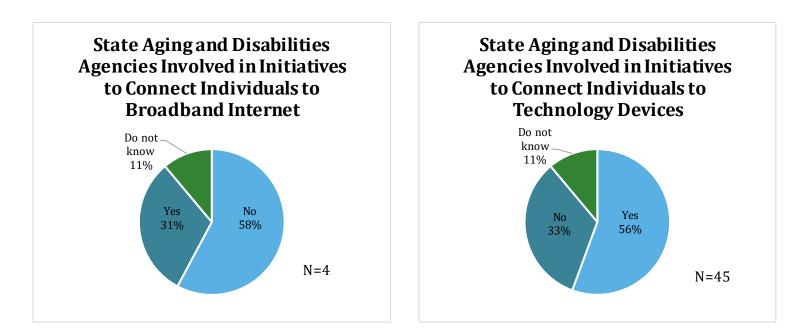
In order to address a lack of access to broadband Internet, as shown in figure 2, of 45 survey participants, 31% reported that they are involved with initiatives to connect individuals to Internet; 58% said that they are not; and 11% said that they did not know. While 58% of state aging and disabilities agency respondents reported that they are not involved with an initiative, that does not necessarily mean that there are not actions to address this issue in their state. Some survey participants commented that these initiatives lie outside the purview of their agency, and for example other agencies have taken the lead in their state or the governor is leading an initiative to facilitate access to broadband Internet. Additionally, some states indicated that while increasing Internet connectivity is pressing right now, there have been efforts in their state to expand connectivity prior to the pandemic. For example, one state shared that, "the Governor has a broad initiative for broadband internet access that pre-dated the pandemic," and another state indicated that, "this has been a project at a different governmental agency for many years."



In addition to Internet connectivity, access to technology devices is also very important in engaging with older adults and persons with disabilities during the pandemic. State aging and disabilities agencies were asked if they are involved in initiatives to connect individuals to technology devices. Of 45 respondents, over half, 56%, said that they are involved in initiatives (see figure 3).

Figure 2

Figure 3



Funding and Federal Guidance

ADRC/NWD CARES Act Funding

To connect individuals to the Internet and technology devices, state aging and disabilities agencies are leveraging a variety of new and existing funding opportunities. One new funding source as a result of the pandemic is the Aging and Disability Resource Center (ADRC)/No Wrong Door (NWD) System Funding Opportunity: Critical Relief Funds for COVID-19 Pandemic Response. ADRCs serve as single points of entry into the long-term services and supports (LTSS) system for older adults, people with disabilities, caregivers, veterans, and families. The ADRC/NWD CARES Act funding is flexible disaster-response funding provided to states and territories through the Administration for Community Living (ACL) to support ADRCs in providing critical access functions, including in enhancing and increasing virtual access to services and in mitigating social isolation.¹ Under the CARES Act, this special COVID-19

¹<u>https://acl.gov/grants/adrcno-wrong-door-system-funding-opportunity-critical-relief-funds-covid-19-pandemic</u>



funding was made available to each state's lead agency for the ADRC.² This is a 12-month grant that began for most states around May 2020.

Many state aging and disabilities agencies indicated that they are utilizing funding from the ADRC/NWD CARES Act grants to support access to the Internet and technology devices. For example, one state shared that connecting individuals to the Internet and devices "is one of the initiatives of the ADRC grant in partnership with the State AT [assistive technology] agency." Another state indicated that, "Through the ADRC grants that [our agency] is working on with the AAAs and the Center for Independent Living, some of the funding will be to help support individuals with smart devices, internet access and technology support." Additionally, one state commented that, "[Our agency] in partnership with the Rehabilitation Commission has received an Aging and Disability Resource Center (ADRC)/No Wrong Door System Funding Opportunity: Critical Relief Funds for COVID-19 Pandemic grant from the Administration for Community Living for \$1.1M. In accordance with ACL goals, [our agency] is distributing funding to [our state's] eleven ADRCs in order to help them to prevent, prepare for, and respond to COVID-19 and its effects on older adults and people with disabilities. This includes access to assistive technology." Furthermore, another state indicated that their State Unit on Aging is using, "part of the ADRC stimulus funds to equip older adults with tablets and burner phones to mitigate social isolation." As indicated by many survey respondents, it is evident that states are harnessing this important funding opportunity to connect individuals to technology to facilitate social connectedness and access to services. At the same time, the use of time-limited grant funding raises concerns with sustainability – particularly for ongoing costs such as device maintenance and Internet service delivery.

Consolidated Appropriations Act, 2021

The Consolidated Appropriations Act, 2021 was passed and signed into law in December of 2020. This legislation was wide ranging and included both COVID relief provisions as well as appropriations for the Federal Government's 2021 fiscal year. One component of this legislation created a new program that provides a \$50 monthly credit for broadband internet (\$75 on tribal lands) for individuals that meet one of the following criteria:

- Household income below 133% FPL;
- Household member experienced a significant loss in income due to layoff or furlough;
- Is participating in a broadband provider's existing low-income or COVID-19 relief program; or
- Are receiving, or has a dependent or household member receiving, any one of:
 - o Medicaid;
 - Supplemental Nutrition Assistance Program (SNAP);

² https://acl.gov/sites/default/files/common/ACL_COVID-19_Emergency_Funding_FAQ_PostWebinar.pdf



- Supplemental Security Income (SSI);
- Federal Public Housing Assistance;
- Veterans and Survivors Pension Benefit;
- Free or reduced price lunches; or
- Federal Pell Grant.

Additionally, the program funds up to \$100 for the provision of one device for each eligible household. If a household utilizes this benefit, it is required to pay no less than \$10 and no more than \$50 for this device. Congress allocated this new program \$3.2 billion and authorized it to remain in place until six months after the end of the declared COVID-19 public health emergency or once the \$3.2 billion is exhausted.

This initiative, while new, provides a new opportunity to support both internet connectivity as well as purchase of devices for many older adults and people with disabilities, including all of those individuals who are enrolled in Medicaid, SSI, or SNAP. The limited duration of this program creates concern about methods to maintain connectivity for households that participate.

Federal Communication Commission's Lifeline Program

In addition to newer funding opportunities and resources, there are also longer established programs designed to help individuals with connectivity. One such program is the Federal Communications Commission's (FCC) Lifeline Program for Low-Income Consumers, established in 1985. Lifeline is the FCC's program to help make communications services more affordable for low-income consumers. Lifeline provides subscribers a discount on monthly telephone service, broadband Internet service, or bundled voice-broadband packages purchased from participating wireline or wireless providers. Lifeline provides up to a \$9.25 monthly discount on service for eligible low-income subscribers. Subscribers may receive a Lifeline discount on either telephone or Internet, but not both services at the same time. To participate in the Lifeline program, consumers must either have an income that is at or below 135% of the Federal Poverty Guidelines or participate in certain federal assistance programs, such as the Supplemental Nutrition Assistance Program (SNAP), Medicaid, Federal Public Housing Assistance, Supplemental Security Income, the Veterans and Survivors Pension Benefit, or certain Tribal Programs. The Lifeline program is administered by the Universal Service Administrative Company (USAC). For information, visit https://www.fcc.gov/general/lifeline-program-low-income-consumers or https://www.lifelinesupport.org/.



Spotlight on Connecticut: Staying Connected During the Pandemic and Beyond

Connecticut identified an opportunity with the ADRC/NWD CARES Act funding to help older adults and persons with disabilities connect with family, friends, community, and providers through technology during the COVID-19 pandemic. This funding opportunity supported the creation of the Stay Connected program. Stay Connected is a partnership between the State Unit on Aging (SUA), the CT Tech Act Project, and Connecticut's five Area Agencies on Aging (AAAs), five Centers for Independent Living (CILs), and three Assistive Technology Partners (ATPs). The partners work together to connect adults ages 18 and older with a disability or older adults ages 60 and older with the most appropriate Assistive Technology (AT).

To better understand the availability of existing resources and prevent duplication of services, project leaders surveyed local resources such as Resident Service Coordinators, senior centers, and libraries regarding Internet availability, technology loan programs, and training opportunities. They also surveyed towns to collect information on resources such as telephone reassurance and support; grocery shopping and food delivery supports; and funding for technology and Internet.

With the ADRC/NWDCARES Act funding, the state executed new contracts with the AAAs, CILs, and AT partners for the Stay Connected program. The screening process for Stay Connected is embedded within existing information and referral (I&R) programs at AAAs and CILs. Callers receiving I&R are asked six social isolation screening questions using a validated social isolation screening instrument for older adults developed by Professor Nicholas Nicholson from Quinnipiac University. The screening questions are administered through Survey Monkey. Based on the score, the individual is then screened for current access to technology; financial options for the purchase of technology and/or Internet; and information needed for referral.

Sustaining Stay Connected beyond the ADRC/NWD CARES Act funding is a key component of this program. Therefore, if an individual is eligible for assistance, they are screened for Medicaid and asked if they are receiving services through Money Follows the Person (MFP), Community First Choice (CFC), or another Medicaid waiver program. This is to check if technology is approved under their plan of care or if they have technology funds available under Medicaid. They also check to see if the individual is eligible for the National Family Caregiver Support Program (NFCSP), as this program may fund technology devices for caregivers and their loved ones. Several CILs utilize the CARES Act funds they received to pay for technology and/or Internet. Individuals with a disability may also apply to a local charitable foundation for help with the costs of technology and/or Internet connections. Additionally, the town of Trumbull agreed to fund technology devices and Internet outright to any of their residents who qualify for Stay Connected.

If no funding resources such as Medicaid or NFCSP are identified, then the program uses the CARES Act funds for Internet and/or technology. Each qualified individual is referred to a CT Tech Act Project AT partner. A person-centered remote consultation is provided to determine the type of equipment that would best suit their preferences, needs, and situation. Technology is recommended based on the consultation. The CT Tech Act partner helps the individual set up the technology and provides virtual training and support. Following the training, the same screening tool is administered to participants 30 days later along with questions on their use of the technology to identify any challenges they are experiencing. The program is also planning on working with Quinnipiac University students to continually follow-up to track the impact of technology on social isolation over time.

Stay Connected program leaders are investing significant time to set up this project to support systems change and to continue to support individuals post-COVID-19. Program leaders are planning on using data gathered from the screening instrument to demonstrate that a person-centered technology consultation to determine the best fit, as well as training on how to use devices, play an important role in addressing social determinants of health. They anticipate demonstrating that with the provision of upfront consultation for the best fit and backend training, individuals will have more success using devices. Through new and existing funding opportunities and partnerships, Connecticut is helping older adults and persons with disabilities "stay connected" to their communities and support systems.



Civil Money Penalty Funding

A resource that state aging and disabilities agencies are using to connect individuals to technology devices in residential settings is the Civil Money Penalty Fund (CMP). A CMP is a monetary penalty that the Centers for Medicare & Medicaid Services (CMS) may impose against nursing homes for either the number of days or for each instance a nursing home is not in substantial compliance with participation requirements for long-term care facilities.³ A share of CMPs collected from nursing homes are returned to the states in which CMPs are reinvested in activities that benefit nursing home residents. State CMP funds returned to the states are intended to protect or improve nursing home residents' quality of care or quality of life.

Several survey respondents indicated that they are tapping into CMPs to facilitate access to technology devices in residential settings. For

Spotlight on South Dakota: Accessing CMP Funds

When the pandemic placed restrictions on visiting nursing facilities, South Dakota utilized the Civil Money Penalty (CMP) fund to purchase and distribute iPads to nursing homes. To access this funding, the nursing home associations in South Dakota applied for CMP funding to purchase four iPads per nursing facility. Partners such as the South Dakota Healthcare Association and the South Dakota Association of Healthcare Organizations were the driving force behind this initiative. While this initiative to connect nursing home residents has been successful, significant staff time is required to help residents use the technology, and the demand on staff time has been high throughout the pandemic. South Dakota recognizes that while access to technology devices is critical in supporting social connectedness, older adults need to be trained on how to use the devices and/or staff need to be available to facilitate the connection for older adults.

example, one state shared that, "We received approval to reimburse facilities up to \$3000 for the purchase of communication equipment (and supplies to sanitize the equipment). It is funded out of the CMP cash fund and most are buying tablets." Another state commented that, "We are promoting the use of civil monetary penalty funds to support technology access in nursing facilities." Finally, one state reported that their agency, "allocated \$3.6 million in Civil Monetary Penalty funding for nursing facilities to purchase tablets, webcams, and headphones to connect residents with their loved ones during the COVID-19 pandemic. Nursing facility providers can submit applications to [our agency] to receive up to \$3,000 in funding for purchasing communication technology devices."

Guidance from CMS

To support technology acquisition during COVID-19, the Centers for Medicare and Medicaid Services (CMS) has also provided guidance to state Medicaid and Children's Health Insurance Program agencies

³ <u>https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/LTC-CMP-Reinvestment</u>



through frequently asked questions. Through the FAQs, CMS indicates that states can provide tablets and telephones to facilitate remote delivery of services under section 1915(c) Home and Community-Based Services Waiver using Appendix K.⁴ CMS explains that, "States can fund devices such as tablets and telephones to enable the delivery of services remotely by adding Assistive Technology as a service available under the authority of section 1915(c)(4)(B) of the Act and/or expanding the current definition of assistive technology to include these devices." The state must ensure that the devices are being used to facilitate the delivery of services.

Partnerships

Working collaboratively, through partnerships with other agencies, is a key practice that state aging and disabilities agencies are engaging in to increase access to technology devices and the Internet. Partnerships range from other state agencies to local and community partners. Through the ADRC/NWD CARES Act funding, ACL encouraged grant recipients to work with key stakeholders within the state's NWD system.⁵ Several state aging and disabilities agencies described partnering with their State's Assistive Technology (AT) program. For instance, one survey respondent indicated that connecting the individuals they serve to both the Internet and technology devices is an initiative of their ADRC/NWD grant in partnership with their State AT agency. They further describe how they are partnering with their State AT agency, "to provide technology solutions to LTC facility residents to help them connect to their family and friends and have virtual access to the LTC Ombudsman program." Another state agency commented that they, "tapped into the Assistive Technology Program to partner for the ADRC grant in response to the COVID need for additional technology." Additionally, some older adults may lack the skills or experience to use technology. One state reported that they are partnering with their state AT program to support older adults in gaining the skills and experience needed to use technology through the ADRC/NWD CARES Act funding.

While not specifically pertaining to the ADRC/NWD CARES Act funding, one state also said that they have a strong relationship with their State AT program and ADRCs to, "ensure assistive technology is available for those who need it." Another state shared that they have convened a social isolation workgroup with several partners including the Division of Aging Services, the Department of Behavioral Health and Developmental Disabilities, and the State AT program. Initiatives of this workgroup include, "developing policy around telephone reassurance and connecting people to assistive technology."

In addition to State AT programs, there are many other key partners states are working with to facilitate access to the Internet and technology. For example, one state respondent indicated that they

⁴ https://www.medicaid.gov/state-resource-center/downloads/covid-19-new-faqs.pdf

⁵ADRC/NWD Funding Opportunity: Critical Relief Funds for COVID-19 Pandemic Response Funding Opportunity Announcement (FOA)



are, "Working with AARP and local broadband internet providers to find reduced costs for seniors." Several states also broadly commented that they are working with other state agencies and community partners such as Area Agencies on Aging (AAAs) and Centers for Independent Living (CILs) to help provide individuals with smart devices, Internet access, and technology support. For instance, a survey participant commented that they are working with community partners to address social isolation with the, "loans or purchases of smart devices to those at high risk, and in some cases internet support and technology education as well, to connect people to both services and social connection." A few states also commented that they are working with managed care organizations (MCOs) to help with connecting individuals to devices. For example, one state shared that they, "worked with its MCOs to provide access to cell phones for individuals that did not have these devices so that telephonic and remote access was possible during the COVID-19 Emergency."



Spotlight on Virginia: Partnership to Support Emergency Preparedness, Social Inclusion, and Technology Competency

With the onset of COVID-19, Virginia No Wrong Door (NWD) leveraged the ADRC/NWD CARES Act funding by partnering with the state's Assistive Technology (AT) Act program, the Virginia Assistive Technology System (VATS), to build capacity and develop infrastructure to respond to the current COVID-19 pandemic as well as future epidemics/pandemics.

Prior to the pandemic, VATS worked with AAA partners to develop kits to address the most common AT needs of older adults. Through the funding available from the CARES Act, the Virginia NWD and VATS decided they would partner to develop three enhanced AT kits in response to COVID-19 to support older adults and persons with disabilities and facilitate social connectedness and emergency preparation. Each of the three kits supports a specific focus area, such as, emergency preparedness, social inclusion, and training.

The emergency preparedness kit includes items that can assist individuals in emergency situations such as a plug in/rechargeable emergency flashlight; wind up radio; folding cane; solar charger power bank; battery operated can opener; whistle; spring assist scissors; and cooler/ice packs. The social inclusion kit includes items to help combat social isolation. Beyond supporting social connections via technology, the social inclusion kits also provide tangible supports that can help comfort and support anxiety reduction. Items in the social inclusion kit include Amazon Alexa; Facebook Portal; robotic companion pet; webcam; wi-fi picture frame; natural sun lights (sun lamp); UV wand (for equipment sanitization); soft fidget blanket; artificial fish tank; phone/tablet stands; ring doorbell; and Wyze Camera/headphones. Finally, the training kit provides training on several different types of technology to support older adults and persons with disabilities. Through this kit, VATS provides trainings to AAA clients and/or staff on several different topics including intro to smart phones; intro to IOS; intro to Android; using apps to order food online; video calling with friends; and smart home devices.

Once the NWD and VATS partners determined what to include in the kits, they rolled out implementation with existing NWD partners. As part of the NWD/ADRC CARES Act grant, Virginia NWD and VATS have seven sub-grantees through the Virginia Department of Aging and Rehabilitative Services (DARS), two AAAs, four Centers for Independent Living (CILs), and one private provider. The kits are made available to all seven sub-grantees, as well as all certified No Wrong Door partners participating on the technology platform for making an electronic referral. Virginia NWD and VATS have also had several webinars with AAAs to determine who would be interested in utilizing the kits. Interested AAAs reach out to VATS to loan the kits to anyone within their client population who need assistance; there are no eligibility requirements. While Virginia NWD and VATS are primarily focusing on implementing the kits with AAAs and CILs, the kits are also available to any of the 228 NWD certified partners throughout the state. To further help individuals and providers to learn about technology consultation. This new opportunity can help individuals and providers learn about the range of available technology, select appropriate devices, and receive training on how to use the selected device.

While the three enhanced AT kits were created in response to the COVID-19 pandemic, Virginia plans on utilizing these kits post-pandemic as well. For instance, these kits can support rural Virginians who lack connection and access to technology and services. Additionally, more and more caregivers are responding remotely, and these kits can support caregivers in making sure their loved ones have access to tools and equipment that support social inclusion and emergency preparedness.



Conclusion

Response to the COVID-19 pandemic has created a strong reliance on technology and the Internet in order to deliver and facilitate access to services and programs and promote social inclusion. State aging and disabilities agencies recognize the importance of connecting their populations served to these important resources and are therefore leading or partnering on numerous initiatives to provide access to devices and the Internet. States report leveraging critical new and existing funding opportunities and partnerships to support efforts to bridge the digital divide.

This issue brief was developed under the auspices of the ADvancing States **Aging and Disabilities Technology Workgroup**. This Workgroup was established in 2019 in order to drive improvements in aging and disabilities state agencies' information technology (IT), facilitate sharing and learning among states, and provide assistance to states as they seek to implement and integrate technology that supports holistic person-centered services. The work of the workgroup will result in expanded agency IT capacity, greater technological innovation at the state level, and state/federal engagement on IT policy.