



June 22, 2020

The Honorable Brian Kemp  
Governor of Georgia  
206 Washington Street  
Suite 203, State Capitol  
Atlanta, GA 30334  
United States

Dear Governor Kemp,

As you work to stop the spread of COVID-19, I write to respectfully encourage the inclusion of Georgia's family caregivers in any expanded policies and programs.

Like many Americans, caregivers have been dramatically affected by COVID-19. Their health, well-being, and mental health has been significantly impacted, as well as the health and well-being of their vulnerable care recipients. Prior to COVID-19, one in five adults in Georgia provided informal care to a friend or family member,<sup>i</sup> at an economic value of \$13 billion per year for the state<sup>ii</sup>.

Some Georgians care full-time for their loved one, who may have dementia, a chronic illness, or a disability. Many Georgians are part-time family caregivers who help financially, such as with groceries and medical appointments, and care for aging loved ones in nursing homes or living independently. And others care for a loved one who returned with visible or invisible wounds from time serving our nation.

Caregivers make up an enormous part of Georgia's population and their numbers and stresses have grown significantly with closures of schools, adult daycare, respite care, and elder services. It is no secret that caregivers are facing unprecedented challenges alone while isolating at home. Moreover, many people are becoming caregivers for the first time, as loved ones return home after being hospitalized or admitted to intensive care units because of COVID-19.

In my previous work as an infectious disease epidemiologist, I learned the best ways to support communities were with locally-generated solutions. It is with this experience and optimism that I believe Georgia can serve as an example for the nation in how to support caregivers during this time.

To this end, please accept these ideas for your Task Force on COVID-19 to help family caregivers and to address the mental health needs of Georgians:

**Establish a role within the Coronavirus Task Force focused on family caregivers.** We know thousands of family caregivers in Georgia are struggling and will continue to struggle. With so many of the medical and respite routines they relied upon dramatically changed, caregivers need an advocate recommending immediate supports to ensure they are kept physically and mentally healthy. When caregivers stay healthy, they are able to keep their loved ones home – keeping medical costs down.

**Rosalynn Carter Institute for Caregiving**  
**a unit of Georgia Southwestern State University**

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**Put plans in place to support COVID survivors and their caregivers.** Patients discharged after COVID-19 stays in the intensive care unit (ICU) will continue to need care. A 2013 study found that three months after leaving the ICU, 40% of patients had cognitive test scores similar to those with a moderate traumatic brain injury, and 26% had scores similar to mild Alzheimer’s disease.<sup>iii</sup>

**Allow a family member to serve in a paid caregiver role.** The Centers for Medicare & Medicaid Services (CMS) has urged states to make emergency adjustments through Social Security Act section 1135 waivers, Appendix K amendments to section 1915(c) Home and Community-Based Services (HCBS) waivers, and in some cases, 1115 demonstration waivers. Making this allowance will help families keep their loved ones home – keeping medical costs down.

**Provide paid leave for families and paid sick time to offset the economic impact of a care workforce shortage.** School closures may increase home child care, but please consider the hundreds of thousands who care for adult and aging family members and may lose access to respite care, adult day care, behavioral health day programs, and home healthcare workers. This ripple effect could stagnate the economy, as many will be in the untenable position of choosing between their jobs and providing 24/7 care for a loved one.

**Expand remote mental health services and telehealth care programs for family caregivers.** Many of the most important services and supports have changed their operating procedures, putting new burdens on family caregivers. Cover physical, behavioral, and mental telehealth services at the same rate as in-person visits. Reducing the number of office visits makes public health sense and reduces risk of COVID-19 transmission.

Thank you for your tireless work on behalf of all Georgians. And thank you for considering these ideas. If we can be of any help to you and your staff, please do not hesitate to call me at (229) 931-2062 or email [Jennifer.Olsen@GSW.edu](mailto:Jennifer.Olsen@GSW.edu).

Respectfully,

A handwritten signature in black ink that reads "Jennifer Olsen".

Jennifer Olsen, DrPH

Executive Director

Rosalynn Carter Institute for Caregiving

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<sup>i</sup> Edwards VJ, Bouldin ED, Taylor CA, Olivari BS, McGuire LC. Characteristics and Health Status of Informal Unpaid Caregivers — 44 States, District of Columbia, and Puerto Rico, 2015–2017. *MMWR Morb Mortal Wkly Rep* 2020;69:183–188.

<sup>ii</sup> <https://www.aarp.org/content/dam/aarp/ppi/2019/11/family-caregivers-data-by-state.pdf>, accessed 4 June 2020.

<sup>iii</sup> Pandharipande PP, Girard TD, Jackson JC, et al. Long-term cognitive impairment after critical illness. *N Engl J Med*. 2013;369(14):1306-1316.

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