Coronavirus (COVID-19) Update: Emergency Waiver Amendments For ODP Supports Coordination Organization

March 24, 2020
Everyone has a responsibility to slow the spread

Everyone should behave like they are carrying the virus!
Daily precautions

• Use safety precautions when interacting with others at all times.

• Be aware of and follow these guidelines to protect their health and others around them.
  – Avoid contact with others.
  – Not leave the home while sick.
  – Cover your mouth and nose with a tissue or your sleeve (not your hands) when coughing or sneezing.
  – Wash hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer if soap and water are not available.
Governor Wolf Executive Order – Prohibitions on Non-Life Sustaining Businesses

- **ODP home and community based service and intermediate care facility providers considered life-sustaining and therefore exempt from the Governor’s directive asking for the closure of all non-essential businesses.**

- ODP required shifts in operations, closure of CPS/Day Hab facilities and suspension of community integration activities, mean all allowable service provision is essential.

- **All remaining ID/A and AAW services must be provided in alignment with ODP instruction and Governor’s Orders.**
ODP’s Approach

1. Slow the spread of the virus

2. Redeploy staff where needed most

3. Long term stability of community system
Appendix K: Emergency Preparedness and Response

- CMS process for submitted emergency changes to approved waiver agreements
- ODP submitted emergency amendments to the 3 ID/A and the AAW 3/13/2020
- CMS approved all emergency applications on 3/18/2020
- Effective date of emergency amendments is 3/11/2020 – 3/11/21
Statewide Changes Effective March 12

• Supports Coordination must conduct monitoring visits and ISP team meetings remotely or by telephone. In person Face to Face contact is NOT permitted, unless the participant does not have access to a telephone.

• Limitation of visitors in residential programs

• Community Participation Supports/Day Habilitation – suspend requirements for support in community locations

• Annual licensing requirement for physicals for staff and participants is suspended. Providers do not need to request a waiver of this requirement; this is not considered a violation during this time.
Statewide Suspension of ODP Functions
Effective March 17, 2020

- Quality Assessment and Improvement (QA&I) Provider and SCO Corrective Action Plans (CAPS) and Directive Corrective Action Plans (DCAPS) activities (unless otherwise instructed by ODP or the Administrative Entity)
- Independent Monitoring for Quality (IM4Q) interviews
- Supports Intensity Scale (SIS) and PA Supplement Assessments
- Communication Assessments and Reassessments related to the Harry M Settlement
Statewide Required Closures of Day Program Facilities

- Older Adult Day facilities licensed under 6 Pa. Code Chapter 11
- Adult Training Facilities licensed under 55 Pa. Code Chapter 2380
- Prevocational Facilities licensed under 55 Pa. Code Chapter 2390

Closures are effective Tuesday, March 17, 2020 and are in effect until further notice.
ID/A Waivers: Approved for Remote Delivery of Services

• Supports Coordination
• In-Home and Community Supports
• CPS
• Companion
• Behavioral Support Services
• Therapies as appropriate
• Supports Broker
• Supported Employment
• Communication Specialist
• Small Group Employment
AAW – Approved for Remote Delivery of Services

• Supports Coordination
• Specialized Skill Development
• Therapy (counseling)
• Family Support
• Nutritional Consultation
  * Day Habilitation
  * Support Employment
  * Career Planning
  * Small Group Employment

Guidance on HIPAA compliance while using remote technology. 
Supports Coordination Organization
Operational Changes
Process for Level of Care

• Initial Level of Care Evaluation -
  • LOC will not require a physician to recommend ICF LOC

• Annual Level of Care Reevaluations -
  • Annual reevaluation will allow for a 6-month extension
Transfers and Intake

The following are suspended, unless essential due to COVID19:

- No County to County transfers
- No transfer from AAW to Participant Directed Services
- BSASP will halt the outreach to individuals on the AAW interest list
Continued Individual MA Eligibility

- DHS is preparing to submit an 1135 waiver
- OIM is proposing not to end MA for failure to submit recertification information
Service Definitions and/or Limits
ID/A: Community Participation Support

- Variance no longer required for more than 14 hours per day of In-Home and Community Support, Companion and/or CPS
- Requirement to provide services in community locations a minimum of 25% is suspended.
- Suspend visitors
- CPS can be provided in private homes and by remote technology
- Can exceed min. of staffing ratios due to staff shortages
- Suspend requirement of no more than 3 people being supported
ID/A: Variances Process Con’t

- NOT required when a Consolidated Waiver participant requires more than 14 hours per day of IHCS, Companion or CPS

- NOT required for Supplemental Habilitation

- NOT required for respite beyond 30-days

- NOT required for 40/60 rule

**Providers must include on the spreadsheet being sent to the SC/AE**

**Providers must ensure they are maintaining documentation and records of changes related to COVID-19**
AAW: Day Habilitation

- Can be provided in private homes

- Requirement to provide services in community locations a minimum of 25% of the time is suspended.
ID/A: Education Support Services

- Allow all components of Education Support can be provided with any changes the University/College makes for distance/web learning.
AAW: Family Support
• May be provided using remote/tele support

AAW: Nutritional Consultation
• May be provided using remote/tele support
ID/A: In-Home and Community Support and/or Companion Services

- Flexibility in In-Home and Community and Companion (including for Participant-Directed Services)

- Suspend 40/60 rules relate to overtime and provision of services by relatives

- May be provided remotely where health and safety can be ensured
ID/A: Residential Habilitation, Life Sharing and Supported Living – (Does not apply to the P/FDS Waiver)

- Number of people served in each licensed or unlicensed home may be exceeded.
- Maximum number of individuals served in a service location may be exceeded.
- Right to choose with whom they share a bedroom is suspended.
- Suspend requirements for allowing visitors.
- Shift nursing may be provided as a discrete service.
- SH can be provided without requesting a variance,
ID/A: Residential Habilitation, Life Sharing and Supported Living Con’t:

• Family members may provide the service if hired by a provider
• Staffing ratios may be exceeded due to staffing shortages
• Services can be rendered when an individual is hospitalized due to COVID19 as long as it’s medically necessary
AAW: Residential Habilitation (Community Homes and Life Sharing)

- Can be provided in a licensed or unlicensed settings.
- Limitations on the number of people of served in Community homes may be exceeded.
- Maximum number of individuals served in a service location may be exceeded to address staffing shortages or accommodating use of other sites as quarantine sites.
- Prior written authorization through the use of the AAW Residential Habilitation Request Form is suspended.
- May be rendered by relatives or legally responsible individuals when they have been hired by the provider agency authorized on the ISP.
- Minimum staffing ratios may be exceeded due to staffing shortages.
- Participants that require hospitalization due to a diagnosis of COVID-19 may receive Residential Habilitation in a hospital setting.
Individual Rights

During the COVID-19 response, the following rights may be limited:

- Visitors
- Sharing a bedroom
- Access to community
ID/A: Respite

- May be provided in any setting necessary to ensure health and safety

- Room and board already included in fee schedule for respite in licensed residential habilitation

- Room and Board WILL BE included in the fee schedule for settings used in response to emergency

- Respite can be provided beyond 30 days without a variance

***SCs must document in Service Note where the respite is provided
AAW: Respite

- Limits may be extended beyond 30 times the day unit rate per ISP plan year without requesting an exception in order to meet the immediate health and safety needs of participants, including behavioral health needs.

- May be provided in any setting necessary to ensure the health and safety of participants.

- Room and board are included in the fee schedule rate for Respite in a licensed Residential Habilitation setting.

- Room and Board would be included in the fee schedule for settings used in response to the emergency.

***SCs must document in Service Note where the respite is provided***
AAW: Specialized Skill Development – Behavioral Specialist (BS) and Systematic Skill Building (SSB)

- May be provided using remote/tele support

- Participants that require hospitalization due to a diagnosis of COVID-19 may services in a hospital setting when the participant requires these services for communication, behavioral stabilization and/or intensive personal care needs.
AAW: Specialized Skill Development- Community Support (CS)

• May be provided in excess of 50 hours per week without requesting an exception in order to meet the health and safety needs of participants.

• May be provided using remote/tele

• Participants that require hospitalization due to a diagnosis of COVID-19 may receive this service in a hospital setting when the participant requires it for communication, behavioral stabilization and/or intensive personal care needs.
ID/A and AAW Supports Coordination

• Allow remote/telephone individual monitoring by Supports Coordination where there are currently face-to-face requirements.

• Individual Support Plan team meetings and plan development may be conducted entirely using telecommunications.

• AAW Operational Guidance for SCs has additional direction on assessments and required signatures and interim ISPs.
AAW – Temporary Supplemental Services (TSS)

- Can be exceeded beyond 540 hours in a twelve-month period

- May be rendered by relatives or legally responsible individuals when they have been hired by the provider agency authorized on the ISP.

- Participants that require hospitalization due to a diagnosis of COVID-19 may receive this service in a hospital setting when the participant requires it for communication, behavioral stabilization and/or intensive personal care needs.
AAW – Therapies (Counseling)

• May be provided using remote/tele support

• Participants that require hospitalization due to a diagnosis of COVID-19 may receive this service in a hospital setting when the participant requires it for communication, behavioral stabilization and/or intensive personal care needs.
AAW NEW SERVICE – Shift Nursing

• Shift Nursing has been added as a new service in the Adult Autism Waiver while Appendix K is in effect.
• See pages 20-24 of the Operational Guidance for the service definition, provider specifications, qualifications, and guidance on determining the need for the service.
• ODP’s Bureau of Supports for Autism and Special Populations will provide SCs with a Services and Supports Directory for Shift Nursing.
• If the SC has identified in need for shift nursing in a county where a provider has not yet been identified, the SC should contact the AAW Provider Enrollment Mailbox at ra-pwbasprovenroll@pa.gov.
Waiver initial qualification, requalification and revalidation

• New SCO and Provider Qual Apps - significant delay in acting on applications due to redeployed resources as a result of the COVID-19 virus.

• SCO re-qualification deadline extended to October 31, 2020

• SCO and Provider revalidation is currently suspended
Staff Qualifications

• To allow redeployment of direct support and clinical staff to needed service settings during this emergency, staff qualified under any service definition in the waivers may be used for provision of any non-professional service under another service definition the ID/A and AAW Waivers.

• ID/A Waivers: Professional services exempt from this include: Supports Coordination, Therapy Services, Behavioral Support, Consultative Nutritional Services, Music Therapy, Art Therapy and Equine Assisted Therapy and Shift Nursing

• AAW: Professional services exempt from this include: Supports Coordination, Therapies, Behavioral Specialist Services and Systematic Skill Building components of Specialized Skill Development, Nutritional Consultation, Family Support, and Shift Nursing.
Participant-Centered Planning and Service Delivery (aka ISPs)
ISPs:

- Reminder – ISP meetings must be done using remote technology

- Documentation of verbal approval or email approval of changes and additions to individual plans will suffice as authorization.

- ISPs changes should include language identifying the change is due to COVID-19

- Written consent and acknowledgment for CRs for AAW is not required.
ISP Con’t:

• P/FDS and Community Living waiver's cap exceptions may be temporarily exceeded to provide emergency care provisions.

• When the emergency is declared to end, authorization of services for individuals must return to the frequency and duration as included in ISPs prior to the emergency.
  – Guidance on plan changes/authorizations will be provided soon

• ID/A ISPs with authorized Residential Habilitation -
  – ODP is planning to automatically adding "without day" units to each plan
Exceeding the CAP for PFDS and CLW

• CAPs may be temporarily exceeded to provide needed services for emergency care provision.
• Changes to ISPs/services due to COVID19
• If unable to authorize services or units due to the CAP
  – AE should submit exception requests for each individual including name, MCI and the projected amount of ISP auths.
  – ODP approvals will be communicated to the AE for auth.
• When emergency is declared to end, utilization of services of individuals must return to the frequency and duration as authorized in the plan prior to the emergency.
ID/A: Appendix K ISP Changes Spreadsheet

• Announcement # 20-027 included a spreadsheet for providers to complete and share with SCs/AEs
• All plan changes should be based on 6/30/2020 end date
• Changes related to Residential without day should NOT be included in the spreadsheet
• ISPs changes should include language identifying the change is due to COVID-19
Since we are uncertain about when normal operations will resume and we hope to avoid multiple plan revisions, all changes should be based on a 6/30 end date.

Revised plans should include the following language regarding the changes made: "The changes made to this plan to services, the amount of service, or when services are delivered are being made to ensure participant health and safety during the COVID-19 emergency. These changes are time limited. When the COVID-19 emergency restrictions are lifted, the plan will be revised to reflect the previously authorized services and service levels. The changes made due to COVID-19 and the changes made to revert services back to levels prior to being impacted by COVID-19 are not subject to fair hearing and appeal requirements."

This language should be included in the comment section of the critical revision ISP.
Due Process Rights

- Changes to ISPs due to COVID-19 are not subject to due process/fair hearing rights notification

- A statement should be added to all ISPs when services are changed due to COVID-19

- When the emergency precautions are lifted, services will resume back to pre-COVID-19
Participant Safeguards – Incident Management
Incident Management

- Incidents are NOT required solely for deviation of staffing that is outlined in ISP

- Incidents ARE required if the staffing deviation results in failure to provide care

- Incidents are NOT required for restricting of visitors as a rights violation.

- Certified Investigations should be conducted using remote technology and telephone where possible

- Submissions of Incident Management contingency forms will be addressed in a subsequent communication
Rates, Billing and Claims and Supplemental or Enhanced Payments

No impact to SCOs
Waiver reserved capacity/Intent to Enroll

- Not required for individuals in Hospital beyond 30 days

- Reminder – ID/A individuals are only required to receive a waiver service twice a year to remain eligible for continued enrollment.
OBRA/PASSR

- Currently ODP is processing OBRAs via telephone or email
- PA is applying for 1135 waiver, pending approval from CMS:
  - SUSPENDING all OBRAs, they would be treated as "exempt hospital discharge" for the first 30 days in NF
Upcoming Webinars and Communications:

- Webinar for SCOs 3/25
- Webinars for All Stakeholders 3/25
- Series of Virtual Office Hours sessions being scheduled
- Information on regulatory waivers to follow

Please be patient with the pace of information flow. First priority is health and safety. Organize around the information provided and make sure to document.
Communication is Key

• *If staff or a person for whom you provide services is suspected to have COVID-19 or tests presumptively positive for COVID-19, please notify the ODP Regulatory Administration Unit at RA-PW6100REGADMIN@pa.gov*

• For ODP to be responsive to the needs related to COVID-19, timely information from the provider community is essential. Providers should follow Department of Health (DOH) guidance for evaluation, testing, and reporting related to staff or a beneficiary suspected of having COVID-19.

*Questions? Call 1-877-PA-HEALTH (1-877-724-3258)*
Emergency warning signs for COVID-19

• If you develop emergency warning signs for COVID-19 get medical attention immediately. Emergency warning signs include*:
  – Difficulty breathing or shortness of breath
  – Persistent pain or pressure in the chest
  – New confusion or inability to arouse
  – Bluish lips or face

• *This list is not all inclusive.
Resources


https://www.health.pa.gov/topics/disease/Pages/Coronavirus.aspx

https://www.dhs.pa.gov/providers/Providers/Pages/Coronavirus-2020.aspx