

Coronavirus (COVID-19) Update: Community Participation Support/Day Habilitation

March 27 and 30

3/27/2020

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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 facilities and suspension of community integration activities, mean all allowable service provision is essential.
- ***All remaining ID/A services must be provided in alignment with ODP instruction and Governor's Orders.***

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ODP's Approach

1. **Slow the spread of the virus**
2. **Use trained direct support professionals where needed most**
3. **Long term stability of community system**
4. **Resources and communication**

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Appendix K: Approved by CMS on March 18, 2020

- Purpose: to amend 1915(c) waivers during the Coronavirus (COVID19) pandemic until ODP announces an end date of Appendix K.
 - Consolidated Waiver
 - Person/Family Directed Support Waiver
 - Community Living Waiver
 - Adult Autism Waiver

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Operational Guide for Appendix K



Changes that are contained in the Operational Guide may only be implemented for participants impacted by COVID19. Examples include but are not limited to:

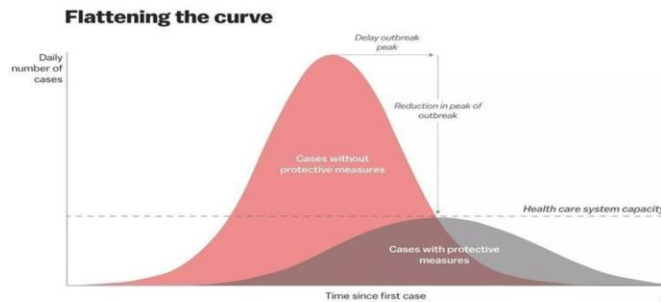
- Was the participant receiving Community Participation Support services in a licensed facility that closed?
- Is the participant's direct support professional isolating at home or quarantined due to exposure to someone diagnosed (presumptive or confirmed) with COVID-19?

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Slow the Spread



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Support in Community Locations



SOCIAL DISTANCING OUTSIDE OF YOUR HOME

YES



Fresh air activities and exercise, keeping 6 feet between yourself and others who do not live in your home



Life-sustaining trips, like food shopping—try to do weekly rather than daily



Order take-out or delivery from a local restaurant

NO



Gatherings of large groups of people



Parties, BBQs, play dates, group sports, etc, with people that do not live in your home



Close contact with people who do not live in your home



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Closure of 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. Requirements for visitors in licensed facilities where Community Participation Support or Day Habilitation may be provided are not addressed in the Appendix K Operational Guide due to required closures

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Remote Service Delivery



- While Community Participation Support/Day Habilitation were not included in Appendix K as services that can be rendered remotely, ODP will submit another Appendix K request that includes it.
- It is OK to render these services remotely or by phone now if this type of support meets the health and safety needs of the participant



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Remote Service Delivery



- Services may be delivered via telephone or video conferencing such as Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype.
- Providers are encouraged to notify participants that these third-party applications potentially introduce privacy risks, and providers should enable all available encryption and privacy modes when using such applications.
- Facebook Live, Twitch, TikTok, and similar video communication applications that are public facing should not be used.



[\(Guidance from U.S Department of Health & Human Services for telehealth remote communications\)](#)

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Remote Service Delivery



- The provider is responsible for determining if this type of support will meet the health and safety needs of the participant.
- The provider is responsible for contacting the participant and family to discuss how remote services would work and asking if the participant and family are open to receiving services remotely.
 - When the participant is present during the discussion this is a billable activity.



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Remote Service Delivery



- Providers include diagnosis code Z03.818 on Field 21.B of the claim in PROMISe.
- Billing may only occur when direct support professionals are actively engaging with participants via technology or over the phone.
 - Billing may not occur when staff is "on-call"

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Support in Community Locations



- To follow social distancing recommendations, requirements for support in community locations is suspended.
- A variance is not required to be completed when a participant requires more than 14 hours per day of In-Home and Community Support, Companion and/or Community Participation Support in order to meet the needs of participants.



Providers must notify each participant's SC

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Support in Community Locations



- The requirement to provide services in community locations a minimum of 25% of participant time in service is suspended.
 - No changes need to be made to ISP
 - Variance not required

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Use Trained Direct Support Professionals Where Needed Most



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Services in Private Homes

- Community Participation Support may be provided in private homes.
 - Homes owned, rented or leased by the participant, the participant's family or friends. This includes homes where Supported Living is provided.
 - Licensed and unlicensed Life Sharing homes.
- Supporting participants in private homes can be billed using community procedure codes.
 - If changes to ISP are required, contact Supports Coordinator

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Services in Residential Homes



- Community Participation Support/Day Habilitation services may not be billed when it is provided in a Residential Habilitation home.
 - Residential Habilitation authorizations being automatically changed from “with day” to “without day” (communication 20-029)
 - Community Participation Support/Day Habilitation providers are encouraged to collaborate with Residential Habilitation providers to see if they are interested in having Community Participation Support/Day Habilitation staff render services in the home as part of the Residential service.
 - This could be done via contract or other arrangement between the two agencies.

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Service Flexibility



- Minimum staffing ratios as required by licensure, service definition, and ISP may be exceeded due to staffing shortages.
- The requirement that no more than 3 people can be supported at a time in a community location is suspended.
 - When rendering group services to participants in the community, providers must follow current guidance on social distancing and interactions with others.
 - Example: Using remote technology to render Community Participation Support/Day Habilitation to multiple people in different homes

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Waiver Caps




- If changes discussed today cause the participant to go over the fiscal year limit enumerated in Appendix C-4 of the Community Living (\$70,000) or P/FDS (\$33,000) waiver, this may be temporarily allowed for emergency care provision.
- When emergency is declared to end, utilization of services for individuals must return to the frequency and duration as authorized in individual plans prior to the emergency.
- Exceptions to the fiscal year limits (referred to as cap exceptions) should be identified by the ISP team and a request should be submitted to the AE. The AE will submit exception requests for each individual, to the ODP appropriate Regional Office for review. ODP approvals will be communicated to the AE.

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ISP Changes



- When CPS implementation of any of the requirements require changes in currently authorized staffing ratios or the addition of units of community procedure codes, the provider must notify each participant's SC
 -  The provider must inform the SC when the services will start or were implemented. Cannot be prior to March 11, 2020.

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Provider Qualification Flexibility



- Staff Qualifications
 - **Staff qualified under any service definition in the ID/A waivers may be used for provision of any service that does not require licensure, degree and/or certification under another service definition the ID/A 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.

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Provider Qualification Flexibility



- Individual staff do not have to meet the qualification criteria to render a specific service.
 - Examples: Staff qualified to render Community Participation Support/Day Habilitation can be transferred/hired to render Residential Habilitation, In-Home and Community Support, Companion or Respite Services.
- Providers must be enrolled and qualified in HCSIS to render the service.
- For newly enrolled providers or new staff hired for any service in the Adult Autism Waiver, the SPeCTRUM 2.0 training course can be completed within 30 days after the first date of service delivery.

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Provider Qualification Flexibility



- Staff Qualifications Continued
 - Staff must receive the following training, which needs to be documented:
 - ✓ Training on ISP
 - ✓ The prevention, detection and reporting of abuse, suspected abuse and alleged abuse
 - ✓ Individual rights.
 - ✓ Recognizing and reporting incidents.
 - ✓ The safe and appropriate use of behavior supports if the person works directly with an individual.



Encourage use of remote training and nurse support to respond to rapid changes

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Provider Qualification Flexibility



- A staff person may work for more than one provider, but only one provider needs to determine that the staff person is qualified to render an HCBS Waiver service.
- Providers are responsible for determining whether staff meet the qualifications to render an HCBS Waiver service. Under normal conditions, if a staff person is employed by multiple providers to render an HCBS Waiver service, each provider is responsible for verifying that the staff person is qualified to render the service.
- To ensure that there are enough staff to meet individuals' needs during the COVID-19 pandemic, only one provider must verify that a staff person is qualified.

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Provider Qualification Flexibility



- The Department encourages provider collaboration to ensure individuals receive the services and support needed. Providers are asked to supply all staff with a letter that includes:
 - The provider's IRS name, Master Provider Index number and contact information
 - The staff person's name and date of birth, and
 - A list of Waiver services the staff person is qualified to render
- Staff may present this letter to any other provider as evidence of meeting qualifications to render Waiver services. Providers using these letters as evidence of qualifications hire staff may contact the ODP Provider Qualification mailbox at ra-odpproviderqual@pa.gov to verify that the provider who supplied the letter is enrolled and in good standing with the Department.

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Provider Qualification/Licensing Flexibility



- Initial orientation and annual training does not need to include application of person-centered practices, community integration, individual choice and assisting individuals to develop and maintain relationships.
- Minimum numbers of annual training hour requirements are suspended.
 - 55 Pa.Code Chapters 6100, 2380 and 2390 provide minimum numbers of hours of annual training (24 hours and 12 hours, respectively) that must be provided to select staff. The requirements to provide the minimum numbers of annual training hours is suspended.
 - Note that the requirement to provide training is not suspended; the suspension is limited to the number of hours of training that must be provided.

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Provider Qualification/Licensing Flexibility



- In order to ensure that individuals who require assistance with medication receive such assistance, new staff may administer medications after they:
 - Complete ODP's Modified Medication Administration Training Course, available on www.MyODP.org (<https://www.myodp.org/course/index.php?categoryid=11>), and
 - Receive training from the provider on the use of the provider's medication record for documenting the administration of medication.

Providers must retain record of staff's completion of the Modified Medication Administration Training Course by retaining a copy of the certificate of completion.

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Licensing Flexibility



- 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.
 - The tuberculin skin test is part of the annual physical requirements, and is suspended for current staff and participants during the COVID 19 emergency.

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Long Term Stability of Community System

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Billing logic and Documentation

- When services have been impacted by COVID-19, ODP recommends providers include the **Z03.818** medical diagnosis code in addition to the regular program diagnosis code on PROMISe claims
- Retroactive authorizations to March 11, 2020 can be made to remove barriers between HCSIS authorizations and providers rendering services.
 - 🚫 Providers should contact the Supports Coordinator (SC) to discuss the need for retroactive authorization.
 - 🚫 To avoid delays, verbal approval or email approval of changes and additions to ISPs will suffice as authorizations

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Retainer Payments



- The Office of Developmental Programs (ODP) included Retainer Payments for Community Participation Supports (CPS) in Appendix K to help ensure the long-term stability of this essential service.
 - ODP Communication 20-031
 - COVID-19 ODP Virtual Office Hours: Provider Billing Discussion on Appendix K
 - Date: Monday, March 30, 2020 (One session only)
 - Time: 1:00-2:00pm
 - To register, click on this link: <https://attendeegotowebinar.com/rt/8489549586137881355>

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Resources and Communication

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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)



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Communication with Stakeholders

- Frequent guidance and webinars
- Dedicated COVID19 page housing all guidance and webinars – MyODP.org
- ASERT resource pages for individuals and families
- Routine stakeholders calls for feedback
- Provider survey tool for critical service change information
- Self-advocate and family calls/webinars



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Other Related Resources



Providers Tracking ISP Revisions – ODP Announcement 20-030

- https://www.myodp.org/mod/data/view.php?d=18&perpage=100&search&sort=415&order=DESC&advanced=1&filter=1&f_420&f_415_d=29&f_415_m=3&f_415_y=2019&f_417&f_423&f_421&f_410

Addressing Day to Day Risks with the Team

- <https://www.myodp.org/course/view.php?id=1513>

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Other Related Resources



<https://www.cdc.gov/coronavirus/2019-ncov/index.html>



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



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



<https://www.myodp.org/mod/page/view.php?id=26808>

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