

Coronavirus (COVID-19) Update: Residential Services

March 27 and 30

3/27/2020

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Residential Services

For this presentation, we will be discussing the implementation of changes in the following services due to impacts of COVID-19:

- Licensed and unlicensed Residential Habilitation in the Consolidated, Community Living and Adult Autism Waivers
 - Unlicensed Residential Habilitation is being added as a service to the Adult Autism Waiver
- Licensed Life Sharing in the Consolidated, Community Living and Adult Autism Waivers.
- Unlicensed Life Sharing in the Consolidated and Community Living Waivers
 - Unlicensed Life Sharing is being added as a service to the Adult Autism Waiver
- Supported Living in the Consolidated and Community Living Waivers

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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

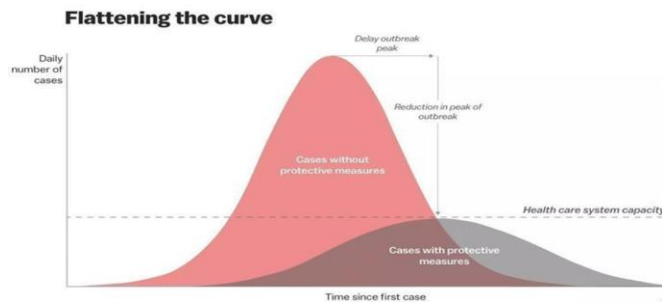
Changes that are contained in the Operational Guide may only be implemented for participants impacted by COVID19. Examples include but are not limited to:

- 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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SIS Assessments

- Supports Intensity Scale (SIS) and PA Supplement Assessments have been suspended effective March 17, 2020.
 - Reminder: A new needs assessment is required if a major change in the individual's life occurs that has a lasting impact on his or her support needs that is anticipated to last **more than six months and makes his or her assessment inaccurate and no longer current.**
 - Requests to update the SIS should not be submitted for impacts related to COVID-19

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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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Support in Community Locations



- To follow social distancing recommendations, requirements for support in community locations is suspended.
 - As discussed on the previous slide, participants should be supported to go outside and exercise, keeping 6 feet between participants and people who do not live and/or provide services in their home.
 - ODP is working on guidance to help providers support individuals who continue to be employed outside the home.
 - The modification of this right is not required to be justified in the ISP.

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Visitors



- To follow social distancing recommendations, requirements for allowing visitors are suspended.
 - Providers must facilitate personal relationships between each participant and persons of their choosing – via phones, other technology and any other methods that are meaningful.
 - The modification of this right is not required to be justified in the ISP.
 - Limiting visitors against an individual's wishes to prevent the spread of COVID-19 does not need to be entered as a rights violation in Enterprise Incident Management (EIM).

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Remote Service Delivery



- Residential providers are encouraged to explore whether remote service delivery could meet the health and safety needs of participants during all or some of the hours of the day (overnight asleep hours for example).
 - Explore whether needed components of the residential service could be rendered remotely. Examples: Provision of behavioral support as part of the residential service.




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Shift Nursing



- Shift nursing may be provided as a discrete service during the provision of residential habilitation, life sharing and supported living services when the following occurs:
 - The provider's current nurse is diagnosed with COVID-19 and the provider has been unable to contract with a nurse from an agency to fill the role; or
 - Due to multiple participants being diagnosed with COVID-19, additional nurses are needed to meet the health and safety needs of those participants in the home

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 Providers must notify each participant's SC to have Shift Nursing added to the ISP

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Use Trained Direct Support Professionals Where Needed Most



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Flexibility in Size of Location



- 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.
 - For Residential Habilitation, the number of people receiving services in each licensed or unlicensed home may not exceed 8 or the capacity listed on the certificate of occupancy, whichever number is lower.
 - For Life Sharing, the number of people receiving Life Sharing services may not exceed 2.
 - For Supported Living, the number of people receiving Supported Living may not exceed 3.

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Flexibility in Size of Location



- To implement this change, providers are not required to complete a request for Approved Program Capacity when there is a change to the number of people served in the home due to COVID-19.
 - This applies for increases in the number of people served in a home to address staffing shortages or using homes as quarantine sites.
 - This also applies to decreases due to a person's medical or hospital leave due to COVID-19 or when a person stays with family or friends due to COVID-19 (also known as reserved residential capacity).
 - Providers are required to continue completing requests for Approved Program Capacity for any changes not due COVID-19.


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Flexibility in Size of Location



NOTIFICATION REQUIREMENT:

-  Providers must notify each person's Supports Coordinator when there are plans to move the person to another home, or when emergency relocation is necessary. The Supports Coordinators will then notify the person's AE to ensure that there are no concerns about the relocation.

For participants in the Adult Autism Waiver, the Supports Coordinator will contact ODP's Bureau of Supports for Autism and Special Populations (BSASP)

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Flexibility in Size of Location



Changes to the ISP are not required when there will be an increase in the number of people served in a home. Providers can continue to bill the procedure code(s) for the service location, including the approved program capacity at the service location, in the ISP prior to the increase in the number of people served in a home.

- (Include the diagnosis code Z03.818 on Field 21.B of the claim.)**

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Sharing Bedrooms



- When there are no other options, each participant's right to choose with whom they share a bedroom is suspended.
 - Providers are responsible for talking with each person who will be required to share a bedroom to discuss their concerns, how privacy will be afforded and how choices will be negotiated.
 - Requests such as sharing a bedroom with someone of the same sex must be honored.
 - An unrelated child and adult may not share a bedroom
 - The modification of this right is not required to be justified in the ISP.

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Community Participation Support



- Community Participation Support/Day Habilitation 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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Community Participation Support




- 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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Supplemental Habilitation



- Supplemental Habilitation can be provided during the provision of licensed residential habilitation, licensed life sharing and supported living services.
 - A variance is not needed beyond 90 days
- Supplemental Habilitation may be used to supplement staffing in the residential home itself or support a participant while the participant stays in the home of friends, staff or family.
 -  Providers must notify each participant's SC to have Supplemental Habilitation added to the ISP

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Services By Relatives



- Supplemental Habilitation, Residential Habilitation and Supported Living may be rendered by relatives or legally responsible individuals when they have been hired by the provider agency authorized on the ISP.
 - When one of these services is rendered by relatives or legally responsible individuals, the provider agency authorized to render the Residential Habilitation, Supported Living or Supplemental Habilitation/Temporary Supplemental Services, is responsible for ensuring that services are provided as authorized in the ISP and that billing occurs in accordance with ODP requirements

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Staffing Ratio Flexibility



- Minimum staffing ratios as required by licensure, service definition and individual plan may be exceeded due to staffing shortages.
- ODP continues to encourage ISP teams to use person-centered thinking skills to discuss each participant's risk factors and ways to mitigate those risks including what technology, environmental, and staff supports will be provided to mitigate those risk(s) during specific activities and situations. The emphasis and conversation is around why the supports are being provided; not the number of hours and people, but the reason why staff are there.
 - More information about residential staffing ratios can be found at:
 - [Residential ISP Staffing: It's about the Person, Not the Numbers](#)
 - [Addressing Day to Day Risks with the Team](#)

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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: 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: 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. Residential Habilitation staff can be hired to render 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, 6400 and 6500 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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Residential Services in a Hospital



Participants that require hospitalization due to a diagnosis of COVID-19 may receive the following services in a hospital setting when the participant requires these services for communication, behavioral stabilization and/or intensive personal care needs.

- Residential Habilitation
- Life Sharing
- Supported Living
- Supplemental Habilitation
- Temporary Supplemental Services (AAW)



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Residential Services in a Hospital



- The provider is responsible for talking with hospital personnel about whether the hospital will allow the provision of services and follow any hospital requirements for doing so.
- Service notes must be completed for the participant that demonstrate how the service is being used for communication, behavioral stabilization and/or intensive personal care needs.



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Waiver Caps



- If changes discussed today cause the participant to go over the \$70,00 fiscal year limit enumerated in Appendix C-4 of the Community Living 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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Notify the Supports Coordinator



Reminder: Please notify the Supports Coordination when:

- A service needs to be added to the ISP
- When additional units of service need to be added to the ISP
- A participant will be moving from one home to another

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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 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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Financial Strategies



- Enhanced rates
 - ODP will establish and provide guidance
 - It is anticipated that temporarily increased rates would be applied retroactively.
 - ID/A waivers: Residential Habilitation, Life Sharing and Supported Living.
 - AAW: Residential Habilitation, including life Sharing

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://attendee.gotowebinar.com/rt/8489549586137881355>

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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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Resources and Communication

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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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