COVID-19 Appendix K Fact Sheet

An overview of temporary changes to the Medicaid Home and Community-Based Services (HCBS) Developmental Disabilities Adult Day (DDAD) Waiver and the Comprehensive Developmental Disabilities (CDD) Waiver

April 20, 2020

Effective date for the DDAD and CDD Appendix Ks for COVID-19:

The start date is **March 6, 2020** and the end date is **September 6, 2020**. The DDAD and CDD Appendix K documents are posted on the DHHS-DD website at: **http://dhhs.ne.gov/Pages/Developmental-Disabilities.aspx**.

Overview of temporary changes:

For anyone affected by the potential outbreak of COVID-19, recommended closures, and quarantines due to potential exposure, or for those following the CDC guidelines for those with disabilities, the Nebraska Department of Health and Human Services Division of Developmental Disabilities (DHHS-DD) will temporarily:

- Allow certain services to be delivered in alternative sites;
- Allow caps on certain services to be exceeded;
- Allow electronic methods of service delivery;
- Change enrollment requirements for providers;
- Modify person-centered service plan development process;
- Increase certain payment rates; and
- Allow retainer payments when certain services are not available to the participant.

Temporary modifications to service coordinator core job functions:

- DHHS-DD Service Coordination staff will monitor services through a minimum of monthly contacts via telephone.
- When an Individual Service Plan (ISP) is due to expire within 60 days after March 6, 2020, the service coordinator will contact the participant, guardian, and the participant's providers and verify current assessments and services remain acceptable for the upcoming year.
- The ISP may be modified as needed in response to the COVID-19 pandemic and updated within 30 days after the service changes.
- The annual Level of Care re-assessment will not be extended more than nine months from the original due date.

Temporary modifications in service delivery:

- Habilitative Workshop, Adult Day Services, Habilitative Community Inclusion, Independent Living and Supported Family Living may be delivered in a participant's residential setting.
- Residential Habilitation – Continuous Home may alternatively be delivered in Shared Living or Host Home settings.
- When a participant is a student under the age of 22, and quarantined or following the CDC guidelines for people with disabilities, or the school closes for remote learning, DD services may be provided during the school hours that would have been set by the local school district.
- The use of subcontractors will be allowed.
- The amount of prior authorized services may be in excess of the participant's approved annual budget.
- The requirement of prior clinical team approval of Medical In-Home is temporarily waived. Medical In-Home Habilitation is approved for use in hospital settings.
- For Habilitative Community Inclusion, the majority of habilitation service in a 35-hour week is not required to occur in community integrated activities and can occur in the participant's private home or family home, the employee's home, or in any continuous residential setting option.
- For Residential Habilitation Shared Living and Host Home, Independent Living and Supported Family Living, groups of three participants will be allowed and not need prior approval by DHHS-DD Central Office.
- For Independent Living and Supported Family Living, the cap of 70 hours per week under the CDD waiver or 25 hours per week under the DDAD will not apply.
- The cap of 360 hours is removed on use of back-up staff in Shared Living and Host Home.
- Participants who do not utilize waiver services for more than 90 days will remain on the waiver.

Role of temporary remote tele-monitoring for the delivery of service monitoring:

For anyone affected by the potential outbreak of COVID-19, recommended closures, isolation, quarantines, or following the CDC guidelines for those with disabilities, tele-monitoring for Independent Living, Supported Family Living, Adult Day, Habilitative Community Inclusion, and Habilitative Workshop can be delivered via an electronic method of service delivery when determined appropriate by the team. This is to encourage frequent check-ins and socialization. Tele-monitoring may also be used for cueing and prompting while running habilitation programs, but is not intended for continuous supervision.

Temporary modifications to provider enrollment and certification:

The following modifications are made to independent provider enrollment requirements:

- A certificate for completion of training in abuse, neglect, and exploitation and state law reporting requirements and prevention must be obtained within 90 calendar days of initial enrollment;
- A certificate for completion of cardiopulmonary resuscitation (CPR) training must be obtained within 12 calendar months of initial enrollment; and
- A certificate for completion of Basic First Aid training must be completed within 12 calendar months of initial enrollment.
- Annual verification of program compliance will be waived during the time period of the pandemic.

Background check requirements will remain unchanged.

For certified agency providers, DHHS-Public Health may postpone agency provider certification reviews for those impacted for residential and day service settings until the public health emergency has passed.

Temporary Provider rates, retainer payments, billing instructions, and GER guidelines:

- Using the current rate-setting methodology, the following rates will be increased temporarily to ensure sufficient providers are available to participants: Residential Habilitation (Shared Living, Group Home, and Host Home), Independent Living, Supported Family Living, Habilitative Community Inclusion, and Habilitative Workshop. The rates will not exceed 15% of current rates.
- Retainer payments may be requested after DDAD and CDD Appendix Ks are approved by the Centers for Medicare and CHIP Services (CMCS). Requests for retainer payments must be approved by DHHS-DD Central Office, and will be approved only for the amount of service authorized prior to the COVID-19 pandemic.
- Billing information for providers can be found in *COVID-19 Service Authorization and Billing Procedure* created by DHHS-DD.
- Information regarding COVID-19 GER requirements is online at: **http://dhhs.ne.gov/Guidance%20Docs/COVID-19%20GER%20Instructions.pdf**.