COVID-19 Updates

Colorado Department of Health Care Policy & Financing

August 7, 2020



Overview

Colorado Cross-Disability Coalition (CCDC) Update

Julie Reiskin, Executive Director, CCDC

Colorado Department of Public Health & Environment (CDPHE) Update

Melanie Roth-Lawson, Trainer/Emergency Response Coordinator, CDPHE

New Normal
Electronic Visit Verification (EVV)
Utilization Management Update
HCBS Settings Final Rule Update
Strike Force Update
New Guidance
Resources

- Bonnie Silva, Office of Community Living Director, HCPF
- Shawn Bodiker, Eligibility Policy Unit Supervisor, HCPF

Colorado Cross-Disability Coalition

www.ccdconline.org covid@ccdconline.org

Weekly Webinars and chat spaces
Opportunities for engagement
Individual Advocacy including appeals



What from our "old" system do we want to keep?

Think back to another time...February of 2020.

What part of our system (whether disrupted or not) do you think is a great thing that we want to keep no matter what.

Think in terms of both services and processes

What worked well? What is working well now?



What are we doing because we do not know anything different?

In what situations or for what purposes is it a good idea to have people with disabilities grouped together?



Reimagining Services

We talked about this a month ago and need to talk about it again.

What does a different day program look like?

How do we truly move to employment first for all of us?

What other HCBS Services should be modernized?



What Now?

- There are MANY stakeholder groups, committees, work groups, etc.
- You can be involved in reimaging a better system?
- If you are supporting someone who has lost a day program use this time to see if they can virtually do some job shadowing.
- Learn about Medicaid rules and help identify what we should push to change.
- Be a problem solver.
- Learn about the <u>state budget process</u> and how it works.
- We will need to figure out how to do some of what we wanted with no new money. If we want to shift money we will need to get legislative authority to do so.
- Read or listen to the book <u>Being Heumann by Judith Heumann</u>

Future of Case Management

Working to Continue:

- Electronic Signatures
- Opportunities for Virtual Face-to Face
- Professional Medical Information Page (PMIP)
- Streamlining Nursing Facility Transfers
- Preadmission Screening and Resident Review (PASRR)

Planning to roll back at end of Public Health Emergency:

- 60-day extension to <u>sign forms</u>
- Continuous Medicaid Eligibility

Day Programs

- Department working towards "New Normal" with community partners
- Continuing to examine flexibility in rate methodology and payment structure to address post-retainer payment
- Retainer Payment letter from Colorado delegation -Department signed on to this letter

Focus on Employment

Employment First utilizes the principles that everyone can work, that work is a social determinant of health, and that Competitive Integrated Employment (CIE) is the preferred outcome for all individuals with disabilities. Department working on several initiatives:

- Conducting an incentive-based pilot to promote CIE
- Partner with the Office of Employment First to develop and roll out <u>Disability Benefits 101</u> to support working adults with disabilities understand how changes in income will impact their benefits
- Working with Division of Vocational Rehabilitation (DVR) to identify and reimburse providers for training on Supported Employment best practices. HCPF has reimbursed 145 providers
- Also working with DVR to allow waiver members to more easily utilize services and support between these two funding systems
- Rewriting the Supported Employment rules for both Supported Living Services and Developmental Disabilities waiver to clarify CIE as the preferred outcome. Stakeholder engagement happening soon!

Public Health Emergency End Date Timeline

- HHS announced on July 23 extension of Public Health Emergency effective July 25, with new deadline for end date of October 23
- Dept. asking for at least 2 months notice from HHS if the PHE will not be extended again

- Continuous Medicaid Coverage ends at the end of that month the PHE ends
- Dept. and County Partners will need to notice members and time to properly disenroll members
- Dept. requested 90 days to complete disenrollment, but no specific guidance has been issued or approved by CMS

July 25, 2020

Oct. 23, 2020

Oct. 31, 2020

Dec. 31, 2020

Jan. 26, 2021

- PHE ends
- State Plan Amendments, 1135 Waivers, and Optional Testing Group end with PHE

Maintenance of Effort (MOE) & Federal Medical Assistance Percentages (FMAP) ends at the end of the quarter the PHE ends Appendix K with HCBS flexibilities ends

Electronic Visit Verification Update

8/3/2020 - EVV mandate, providers must use EVV

- EVV is now required for all <u>mandated services</u>. Department is looking for good faith effort by providers, not perfection
- Training is available online and must be completed prior to EVV use
- Claims will continue to pay and EVV errors will appear on Remittance Advice (EOB 3054)
- Beginning 1/1/2021, claims for EVV required services without corresponding EVV records will deny
- Additional information for providers can be found on the <u>EVV Resources page</u>

Live-in Caregivers may be exempt from EVV

- Eligibility is outlined in the Operational Memo
- Those who qualify should complete the Live-in Caregiver Attestation Form

Please notify the Department of any unavoidable delays via email: <u>EVV@state.co.us</u> If you need support with SANDATA training, EVV State Solution, or interfacing Provider Choice Systems, call or email the EVV Help Desk at 1-855-871-8780 / <u>COCustomercare@sandata.com</u>

Utilization Management Update

The Department received approval to conduct Utilization Review / Utilization Management (URUM) for health maintenance activities in Participant Directed Programs including:

- Consumer Directed Attendant Support Services (CDASS)
- In-Home Support Services (IHSS)

The Subcommittee meets monthly to review and create policies, procedures, training and other concerns related to the URUM process. The Subcommittee reports to the Participant Directed Programs Policy Collaborative.

If interested in joining the subcommittee, please contact <u>John.R.Barry@state.co.us</u>

HCBS Settings Rule

CMS's July 14 State Medicaid Director Letter addressing the COVID-19 PHE:

- Extends deadline for statewide compliance with the HCBS Settings Final Rule to March 17, 2023;
- Extends intermediate deadlines relating to heightened scrutiny; and
- Says that "[i]f a setting has made significant and permanent changes" in response to COVID-19, "the state may be required to reassess the setting, after the PHE, for compliance."

HCBS Settings Rule, cont.

What the **State Medicaid Director Letter** means for Colorado:

- We are still committed to the rule and moving forward with implementation
- Providers need to continue working on their Provider Transition Plans (PTPs)
 - > As always, can ask CDPHE staff leads for reasonable extensions on a case-by-case basis
- We are updating the schedule of rule implementation milestones in light of:
 - ➤ the effects of the COVID-19 PHE on rule implementation;
 - > the CMS extension;
 - > our ongoing engagement with stakeholders; and
 - ➤ the completion of the PTP platform rollout

The updated schedule will be publicly posted and submitted to CMS

We will be asking CMS for details about the expected reassessment process

HCBS Settings Rule, cont.

Why no across-the-board extension for nonresidential and children's residential providers to submit their initial PTPs?

- CMS has not given us that much time for this part of the process. Working backwards:
 - > We need to give CMS info about settings in 2 heightened scrutiny categories by 3/31/21.
 - > We have to publicly notice that info around 12/31/20 to allow time for public comment (likely including town halls) and for addressing all input received.
 - > This requires us to have identified all settings in the 2 categories (at minimum) and verified their plans to come into compliance. This means CDPHE needs to complete its initial review of all remaining PTPs. To get there, all initial PTPs need to be submitted by 9/31/20.
 - > If everyone waits to the last minute, CDPHE will not be able to review everything on time. Review must be (and is) underway now on a rolling basis.



Update

- State Emergency Operations Center (SEOC)
- IC Survey Status
- EM Resource (CDPHE_EMResource@state.co.us)
- Follow-up Items
- HEMSD COVID-19 Blog

EM Resource Reporting Now Required

Per <u>Public Health Order 20-20</u> (amended July 30), regular reporting to CDPHE is now required for Residential Care Settings

Reporting will be done through EM Resource, a web-based tool used to assist the State with situational awareness and identification of providers' resource needs

The State monitors the data that providers enter into EM Resource several times each
week to create critical needs reports that go to the state's emergency healthcare lead

Timeline:

- Nursing Homes must begin reporting by August 5, 2020
- Assisted Living Residences must begin reporting by August 12, 2020
- Group Homes and ICFs must begin reporting by August 19, 2020

Visitation in Residential Care Settings

 New FAQ page posted on the Strike Team website to clarify questions related to visitation, as well as provide additional information:

www.colorado.gov/cdphe/residential-care-strike-team

 Working with the Governor's Office on guidance for indoor visitation, which will provide additional information about visits from family, friends, and individuals providing ancillary services - coming soon

Health and Well-being

- New priority focused on resident and staff health and well-being
 - ➤ The goal is to develop strategies to address physical, mental, and cognitive health of residents and staff while continuing to assure their safety
 - > Examples of concerns that we'd like to address:
 - Isolation among residents
 - Staff burnout and stress

Testing Update

- The 8-week time frame for standing up surveillance testing ended on 8/2/20 Over that time, The State Lab, including the National Guard:
 - > Distributed 116,542 test kits, far exceeding their goal of 100,000 tests
 - ➤ Worked with 184 facilities (160 unique) and identified 197 positives
 - ➤ Increased distribution from 6,100/week to 21,500/week
- Over the 8-week time frame CSU:
 - Conducted 12,884 tests, worked with 26 facilities, and identified 29 positives
- Surveillance testing will continue through the State Lab and CSU
 - > On-the-Ground support will be available for those facilities that need it
- Since June 1st, 43.8% (20,612) residents and 36.5% (19,367) staff have been provided access to testing by the State at least once

Infection Control Surveys

- CDPHE Health Facilities and EMS Division survey teams have completed infection control surveys with all 1,057 residential care settings
 - > Now will shift back to focusing on complaint response surveying
- CMS is providing HFEMS a list of nursing homes (using data from NHSN) that need to be surveyed
 - > Survey team must respond within two days
 - CMS surveyors responding as well

New Guidance Issued

OM 20-071 OM 20-080 OM 20-083

All COVID-19 related Memos can be found here: www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response



OM 20-071

TITLE: SELF-ATTESTATION OF INFORMATION DURING COVID -19

CMS provided approval for the State of Colorado to make changes to required verifications to r	make an e	eligibility
determination.		

Individuals submitting a new application during the PHE may self-attest to the following:
□ Income
□ Social Security Number
□ Resources
Currently, for all medical assistance programs, an applicant may self-attest to the following information withou
following up with required verification:
☐ age or date of birth
■ state residency
household composition
identity (if information can be verified electronically)

> Any other criteria needed to make an eligibility determination, other than those mentioned, will still need to be requested from the applicant.

□ citizenship or immigration status (if information can be verified electronically)

Link: OM 20-071

OM 20-080

TITLE: CRITICAL INCIDENT REPORTING FOR COVID-19 (Supersedes OM 20-044)

Clarifies Critical Incident Reporting requirements for presumptive cases of COVID-19.
Presumptive cases of COVID-19 means a member is experiencing identified symptoms of the
COVID-19 virus and is presumed by a physician to have COVID-19 and/or is pending testing for
COVID-19 due to symptoms. Symptoms of COVID-19 include:

☐ Fever or Chills	New loss of taste or smel
□ Cough	■ Sore throat
☐ Shortness of breath or difficulty breathing	Congestion or runny nose
☐ Fatigue	Nausea or vomiting
☐ Muscle or body aches	☐ Diarrhea
☐ Headache	

➤ Removes the requirement for case managers to report COVID-19 to the Local Public Health Agency.

Link: OM 20-080

OM 20-083

TITLE: DAY HABILITATION SERVICES IN RESPONSE TO COVID-19

- Clarity about how Day
 Habilitation may be provided
 to HCBS waiver members
 under the Protect Our
 Neighbors Executive Order
- Department encourages service delivery in the community whenever possible as the risk of transmission of the COVID-19 illness is lower outdoors

(does not supersede OM 20-070: Updated Information Pertaining to Day Program Services in Response to COVID-19, but rather provides additional guidance)

Supported Community Connections

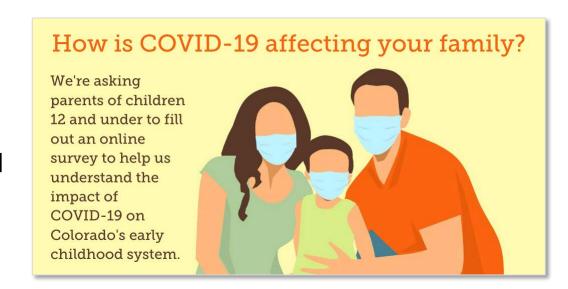
- Until further notice, SCC does not have to "utilize the community as a learning environment"
- Several other modifications to SCC are being made to help providers help members access SCC (see memo for list)
- Temporarily allow members who reside in an IRSS setting or Group Home determine
 to return to SCC service agency or have the IRSS or Group Home temporarily provide
 the SCC service (See memo for instructions. Residential provider must be approved
 SCC provider.)

Specialized Habilitation

- Until further notice, SH may include virtual individual and/or group activities, hosted by the current SH service agency.
- For those members who are considered "at risk," or do not feel comfortable returning to group settings, SH may also continue to be provided 1:1 in the member's home by the SH service agency.
- Residential providers are expected to provide 24/7 regular care for members including services that are provided under SH, such as assistance with feeding, toileting, self-care, etc. Because of this, residential providers will not be allowed to also provide the SH service to members who live in the home



- The Colorado Department of Human Services Office of Early Childhood partnered with Early Milestones Colorado, other state agencies, and community partners to develop a brief, online survey to address:
 - ➤ Whether you used the Colorado Emergency Child Care Program during stay-at home orders
 - ➤ What child care and early education options you want and need now
 - ➤ Where you have received support for your family's basic needs
 - > How you are getting information about child care options
 - ➤ How the pandemic has impacted your family and child/children
- If you are the parent or legal guardian of a child age 12 or younger, we want to hear from you!
- The survey will close on August 30
- Participants will be eligible to win a \$100 gift card
- Complete the 15-minute online survey
- Learn more about this effort





New Questions?

Stay Engaged

Memos, Webinar Info, and FAQs - Updated Regularly

www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response

Email us

HCPF_HCBS_Questions@state.co.us

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Previous Guidance

Case Management Agencies

Operational Changes

- OM 20-049
- OM 20-027
- OM 20-037
- OM 20-045
- OM 20-075

PASRR Changes

• OM 20-043

Level of Care Changes

• OM 20-053

Transition Coordination

• OM 20-056

In-Person & Travel Add-On

• OM 20-076

Facilities and PACE

Infection Control And Prevention in NHs (CMS)

CMS QSO-20-14-NH

Telemedicine in Nursing Facilities

• OM 20-032

Training & Certification

• OM 20-038

Rate Increase

• OM 20-050

Options Counseling

• OM 20-054

Stimulus Payments

• OM 20-059

Civil Money Penalty (CMP)

• <u>IM 20-021</u>

HCBS Providers

HCBS Therapy Services

• OM 20-020

Guidance for Class B Providers

• OM 20-023

Changes to Benefits & Services (Table)

• <u>OM 20-046</u>

Telemedicine

Temporary Policy

Host Home Inspections

• <u>OM 20-036</u>

CDASS Sick Time

• OM 20-047

Changes to Benefits & Services Rates (Table)

• OM 20-048

Flexibility in Hiring

• <u>IM 20-019</u>

CC & SCC Clarifications

• OM 20-060

Additional Provider Relief Funds

• <u>IM 20-024</u>

Non-Medical Transportation

• OM 20-063

Retainer Payments Ending

• OM 20-069

Guidance for Reopening or Expanding Day Programs

• OM 20-070

CDPHE TA for IRSS

• <u>IM 20-031</u>

Updated Residential Guidance

• OM 20-072

All COVID-19 and LTSS related memos and FAQs can be found here:

www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response

Reminder: Personal Protective Equipment

If you or your organization are experiencing a shortage or outage of personal protective equipment (masks, gloves, gowns, etc.) to conduct essential or life saving functions during this crisis, please reach out to your local emergency manager or local public health department.

Find Your Local Community Emergency Manager Find Your Local Public Health Department

To report issues in obtaining PPE please notify:

Sadie Martinez
Access and Functional Needs
Coordinator
Office of Emergency Management
720.610.1691

sadie.martinez@state.co.us

More Information



www.cdc.gov/coronavirus/2019-ncov/



www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page



covid19.colorado.gov



Local Public Health Agencies www.colorado.gov/cdphe/find-your-local-public-health-agency



www.colorado.gov/hcpf/COVID

Next Steps

Thank You!

