COMPLIANCE GROUP April 16, 2020

Chat communication (edited for clarity)

M.muldoon: Does an Appendix K or an amendment need to be done if we want to provide DH in the home?

Jennifer: We have a Client who's DH was amended to include their backyard on the new COVID Amendment form. Haven't gotten any response from SDS yet.

awilson: We have completed several Appendix K forms to change our delivery of service from on-site to telehealth

Stephanie Hall: Kara was also pretty clear to say In-Home and Respite could not be done via distance/virtual

Stephanie Hall: Kara was pretty clear that Day Hab providers should not be going into Assisted Living homes.

afaulkner: We are having the house managers work out of ALH to provide DH. This is important for the DSPs and individuals during this time.

KaraL: I have not seen a requirement for a written plan in the state mandates that would apply to Supported Living and Day Hab services. We have made a plan, but I would like to know where I find guidelines for what the written plan needs to include. Where would I find that? (See AADD COVID-19 document for protocols)

Amanda Race: I have Relative providers (Day Hab, SLS, respite care) who are monitoring temperatures 2x a day; wearing masks, gloves AND delivering food & supplies to their consumers homes because the parents/guardians are Elders (Delta, Anc).

awilson: The Arc of Anchorage is providing Day Hab Rec/Sparc classes via Zoom - it is working Erin Weis: Question for Arc, are you providing distance delivery DH for Group and Individual DH or just Group?

Carla Meitler: is anyone doing just straight Phone services, without video, and if so what services?

Lisa: Can the "blurb" be shared? (:"Blurb" is what providers gave Care Coordinators to put on Appendix K amendments.)

awilson: an example of our statement -: Due to the Covid-19 and the hunker down mandate XXXX and her guardian are asking for XXXX to have the flexibility to do her 1 on 1 day habilitation services partially in the home. She will continue to work on her health and fitness goals during this time. She would also like to continue her group day habilitation with Cindy & Vic's and with the Arc via computer or phone to stay connected with her friends and continue to work on her communication skills and healthy living choices.

TylerM: Can Supported Living be provided remotely? For example if someone is fairly independent but needs verbal coaching through cooking or meal prep. Can that be done through electronic means?

Jennifer: This was discussed in a webinar last week with Kara, specifically for the Care Coordinators. It should be available in the recorded trainings.

Stephanie: no In home for children

Carla Meitler: What Is the turnaround that people are seeing on the approval of the amendments, and are you holding billing until approval?

TylerM: Are you all providing the service remotely and just not billing out until approved?

Erin Weis: We're waiting for approvals back before billing also

afaulkner: FCS until App K will also be waiting for approval before billing

LaRae: holding

awilson : we are holding our billing Barb Jewell : We have not yet billed

Amanda Race: So far, mine are still in the home and i am billing every 2-3 weeks based on

timecards/progress notes turned in. I am getting paid timely.

9075868228: Reach is holding for approvals

From Stephanie: I asked Kara about timelines (for Appendix K amendment approvals). She said it would expedited and 10 day turnaround is what they are shooting for.

Lisa: Hello FCS. In Homer, we have not gotten a single APP K amendment completed with CCs either

Carla Meitler: It's interesting that Division of Behavioral health gave very quick guidance on tele services, no adjustments to authorizations, etc. Too bad that SDS can't do the same. 9075868228: REACH has gotten 2 Appen K approvals back. This is Anitra - no wisdom, just a fast CC. (Approved amendments were about) changing the settings for DH to in home DH - sorry, have a lot of background noise here

Erin Weis: A question came up yesterday regarding Day Hab being provided in a Family Hab home. The question was; if a recipient still wants their DSP to come into the Fam Hab home to provide DH is this allowable or is it expected that the Fam Hab provider would incorporate the DH goals & objectives/skills under their Fam Hab service?

Jennifer: I was told that our FH provider could work on the Goals/Obj, but we will not be able to bill for the DH

Stephanie: If folks live in ALHs and have limited mobility or non verbal. Then CCs were told they can talk to the staff and get updates.

Lisa: Are agencies using the phrase, "distance delivery" instead of phone, video or other method? I am less than confident that SDS is okay with a DSP providing services via phone.

afaulkner: FCS made a statement that we will not be hiring families during this timeframe Lisa: SPBHS is not hiring families because we do not have the ability to train staff by distance TylerM: We are accepting applications from family and will be looking at individual situations.

melissa.muldoon - MSSCA is continuing with their current policy - not to hire parents.

Amanda Race: We've had relative providers hired years ago (one 17 years ago) to work with consumers through Tanana Chiefs...2 off-site staff and 2 family directed respite providers.

From Amanda Race: We have an adult sibling, cousin, brother in law and Grandmother. No new staff since this started.

afaulkner: FCS has current family members that are employees but we are not hiring family members that live with the recipient during this period of time.

TylerM: We are looking at hiring families in a case by case basis. We are having them apply. TylerM: It explicitly says that they have to go through the same training process? For family members?

afaulkner: I thought about that Tyler...I just struggled with "fairness" I do like the idea of defining around a COVID diagnosis.

awilson: Is anyone getting push back from Care Coordinators - when agencies are not hiring family members?

Chriss Erwin: It seems to be a lot of work for a situation that may only last a month. It's expensive to bring on and train an employee.

afaulkner: I totally got push back and nasty comments from CC when I stated we would not be hiring family members

Erin Weis: Yay Cindy, that is something we are looking at developing for family members being hired on too! We're looking at having a "contingent on" letter developed so it's clear after the emergency is lifted they are no longer eligible to provide support.

Amanda Race: We have Service Contracts that go through the same back-ground checks; family provides orientation. Staff now go through a 1.5 day on line orientation vs. on site 2.5 days in Human Services.

Lisa: We are not hearing anything from care coordinators -

Barb Jewell: Our Care Coordinators are definitely strongly in favor of hiring (family members) 9075868228: Our care coordinators are in favor of hiring as well (REACH)

Amanda Race: I've only heard from 1 or 3 CC's; I have emailed them all our TCC protocols to work in individual homes....

Stephanie: FYI Kara was very clear to tell CCs that it was agencies decisions to choose to opening up hiring to families and if a family wanted to change service providers that a regular amendment needed to be completed.

damid: I had a CC tell me that during the monthly CC meeting SDS told them if an agency did not want to hire the family then they should change agencies.

melissa.muldoon: We are getting repeated requests as to how our agency is going to help the CCs conduct their virtual visits. We don't presently have the equipment to facilitate this for them. We don't have the cameras

melissa.muldoon: What are agencies doing to help CCs do their virtual visits

Amanda Race : I think CC's as small businesses can apply for funds for extra Internet & tech devices...

Stephanie: CC do not have to see people to do visits. It can be done over the phone.

Lisa: At SPBHS we are not helping CC's with their visits

Erin Weis: Did I miss something that came out requiring the agency to facilitate a CC's monthly virtual visits? I haven't heard from any CCs asking us to do this

melissa.muldoon: We use teleconferences for qtly and annual visits, but we're getting pressure to put things in place to allow them to complete their monthly virtual visits and I wondered if anyone else was getting this same pressure.

Amanda Race: Sorry, we had to separate from CC's so they needed to come up with their business protocols...

Erin Weis: Regarding CPR/FA being extended for another year for current certified staff; I'm curious what others have come up with to document this that will be sufficient in an audit. The PCS program has a form to document this but Waiver does not, is it possible to request this from SDS?

TylerM: I'd like to know the answer to Erin Weis' question about FA/CPR extensions karaL: The approach I was going to use is just to print the blanket SDS guidance allowing us to waive the in-person FA/CPR during this period and add that to staff files when necessary. I don't really want one more form to fill out

Amanda Race: Agreed Kara L.

Lisa: Since agencies had to change community based DH to at home DH, don't all of our clients need App K amendments as of that date?

9075868228: Yes, REACH has sent a few in

melissa.muldoon: We've had one ISW submitted. I don't believe an increase was requested awilson: We have requested it but have not received approval yet

Lisa: It is my understanding that the meetings still need to take place, to extend a plan under appendix k.

Erin Weis: Yes correct, the Request Form includes a statement for the CCs that outlines they still have to hold a Planning meeting and follow steps etc.

Erin Weis: We just received two M&S audits this week, I was really taken back by that

9075868228: Have the M&Stauffer audits arrived by mail? (YES)

We requested an extension and it was approved---so ask

Erin Weis: Yep 2016 for us too! Sent by mail

Jessica : A care coordinator just said the Appendix K can not be back dated to 3/13/20 as there is only 30 days allowed for this change.