

February 15, 2021

Provider Notice/ Appendix K-COVID-19 Initiative Updates & Reminders

Dear Provider:

This notice is to provide updated information and reminders on the COVID initiatives due to the extension of Appendix K. Appendix K will remain in effect until 6 months after the end of the Public Health Emergency. The end of the Public Health Emergency is determined by the federal government, who intends to extend the Public Health Emergency through the end of 2021. Please note that reductions/ loss of eligibility will take effect no later than 30 days after the end of the Public Health Emergency.

UPDATE:

➤ **Respite:**

- During the COVID-19 crisis, HFS approved an additional 336 respite hours for Waiver participants to use starting 3/16/2020. Any respite used from 3/16/2020 on, was taken from the additional allotment prior to participants using their regular respite amount. Due to the extension of Appendix K, an additional 336 allotment will again be provided for each Waiver participant to utilize prior to their regular respite allotment- starting 3/16/2021.
- Appendix K does not allow for the emergency respite allotments to roll-over. Therefore, the new allotment will start on 3/16/2021. Any remaining respite amount from the previously issued emergency allotment from 2020, **will not** be added to the overall total. The maximum amount of respite remains at 672. (336 emergency respite, and 336 regular respite).
- As in 2020, any respite used starting on 3/16/2021 will be taken from the emergency allotment, prior to any regular respite usage.
- There are no parameters in how the family can use their respite- respite is used at the family's discretion.
- Respite is only for Waiver participants.
- Respite rates during the COVID-19 crisis remain at:
 - RN: \$45, LPN: \$37.50, CNA: \$25

➤ **Retainer Fees Update:**

- The extension of Appendix K does **not** include another retainer fee episode.
- Providers still have 3 episodes of up to 30 days of retainer fee's per participant.
- The Provider notice on 4/27/2020 notified providers of one episode.
- An update went out on 7/29/2020 notifying providers of two additional episodes that were added.

REMINDERS:

➤ **Payments to Parents as Paid Caregivers (RN/LPN):** During the crisis, HFS continues to approve skilled nursing services by parents or legally responsible relatives, including foster-parents. This remains approved for both waiver and Nursing and Personal Care Services, also known as NPCS or non-waiver.

- Services may begin on the date of hire of parent or legally responsible relative.
- Parent or legally responsible relative must meet all provider qualifications and training required by nursing agency.
- Parents may not provide respite services.
- HFS has set no limit on the number of hours a parent can staff in a week. The number of hours cannot exceed the approved resource allocation.
- Parents as paid caregivers can receive overtime. The amount paid needs to stay within the resource allocation.
- Parents will not be approved to receive reimbursement for nurse training.
- A parent who is a CNA is not approved to be a paid caregiver. Parents must hold an RN or LPN license.

➤ **Overtime:** The nursing agency can pay time and one-half using the established HCPC Code with the modifier TU-Special payment rate, overtime.

- In accordance with the Fair Labor Standards Act, anything over 40 hours/week per nurse can be billed as overtime. The Nurse Practice Act prohibits working more than 16 hours in a 24-hour period. It also requires an 8-hour break in between shifts.
- Total dollars may not exceed resource allocation.
- The 40 hours worked is attached to the nurse.
- Overtime will not be paid when the nurse is working a case where private insurance is the payer. Overtime can only be applied when the nurse is working the overtime when Medicaid is the payer.

➤ **Nursing Supervisory Visits:** Nursing agencies were notified that in-person supervisory visits were to resume in November 2020.

- Nursing agencies cannot opt out of resuming in-person supervisory visits but can make exceptions for families that do not want in-person contact.
- Agencies should be using the following precautions:
- Completing a pre-assessment over the phone or by other electronic means before the home visit. This is to help keep the visit as short as possible.
- Wear appropriate PPE and practice good hand hygiene.
- Triage the order of their visits.
- Use of telehealth visits when the family does not want in-person visits.
- For those participants who have nurses who are also their Legally Responsible Adult, the in-person

supervisory visits are mandatory with no option of declining them. These visits are particularly important to ensure health, safety, and welfare of all participants.

- **No reductions/loss of eligibility during the public health emergency:** There continues to be no enforcement of reductions or loss of eligibility for participants, during the Public Health Emergency.
 - This remains retro to 3/1/2020. Therefore, if a participant was issued a reduction or eligibility loss after 3/1/2020, they remain on the program under a COVID hold, and the allocation that they had on 3/1/2020 still stands. – (NOTE: If the participant had an increase or a temporary increase, then those increases apply- this is in refence to loss of services through reductions or ineligibility.)
 - A parent/LRA can request to end services during the COVID hold. If the participant was determined ineligible for the program after 3/1/2020, and the parent does not want to continue with services, services can end.
 - If a participant moves from Waiver to Non-Waiver after 3/1/2020, they continue to be eligible for all Waiver services under the COVID hold. This includes respite, nurse training, and all other waiver services.
 - Providers should continue to refer to the Provider Notice issued 4/27/2020, as evidence of ongoing eligibility and that no reductions can be enforced during the public health emergency.
 - The COVID hold on loss of eligibility still applies to those NW participants turning 21. Care coordination teams still must initiate the discussion with the LRA on which services they would like to apply for and complete the “Choices form”.
 - Reductions/loss of eligibility will take effect no later than 30 days after the end of the public health emergency. – there are no changes to this statement which is in the initial Provider Notice dated 4/27/2020.

- **State Fair Hearing Requests and Appeals:**
 - Hearings and appeals continue to be scheduled and held for DSCC participants and families who are appealing 2352 decisions.
 - Final Administrative Decision letters as a result of the appeal, may not always have language related to the COVID hold.
 - Providers should continue to refer to the Provider Notice dated 4/27/2020 as evidence that no reductions or loss of eligibility can occur during the public health emergency.

- **Personal Protective Equipment Reimbursement:**
 - Providers can continue to be reimbursed for PPE used to ensure nursing in the home.
 - This includes gloves, masks, gowns, hand sanitizer and bleach.
 - These supplies are to be provided by the nursing agency to ensure that the nurses can safely work in the home.
 - Nursing agencies cannot bill for reimbursement of PPE for cases that are not being staffed.

We thank you for your continued service to the participants that we jointly serve. If you have any questions, please contact your DSCC nursing agency liaison.