Kentucky Cabinet for Health and Family Services

COVID-19 Frequently Asked Questions for Medicaid 1915(c) Home and Community Based Services Waivers



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Section 1: Document Background

On March 6, 2020, Governor Andy Beshear declared a state of emergency in Kentucky due to the novel coronavirus, or COVID-19, a respiratory illness that is easily spread person-to-person. The symptoms such as fever, dry cough, and difficulty breathing, can range from mild to severe. According to the Centers for Disease Control, adult aged 60 and older or people with underlying medical conditions such as heart disease, diabetes, or lung disease are most at risk for severe illness.

The Department for Medicaid Services (DMS), on behalf of the Cabinet for Health and Family Services (CHFS), is publishing this Frequently Asked Questions (FAQs) document in response to COVID-19 questions as they relate to 1915(c) Home and Community Based Services (HCBS) waivers. This includes all six of Kentucky's 1915(c) HCBS waivers: Acquired Brain Injury (ABI), Acquired Brain Injury Long Term Care (ABI LTC), Home and Community Based (HCB), Model II Waiver (MIIW), Michelle P. Waiver (MPW), and Supports for Community Living (SCL).

These questions were collected from inquiries made to the DMS Division of Community Alternatives (DCA). DMS has modified some questions from the originally submitted language to be as clear as possible and not share case-specific details.

If you have additional waiver-related questions about the COVID-19 state of emergency, please contact the 1915(c) Waiver Help Desk via email 1915cwaiverhelpdesk@ky.gov or by phone at 844-784-5614.

For more information on COVID-19, the number of confirmed cases in Kentucky, or a listing of actions Governor Beshear has taken during this state of emergency, visit kycovid19.ky.gov.

Section 2: Questions and Responses – 3/20/20

Q1: Can providers conduct a screening for COVID-19 before entering a waiver participant's home to deliver services?

Date Added/Revised: 3/20/20

DMS is not requiring providers to screen for COVID-19 before entering a waiver participant's home, but it is recommended. To do this, providers can call ahead and ask how the participant and everyone in the home is feeling and if they are displaying known viral symptoms (including fever, cough, and shortness of breath). DMS provided screening questions in a letter sent to providers on March 11, 2019. The letter is available at https://chfs.ky.gov/agencies/dms/ProviderLetters/1915cproviderletterCOVID19.pdf.

Providers should also be vigilant in following their agency's infection control policies and Centers for Disease Control (CDC) guidance while providing in-home services to waiver participants.

Q2: Can providers deliver services remotely during the COVID-19 state of emergency?

Date Added/Revised: 3/20/20

Yes, DMS is allowing providers to deliver 1915(c) HCBS waiver services remotely for certain services. This can be done in situations where a participant is quarantined due to symptoms of or having been exposed to COVID-19 or as a precaution against spreading COVID-19. Services that could be provided via telehealth include:

- Physical, Occupational or Speech Therapy,
- Supported Employment,
- · Behavior supports and counseling services,
- In-home services such as Personal Care or Homemaking (cueing and prompting support only)
- Case Management.

Hands-on direct care services can only be reimbursed if performed in person. Providers should also be vigilant in following their agency's infection control policies and Centers for Disease Control (CDC) guidance while providing in-home services to waiver participants.

Please see the COVID-19: Telehealth letter available at

https://chfs.ky.gov/agencies/dms/ProviderLetters/1915ctelehealthcovid19providerletter.pdf for more information. All providers should work together to allow participants to receive services via telehealth when possible.

Q3: Should case managers/support brokers/service advisors conduct virtual visits with all waiver participants or only those who show symptoms of or have had known exposure to COVID-19?

Date Added/Revised: 3/20/20

To reduce the spread of COVID-19 in Kentucky, case managers and support brokers are allowed to conduct all visits via phone or using virtual options (such as FaceTime, Skype, etc.), so long as the method used allows for direct interaction between the waiver participant and the case manager (e-mail or leaving a message is not considered interactive). Please refer to the COVID-19: Telehealth letter available at

https://chfs.ky.gov/agencies/dms/ProviderLetters/1915ctelehealthcovid19providerletter.pdf for more information.

Q4: Can case managers/support brokers/service advisors conduct virtual visits with waiver participants and their families in lieu of face-to-face visits even when no one in the participant's residence is showing signs of COVID-19? Some participants have a higher risk of contracting the virus due to age, health conditions or a compromised immune system and don't want to risk unintentional exposure.

Date Added/Revised: 3/20/20

On March 13, DMS began allowing case managers/support brokers/service advisors to conduct all visits via phone or using virtual options (such as FaceTime, Skype, etc.). Please refer to the COVID-19: Telehealth letter available at

<u>https://chfs.ky.gov/agencies/dms/ProviderLetters/1915ctelehealthcovid19providerletter.pdf</u> for more information.

Q5: What should a case manager do if a waiver participant needs to have a person-centered service plan meeting, either due to their annual level of care ending or the need for an emergency modification to their plan?

Date Added/Revised: 3/20/20

On March 13, DMS began allowing case managers and support brokers to conduct all visits via phone or using virtual options (such as FaceTime, Skype, etc.). DMS issued the same guidance regarding assessments on March 16. Please refer to the following letters for more information.

COVID-19: Telehealth Letter

https://chfs.ky.gov/agencies/dms/ProviderLetters/1915ctelehealthcovid19providerletter.pdf

ABI/MPW Assessments Letter

https://chfs.ky.gov/agencies/dms/ProviderLetters/abimpwassessmentscovid19.pdf

Model II Assessments Letter

https://chfs.ky.gov/agencies/dms/ProviderLetters/modeliiassessmentscovid19.pdf.

The related case note should cite the COVID-19 state of emergency as the reason the meeting was not held face-to-face.

Q6: If a case management agency does not have the capability to provide services using virtual options (such as FaceTime, Skype, etc.), are they allowed to conduct waiver participant visits via phone?

Date Added/Revised: 3/20/20

Yes, it is acceptable to conduct meetings with waiver participants via phone during the COVID-19 state of emergency if an agency does not have capability to conduct meetings via virtual options.

Q7: Some waiver participants do not have phones. Is it appropriate to check-in on participants through individuals who have contact with them? For example, could the case manager/support broker/service advisor contact the participant while he/she is at another appointment or send another agency's employees to check on he/she on the case management agency's behalf?

Date Added/Revised: 3/20/20

Yes. DMS intends to be as flexible as possible regarding contact with participants during the COVID-19 state of emergency and we encourage providers to work together to meet participant needs. If you use this method to contact a participant, please keep detailed notes on the date, time and method of contact and be sure to indicate the contact took place this way due to the COVID-19 state of emergency.

A case manager/support broker/service advisor may make a home visit as a last resort if they cannot contact the participant any other way. For any home visit, providers should follow their agency's infection control policies and (CDC) guidance.

Q8: Case management providers are not required to have a license to provide services. Does the waiver stipulate only licensed case managers can bill for telehealth services?

Date Added/Revised: 3/20/20

The waiver does not require case managers to be licensed to provide services. Telehealth services are governed by KRS 205.510 (15) and 907 KAR 3:170. See the COVID-19: Telehealth letter available at https://chfs.ky.gov/agencies/dms/ProviderLetters/1915ctelehealthcovid19providerletter.pdf for more information. Providers delivering services through alternative methods during the state of emergency should continue to bill under their waiver provider number as they usually do.

Q9: How should a case manager/support broker/service advisor collect the signatures required during person-centered planning if the team meeting is conducted via phone or online? Can this be done verbally?

Date Added/Revised: 3/20/20

During the designated emergency period, consent of the person-centered team may be obtained verbally. Additionally, provider consent to deliver the services documented in the plan may be obtained verbally. When obtaining verbal consent, case managers are instructed to document the name of the participant, the name of the team member and their relationship to the participant, and the date and time of the consent. It is also acceptable to obtain email consent from service providers. Notes should indicate the signatures were collected either verbally or through email due to the COVID-19 state of emergency.

Q10: When completing the MAP-116 for person-centered service planning that took place over the phone or online, should the case manager/support broker/service advisor indicate that on the form?

Date Added/Revised: 3/20/20

Yes, please sign the form, note the date/time, and include a statement indicating how the meeting took place (via phone or online). The note should also cite the COVID-19 state of emergency as the reason the form was completed via phone or online.

Q11: How should a case manager/support broker/service advisor complete and upload monthly notes for visits that took place via phone or online? What should be entered for note type and meeting location?

Date Added/Revised: 3/20/20

The case manager/support broker/service advisor should use the "Indirect Contact" option as the note type and use the "Phone Contact" option as the method when recording the note in the Medicaid Waiver Management Application (MWMA). The note should be detailed and include the date and time the meeting took place, how it was conducted (i.e. via phone, Skype, etc.). Please be sure to indicate the COVID-19 state of emergency as the reason the meeting did not occur face-to-face.

Q12: If a waiver participant needs their annual re-certification completed, how should the assessor complete the assessment/re-assessment?

Date Added/Revised: 3/20/20

DMS issued notice to assessors on March 16 that all assessments and re-assessments should be completed via phone or using virtual options (such as FaceTime, Skype, etc.). While DMS knows an assessment is best completed in-person, this measure was implemented to support recommended social distancing measures. Please refer to the following letters for more information.

ABI/MPW Assessments Letter

https://chfs.ky.gov/agencies/dms/ProviderLetters/abimpwassessmentscovid19.pdf

Model II Assessments Letter

https://chfs.ky.gov/agencies/dms/ProviderLetters/modeliiassessmentscovid19.pdf.

Q13: Are Kentucky Home Assessment Tool, or K-HAT, assessments/re-assessments on hold due to the COVID-19 state of emergency?

Date Added/Revised: 3/20/20

No, **assessments are not on-hold.** DMS issued notice to assessors on March 16 that all assessments and re-assessments should be completed via phone or using virtual options (such as FaceTime, Skype, etc.). While DMS knows an assessment is best completed in-person, the step was taken to support recommended social distancing measures.

Q14: What if an initial waiver enrollment or re-certification cannot be completed in the required timeframe?

Date Added/Revised: 3/20/20

If you have a participant for whom you cannot complete an assessment, please email the 1915(c) Waiver Help Desk at 1915cWaiverHelpDesk@ky.gov for further guidance.

Q15: What should a provider do if a waiver participant or an agency employee who has direct contact with waiver participants tests positive for COVID-19?

Date Added/Revised: 3/20/20

The individual who is confirmed to have COVID-19 should be referred to Kentucky's COVID-19 hotline at (800) 722-5725 or their local health department.

The provider must submit a critical incident report. DMS issued guidance on how to report a confirmed COVID-19 case in waiver participants or agency employees on March 17. The guidance is available at https://chfs.ky.gov/agencies/dms/ProviderLetters/1915cwaivercovid19reporting.pdf

Q16: If a waiver participant requests to cancel a visit due to having possible COVID-19 exposure or active symptoms but timesheets indicate he/she is still taking part in community activities, what actions should the provider take?

Date Added/Revised: 3/20/20

If the participant indicates or it is observed he/she is taking part in community activities, the provider should counsel the participant on government-issued social distancing guidelines and refer them to the COVID-19 resources available at kycovid19.ky.gov.

If the participant has been exposed to COVID-19 and/or is showing symptoms, but is refusing to self-isolate, contact the state's COVID-19 hotline at (800) 722-5725 or the <u>local health department</u> to alert them.

Q17: How should waiver participants proceed if they are concerned about agency staff entering their homes? The agency sometimes rotates aides and the participant is concerned about someone unintentionally bringing the virus into his/her home.

Date Added/Revised: 3/20/20

A participant has the right to suspend services if he or she wishes to limit the volume of individuals coming into their home during this emergency period. The waiver participant and the case manager/support broker/service advisor should work together to ensure needs can be met in other ways during the suspension of services, such as using natural supports or through telehealth services. Additionally, case managers are expected to observe risk identification, planning and mitigation activities with participants for whom service suspension poses potential risks to health, safety and welfare. These efforts are to be documented in MWMA.

Q18: What should a case manager/support broker/service advisor do if a participant asks to have his/her waiver services put on hold due to the COVID-19 state of emergency? What if the hold goes beyond sixty (60) days – should the participant be discharged?

Date Added/Revised: 3/20/20

No, do not discharge or dis-enroll waiver participants due to or during the COVID-19 state of emergency. Please document the participant's decision to stop services in MWMA and contact the waiver participant no less than the number of times required by the applicable waiver regulation to evaluate and determine the best time to resume services. Please keep detailed notes of each contact. The notes should also indicate the COVID-19 state of emergency as the reason services were put on hold.

Q19: A waiver participant is coming up on sixty (60) days with no services and the case manager/support broker/service advisor is having trouble getting services started due to the COVID-19 state of emergency. Should the participant be discharged?

Date Added/Revised: 3/20/20

No, do not discharge or dis-enroll waiver participants due to the COVID-19 state of emergency. Please document the difficulty initiating services in MWMA and keep detailed notes. The notes should indicate the COVID-19 state of emergency as the reason services have not been initiated.

Case managers should continue to pursue service options, including participant directed services (PDS), within modified allowable service and service provider rules being implemented by DMS. More information on these will be released soon. If a case manager/support broker/service advisor cannot initiate services and needs further guidance, they should contact the 1915(c) Waiver Help Desk at 1915cWaiverHelpDesk@ky.gov.

Q20: We are temporarily closing our Adult Day Health Care Center (ADHC) or Adult Day Training (ADT) site due to the COVID-19 state of emergency? Do we need to submit a critical incident report?

Date Added/Revised: 3/20/20

Governor Andy Beshear ordered all adult day health care centers and adult day training sites to temporarily suspend services by Friday, March 20, 2020. ADHCs and ADTs serving waiver participants do not need to complete a critical incident report due to the closure, as this change is known to DMS.

Agencies only need to submit a critical incident report for COVID-19 if a waiver participant or agency employee who has direct contact with waiver participants is tested and confirmed to have the virus.

Q21: What kind of flexibility is DMS offering providers as they plan for or experience staffing shortages during the COVID-19 state of emergency? The reason for these shortages could include employees who are sick or employees who need to take time off to care for their families.

Date Added/Revised: 3/20/20

First, DMS is allowing providers to deliver services via phone and telehealth, as is appropriate. Please see the COVID-19 and Telehealth letter available at

https://chfs.ky.gov/agencies/dms/ProviderLetters/1915ctelehealthcovid19providerletter.pdf for more information.

Other temporary changes DMS has made to the 1915(c) HCBS waivers include:

- Allowing employees, both agency and PDS, to begin providing services while they wait on the results of background check and pre-employment screenings.
 - o If the results of a background check or other screening make the employee ineligible, services will be allowed to continue until an alternative employee is found. The only exception is in cases where the employee poses immediate jeopardy to the health, safety, and/or welfare of the participant or has a substantiated finding of past abuse, neglect or exploitation or violent felony.

- Suspending all conflict-of-interest related screening of immediate family members who wish to provide PDS. This gives providers and participants more options to cover gaps in care resulting from the COVID-19 state of emergency. More guidance on how to request an immediate family member as a PDS employee during the COVID-19 state of emergency will be forthcoming.
- Expanding the provider base by waiving requirements that out of state providers be licensed and located in Kentucky as long as they are licensed by another state's Medicaid agency.
- Expanding settings where services can be provided and opening up provider qualifications to allow different provider types to offer services outside of what they typically provide.

Q22: CPR and first aid classes are being canceled due to the COVID-19 state of emergency. Will there be an extension for agency and PDS employees who are due to receive this training?

Date Added/Revised: 3/20/20

Yes, there will be an extension. The end-date of the extension period is to be determined and will be publicized later. For now, please document the reason the training could not be completed.

Q23: An agency or PDS employee is due to have his/her tuberculosis test completed soon. If the employee is unable to do so because of the COVID-19 state of emergency, will they be considered ineligible to work?

Date Added/Revised: 3/20/20

No, they will not be considered ineligible to work unless they are demonstrating symptoms of tuberculosis or active illness. Please document the reason the tuberculosis test could not be completed.

Q24: In the event that there are periods of time when people are asked to stay at home, will direct support professionals (DSPs) be able to provide in-person residential through 1915(c) HCBS waivers which offer that service option?

Date Added/Revised: 3/20/20

Yes, the residential service may be provided. Providers should monitor staff and should not allow any DSP who has been exposed to someone who tested positive for COVID-19 or who is displaying symptoms to provide the care.

Q25: In the event that there are periods of time when people are asked to stay at home, will the DSP or PDS employees be permitted to provide in-home care to 1915(c) waiver participants?

Date Added/Revised: 3/20/20

Yes, if the service being provided by the DSP or PDS employee is emergent, meaning that without the service the participant would be placed in danger or the person would lose functioning that could never be restored, the care may be provided. The DSP or PDS employee should not provide care if he/she has been exposed to someone who tested positive for COVID-19 or who is displaying symptoms.

Q26: Will DMS, the Department for Aging and Independent Living, and the Department for Behavioral Health, Developmental and Intellectual Disabilities continue provider certification visits during the COVID-19 state of emergency?

Date Added/Revised: 3/20/20

DMS is suspending most provider certification visits for at least sixty (60) days, to reduce non-essential use of limited state staff. Pre-certification visits and visits for investigations related to the health, safety and welfare of participants will still be conducted. DMS issued a provider letter on March 17 with more information on provider certification and monitoring during the COVID-19 state of emergency. The letter is available at

https://chfs.ky.gov/agencies/dms/ProviderLetters/1915cprovidercertificationscovid19.pdf.

Section 3: Questions and Responses – 3/24/20

Q27: On March 17, 2020, Governor Andy Beshear mandated that all adult day cares close. Does this include ADHCs and ADT sites?

Date Added/Revised: 3/24/20

Yes, this includes all ADHC and ADT sites. More information on the Governor's order can be found at https://kentucky.gov/Pages/Activity-stream.aspx?n=GovernorBeshear&prld=95. DMS issued guidance to ADHC and ADT providers on March 24, 2020. The guidance is available at https://chfs.ky.gov/agencies/dms/ProviderLetters/1915cadhcadtclosurescovid19.pdf.

Q28: Will ADHCs and ADTs be receiving guidance on their temporary closure as mandated by the Governor?

Date Added/Revised: 3/24/20

Yes, DMS sent a letter on March 24, 2020. The letter is available at https://chfs.ky.gov/agencies/dms/ProviderLetters/1915cadhcadtclosurescovid19.pdf.

Q29: Due to the Governor's order to close ADHC and ADT sites, do ADHC and ADT services need to be end dated in the MWMA?

Date Added/Revised: 3/24/20

No, please do not end date the ADHC or ADT service line in the plan of care within MWMA.

Q30: For participants who only receive ADHC or ADT services, if they cannot receive these services for sixty (60) consecutive days or more, do I need to dis-enroll the participant?

Date Added/Revised: 3/24/20

No, do not discharge or dis-enroll waiver participants due to the temporary closure of his/her ADHC or ADT even if the closure extends beyond sixty (60) days. DMS does not need an extension request for this circumstance. Update the person-centered service plan and keep detailed notes that cite the COVID-19 state of emergency as the reason service is not being delivered.

The waiver participant and the case manager/support broker/service advisor should work together to meet service needs in other ways during the ADHC or ADT closure, such as using natural supports or through remotely delivered or telehealth services.

Q31: If ADHC or ADT staff is planning to provide in-home services to participants who need care during the temporary closure, how should this be billed? For example, an ADHC staff member might provide Attendant Care.

Date Added/Revised: 3/24/20

If you are an ADHC or ADT who plans to provide individualized, in-home services at a one-to-one staff to participant ratio, the case manager can modify the plan to reflect the appropriate waiver service such as Personal Care, Homemaking, Attendant Care, etc.

If providing remote or telehealth services to a participant, continue to request and bill ADHC or ADT services.

Q32: Can provider agencies or PDS employers use background checks on an employee that were completed by a different provider agency or PDS employer?

Date Added/Revised: 3/24/20

Yes, this is allowed during the state of emergency.

Q33: Can a PDS employee be permitted to work overtime to reduce gaps in service caused by the COVID-19 state of emergency?

Date Added/Revised: 3/24/20

Yes, overtime is allowed during the COVID-19 state of emergency, if necessary, to address the health, safety and welfare of the 1915(c) HCBS participant. The need for overtime should first be discussed with the case managers/support broker/service advisor, who is responsible to document this need and update the emergency person-centered service plan.

Please note that if there has not been a change in the participant's overall health and community-based status and no disruptions in services as a result of the COVID-19 virus, increasing services should not be required. DMS will be conducting retrospective reviews of service increases to ensure these were implemented for appropriate, emergency-related reasons.

Q34: Can the approval process for hiring immediate family members as PDS employees be temporarily waived to deal with service disruptions, such as the closure of ADHCs and ADTs, and staffing shortages caused by the state of emergency?

Date Added/Revised: 3/24/20

Yes, DMS is temporarily waiving the additional screening and approval process to hire immediate family members as PDS employees. Potential employees must still initiate a background check and other screenings, however, they can begin providing services while waiting for the results. If the results of a background check or other screening make the employee ineligible, services will be allowed to continue until an alternative employee is found. The only exception is in cases where the employee poses immediate jeopardy to the health, safety, and/or welfare of the participant or has a

substantiated finding of past abuse, neglect or exploitation or a violent felony.

Q35: How should the support broker/service advisor add new PDS employees during the state of emergency?

Date Added/Revised: 3/24/20

New PDS employees can be added in the comments in MWMA if they are being added due to the state of emergency.

Q36: Will there be a grace period on the annual requirements for maintaining PDS employee eligibility?

Date Added/Revised: 3/24/20

Yes, DMS will temporarily allow services to be initiated before confirmation of certain eligibility requirements such as tuberculosis risk assessments and screenings, CPR/first aid and other trainings, and providing a copy of driver's licenses. The case manager/support broker/service advisor is responsible to ensure it is documented that these requirements have not been met due to the state of emergency. These requirements will be reinstated at the end of the emergency so, if possible, employees continue to work to confirm these pre-employment requirements.

Q37: Will electronic delivery of timesheets be accepted during the state of emergency?

Date Added/Revised: 3/24/20

Yes. Electronic delivery of timesheets is already permitted and DMS encourages any provider not currently accepting them electronically do to so during the state of emergency. If your agency does not have a method in place for accepting timesheets electronically, they can be submitted by email or fax if accepted by the agency.

Q38: What will DMS accept as an official signature on PDS timesheets during the state of emergency?

Date Added/Revised: 3/24/20

Timesheets can be signed by hand, by email or verbally attested to. If using verbal attestation, the support broker/service advisor must document the source of verbal attestation, the date and time, and note that it was verbally attested to due to the COVID-19 state of emergency. Please note that timesheets are still to be accurately completed and adequately reviewed before signing or attesting to timesheet contents. Laws related to fraud, waste and abuse of Medicaid services are still applicable during the state of emergency.

Q39: What if a support broker/service advisor makes an error on a timesheet? Can this be corrected without having to send it back?

Date Added/Revised: 3/24/20

During the state of emergency, the support broker/service advisor may make minor corrections to the time sheet, such as adjusting a.m./p.m. or correcting hour totals based on review of the document and with the approval of self-directed participant / PDS representative. When the support broker/service

advisor makes a correction, they should sign and date it. Hours are <u>not</u> to be changed at the sole discretion of the support broker/service advisor and must include the consent of the participant or designated representative.

Q40: Can a PDS employee who is unable to work due to the COVID-19 state of emergency file for unemployment?

Date Added/Revised: 3/24/20

PDS employees may file for unemployment if they meet the eligibility requirements. This can be done through the Kentucky Career Center website at kcc.ky.gov.

The website is available from 7:00 a.m. EST to 7:00 p.m. EST Monday through Friday and 10:00 a.m. to 9:00 p.m. EST on Sundays. To reduce strain on the system, individuals are asked to file claims on a certain day of the week based on the first letter of their last name.

Sunday: A-D
Monday: E-H
Tuesday: I-L
Wednesday: M-P
Thursday: Q-U

Friday: V-Z or if you missed your day.

PDS employees can also reach out to the support broker or service advisor for additional information on whether they have paid into unemployment.

Q41: If a newly hired agency employee has not worked in the field, can they complete required trainings while working?

Date Added/Revised: 3/24/20

Yes, this is allowed during the COVID-19 state of emergency. The only trainings DMS is requiring be completed during the state of emergency are ones related to the health, safety and welfare of waiver participants, such as medication administration.

Q42: Do agency employees in Michelle P. Waiver (MPW) and Supports for Community Living (SCL) still need to complete individualized instruction and medication administration training before working independently?

Date Added/Revised: 3/24/20

Yes, but during the state of emergency these can be completed remotely.

Q43: Will level of care (LOC) determinations and prior authorizations be extended?

Date Added/Revised: 3/24/20

No, not at this time. There are processes in place to allow assessments / re-assessment and personcentered planning to continue, which should allow for the required activities needed to maintain current LOC determinations and prior authorization issuance. This includes allowing these visits to be conducted via phone or virtual options (such as FaceTime, Skype, etc.). If an LOC or PA needs to be

extended and you are unable to follow guidance provided, please email the 1915(c) Waiver Help Desk at 1915cWaiverHelpDesk@ky.gov for assistance.

Q44: Will there be extensions for exceptional supports in the SCL waiver?

Date Added/Revised: 3/24/20

Automatic extensions will not be granted. Case managers / support brokers / service advisors must still submit the required information found in <u>SCL provider letter #A-49</u>, however, they can work with providers through email and do not need to go see the participant in-person during the state of emergency to finalize an exceptional supports request. If a case manager/support broker/service advisor is unable to gather a piece of the documentation, please contact the Department for Behavioral Health, Developmental and Intellectual Disabilities for guidance.

Q45: A waiver participant is experiencing difficulty finding needed supplies, such as incontinence supplies. How can providers help them?

Date Added/Revised: 3/24/20

DMS will allow Goods and Services providers to provide supplies to participants in all waivers, regardless of which waiver the provider typically services. For example, a provider who only bills Goods and Services through HCB can bill for this service using any waiver during the state of emergency. Providers of goods and services who are authorized by Medicaid programs in other states may also furnish and bill for supplies.

Q46: Can Specialized Respite supervisory visits be conducted via phone during the COVID-19 outbreak?

Date Added/Revised: 3/24/20

Yes, this is allowed via phone if monitoring staff. Calls should be conducted by qualified supervisory staff.

Q47: When will agencies receive site visit extension letters?

Date Added/Revised: 3/24/20

DMS is reviewing which agencies are due for site visits and certifications during the next sixty (60) days. Those providers who qualify for an extension will receive a letter before their contract expiration date and/or Office of Inspector General license expiration date.