

Issues List

18 March, 2020

Priority	Service	Agency	Issue
1	DD Waiver Residential	DMAS	Extend the protocols developed for nursing homes for testing, procurement of extended supplies of medication and/or PPE, etc to all community ICFI/DDs and DD Waiver Residential
1	DD Waiver Day	DBHDS	Where providers are still able to do limited CE/CC, authorizations are being pended until a "back-up" plan is described for an instance where the DSP can not provide the service. This practice needs to be ended; the providers have always had that responsibility!
1	All	Both	Allow exception the 15 day rule for Fieldprint appointments; as Fieldprint locations continue to close appointment will need to be accepted if "first available;" DBHDS may need to provide other alternatives if the travel distance to a Fieldprint site is prohibitive
1	DD Waiver Residential	Both	If the state makes any effort to provide or arrange day care for employees of hospitals, nursing homes or other health care facilities - be sure that DD Waiver program staff are included on the list of those who can access the service
3	DD Waiver	DBHDS	Establish a "hotline" for providers to call to report/discuss the changes being made that may be in "violation" of a Licensing Regulation - ensure that the individual who responds has both the knowledge base and the authority to speak on behalf of the Department.
In Process	CMHRS	DMAS	Clear communication on the use of remote supervision across services/MCOs and some allotment for monitoring client safety via phone or video chat; TDT alternatives and a
In Process	DD Waiver Residential	Both	Allow a three month extension for annual training, performance evaluations, competency reviews, etc: the provider can change their policy for annual training and performance evals (as with any policy change the OL Specialist needs to be notified); the issue of competencies is being reviewed by DMAS
No	DD Waiver Residential	DBHDS	Service modifications need to be available for residential relocations that are either "necessary" or already being planned. Site visits should not be as problem as those are done before occupancy
No	Licensed Programs	DBHDS	Renewals for licenses need to be postponed and licenses extended for 3 months rather than done as desk audits; staff capacity for preparing the "packages" to be emailed simply will not exist.
No	DD Waiver Residential	Both	Allow residential providers to hire from Licensed DP sites with exceptions - accept a copy of the eligibility letter for Criminal Hx, Proof of Waiver Training, First Aid/CPR etc

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No longer applicable	DD Waiver Day	Both	Establish some flexibility CE/CC providers to limit the amount of "engagement" as it may be contrary to guidance for social distancing; allow providers who do both Group Day and CE to do the same so they can continue to bill at expected levels
✓	DD Waiver	DMAS	Extend the EVV "go-live" date; has been extended to June 30
✓	DD Waiver Residential	DMAS	All face-to-face requirements suspended until "end of emergency" - CM should attempt to conduct visit telephonically and/or using a video chat and document the same type of information that would be obtained in a face-to-face making note of the COVID19 restrictions
✓	DD Waiver Residential	DBHDS	Suspend NCI visits in a residential site
✓	DD Waiver Residential	DBHDS	Suspend "routine" visits by Licensing or OHR staff
✓	All	Both	Allow staff to have been laid off to be "rehired" by the same agency without having to repeat the criminal background check, etc. This can be done if the staff are not separated from employment -they may still apply and receive unemployment under the relaxed rules IF the employer simply reduces their hours to zero
✓	DD Waiver	Both	Allow Annual Plans meetings to be telephonic and accept the CMs attestation of the participants; signatures need to be obtained within 45 days of the end of the emergency; CM must document the who, what, where and why of the approval obtained by phone
✓	DD Waiver	Both	Allow, as appropriate, TC to be done by video conference or telephonically
✓	DD Waiver Residential	Both	Recognize that decisions are being made on a daily basis and that submitting modifications to an individual's plan or documenting why changes are being made on a daily basis should not be the staff's highest priority!
Under Discussion	DD Waiver Residential	DMAS	Implement rate increases to cover added overtime for residential providers
Under Discussion	DD Waiver Residential	DMAS	Suspend QMR activity; QMR will be modified and not done "on-site" - number and scope still being reviewed
Under discussion	DD Waiver	Both	Allow expedited or retroactive authorizations for in-home and related services that need to increase to accommodate closures

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Under Discussion	DD Waiver Residential	Both	Allow a 3 month extension of the current plan if a meeting can not be held at all; extensions require permission of CMS through the 1135 Waiver
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