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MEMORANDUM TO DIVISION EMPLOYEES, SERVICE, AND TCM PROVIDERS

FROM: Val Huhn, Division Director

RE: Waiver Rule Exceptions and Operational Changes in Response to COVID-19

The Coronavirus (COVID-19) pandemic is rapidly evolving. The Missouri Department of Health and Senior Services (DHSS), Missouri Department of Mental Health (DMH), Division of Developmental Disabilities (Division) and the Department of Social Services (DSS) gives highest priority to the health, safety, and well-being of individuals with disabilities, families, staff, and all Missourians. As a community provider you are dealing with this national emergency. Our unified goal is to support your efforts by providing as much flexibility in regulatory requirements as possible and support your financial viability during this time when revenues are uncertain and unstable.

Below are exceptions being made to our 1915(c) waiver requirements, as well as changes to Division practices, in order to provide relief to our provider network and the entire system during this state of emergency. These changes will suspend the requirement during the state of emergency. Once the emergency passes and business begins to return to normal, the state along with providers will need to develop a plan to bring all suspended requirements back into compliance. To the extent possible, if a provider is able to maintain compliance with the requirement, they are encouraged to do so in an effort to save time on the other end. It is important to note that these temporary changes do not negate documentation requirements relative to service documentation, logging, expenditures, etc. The following practices are being implemented immediately, and the authority to bill services using these alternative methods will extend back to the date of the emergency.

To support guidance around social distancing and minimizing community spread, the Division is implementing the following practices to minimize or eliminate face-to-face visits:

- **Face-to-Face Requirement** is being modified for all waiver services, except transportation and environmental modifications, to allow delivery by telephone, video, text, email, if practical and necessary. This includes but is not limited to support coordination monitoring, ISP meetings, QE Nurse Oversight Reviews, etc. Some of these monitoring activities are being suspended and are covered below. *Special Note:* Responsibilities around support coordination remain the same—frequency of monitoring, contact with individuals on caseload, ISP planning, etc. Only the method of delivering the service is changing. If the health or safety of an individual is thought to be in jeopardy, the support coordinator will respond in person and act accordingly.

An Equal Opportunity Employer; services provided on a nondiscriminatory basis.

- **Telehealth** may be used to provide traditional face-to-face services if practical. We encourage providers to be innovative in providing ABA, personal care assistance, day program, employment and other services.
- **Expanding Group Home, ISL, and Share Living Setting** to help manage number of people in the home and provide staff continuity.
 - Family or agency staff may live at the residence in order to reduce the number of people in and out of the home. Family members would have to become employees of the agency. Agency would continue to bill group home/ISL service as usual.
 - Individuals currently living in group homes or ISLs may go home to live with family, legally responsible party, or agency staff as a way to reduce number of people in the residence and provide staff continuity. Family members would have to become employees of the agency. Agency would continue to bill for group home/ISL service as usual.
 - Individuals currently in a shared living arrangement may move in with family, legally responsible party, or other staff member if the shared living provider becomes ill and unable to provide care. Family members would have to become employees of the agency.

If the provider is going to bill for the service and pay the family member or legally responsible party the family member/legally responsible party would have to become an employee of the agency and be subject to background check through the Family Care Safety Registry. Any person 18 years or older living in the household would also be subject to a background check.

- **Expanding day habilitation setting** to allow day habilitation staff to provide day habilitation in a residential setting or the family home to reduce or eliminate congregate settings, support residential staff with additional staffing needs, and support agency revenue and viability.
- **Expanding Service Settings to Include Hospitals.** Providers will be paid for services provided in support of an individual who is hospitalized or in a short-term institutional stay. We know that hospital staff will be stretched to the limit, so any support we can provide may be appreciated. This will be dictated by hospital policy.
- **Medical Transportation.** All waiver providers will be able to provide transportation for medically related reasons. Providers should bill for the time it takes to provide the transportation as an extension of the service being provided. Providers **will not** need to add transportation as a service.

To support providers through staffing shortages, the following allowances are being implemented:

- **Family as Caregivers**—All non-licensed waiver services may be provided by family caregivers or a legally responsible relative, but the family member must be employed by a DMH contracted provider. Family members would need to pass the Safety Care Registry background check.
- **Family Transportation**—Waiver providers will be able to reimburse families for transportation in lieu of waiver provider staff providing transportation.
- **Training Exceptions**—The Division is relaxing requirements around initial and recertification for First Aide, CPR, and Mediation Administration. Additional guidance to follow. Staff will be

required to come into full compliance after the state of emergency has passed for employees who remain with the agency. It is critical that all employees are trained on the individual's ISP which would cover physical and behavioral health and related support needs.

- **Education Requirement**—The Division is suspending the requirement to have educational status verification for positions requiring documentation level of education. Agencies will have to come into compliance after state of emergency has passed for employees who remain with the agency.
- **Staff Qualifications**—Staff who are qualified to provide services under any service definition in the 1915(c) waiver may be reassigned to provide Group Home, ISL, Shared Living, Out of Home Respite, and Personal Assistant services.

In order to reduce administrative burden to the entire system, the following practices are being implemented:

- **Assessments**
 - Initial assessments MOCABI, Vineland and SIS will be completed through non-face-to-face methods including telephone or non-public facing remote communication methods. Examples of non-public facing products include Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype. It is important to note that Facebook Live, Twitch, TikTok, and similar video communication applications are public facing and should not be used in the provision of telehealth.
 - Annual re-assessment process will be modified to allow for completion without the need for face-to-face meetings.
- **Verbal Authorizations** —To avoid delays in processing authorizations, verbal or electronic approvals using phone, email, or text will be accepted. Approvals will be documented with the authorizing party's name and a note "via [insert method]". Approvals may be backdated during this emergency period.
- **Centralized Utilization Review** —In order to expedite an influx of service authorizations, a special team will be established to support the increased workload and ensure authorizations are entered timely.
- **Suspending Service Reviews** —We understand that providers will be retooling and repurposing staff to meet the health and safety needs of the people they are serving; therefore, the Division is temporarily suspending the following reviews:
 - TCM TAC ISP Reviews
 - TCM Annual Reviews
 - Provider Relations Reviews
 - Business Office Reviews
 - NCI Surveys
 - Fiscal Reviews
- **Investigations & Inquiries** —Activities will continue but will be prioritized and addressed accordingly.

In order to mitigate financial losses and maintain provider stability and capacity, the Division is working on the following measures to maintain the provider network through this crisis:

- **Retainer Payments**—The State will make retainer payments available for waiver services when the individual is hospitalized or absent from his/her home for a period of no more than 30 days.
- **Gap Payments**—In the event of reduction in billable time due to the circumstances around COVID-19, the Division will offer supplemental funding to providers to offset the loss of revenue.

Please utilize the following sites as your points of authority for the most current information.

- Regularly monitor the situation on CDC's COVID-19 webpage
www.cdc.gov/COVID19
- Subscribe to the CDC's COVID-19 newsletter
<https://tools.cdc.gov/campaignproxyservice/subscriptions.aspx>
- Regularly monitor COVID-19 on the DHSS website
www.health.mo.gov/coronavirus
- Participate in Division weekly update webinars
<https://dmh.mo.gov/dev-disabilities/webinar>
- Monitor DD website for updated information specific to DD services and operations
<https://dmh.mo.gov/dev-disabilities/covid-19-information>
- Follow your local health department communications for updated information
<https://health.mo.gov/living/lpha/lphas.php>

I know there remains a lot of questions. Our staff is working as expeditiously as possible to develop additional guidance. Thank you in advance for your patience as we work through these unprecedented times.