Background

The Department of Human Services, Aging and People with Disabilities (APD) recognizes and values the services that Adult Day Services (ADS) provides to seniors and people with disabilities. Since March 2020, APD made the difficult decision to close ADS Centers to protect vulnerable Oregonians from the spread of COVID-19.

To provide the critical services to Oregonians, APD is developing ADS Alternative Services to allow ADS program to provide eligible participants services outside of the typical ADS center.

This document has been revised after receiving a response from OAADS to the original proposal that was provided on August 13, 2020. The changes are underlined.

Sustainability Payments

<u>APD will continue to offer the sustainability payment of up to 75% of the</u> previously billed services through December 31, 2020. APD agrees to revisit this payment structure in December 2020

- If the ADS billing is less than 75%, a sustainability payment will be provided to bring up to 75%.
- If the ADS billing is equal to or greater than 75%, no additional sustainability payment will be provided for that month.
- <u>Billing that includes any request for sustainability payment must be</u> requested within 90 days from the end of the payment period.

Eligibility

Alternative Services must be prior authorized by the case manager. The prior authorization form will include:

- Which service(s) are authorized;
- The authorization period; and
- Any specific tasks that are person centered for the participant to receive.

These services are typically offered to participants that live in their own home.

However, these services may be allowed for participants living in an Adult Foster Home with Central Office approval.

Approval process for current participants:

- Upon the start of Alternative Services, each participant will be automatically authorized through December 31, 2020
- <u>A new authorization will be completed by the case manager for any</u> <u>authorizations after December 31, 2020. The authorizations will last</u> <u>until the participant's eligibility for services needs to be reviewed and</u> <u>renewed.</u>

Approval process for new participants or current participants after December 31, 2020:

- <u>The case manager refers the potential participant for ADS alternative</u> <u>services consideration</u>
- If the ADS accepts the individual, the prior-authorization form is completed.
 - If the participant lives in an AFH, the request is submitted to Central Office for approval.
- <u>The form is provided to the ADS to demonstrate approval (assuming</u> <u>Central Office approval for AFH participants) and appropriate effective</u> <u>dates.</u>

ADS providers may reach out to the ADS coordinator as needed to assist with moving the authorization process. In addition, the ADS coordinator will have a list of ADS participants that were receiving this service prior to the ADS sites closing down.

General Services Guidance

An ADS program providing services during the COVID-19 pandemic must follow all Oregon mandates and CDC and OHA guidance. This includes:

- Staff and consumers wearing face coverings (unless medically exempt);
- Ensuring social distancing is maintained as much as possible;

- Appropriate hygiene and sanitization practices are practiced before, during and after any contact with a participant and after each service is provided;
- Health screenings of participants and staff will occur each day;

The ADS site may be utilized, however no more than two participants may be at the site at a time. If there are two participants at the ADS site at the same time, the following conditions must be met:

- <u>Staff to follow safety guidelines set forth when moving from one</u> <u>participant to another and provide stable care environments whenever</u> <u>possible</u>. Participants must be in separate rooms.
- No shared facilities (i.e. bathrooms) or if shared, fully sanitized after each participant or staff uses the facilities.
- <u>An exception to the two-participant maximum at an ADS site at one</u> <u>time may be requested if the participants live in the same home.</u>

Billing

In the near term, ADS will need to submit an invoice (provided by APD) for the Alternative Services. When invoicing for the service, the ADS will report a summary of the services that were provided for each approved service. Details will be provided on the invoice. APD is looking at options to streamline the billing process.

If an authorization expires, the ADS provider may decide to continue providing services to the participant. However, payment shall not be provided unless the case manager provides an authorization to deliver the services. During the emergency period, the service may be retroactively approved.

Reporting

APD requires the ADS to report a summary of the services provided for each individual served every 90 days or when requested by the case manager. All reports will be sent to the CM.

Approved Services

Health Related Services Level 1

Health Related Services Level 1 (HRS1) are services provided by the ADS to participants by <u>non-licensed</u> staff. The non-licensed staff may receive direction from licensed staff (see next service) in order to perform these tasks successfully. These services should be tied to the goals of the participant, are person-centered, and goes beyond providing typical ADL care.

Here are some services that it may include (but not limited to):

- Coming to the home to provide bathing or other assistance due to the additional support that is needed during the activity;
- Taking the participant out on an outing that supports their cognitive well- being;
- Providing range of motion exercises for skills training and to improve independence;
- Provide cognitive based activities in the participant's care setting or community
- Complex medication management as delegated by a RN.
- Provide meal preparation assistance if medically prescribed
- 1:1 supports for the participant
- Provide skills training to assist the individual in gaining, maintaining or enhancing their independence and well-being.

Authorization:

- The Case Manager (CM) will authorize the service
- The ADS will determine the number of hours to provide each day, based upon the defined needs
- The ADS may provide up to 25 hours each week

Rate: <u>\$30 per hour</u> (15-minute increments), .485 per mile when the participant is being transported by ADS staff.

HRS Level II

HRS Level 2 (HRS2) are services provided to the participant by <u>licensed</u> staff. Any licensed staff, such as a RN, LPN, or other health professional may qualify as licensed staff. These services should be tied to the goals of the participant and is person-centered. Services may be "hands-on" with the individual or as

part of an evaluation process to train other staff (for HRS Level I care) to perform certain health related services.

Along with the services mentioned above, here are some additional services that it may include (but not limited to):

- Habilitation support by licensed staff;
- Evaluation of needs in order to provide training/guidance to nonlicensed staff;
- Music or other cognitive therapy

Authorization:

- The CM will prior-authorize this service.
- The ADS will determine the number of hours to provide each day, based upon the defined needs.
- The ADS may not provide more than 5 hours per week for this service.

Rate: <u>\$85</u> an hour (15-minute increments). Please note that time spent transporting a participant should be billed under HRS Level I.

(APD is willing to review this rate again if the ADS providers intending to provide this service can demonstrate the rate does not cover the providers' costs.)

Telehealth Cognitive Services

These services are provided remotely through a telehealth method. These services support the cognitive and emotional well-being of the participant. The specific services provided are broad based, however it must be therapeutic in nature and can be successfully delivered through telehealth. These services should be tied to the goals of the participant and be personcentered.

Authorization:

• The CM will prior-authorize this service.

- The ADS will determine the number of hours to provide each day, based upon the defined needs.
- The ADS may not provide more than 10 hours per week for this service.
- The ADS may provide this service with other participants at the same time.

Rate: <u>\$20</u> an hour (15-minute increments) for individual sessions. <u>\$15</u> an hour (15-minute increments) per participant for group sessions.

Respite Care

Respite care is short-term care and supervision provided because of the absence, or need for relief, of <u>unpaid</u> providers that normally provide the care to participants.

Respite Care is only available to in-home consumers. It may be provided in the participant's home or the ADS facility. Respite care may only be authorized when an individual relies on natural supports for their ADL/IADL support needs.

Authorization:

- The CM will prior-authorize this service.
- The ADS will determine the number of hours to provide each day, up to a maximum of 8 hours per day.

The ADS may not provide more than 40 hours per week for this service.

Rate: <u>\$30</u> per hour (15-minute increments), .485 per mile when the participant is being transported by ADS staff.