

## SUMMARY OF COVID-19 POLICY MODIFICATIONS

### PERIOD COVERED – JULY 24, 2020

This summary of modifications is designed to guide the review of new and revised content published at <https://gadbhdd.policystat.com> as it relates to each iteration of the **COVID-19 2020: DBHDD Community Behavioral Health Services Policy Modifications** policy. This policy was instated during the COVID-19 coronavirus pandemic, while the State of Georgia declared a Public Health Emergency.

The responsibility for thorough review of the policy content remains with the Provider.

Policy Date	Policy Item #	Original Policy Impacted by the Modification	Summary of Modification
7/24/2020	1.  2.	<a href="#">CSU: Medical Evaluation Guidelines and Exclusion Criteria for Admission to Crisis Stabilization Units, 01-350</a>  <a href="#">CSU: Evaluations and Admissions, 01-330</a>	Enhancements made to admissions criteria for CSUs.



Georgia Department  
of Behavioral Health  
& Developmental  
Disabilities

**VERSION 7**

**COVID-19 2020: DBHDD Community Behavioral Health Services  
Policy Modifications**

**EFFECTIVE 7/24/2020**



Current Status: *Old*

PolicyStat ID: 8366536



Georgia Department  
of Behavioral Health  
& Developmental  
Disabilities

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Owner: *Monica Johnson, MA, LPC:  
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Chapter: *Admin Issues for BH & DD  
Services*

Sections:

## COVID-19 2020: DBHDD Community Behavioral Health Services Policy Modifications - 7/24/2020

### EFFECTIVE IMMEDIATELY

### APPLICABILITY

DBHDD Providers of Community **Behavioral Health** Services

### POLICY

In response to the continued transmission of COVID-19, where necessary new measures are in effect to minimize community spread of the virus, and to assist in the continued delivery of community behavioral health services.

**Modifications** as described in this policy refers to the restriction, enhancement, relaxation, and partial or full suspension of existing policies in PolicyStat, as applicable to the service. This policy includes full details of the alternate requirement(s) or procedures.

The following temporary modifications to the policies listed below are pertinent to community behavioral health services, effective immediately. Please refer to the full policy via the hyperlink, noting the alternate requirements applicable until further notice.

This policy will be updated as necessary. This policy remains in effect until the Governor of the State of Georgia lifts the Emergency Declaration.

1. **Temporary enhancements** are made to the requirements stated in [CSU: Medical Evaluation Guidelines and Exclusion Criteria for Admission to Crisis Stabilization Units, 01-350](#)

- a. Section A

A new version of the Medical Evaluation Guidelines & Exclusion Criteria for Persons Referred for Admission to Crisis Stabilization Units (Attachment A). See Item 9 which allows quarantine or isolation as needed to treat COVID positive individuals.

- b. Section D.3

COVID-19 positive status cannot be the sole reason for denial of care. Additional input and documentation from CSU Medical Director and Leadership is required for a denial.

2. A **temporary enhancement** is made to [CSU: Evaluations and Admissions, 01-330](#):
  - a. CSUs refer to the 7/24/2020 version of Attachment A (Exclusionary Criteria) of 01-350, to allow isolation or quarantine as needed to ensure continued access as required of an Emergency Receiving and Evaluating facility.
3. Behavioral Health Providers categorized as Tier 1 or Tier 2 are required to adhere to standards and key performance indicators as outlined in [Comprehensive Community Provider \(CCP\) Standards for Georgia's Tier 1 Behavioral Health Safety Net, 01-200](#) and [Community Medicaid Provider \(CMP\) Standards for Georgia's Tier 2 Behavioral Health Services, 01-230](#). Due to the impact of the COVID-19 pandemic, DBHDD has delayed the reporting requirements outlined in [Process for Reporting Compliance with Standards for Tier 1 Comprehensive Community Providers \(CCPs\), 01-225](#), [Process for Reporting Compliance with Standards for Tier 2 Community Medicaid Providers \(CMPs\), 01-249](#), [Process for Reporting Compliance with Standards for Tier 2 Community Medicaid Providers \(CMP+\), 01-249a](#), and [Standards and Key Performance Indicators for Providers of Community Crisis Services, 01-270](#). A **temporary relaxation** of the report due dates is permitted as follows:
  - a. Tier 1, Tier 2, Tier 2+, and Community Crisis Services  
The reporting due date for the "Performance Monitoring Report" (PMR) has been extended to October 1, 2020. The reporting period will remain the same (July 1, 2019 – June 30, 2020). The PMR portal will open for providers September 1, 2020.
  - b. Tier 1  
Activities related to community stakeholder surveys will be delayed and not initiated until the summer.
  - c. In the following reporting year the reporting schedule outlined in [01-225](#), [01-249](#), [01-249a](#), and [01-270](#) will resume.
4. **Temporary suspension** of the site visit requirement for behavioral health provider enrollment, per [Recruitment and Application to become a Provider of Behavioral Health Services, 01-111](#) are permitted as follows:
  - a. New Applicants
    - i. Site visits are currently suspended for new providers. Applications for new providers will remain in a pending status until site visits resume.
  - b. Existing Providers
    - i. Site visits for new sites are suspended. Site visits will be waived for existing DBHDD approved providers applying for services at an existing approved site or a site that is currently licensed by Healthcare Facility Regulation (HFR). Pending applications that require a site visit and do not meet these criteria will remain in pending status until site visits resume.
  - c. Applicant Forum
    - i. Applicants must have attended one of the two most recent BH Provider Enrollment Forums (held August 14, 2019 and December 11, 2019) to be eligible to submit a Letter of Intent (LOI) during this enrollment cycle. LOIs must be submitted to the Georgia Collaborative via email at [GA\\_Enrollment@Beaconhealthoptions.com](mailto:GA_Enrollment@Beaconhealthoptions.com).

LOIs submitted before May 1 or after May 31 will not be accepted or processed. LOIs submitted via USPS mail may experience delays in processing. It is highly recommended to submit LOIs via email.

5. A **partial suspension** of the fingerprinting requirement described in [Criminal History Record Check for DBHDD Network Provider Applicants, 04-104](#) is permitted as described below **only if fingerprinting services are not available in your area**:
  - a. DBHDD's Provider Network must have each person subject to Policy 04-104 complete the "Network Provider Applicant Attestation," **Attachment A** to this policy, instead of completing the fingerprint based background check stipulated in Policy 04-104.
  - b. Within sixty (60) days of cessation of the Public Health Emergency, all persons who signed the Network Provider Applicant Attestation instead of completing the fingerprint based background check must complete a fingerprint based background check as required by Policy 04-104. The provider is responsible for sending any person who signed the Network Provider Applicant Attestation for a fingerprint based background check.
  - c. The provider is also responsible for sending to DBHDD's Criminal History Background Check (CHBC) section each signed Network Provider Applicant Attestation, while retaining a copy in the applicant's personnel file. The provider must send the signed and dated Attestation to CHBC, and acknowledge receipt of an email from CHBC confirming acceptance of the Attestation, before the applicant begins working. The Individual Assessment process set forth in section D of Policy 04-104 does not apply to persons who sign the Network Provider Applicant Attestation.
  - d. The Attestation cannot be used by Network Provider Applicants who were fingerprinted for a fingerprint- based background check within sixty (60) days prior to the declaration of the Public Health Emergency.
6. A **partial suspension** of the income verification requirements using tax returns, pay check stubs, verification of benefits from other federal or state agencies as stipulated in Sections B.3 and F.2 of [Payment by Individuals for Community Behavioral Health Services, 01-107](#) has been made as follows:
  - a. For the period of the Public Health Emergency related to COVID-19, DBHDD waives the requirement for income verification to access state funded behavioral health services.
  - b. Provider agencies are required to request attestation of income from individuals served and verify authenticity to the best of their ability.
    - i. If verification is unavailable due to resource constraints related to COVID-19, providers are required to note this in the record. At the end of the public health emergency, providers will be required to verify individuals income status within 90 days.

**DBHDD sincerely appreciates your compliance with these measures throughout this Public Health Emergency.**

## Attachments

[A - COVID-19 2020 - Attestation of Absence of Barrier Crimes Data & Cover Letter 4/23/2020.docx](#)

## Approval Signatures

Approver	Date
Anné Akili, Psy.D.: Director, Policy Management	7/24/2020
Monica Johnson, MA, LPC: Director, Division of Behavioral Health	7/24/2020
Anné Akili, Psy.D.: Director, Policy Management	7/24/2020

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