The recording of this discussion is a snapshot in time.

Due to the rapidly evolving nature of the public health emergency, additional information and implementation plans will be provided through Special Bulletins, GAMMIS banner messages, and other published information.

The PowerPoint slides and recording from today’s presentation will be uploaded to the DBHDD website along with other COVID related material.
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Summary of Submission

Appendix K applications were submitted to Centers for Medicaid and Medicare Services (CMS) for an extension of the Year One authorities and additions on 02/16/2021.

Purpose:
• Primary purpose was to request an extension of the Year One Appendix K approval
• Also, it amended the previous Appendix K applications as follows:
  o NOW/COMP Change – provided intent to increase rates in certain specific services (requested start date of 03/01/2021)

Appendix K Extension Span:
• Begin date extends the original approval date up to six (6) months following the end of the federal Public Health Emergency.
Significant Changes in Appendix K Extension

From the DCH Provider Message posted 03/01/2021:

Directive from CMS:

- The only modification **not eligible** for extension is the use of retainer payments.

- CMS stated in late 2020 that **additional retainer payments will not be approved** in the second year of the public health emergency.
Appendix K Allowances

Due to COVID-19, effective 03/01/2020, the state proposed to temporarily:

• Expand setting(s) where services may be provided
• Permit payment for services rendered by temporary family caregivers
• Increase payment rates
• Modify person-centered service plan development process and individual(s) responsible for person-centered service plan development
• Include retainer payments to address services delivered in settings closed in response to the health crisis [k-2.j]
At-a-Glance: Telehealth (continued)

• Support Coordination
  o Support Coordination uses the telehealth model for all contact with the waiver participant

  ** DBHDD Support Coordination has restarted in-person visits with waiver participants.

• Physical Therapy / Occupational Therapy / Speech Therapy
  o Nursing assessments, reassessments, supervision, and contact with waiver participants may be delivered via telehealth as clinically appropriate by practice acts, state, and federal policy.
  o Physical, Occupational, and Speech Therapy can be provided via telehealth (exception: Swallowing Evaluation by Speech Therapist)
At-a-Glance: Expanded Service Settings (continued)

Temporarily expand setting(s) where services may be provided (K-2.b.iv):

What this means for you:

- Services can be now rendered in new settings due to the public health emergency:
  - Hotels
  - Shelters
  - Schools (virtual)
  - Churches
  - Other approved temporary living situations

- Applicable Participant-directed Services:
  - Community Access Services (CAG and CAI)
  - Respite

Documentation of the need for alternative setting is required AND must be tied to the Public Health Emergency.
Temporarily permit payment for services rendered by family caregivers or legally responsible individuals if not already permitted under the waiver:

What this means for you:

- Family caregivers or legally responsible individuals can be reimbursed for delivering
  - Community Living Supports (CLS)
  - Out of Home Respite

- Family Caregivers or legally responsible individuals will need to be enrolled through the fiscal intermediary agency and established Participant-direction process

FAQs:

Will the temporary family caregiver continue to be employed after the emergency?

No. DBHDD requested this allowance to accommodate concerns about waiver participant risk and isolation recommendations

- Community Living Support Services
- Out of Home Respite
- In-home Respite
- Community Access
At-a-Glance: Modify Support Coordination Activities

• NOTE: Many support coordinators have begun to resume face-to-face contact with exposure precautions in place.

Temporarily modify ISP Planning:
• Individual Service Plan (ISP) meetings can be performed via video conference or telephone.

Please refer to the Appendix K Operational Guidelines on PolyStat for more specifics:
https://gadbhdd.policystat.com/policy/8618606/latest/

What this means for you:
• Support Coordinators will use telephonic or video conferencing for ISP development and editing, instead of face-to-face as needed

FAQs:
What about individual signature?

Support coordinator documents member’s consent for use of electronic signature method and collects a physical signature as soon as safely possible.
At-a-Glance: Increased Payment Rates

• 10% rate increase for the following Participant-directed services:
  o Community Living Support (CLS)
  o Community Access Group (CAG)
  o Community Access Individual (CAI)

• Increase is retroactive to March 1, 2021
Resources
How do I stay informed?

PD Model E-newsletter
PD Model Email Blasts
DBHDD Webinars
DBHDD Website

To request that your email address be added to the electronic mailing list, please contact:

Participant.Direction@dbhdd.ga.gov
COVID-19 guidance from DCH, including the Appendix K Application and Amendments

https://medicaid.georgia.gov/covid-19
or https://dch.georgia.gov/

DBHDD Appendix K Operational Guidelines

https://gadbhdd.policystat.com/policy/8618606/latest/
For general information about COVID-19:
https://dph.georgia.gov/covid

For information about COVID-19 vaccinations:
https://dph.georgia.gov/locations/covid-vaccination-site
State of Georgia Orders and CDC Guidance

Governor’s Office Executive Orders

Department of Public Health Administrative Order
Long-term Care Facility Administrative Order
https://dph.georgia.gov/administrative-orders

CDC Covid-19 Guidance
Questions