

NOW/COMP Appendix K Amendment & Re-Opening Updates

BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities

Division of I/DD
June 24, 2020



“ It is better to be a part of a great whole than to be the whole of a small part ”

~Frederick Douglas

Today's agenda

Welcome from Director
Wakefield

Appendix K Amendment
Updates

Appendix K Billing
Technical Assistance

Reopening Updates &
Recommendations

Q & A

Appendix K Amendment: Policy Updates

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Georgia Department of Behavioral Health & Developmental Disabilities

Ashleigh Caseman, Director of Waiver Services
June 24, 2020



Appendix K Recent Events

June 2nd, 2020 DCH submitted an Appendix K amendment for all Georgia HCBS waivers to CMS. The purpose of the Appendix K submission was to clarify waiver providers ability to bill days in excess of the Nursing Home Retainer Payment limit without the individual returning to service.

June 5th, 2020 DCH was informed by CMS that the request was denied. DCH in response has withdrawn the request as required by CMS.

June 12, 2020 DCH submitted a second Appendix K amendment to CMS for NOW & COMP waivers to request telehealth allowances for Community Access and Prevocational Services at the request of DBHDD.

June 15, 2020 CMS approved the Appendix K amendment to allow telehealth for Community Access and Prevocational Services .

Telehealth Community Access (CA) and Prevocational

- 1 As a result of the Appendix K amendment, Community Access (CAG/CAI) and Prevocational Services can be billed via telehealth while the Appendix K is effective.
- 2 Documentation of services delivered via telehealth must indicate this service delivery.
- 3 Community Access and Prevocational Services delivered via telehealth should be billed using the Place of Service (POS) code '02' .
- 4 Documentation must be consistent with the individual's ISP goals

Community Access Telehealth-Skill Building/Teaching Options

**Social
Distancing
Strategies**

**How to
Properly Wash
Hands**

**How and When
to Wear PPE**

**Discussing
fears**

**Virtual
Exercise Class**

**How to Identify
COVID-19
symptoms**

**How to
Communicate
COVID-19
symptoms**

**Other
Activities**

Prevocational Telehealth-Skill Building/Teaching Options

**Social
Distancing
Strategies**

**How to
Properly Wash
Hands**

**How and When
to Wear PPE**

**Discussing
fears**

**Resume
Building**

**Identifying
Markable
Strengths**

**Video Based
Career
Exploration**

**Discussing plans
to move towards
competitive
integrated
employment**

Retainer Updates General

- Appendix K temporarily includes retainer payments to address emergency related issues
- Retainer payments must be authorized at the level, duration and amount as outlined on the individual's PA
- Providers should bill the service as if it was delivered and document daily the reason for retainer reimbursement
- **Services with retainer option can be reimbursed as retainer payment for 30 consecutive days initially and in increments of up to 7 days following a day of service.**

Retainer Updates Policy Guidance

Initial retainers cannot exceed 30 consecutive days. After the initial 30 day retainer is billed, the provider may bill for up to seven (7) additional days of retainer, in accordance with the following:

1. After the expiration of the initial 30-day retainer period, the staff member for whom the retainer was billed must deliver the service to the individual for a minimum of one encounter before the provider can bill any further retainer for that staff member.
2. An “encounter,” for these purposes, is defined as a minimum of two (2) hours of the service, delivered and billed, with a scheduled agenda and a curriculum that addresses the individual’s person-centered goals, in accordance with the individual’s ISP. The encounter can take place over multiple sessions, however, such multiple sessions must take place in a **single calendar day**.

Retainer Updates Policy Guidance Continued..

3. Once the staff member has delivered at least one encounter of service to the individual, the provider may bill for up to seven (7) additional days of retainer for that staff member, beginning on the later of either (i) the day after the encounter is completed, or (ii) the next day on which the individual would normally receive the service under the individual's ISP
4. If the staff member delivers a second or subsequent encounter of service to the individual, the provider may again bill for up to seven (7) additional days of retainer for that staff member, consistent with item (3) immediately above.

Retainer Updates- Example 1

- ISP authorizes Service for Monday, Wednesday, Friday each week.
- Provider has already billed 30 days of the initial retainer payments for the staff member who delivers the Service to Individual.
- Due to a COVID-19 reason, Provider now limits Service to Individual on Mondays only.
- Staff member delivers 2 hours of the Service to Individual one Monday.
- Provider may bill a retainer payment for that staff member for the following Wednesday and Friday.
- Same staff member delivers 2 more hours of the Service to Individual the following Monday.
- Provider may again bill a retainer payment for that staff member for the following Wednesday and Friday.
- Provider may continue billing retainers in this way for as long as the current version of Appendix K remains in effect.

Retainer Updates- Example 1 Calendar

July 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	June 29 Direct/Telehealth Service Delivery	June 30	1 Retainer: Day 1	2	3 Retainer: Day 2	4
5	6 Direct/Telehealth Service Delivery	7	8 Retainer: Day 1	9	10 Retainer: Day 2	11
12	13 Direct/Telehealth Service Delivery	14	15 Retainer: Day 1	16	17 Retainer: Day 2	18
19	20 Direct/Telehealth Service Delivery	21	22 Retainer: Day 1	23	24 Retainer: Day 2	25
26	27 Direct/Telehealth Service Delivery	28	29 Retainer: Day 1	30	31 Retainer: Day 2	

Operational Guidelines Version 3.0

- The recording of this discussion is a snapshot in time and is subject to change. All current policy information regarding Appendix K can be found within DD COVID-19 policy on PolicyStat



Current Status: *Active* PolicyStat ID: 8127003

 Georgia Department of Behavioral Health & Developmental Disabilities

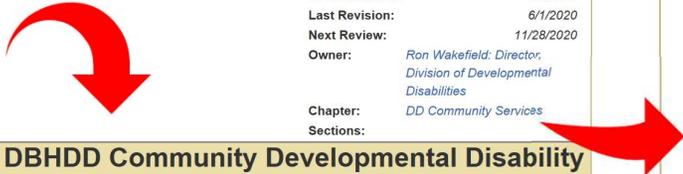
COVID-19 2020: DBHDD Community Developmental Disability Services Policy Modifications - 6/1/2020

EFFECTIVE IMMEDIATELY 

Attachments

-  A - COVID-19 2020 - Attestation of Absence of Barrier Crimes Data & Cover Letter 4/23/2020.docx
-  Appendix K Attachment 1 - NOW and COMP Provider Spreadsheet 4/22/2020
-  Appendix K Attachment 2 - Simplified AS Request Sheet 4/20/2020
-  Appendix K Operational Guidelines for the NOW and COMP Waiver Programs Response to COVID-19 Pandemic, 4/30/2020 Version 2.0
-  B - COVID-19 2020 - Attestation of Absence of Barrier Crimes Data & Cover Letter 4/23/2020.docx

Creation: 3/26/2020
Effective: 6/1/2020
Last Reviewed: 6/1/2020
Last Revision: 6/1/2020
Next Review: 11/28/2020
Owner: Ron Wakefield: Director, Division of Developmental Disabilities
Chapter: DD Community Services
Sections:



How Do I Stay Up to Date?

DBHDD
Newsletter &
PIMS

DBHDD
Webinars

DBHDD & DCH
Websites

To request that your email address be added to the electronic mailing list, please send an email to DBHDD.Provider@dbhdd.ga.gov

For questions related to Appendix K, please use the PIMS link: <https://dbhddapps.dbhdd.ga.gov/PIMS/Default.aspx>

Appendix K Amendment: Billing Technical Assistance

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Georgia Department of Behavioral Health & Developmental Disabilities

Ron Singleton
June 24, 2020



Community Access and Prevocational Services

Technical Assistance for Telehealth Billing

Place of Service Code for Billing Telehealth Services

For telehealth services, providers will submit claims using the procedure codes authorized on prior authorizations in addition to Place of Service Code '02'.

Place of Service Code(s)	Place of Service Name	Place of Service Description
01	Pharmacy **	A facility or location where drugs and other medically related items and services are sold, dispensed, or otherwise provided directly to patients. (Effective October 1, 2003)
02	Telehealth	The location where health services and health related services are provided or received, through a telecommunication system. (Effective January 1, 2017)

Community Access and Prevocational Services

Technical Assistance for Retainer Billing

Procedure Codes/Place of Service Codes for Billing the Retainer

For retainer services, providers will submit claims using the procedure codes authorized on prior authorizations and the Place of Service (POS) code historically used on previous claims such as but not limited to POS '99'.

Place of Service Code(s)	Place of Service Name	Place of Service Description
99	Other Place of Service	Other place of service not identified above.

Retainer Updates Examples Calendar Views

Retainer Updates- Example 1

- ISP says Service is provided Monday, Wednesday, Friday each week.
- Provider has already billed 30 days of the initial retainer payments for the regular staff member who delivers the Service to Individual.
- Due to COVID-19, Provider now limits Service to Mondays only.
- Regular staff member delivers 2 hours of the Service to Individual one Monday.
- Provider may bill a retainer payment for that regular staff member for the following Wednesday and Friday.
- Same regular staff member delivers 2 more hours of the Service to Individual the following Monday.
- Provider may again bill a retainer payment for that regular staff member for the following Wednesday and Friday.
- Provider may continue billing retainers in this way for as long as the current version of Appendix K remains in effect.

Calendar - Example 1

July 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	June 29 Direct/Telehealth Service Delivery	June 30	1 Retainer: Day 1	2	3 Retainer: Day 2	4
5	6 Direct/Telehealth Service Delivery	7	8 Retainer: Day 1	9	10 Retainer: Day 2	11
12	13 Direct/Telehealth Service Delivery	14	15 Retainer: Day 1	16	17 Retainer: Day 2	18
19	20 Direct/Telehealth Service Delivery	21	22 Retainer: Day 1	23	24 Retainer: Day 2	25
26	27 Direct/Telehealth Service Delivery	28	29 Retainer: Day 1	30	31 Retainer: Day 2	

Retainer Updates- Example 2

- ISP says Service is provided Monday, Tuesday, Wednesday, Thursday, and Friday of each week.
- Provider has already billed 30 days of the initial retainer payment for the regular staff member who delivers the Service to Individual.
- Regular staff member delivers 2 hours of the Service to Individual on Monday, June 29.
- Due to COVID-19 concerns, Provider is then unable to deliver the service to the individual again until Monday, July 13.
- Provider may bill a retainer payment for the regular staff member for up to 7 days beginning the next day—i.e. for Tuesday (June 30), Wednesday, Thursday, Friday, and following Monday, Tuesday, and Wednesday (July 8).
- Provider may not bill a retainer for the following Thursday and Friday (July 9 and 10) if no further service encounter by the staff member has occurred.
- However, if same regular staff member delivers at least 2 hours of the Service to Individual on the next following Monday (July 13), Provider may again bill for up to 7 additional days of retainer for that regular staff member, beginning on Tuesday (July 14).

Calendar - Example 2

July 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	June 29 Direct/Telehealth Service Delivery	June 30 Retainer: Day 1	1 Retainer: Day 2	2 Retainer: Day 3	3 Retainer: Day 4	4
5	6 Retainer: Day 5	7 Retainer: Day 6	8 Retainer: Day 7	9 No retainer, because no new service encounter.	10 No retainer, because no new service encounter.	11
12	13 Direct/Telehealth Service Delivery	14 Retainer: Day 1	15 Retainer: Day 2	16 Retainer: Day 3	17 Retainer: Day 4	18
19	20 Retainer: Day 5	21 Retainer: Day 6	22 Retainer: Day 7	23 Direct/Telehealth Service Delivery	24 Retainer: Day 1	25
26	27 Retainer: Day 2	28 Retainer: Day 3	29 Retainer: Day 4	30 Retainer: Day 5	31 Retainer: Day 6	

Additional Billing Guidance DXC Technology

Additional Billing Guidance: Provider Web Portal Navigational Manual

Provider Web Portal Navigational Manual

Georgia Medicaid Management Information System
Fiscal Agent Services Project

Version 4.6

For all MMIS Web Portal billing processes, go to **www.mmis.georgia.gov**

Go to: **Provider Information**

Go to: **Provider Manuals**

Go to: **Web Portal Navigational Manual for Providers**

Provider Contact Center for Additional Billing Assistance

For additional billing assistance, please contact your DXC Provider Representative using the contact numbers below or by using the Contact Us form on the GAMMIS Website (www.mmis.georgia.gov)

Contact Us

Providers with web navigation or Georgia Medicaid questions may contact the Provider Contact Center using one of the methods below:

- Fill out the [Contact Us](#) form
- Call the local number (770) 325-9600
- Call the toll-free number (800) 766-4456

Provider Representative Contact Assistance

Contact My Provider Rep Directly

Login to the MMIS system with your username and password

[Home](#) | [Contact Information](#) | [Member Information](#) | [Provider Information](#) | [Provider Enrollment](#) | [Nurse Aide/Medication Aide](#)

[Home](#) | [Contact Us](#) | [Phone Numbers & Links](#)

★ [GAMMIS:Contact Us](#) <- Bookmarkable Link  [Click here for help and information about bookmarks](#)

Provider Representative Contact Assistance

Contact My Provider Rep Directly

Contact Information ? ▲

How can we help you?

Select an Item*

Enter Category Details

How do you want to be contacted?

Contact Method* Telephone

Last Name, First Name

Phone Number, Ext

REOPENING GUIDANCE

BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities

Dana N. Scott, MSN, RN
Michelle E. Ford, Ph.D.



June 24, 2020

FIRST
THINGS
FIRST



Elements of Provider Reopening Review

PPE

- Face Covering
- Gloves
- Gowns
- Miscellaneous (face shields)

Procedures for cleaning and disinfection

- Hand hygiene
 - Sanitizer
 - Hand washing
- Facility
 - Hard Surfaces
 - Fabrics

Elements of Provider Reopening (continued)

Vehicles

- Hard surfaces
- Fabrics

Social Distancing Procedures

Screening Procedures

Documented Protocol (including exclusionary criteria and protocols, i.e. HRC)

- Contains DPH/CDC elements
- Includes frequency of screening
- Internal communication procedures
- Tracing procedures
- Procedure for communication to individual/families/providers
An exposure/positives

Elements of Provider Reopening (continued)

Statement of Training Procedures

- PPE
- Social Distancing procedures
- Infection Control Procedures
 - Staff
 - Individuals
 - Visitors

Internal and external communication procedures

- Announcing reopening
- Day program schedule modifications
- Day program transportation procedures
- Staffing procedures or modification

Elements (continued)

Revision of policy

Overall Numerical Achievement

Responses to Survey

CDC GUIDANCE AND CONSIDERATIONS

Persons with I/DD and Behavioral Disorders may be at risk for serious illness:

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-disabilities.html>

- ❖ Person also has an underlying medical condition(s)
- ❖ Difficulty understanding information to follow and practice preventative measures
(i.e. handwashing, wearing a face covering, social distancing)
- ❖ Inability to communicate when they are not feeling well or are experiencing symptoms of illness

CDC GUIDANCE AND CONSIDERATIONS

(content continued)

- ❖ Experience behavior challenges with changes in routine
- ❖ Wearing face coverings may be challenging/scary/uncomfortable for persons who have sensory, cognitive, and behavior disorders
- ❖ Cleaning and disinfecting can affect individual's with sensory or respiratory conditions

ACTION STEPS

PROVIDERS/CAREGIVERS/FAMILIES:

- ❑ Discuss the risk with the individual's healthcare provider for recommendations

- ❑ Work with the individual at home to determine his/her capacity to understand and practice preventative measures by:
 - Using Social Stories (examples on the DBHDD Website/Toolkit)
 - Modeling and Practicing daily sessions with individuals using preventative measures (make learning engaging and fun)
 - Use of verbal prompts/reminders, physical assistance, and supervision may be required for handwashing, use of hand sanitizer, keeping on a face covering, social distancing

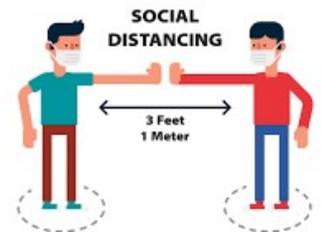


WHAT IF A PERSON CANNOT RETURN TO SITE?

Appendix K Amendment –Use of Telehealth Communications

If an Individual desires to return to site but is unable due to behaviors, document via **Human Rights Committee** steps taken and barriers that prevent on-site return

Continue work with Individual using social stories, modeling, **practice at home** (repetition of teaching to learning)



TEACHING, PRACTICING, MODELING PREVENTATIVE MEASURES

Use words at the level the individual can understand.

Give instructions 1 at a time.

Keep explanations simple.

Give the person time to process. Wait a few seconds before repeating.

Be Calm and Patient.



<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

Definitions

- *Community facilities* such as schools, daycare centers, and businesses comprise most non-healthcare settings that are visited by the general public outside of a household.
- *Cleaning* refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore any risk of spreading infection.
- *Disinfecting* works by using chemicals, for example EPA-registered disinfectants, to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs. But killing germs remaining on a surface after cleaning further reduces any risk of spreading infection.

Cleaning and Disinfection After Persons Suspected/Confirmed to Have COVID-19 Have Been in the Facility

Timing and location of cleaning and disinfection of surfaces

- At a school, daycare center, office, or other facility that **does not house people overnight**:
 - Close off areas visited by the ill persons. Open outside doors and windows and use ventilating fans to increase air circulation in the area. Wait 24 hours or as long as practical before beginning cleaning and disinfection.

A close-up photograph of a hand holding a blue pen, writing on a spiral-bound notebook. The notebook is open, and the pen is positioned over a line of text. The background is a soft, out-of-focus brown color.

BE INFORMED

QUESTION & ANSWERS



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