

# Appendix K Guidance: Participant-directed Services

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**BE D·B·H·D·D**

Georgia Department of Behavioral Health & Developmental Disabilities

**Thursday, August 6, 2020**



*Amy Riedesel, Director of Community Services*

*Barbara (Babs) J. Hall, Statewide Participant-direction Manager*

# Agenda

Welcome & Updates from  
Director Wakefield

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Review CMS Guidance

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Revised Retainer  
Payments

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Attestation Statement

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CLS Services During  
School Hours

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Questions

# Disclaimer

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**The recording of this discussion is a snapshot in time.**

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

The latest COVID-19 guidance, including the Appendix K Application and Amendments, can be found on the Georgia Medicaid website at <https://medicaid.georgia.gov/covid-19> or <https://dch.georgia.gov/>

# Review of CMS Guidance

# History of Submissions to CMS & Purpose

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## **Appendix K applications submitted to CMS for review 04/03/2020**

- New Options Waiver Program / Comprehensive Supports Waiver Program

### **Purpose:**

- Attempts to mitigate exposure risk posed by the COVID-19 public health emergency
- Provides alternative service delivery models as required by the emergency
- Preserves the network and service delivery system for return to a non-emergency state

# History of Submissions to CMS & Purpose *(continued)*

## Appendix K Amendment submitted to CMS 06/12/2020

**Purpose:** add telehealth option to NOW and COMP Appendix K for community access and prevocational services

**CMS approval:** *effective start date 06/24/2020 for PD services*

## Appendix K Amendment submitted to CMS 07/20/2020

**Purpose:** request to follow FAQ guidance allowing:

Three (3) 30-day retainer payment episodes

**CMS approval:** *07/27/2020 with effective start date 04/15/2020*

Equals  
BILLABLE  
days for  
Retainer  
Payments

# What about Participant-directed PAR?

- The Participant-directed PAR (Personal Assistance Retainer) for hospitalizations and vacation is suspended during Appendix K.
- Any PAR days used prior to 03/01/2020 do NOT count against the 90 days of billable retainer payments under Appendix K.
  - For example: You used six (6) days of PAR in December 2019 for vacation. You will not have the six (6) days subtracted from the 90 days allowable under Appendix K.
- You **only have 90 billable days** in total throughout the duration of time that Appendix K is in effect from 03/01/2020 - 02/28/2021 (or the date the Appendix K is terminated if prior to the February 28, 2021 date).

# Encounters and Return to Service

CHANGE

- Previous guidance for a 7-day billing cycle is **no longer valid.**
- Previous guidance requiring a service encounter to be at least two (2) hours is **no longer valid.**
- Retainer payments do not need to have service delivery tied to them.





# SOURCE: CMS FAQ Document



The screenshot shows the Medicaid.gov website. The header includes the Medicaid.gov logo with the tagline 'Keeping America Healthy', and navigation links for Search, Archive, Site Map, and FAQs. A dark blue navigation bar contains links for Federal Policy Guidance, Resources for States, Medicaid, CHIP, Basic Health Program, State Overviews, and About Us. Below this is a large banner image featuring a stethoscope with an American flag design and several circular icons representing healthcare and community. A light blue section below the banner contains three circular icons with text: 'Learn How to Apply for Coverage', 'Comment or View Pending Demonstrations', and 'Medicaid & CHIP Scorecard'. The 'New & Notable' section is at the bottom, listing several links. A large red arrow points to the link 'New COVID-19 FAQs for State Medicaid and CHIP Agencies ( PDF, 246.21 KB ) Jun 30, 2020', which is highlighted with a red rectangular border.

**Medicaid.gov**  
Keeping America Healthy

Search | Archive | Site Map | FAQs

Federal Policy Guidance | Resources for States | Medicaid | CHIP | Basic Health Program | State Overviews | About Us

Learn How to Apply for Coverage | Comment or View Pending Demonstrations | Medicaid & CHIP Scorecard

**New & Notable**

- [SMDL: Home and Community-Based Settings Regulation – Implementation Timeline Extension and Revised Frequently Asked Questions](#) ( PDF, 419.01 KB ) Jul 14, 2020
- [2020-2021 Medicaid Managed Care Rate Development Guide](#) Jul 02, 2020
- [New COVID-19 FAQs for State Medicaid and CHIP Agencies](#) ( PDF, 246.21 KB ) Jun 30, 2020
- [CIB: CMS Oral Health Initiative and Dental Technical Support Opportunity](#) ( PDF, 219.72 KB ) Jun 25, 2020
- [CIB: Updated 2020 SSI and Spousal Impoverishment Standards](#) ( PDF, 138.54 KB ) Jun 24, 2020

## WEBSITE:

[www.medicaid.gov/  
state-resource-center/  
downloads/  
covid-19-faqs.pdf](http://www.medicaid.gov/state-resource-center/downloads/covid-19-faqs.pdf)

*posted 06/30/2020*

# PD Services Eligible for Retainer Payments

**NO  
CHANGE**

## Community Living Support (CLS)

- Retainer payments are authorized in the event that the provider is not serving the member under other comparable services.
- The retainer payment will be authorized at the level, duration, and amount as outlined in the ISP & prior authorization (PA)
- Telehealth is NOT authorized for CLS services.

## Supported Employment (SE)

- Retainer payments are authorized in the event that the setting must be closed for isolation purposes.

# Retainer Payment Guidelines for Georgia

**CHANGE**

- **CMS approved three (3) 30-day retainer payment episodes with the July 27<sup>th</sup> Georgia Appendix K Amendment.**
- **CMS confirmed that a “staggered” retainer payment model is allowable:**
  - **Example: Monday and Wednesday traditional or telehealth service delivery**
  - **Tuesday, Thursday and Friday retainer payment reimbursement with supporting documentation.**
- *Consecutive days are those days that are eligible for billing.*

# Retainer Payments

Temporarily include retainer payments to address emergency related issues [k-2.j]:

## What this means for you:

The retainer payment can be billed if:

- *The provider is unable to substitute a different service to meet the member's need, e.g. ADH to PSS or Community Access Group to CLS*
- *The provider is not able to use a different staff person such as a family caregiver*

**CHANGE**

### FAQs:

#### How do I bill?

- *Retainer payment will be authorized at the level, duration, and amount as outlined in the prior authorization*
- *Bill the service as if it was delivered and document daily the reason for the retainer reimbursement*
- *Services can be reimbursed as retainer payment for 30 continuous days initially*
- *Following the initial episode providers may be reimbursed for 2 additional 30-day episodes for a total of up to 90 days.*

# Mandatory State Controls on Reimbursement

**NO  
CHANGE**

**States interested in utilizing retainer payments for multiple (up to three) episodes of up to 30 days per beneficiary will be expected to include or add the following guardrails in their Appendix K submissions:**

- Limit retainer payments to a reasonable amount,
- **Ensure their recoupment if other resources, once available, are used for the same purpose**
- Collect an attestation from the provider acknowledging that retainer payments will be subject to recoupment if inappropriate billing or duplicate payments for services occurred
- Require an attestation from the provider that it will not lay off staff, and will maintain wages at existing levels

# Mandatory State Controls on Reimbursement

CHANGE

States interested in utilizing retainer payments for multiple (up to three) episodes of up to 30 days per beneficiary (**up to 90 billable days**) will be expected to:

- Collect an attestation from the provider acknowledging that retainer payments will be **subject to recoupment** if inappropriate billing or duplicate payments for services occurred
  - Require an attestation from the provider that they had not received funding from any other sources **that would exceed their revenue for the last full quarter prior to the public health emergency** [such as]:
    - unemployment benefits
  - Or that the retainer payments at the level provided by the state would not result in their revenue exceeding that of the quarter prior to the public health emergency.

# Retainer Payment Provision

NO  
CHANGE

- Providers are subject to recoupment if **inappropriate billing** or **duplicate payments** for services occurred, as identified in a state or federal audit or any other authorized third-party review.
- *Note that “duplicate uses of available funding streams” means using more than one funding stream for the same purpose.*

# Repayment of Retainer Reimbursement for 90 days or More

**CHANGE**

## **What can providers do if they have billed in excess of 90 days of retainer payments?**

1. Void all claims representing 91 retainer payment days or greater, or
2. Enter into a repayment plan described in *Part I: Policies and Procedures for Medicaid and PeachCare for Kids*

*407. Recoupment of Reimbursement*



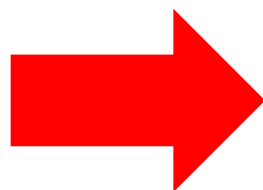
# Attestation Statement

# How do I submit an Attestation Statement?

CHANGE

The fillable form is available on the DCH website at this link:

<https://dch.georgia.gov/how-do-i/covid-19-ga-dch>

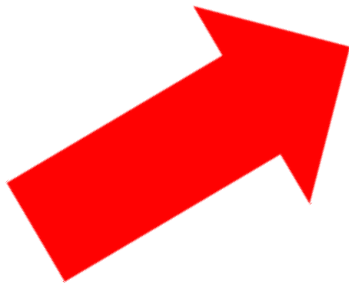


The screenshot displays the Georgia Department of Community Health website. At the top, the header reads "COVID-19: Georgia Department of Community Health" followed by a sub-header "Georgia Department of Community Health division and office updates relating to COVID-19." Below this is a section titled "Division and Office Updates" which contains three columns of information:

- Medicaid and PeachCare for Kids®**  
[Provider Relief Fund](#)  
As a part of the federal government's COVID-19 response, the CARES Act set aside more than \$100 billion in financial relief for
- State Health Benefit Plan**  
The Georgia Department of Community Health SHBP Division has coordinated with our Medical,
- Healthcare Facility Regulation Division**  
[Long-Term Care Facility COVID-19 Report](#)  
Report showing COVID-19 cases in licensed nursing homes, assisted living communities

# Attestation Statements

**Enter the full name of  
the PD Representative  
(aka Employer of Record).**



## Framework

**Attestation Statement: Retainer Payment Reimbursement during the Coronavirus Public Health Emergency**

**Provider Name: \***

## Associated Waiver Program

**(Check all that apply) \***

- ☐ Elderly and Disabled Waiver Program (CCSP and/or SOURCE)
- ☐ Independent Care Waiver Program (ICWP)
- ☐ New Options Waiver Program (NOW)
- ☐ Comprehensive Support Waiver Program (COMP)

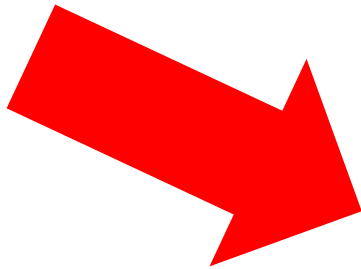
## Attestation Statements

Select all of the statements that assure this agency's compliance as a Medicaid Waiver Provider seeking reimbursement through retainer payments during the Coronavirus Public Health Emergency:

# Attestation Statements

Check the appropriate  
waiver for the participant:

NOW or COMP



## Framework

Attestation Statement: Retainer Payment Reimbursement during the Coronavirus Public Health Emergency

Provider Name: \*

## Associated Waiver Program

(Check all that apply) \*

- ☐ Elderly and Disabled Waiver Program (CCSP and/or SOURCE)
- ☐ Independent Care Waiver Program (ICWP)
- ☐ New Options Waiver Program (NOW)
- ☐ Comprehensive Support Waiver Program (COMP)

## Attestation Statements

Select all of the statements that assure this agency's compliance as a Medicaid Waiver Provider seeking reimbursement through retainer payments during the Coronavirus Public Health Emergency:

# Provider Attestation Statement View

Associated Waiver Program

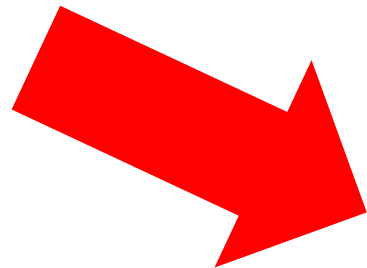
(Check all that apply) \*

- ☒ Elderly and Disabled Waiver Program (CCSP and/or SOURCE)
- ☒ Independent Care Waiver Program (ICWP)
- ☒ New Options Waiver Program (NOW)
- ☒ Comprehensive Support Waiver Program (COMP)

Elderly and Disabled Waiver Program (CCSP and/or SOURCE)

(Select all that apply to the Elderly and Disabled Waiver Program (CCSP and/or SOURCE). Click "Add" to add another row and make another selection.)

Services Reimbursed through Retainer Payment: *	Medicaid Number *	Number of Retainer Payment Days Claimed *
<div>From the dropdown menu, select which service you are using</div> <div></div> <div>Add</div>		
Independent Care Waiver Program (ICWP)		
(Select all that apply to the Independent Care Waiver Program (ICWP). Click "Add" to add another row and make another selection.)		
Services Reimbursed through Retainer Payment: *	Medicaid Number *	Number of Retainer Payment Days Claimed *
<div></div> <div>Add</div>		
New Options Waiver Program (NOW)		
(Select all that apply to the New Options Waiver Program (NOW). Click "Add" to add another row and make another selection.)		
Services Reimbursed through Retainer Payment: *	Medicaid Number *	Number of Retainer Payment Days Claimed *
<div></div> <div>Add</div>		



# Attestation Statements

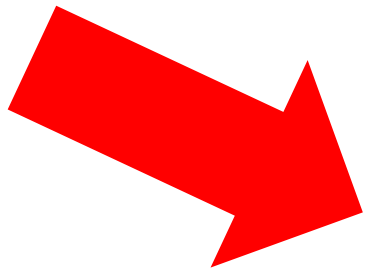


**Read each  
statement.**

**If you agree,  
check each  
statement that  
you are  
attesting to.**

- ☐ As a Medicaid Waiver Program provider reimbursed through retainer payment under Appendix K, I understand that retainer payments will be subject to recoupment if inappropriate billing or duplicate payments for services occurred.
- ☐ Provider did not lay off staff and maintained wages at existing levels during the period represented by retainer payments.
- ☐ Provider did not receive funding from any other sources that would exceed its revenue for the last full quarter prior to the Public Health Emergency (PHE) such as:
- ☐ Unemployment benefits used to reimburse staff wages during the period of retainer payment reimbursement
- ☐ Small Business Administration loans that exceeded revenue for the last full quarter prior to the PHE (and did not require repayment)
- ☐ Cares Act Provider Relief Fund
- ☐ As a Medicaid Waiver Program provider reimbursed through retainer payment under Appendix K, I attest that total retainer payments did not result in revenue greater than that of the quarter prior to the PHE (October 1, 2019 – December 31, 2019).

# Electronic Signature and Submission



**Signature**

Sign

**Attestation Date**

Date captured on form submission

Submit

# Attestation Statements

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- DBHDD Special Bulletins will provide a link and be distributed.
- Reports of agency attestation documents will be retained for audit documentation by DCH, but you should retain a copy for their records
- **Deadline---DUE OCT. 1, 2020**



# Appendix K Operational Guidelines

- All policy information regarding Appendix K can be found within DD COVID-19 policy on DBHDD PolicyStat



<https://gadbhdd.policystat.com/policy/8127003/latest/>

Current Status: Active

PolicyStat ID: 8127003



Georgia Department  
of Behavioral Health  
& Developmental  
Disabilities

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:

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

# How do I stay informed?

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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](mailto:Participant.Direction@dbhdd.ga.gov)**

# Frequently Asked Questions

CHANGE

- Do I still complete an attestation for past retainer payments?

*Yes – by October 1, 2020*

- Do I have to complete an attestation each time I submit a bill?

*No. Only one attestation is required during Appendix K.*

- Can we bill interim retainer payments such as those intermittent with service delivery?

*Yes*

- Will we be audited?

*CMS has advised that there will definitely be audits following the COVID-19 public health emergency.*

# Appendix K Operational Guidelines

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- Appendix K still remains in effect through **February 28, 2021**.
- Effective **June 24, 2020**, you may now deliver community access services (CAG & CAI) via telehealth.
- CLS can only be delivered in-person.
- Individuals and Representatives are encouraged to follow the safety precautions which have been recommended by the GA Department of Public Health and the Centers for Disease Control. (CDC).
- Temporary Family Caregiver Hire remains in effect while we are operating under Appendix K.

# CLS Services During School Hours

- CLS services are not prohibited by policy for when an individual can use the hours in a day.
- The key point is the number of hours used must remain the same as authorized on the Prior Authorization (PA)
  - Example: individuals authorized for 4 hours per day, 3 days per week pre-pandemic for after-school care, still only authorized for 4 hours per day, 3 days per week
- Any increase in CLS or other waiver services would require a clinically assessed need and approved clinical assessment.
  - The frequency and duration of CLS service is designated to address specific needs determined by the Supports Intensity Scale (SIS), the Health Risk Screening Tool (HRST), and other individual-centered assessment information.
- CLS does not cover educational and related services needed by children for whom the Department of Education is responsible.
- CLS services cannot be provided at the same time of the same day as **Community Access** or **Supported Employment** services.

# CLS- SMS and the One-time 30% Increase

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- April 2020, DBHDD added a 30% increase to PA lines for CLS & SMS
- This is a **one-time** increase
- Funds CANNOT be used for additional CLS hours or to increase staff pay outside PA authorization
- Funds are ONLY for coverage of retainer payments + temporary family caregiver hire.
- What about when ISP falls during Appendix K authorization?

# Questions

A close-up photograph of a hand holding a blue pen, poised to write on a spiral-bound notebook. The notebook is open, showing a blank page. The text "BE INFORMED" is overlaid on the image. The word "BE" is in orange, and "INFORMED" is in white with a black outline. The background is a blurred brown surface.

**BE INFORMED**