

Policy Transmittal Developmental Disabilities Services



Lilia Teninty

Authorized signature

Number: APD-PT-20-105

Issue date: 10/13/2020

UPDATED #2

Topic: Developmental Disabilities

Due date:

Transmitting (check the box that best applies):

- New policy
 Policy change
 Policy clarification
 Executive letter
 Administrative Rule
 Manual update
 Other: Temporary Policy

Applies to (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging: {Select type} | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Aging and People with Disabilities | <input checked="" type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input checked="" type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input checked="" type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input checked="" type="checkbox"/> Support Service Brokerage Directors | <input type="checkbox"/> Other (please specify): |
| <input checked="" type="checkbox"/> ODDS Children's Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

| | | | |
|-------------------------------|--|-------------------------|---|
| Policy/rule title: | Purchasing personal air purifiers through OR 562 | | |
| Policy/rule number(s): | PT-20-105 | Release number: | 3 – updated to add the authorization of purchasing a single replacement filter. |
| Effective date: | | Expiration date: | 01/01/2021 |
| References: | | | |
| Web address: | | | |

Discussion/interpretation: On September 8, 2020 as a result of the consequences of the wildfires on the State of Oregon it was determined by the Secretary of Health and Human Services that a public health emergency exists. Many individuals have had their independence negatively impacted by the air quality resulting from these fires. Individuals whose independence in performing activities of daily living (ADL) or instrumental activities of daily living (IADL) has been reduced due to the air quality inside their home may be eligible to use department funds to purchase a personal air

purifier. Whole home air purifiers will not be authorized.

During the fire crisis of 2020, a case management entity may authorize the most cost-effective personal air purifier for an individual as a specialized medical supply (OR562) through the following process:

- Ensure that the authorization of the air purifier is included in the individual's ISP or on a change form.
- Documentation should indicate that the air purifier is needed due to "Smoke or Air Quality"
- Documentation must outline how the individual's ability to engage in ADL/IADLs is being negatively impacted due to smoke or air quality issues caused by the fires.
- Documentation must clarify how the item being purchased is the most cost effective to meet the need and why less expensive air purifiers will not meet the need.
- When entering the SPA in eXPRS must use a "generic" provider must add "air purifier due to wildfire" in the **Generic Provider Name** field as outlined below:

The screenshot displays the eXPRS interface for adding a provider to an authorization. The top table shows a draft authorization for OR562 - Spec Med Supply with a total of \$0.00. Below this, a form allows adding a provider with fields for Units (1), Rate (\$89.95), and Dates (9/1/2020 - 9/30/2020). The 'Generic Provider Name' field is highlighted with a purple box and contains the text 'Amazon, air purifier due to wildfi'. An 'Add Provider' button is visible below the form. The bottom table shows the authorization after being accepted, with a total of \$89.95. The 'Provider' field is highlighted with a purple box and contains the text '(Generic) Amazon, air purifier due to wildfires'. The 'Pay-To Provider' field contains 'Baker County 49 Comp in Home Supp Services'.

| *SE | *Procedure Code | *Modifier | *Units | *Dates | Status | Total |
|-----|-------------------------|-----------|-------------|---------------------|--------|--------|
| 49 | OR562 - Spec Med Supply | NA | 14 per Year | 9/1/2020 -9/30/2020 | Draft | \$0.00 |

| *Provider | *Units | *Rate | *Dates |
|--|--------|---------|----------------------|
| Generic Provider Amazon, air purifier due to wildfi | 1 | \$89.95 | 9/1/2020 - 9/30/2020 |

| *SE | *Procedure Code | *Modifier | *Units | *Dates | Status | Total |
|-----|-------------------------|-----------|-------------|---------------------|----------|---------|
| 49 | OR562 - Spec Med Supply | NA | 14 per Year | 9/1/2020 -9/30/2020 | Accepted | \$89.95 |

| Auth Id | *Provider | Units | Rate | Pay-To Provider | *Dates | Review? | Status | Amount |
|----------|---|-------|---------|--|----------------------|---------|----------|---------|
| 39060423 | (Generic) Amazon, air purifier due to wildfires | 1 | \$89.95 | Baker County 49 Comp in Home Supp Services | 9/1/2020 - 9/30/2020 | No | Accepted | \$89.95 |

- Authorization of air purifiers:
 - Less than \$1200 may be authorized by the CME with the aforementioned documentation in place.
 - More than \$1200 should be requested through the exceptions process and should include the aforementioned documentation.

Reimbursing Individuals/Families Directly:

CMEs may reimburse individuals receiving services, or their parents/guardians as applicable, who paid out-of-pocket between September 8 and October 1, 2020 for the purchase of an individual air purifier.

CMEs should follow the same processes as above by entering authorizations and reimbursements in eXPRS.

Documentation should indicate that the air purifier was “purchased by the individual due to smoke or air quality”

- Receipt for the air purifier that includes the date of purchase and the total being reimbursed.
- Ensure that the authorization of the replacement item is included in the individual’s ISP or on a change form.

Case Management Entities may authorize a single replacement filter. Filters should be the most cost effective and be the correct filter for the previously purchased air purifier.

Implementation/transition instructions:

Training/communication plan: Program Managers/Directors should share this information with staff.

Local/branch action required:

Central office action required:

Field/stakeholder review: Yes No

If yes, reviewed by:

Filing instructions:

If you have any questions about this policy transmittal, contact: Kirsten.G.Collins@state.or.us