

Policy Transmittal Aging and People with Disabilities



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Number: APD-PT-20-096

Issue date: 9/4/2020

Topic: Long Term Care

Due date:

Transmitting (check the box that best applies):

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

Applies to (check all that apply):

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

Policy/rule title:	Adult Day Services (ADS) Alternative Services		
Policy/rule number(s):		Release number:	
Effective date:	September 1, 2020	Expiration date:	
References:			
Web address:	http://www.dhs.state.or.us/spd/tools/cm/adultday/index.htm		

Discussion/interpretation:

Adult Day Service (ADS) centers have remained closed and unable to provide services as a critical safety measure to minimize the impact of COVID-19 on our community and the individuals we serve.

Aging and People with Disabilities (APD) recognizes the important services provided by ADS and are introducing new “alternative services” that may now be provided, effective September 1, 2020. These alternative services allow ADS

programs to provide eligible participants services outside of the typical ADS center in environments that would minimize the risk of exposure to COVID-19. This includes in the participants' home or Adult Foster Home settings.

This transmittal covers the following topics:

[Alternative Service Options](#)

[Service Authorization](#)

[General Service Guidance](#)

[Billing](#)

[Reporting](#)

Alternative Service Options

Health Related Services Level 1 (HRS1)

HRS1 are services provided by the ADS to participants by non-licensed staff.

These services should be tied to the goals of the participant, be person-centered, and go beyond providing typical ADL care.

Services include, but are not limited to:

- Taking the participant on an outing that supports their cognitive well-being;
- Coming to the home to provide additional support that is needed for a specific activity.
 - Or if the consumers home isn't conducive to performing a specific activity, the need may be met at the ADS site.
- Providing or teaching range of motion exercises for skills training and to improve independence;
- Providing cognitive-based activities in the participant's service setting or community
- Providing complex medication management delegated by an RN.
- Providing meal preparation assistance if medically prescribed
- Providing 1:1 supports for the participant
- Providing skills training to assist the individual in gaining, maintaining or enhancing their independence and well-being.

Hours Authorization:

- The ADS will determine the number of hours to provide each day, based upon the defined needs.
- The ADS may provide up to 25 hours each week.

Rate: \$30 per hour (15-minute increments), .485 per mile when the participant is being transported by ADS staff.

Health Related Services Level 2 (HRS2)

HRS2 are services provided to the participant by licensed staff. Licensed staff, such as an RN, LPN, or other health professional may qualify as licensed staff. These services should be tied to the goals of the participant and be person-centered. Services may be “hands-on” with the individual or be part of an evaluation process to train other staff (HRS1 care) to perform certain health related services.

In addition to the services mentioned above other services include but are not limited to:

- Habilitation support to maintain current functional needs;
- Evaluation of needs in order to provide training/guidance to non-licensed staff; and
- Music or other cognitive therapy

Hours Authorization:

- The ADS will determine the number of hours to provide each day based upon the defined needs.
- The ADS may not provide more than 5 hours per week for these services.

Rate: \$85 an hour (15-minute increments). Please note that time spent transporting a participant should be billed under HRS1.

Telehealth Cognitive Services

These services are provided remotely through a telehealth method. These services support the cognitive and emotional well-being of the participant. The specific services provided are broad based but must be therapeutic in nature and successfully deliverable through telehealth. These services should be tied to the goals of the participant and be person-centered.

Hours Authorization:

- The ADS will determine the number of hours to provide each day based upon the defined needs.
- The ADS may not provide more than 10 hours per week for these services.
- The ADS may provide these services with other participants at the same time.

Rate: \$20 an hour (15-minute increments) for individual sessions. \$15 an hour (15-minute increments) per participant for group sessions.

Respite Care

Respite care is short-term care and supervision provided because of the absence, or need for relief, of unpaid providers that normally provide the care to participants.

Respite Care is only available to in-home consumers. It may be provided in the participant's home or the ADS facility. Respite care may only be authorized when an individual relies on natural supports for their ADL/IADL support needs.

Hours Authorization:

- The ADS will determine the number of hours to provide each day, up to a maximum of 8 hours per day.
- The ADS may not provide more than 40 hours per week for this service.

Rate: \$30 per hour (15-minute increments), .485 per mile when the participant is being transported by ADS staff.

Service Authorization

These services are typically offered to participants who live in their own homes. However, they may be provided to participants living in an Adult Foster Home, except for respite care, with Central Office approval.

Approval process for current ADS participants:

- Effective September 1, 2020, current ADS participants will be automatically authorized through December 31, 2020.
- Case managers (CMs) must prior authorize Alternative Services beginning December 31, 2020 (see below section for process).
 - CMs should work with individual ADS providers to determine which services will be offered by the ADS.
 - CMs will authorize the service(s) needed by the consumer. However, the actual hours worked will be determined by the ADS (up to maximums that are addressed above)

Approval process for new participants or current participants after December 31, 2020:

- The CM contacts the ADS to consider providing alternative services to the individual.
- If the ADS accept (or continues to serve) the individual, the prior-authorization form is completed and provided to the ADS. The "ADS Authorization Form" is found [here](#).
 - If the participant lives in an AFH, complete the SDS 514 for Central Office review prior to sending the prior authorization to the ADS.

- Add the ADS as a provider in the consumer's service plan and narrate authorization in Oregon ACCESS.
- Service plan authorizations will typically end on the last day of the month when the re-assessment is due.
- At this time, payment authorization will be managed through direct billing from the ADS provider (see billing section below).

General Services Guidance

An ADS program providing services during the COVID-19 pandemic must follow all Oregon mandates and CDC and OHA guidance. This includes:

- Staff and consumers wearing face coverings (unless medically exempt);
- Ensuring social distancing is maintained as much as possible;
- Appropriate hygiene and sanitization practices are practiced before, during and after any contact with a participant and after each service is provided;
- Daily health screenings of participants and staff.

The ADS site may be utilized by no more than two participants at a time. If there are two participants at the ADS site at the same time, the following conditions must be met:

- Staff must follow safety guidelines when moving from one participant to another and provide stable care environments whenever possible. Participants must be in separate rooms.
- APD discourages the use of shared facilities (i.e. bathrooms). However, if facilities are shared, sanitization should occur after each participant or staff uses the shared facilities.
- An exception to the two-participant maximum at an ADS site at one time may be requested from Central Office if the participants live in the same home.

Billing

ADS must submit an invoice for Alternative Services directly to Central Office. If an authorization expires, the ADS provider may decide to continue providing services to the participant. However, payment shall not be made unless the case manager provides an authorization to deliver the services. During the emergency period, the service may be retroactively authorized.

Reporting

APD requires the ADS to report a summary of the services provided for each individual served every 90 days or when requested by the case manager. The report may be reviewed as an indirect contact.

Implementation/transition instructions:

Training/communication plan:

Local/branch action required:

Central office action required:

Field/stakeholder review: Yes No

If yes, reviewed by: APD Policy & Ops

Filing instructions:

If you have any questions about this policy, contact:

Contact(s): Lindsay Vanderworker	
Phone: 503-856-6931	Fax:
Email: Lindsay.R.Vanderworker@dhsosha.state.or.us	