LPHA COVID-19 Wraparound Reporting October 2020



Purpose: Beginning in November 2020, LPHAs will report summary information on COVID-19 cases and contacts who identify wraparound service needs to complete isolation and quarantine. This includes reimbursable and nonreimbursable services, and those provided by the LPHA or a community-based organization.

The summary information provided may be used to describe coordinated local systems for serving people affected by COVID-19 and the types of wraparound service needs that people need in order to safely complete isolation or quarantine. The information collected may also be useful to LPHAs to identify gaps in available resources that stakeholders can work to address.

LPHAs should do the following:

- 1. Between October and December 2020, LPHAs will complete wrapround reporting for each month, by the following dates.
 - November 15, 2020
 - December 15, 2020
 - January 5, 2021
- 2. LPHAs have two options to complete wraparound reporting.
 - Use the new "Summary of all wraparound services provided in the LPHA jurisdiction" section of the wraparound invoice template.
 LPHAs that choose this option will use a single form to submit an invoice for reimbursement and to complete wraparound reporting.
 LPHAs should continue to submit the form to <u>OHA-</u> <u>PHD.ExpendRevReport@dhsoha.state</u>.
 - OHA will also make an online reporting option available for LPHAs that prefer to keep invoices and reporting separate.
- 3. LPHAs must submit monthly wraparound reporting, regardless of whether the LPHA is submitting wraparound invoices for reimbursement.

FAQs

What system will LPHAs use to track wraparound referrals?

No statewide data system exists for tracking COVID wraparound services. OHA has developed an <u>optional</u> Excel tool that LPHAs and CBOs can use to track referrals and to support their coordination with CBOs. This Excel tool is available at:

https://www.oregon.gov/oha/PH/ProviderPartnerResources/LocalHealthDepartm entResources/Pages/index.aspx. In addition, some LPHAs have developed their own tracking tools, some of which are posted in CLHO's COVID resource library and are available for other LPHAs to use or modify.

Per Program Element 01 -05, the LPHA must ensure social services referral and tracking processes are developed and maintained.

Do LPHAs need to collect information on services provided by CBOs?

Yes. LPHAs need to collect information from CBOs on individuals *referred* to the CBO by the LPHA. *This includes individuals who were initially identified by the CBO through the self-referral process*.

In some instances a CBO may be providing supports, for example connections to safety net resources, for people affected by COVID-19 but who are not confirmed/presumptive cases or contacts. The LPHA is not required to collect information from CBOs for these individuals.

LPHAs are responsible for ensuring that a person's needs are met throughout isolation and quarantine and should have a mechanism for coordinating with CBOs and/or collecting information on an individual once isolation or quarantine is complete.

How should an LPHA collect information on wraparound services provided by the CBO?

Some LPHAs have developed forms that are securely shared between the LPHA and CBO when the initial referral is made and when the individual completes isolation and quarantine. Others have set up regular check ins to share information between agencies. Through these mechanisms, the LPHA will collect the necessary information on a person-by-person basis.

LPHAs could also collect information by requesting that CBOs provide the necessary information through a simple reporting process.

LPHAs and CBOs should work together to develop local processes and systems that work best for all parties.

What are CBOs required to report to OHA?

The CBO quarterly reporting form is available at: <u>https://www.oregon.gov/oha/PH/ABOUT/CETDocuments/Activity-Report-</u> <u>Form.docx</u>

What tools are available to LPHAs for wraparound reporting?

The following tools and resources are available at:

https://www.oregon.gov/oha/PH/ProviderPartnerResources/LocalHealthDepartm entResources/Pages/index.aspx.

- <u>Wraparound tracker template</u>. This tracker is optional and LPHAs are welcome to customize it to meet their local needs.
- <u>LPHA factors for referral decision-making</u>. This is an aid to help LPHAs in coordinating referrals with CBOs.

Locally-developed materials for wrapround coordination are available in CLHO's COVID resource library.

In Part 1, how should individuals be counted if they were referred to a different division or program within the county organization? For example, referrals made to the social services division.

These cases or contacts should be counted in Question 2: Total number of unique individuals who received wraparound supports through the LPHA.

In Part 1, how should individuals be counted if they were referred to the local DHS office or an organization other than CBOs funded by OHA?

These cases or contacts should be counted in Question 3: Total number of unique individuals referred to a CBO or other organization for wraparound supports.

In Part 2, can you provide examples of reimbursable services?

Reimbursable services are those for which an LPHA or CBO can submit an invoice for reimbursement from OHA.

Non-reimbursable services are those for which there is no invoice. This includes connections to safety net supports for the individual after the isolation or quarantine period, or services provided for which there is no associated cost (i.e. providing supplies to the individual that were donated).

In Part 2, do LPHAs need to collect information for the service categories listed in the reporting tool?

At a minimum, OHA expects LPHAs to report on the first seven service categories listed. These are in bold font and align with the wraparound service categories listed in the Program Element.

It is preferred that LPHAs report on all service categories; however, in some cases the categories listed may not align with the categories that an LPHA and CBOs have mutually agreed to collect. In this instance the LPHA can enter "not collected" for a service category that is not collected.

The LPHA can utilize the "other" options to report on additional service categories collected by the LPHA and CBOs.

Questions

Please send questions to <u>oresf8.LPHALiaison@dhsoha.state.or.us</u>.