



# CBAS Updates

December 9, 2021

# Today's Presenters

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# Housekeeping

- We welcome your questions – please submit via the webinar “Questions” box
- This webinar is being recorded and will be posted on the CDA website:  
[https://www.aging.ca.gov/Providers\\_and\\_Partners/Community-Based\\_Adult\\_Services/#pp-tr](https://www.aging.ca.gov/Providers_and_Partners/Community-Based_Adult_Services/#pp-tr)
- Please encourage staff and providers who are not able to join us today to listen to the webinar once posted

# AGENDA



- Data
- Participant Characteristics Report (PCR)
- Multiple Statistical Summary Report (MSSR)
- All Center Letters (ACLs)
- Communication
- 1115 Waiver Renewal
- Return to Full In-Center Services
- Other Business

# DATA

## Center Numbers

- 271 CBAS centers
- Over 39,000 participants enrolled

## Change applications

<b>AD/PD Change</b>	<b>3</b>
<b>Capacity Change</b>	<b>3</b>
<b>Location Change</b>	<b>0</b>
<b>Ownership</b>	<b>0</b>
<b>Shareholder</b>	<b>6</b>
<b>Combination Change App</b>	<b>2</b>
<b>Total</b>	<b>14</b>

## New Centers

- 34 initial certification applications in the queue
- 10 new centers were granted initial certification in 2021:
  - 1 in Fresno County
  - 1 in Kern County
  - 7 in Los Angeles County
  - 1 in Orange County

# Participant Characteristics Report (PCR)

- Submit center's [Participation Characteristics Report \(PCR\)](#) (Form CDA CBAS 293) to the CDA via the [Peach Provider Portal](#) by **January 31, 2022**, for the enrollment period of **December 1 through December 31, 2021**.
- Do not include any participants enrolled after December 31, 2021.
- Begin submitting your PCR starting January 1, 2022.
- **DO NOT submit PCR via email as it contains confidential and Protected Health Information (PHI).**
- Ensure information is accurate. Refer to [PCR Submission Checklist for Providers](#) to assist in identifying conflicting/inaccurate information.
- Refer to the [CBAS Reporting Requirements](#) webpage for more information about the PCR and submission process.

# Monthly Statistical Summary Report (MSSR)



## Important Reminders

- Ensure accurate reporting of MSSR data
- Pay close attention to the order of the payer types and enter data accordingly specifically for boxes 4 (Participants Served) and 5 (Participant Attendance Days)
- Some providers are entering attendance data into the Medi-Cal Fee-For-Service fields (1<sup>st</sup> line) when intending to fill out the Medi-Cal Managed Care fields (2<sup>nd</sup> line)
- Always enter PRIOR month data in the current month (e.g., October data is submitted in November, November data should be submitted in December)
- For additional information, refer to the MSSR instructions posted on the [CDA Reporting Requirements](#) webpage

# MSSR Screenshot

Month June 2021

Shift 1

### Update Report

<h4>1. Individuals Determined Eligible</h4> <p>Medi-Cal Fee-For-Service <input type="text" value="0"/></p> <p>Medi-Cal Managed Care <input type="text" value="0"/></p> <p><b>Total New Eligibles 0</b></p>	<h4>2. Individuals Determined Ineligible</h4> <p>Medi-Cal Fee-For-Service <input type="text" value="0"/></p> <p>Medi-Cal Managed Care <input type="text" value="0"/></p> <p><b>Total New Ineligibles 0</b></p>	<h4>3. Participant Discharged</h4> <p>Medi-Cal Fee-For-Service <input type="text" value="15"/></p> <p>Medi-Cal Managed Care <input type="text" value="0"/></p> <p>Private Pay <input type="text" value="0"/></p> <p><b>Total Discharged Participants 15</b></p>
<h4>4. Participants Served</h4> <p>Medi-Cal Fee-For-Service <input type="text" value="571"/></p> <p>Medi-Cal Managed Care <input type="text" value="0"/></p> <p>Private Pay <input type="text" value="0"/></p> <p><b>Total Served Participants 571</b></p>	<h4>5. Participant Attendance Days</h4> <p>Medi-Cal Fee-For-Service <input type="text" value="11939"/></p> <p>Medi-Cal Managed Care <input type="text" value="0"/></p> <p>Private Pay <input type="text" value="0"/></p> <p><b>Total Attendance Days 11939</b></p>	<h4>6. Days of Center Operation</h4> <p>Days of Center Operation <input type="text" value="22"/></p> <p><b>Average Daily Attendance 542.68 Days</b></p>



# All Center Letter (ACL) 21-11

## ACL 21-11: Change to Distribution of CBAS Certification Correspondence (11/10/21)

- Effective 11/8/21, CDA will begin distributing correspondence to CBAS facilities as a Portable Document Format (PDF) and/or Word document.
- Certification correspondence will be sent to the center Administrator, Program Director, and Owner/Board Chairperson using the email address reported to CDA. **Ensure that CDA has current contact information.**
- Please contact the CBAS Bureau if you have any questions:
  - (916) 419-7545
  - cbascda@aging.ca.gov

# All Center Letter (ACL) 21-12

## ACL 21-12: Discharge Summary Reporting (11/18/21)

- Provides overview of Discharge Summary Reporting Requirements
  - CBAS Discharge Summary Report Form ([CDA 4008](#))
  - Instructions ([CDA 4008i, Rev 9/2021](#))
- CBAS centers are required to develop discharge plans for all participants as part of the six-month reassessment and at time of discharge. Discharge plan should be maintained in participants' health records
- Submit CDA 4008 **only** when Fee-For-Service (FFS) participants are discharged and upon request
- Submit reports to CDA via Peach Portal

# Communication is Key!

- Major form of communication is email
- Ensure that CDA CBAS has the correct email address for your center
- CBAS fax (916) 928-2507 no longer available
- Email CDA CBAS at **cbascda@aging.ca.gov**
- Call us at **(916) 419-7545**
- Important CBAS News Alerts sent regularly



# All Center Letter (ACL) 21-13

## ACL 21-13: CBAS TAS Remote Services Standards and Documentation Requirements

- Addresses standards for remote services to support CBAS TAS providers in the delivery of quality services and to ensure clear understanding of what constitutes a billable remote service
- Defines the components of a billable remote service
- Gives examples of billable and non-billable services
- Reviews IPC completion & health record documentation requirements specified in [ACL 21-04](#)

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

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**ACL 21-13**

Date: December 2, 2021  
To: Adult Day Health Care (ADHC) / Community-Based Adult Services (CBAS) Center Administrators and Program Directors  
From: California Department of Aging (CDA) CBAS Bureau  
Subject: CBAS Temporary Alternative Services (TAS): Remote Services Standards and Documentation Requirements

### **Purpose**

This All Center Letter (ACL) addresses standards that must be met for billing of remote services for the remainder of the time that flexibilities under CBAS TAS remain in place. Additionally, this ACL clarifies documentation requirements that must be met for all services delivered under CBAS TAS.

### **Background**

CBAS TAS remote services – whether delivered via telehealth or in-person at participant homes or in the community – continue to be instrumental in supporting CBAS participants during this ongoing COVID Public Health Emergency (PHE). This ACL addresses standards for remote services to support CBAS TAS providers in the delivery of quality services and to ensure clear understanding of what constitutes a billable remote service.

Until a clear date for the conclusion of the PHE and all the flexibilities allowed under CBAS TAS is known, providers must continue efforts to safely transition to congregate center services. In anticipation of the end to CBAS TAS, providers should focus both in-center and remote service delivery on preparing and supporting participants for their return to full congregate services.

### **CBAS TAS Standards for Billing Remote Services**

CBAS TAS remote services differ from traditional ADHC/CBAS because they are provided when the participant is not in attendance at the center. However, they share core elements of center-based services, including assessment and determination of clinical and person-centered needs and goals; interventions to address the participants' needs and goals; and

# 1115 Waiver Renewal

- California has requested an amendment and five-year renewal of the Medi-Cal 2020 Section 1115 Demonstration, now entitled the “California Advancing and Innovating Medi-Cal (CalAIM)” initiative, with an effective date of January 1, 2022. *The 12-month extension approved by CMS ends on December 31, 2021.*
- DHCS submitted the CalAIM 1115 Waiver Renewal to CMS on June 30, 2021.  
[CalAIM Section 1115 demonstration application and cover letter](#)
- The CalAIM 1115 Waiver Renewal request included the provision of CBAS Emergency Remote Services under specified emergency conditions if approved by CMS. [Link: CalAIM-Section-1115-Renewal-Application](#)
- Refer to the new [DHCS CalAIM](#) webpage for more information.

# Transition to Full In-Center Services

## CBAS Provider Readiness Survey Results

- 70% providing congregate group services in the center
- 38% of participants attend center services at least once a week (average across centers)
- 84% of providers experiencing challenges with serving participants in-center (physical distancing, transportation, staffing)
- 65% of centers report that 74-99% of participants are fully vaccinated
- 13% of centers report 100% of participants are fully vaccinated
- 21% of providers indicate they would not be able to continue to operate should CBAS TAS/remote services end on 12/31/21 and the 6-foot physical distancing requirement remain in effect.

Survey response rate: 84%

# Transition to Full In-Center Services

The date when the Public Health Emergency (PHE) and CBAS TAS flexibilities will end is not yet confirmed, but an early 2022 date is anticipated.

- CDA is working with our State partners to confirm an end date
- CDA will release guidance regarding timelines and requirements for remote to congregate, in-center services when end date for remote services (State ADHC flexibilities and Federal CBAS TAS flexibilities) is confirmed

# Transition to Full In-Center Services

## Current focus:

- Ensuring that services provided under CBAS TAS meet requirements and continue to address participants' needs
- Preparing for the full return to CBAS program requirements
  - ✓ All requirements specified in ACL 21-04 apply - e.g., full MDTs, assessments and evaluations, IPCs, . . .
  - ✓ Plan for those participants identified as unwilling or unable to attend congregate services
  - ✓ If your center is currently serving above your license capacity daily, what is your plan when CBAS TAS flexibilities for remote services end?

CBAS is a center-based service. Providers need to continue planning and moving in that direction



# Transition to Full In-Center Services

## State Authorities for ADHC Flexibilities

- **Governor's Executive Orders**

- [N-35-20](#) (3/21/20) - *Established State of Emergency & allowed temporary waiver of specified ADHC regulatory requirements (flexibilities) and provision of remote services*

- [N-08-21](#) (6/22/21) - *Extends specified ADHC flexibilities through 9/30/21*

- [N-17-21](#) (10/4/21) - *Extends specified ADHC flexibilities through 12/31/21*

- [N-21-21](#) (11/10/21) - *Extends State of Emergency & specified flexibilities through 3/31/22.*

- **California Department of Public Health (CDPH) All Facilities Letter [\(AFL\) 20-34.4: Suspension of Regulatory Enforcement of Specified ADHC Requirements \(6/2/21\)](#)**

## Federal Authority for CBAS TAS - Centers for Medicare & Medicaid Services (CMS)

- **1135 Attachment K** – *Allows approved flexibilities up to six months post federal Public Health Emergency (PHE)*

## Onsite Surveys - Begin January 2022

- CDA surveyors will wear FDA-approved surgical masks and adhere to public health guidance in CDPH State Public Health Officer Order (August 5, 2021). Weekly testing requirements in effect as applicable.

# Resource Information

**California Department of Aging (CDA)**  
[COVID-19 Information and Resources](#)

**California Department of Developmental Services (DDS)**  
[Coronavirus Information and Resources](#)

**California Department of Health Care Services (DHCS)**  
[DHCS COVID-19 Response](#)

**California Department of Industrial Relations**  
[Cal/OSHA COVID-19 Emergency Temporary Standards—What Employers Need To Know](#)

**California Department of Public Health (CDPH)**  
[CDPH All Facilities Letters \(AFLs\)](#)  
[CDPH COVID-19 Home](#)  
[CDPH Find All Guidance](#)  
[CDPH Guidance for the Use of Face Coverings](#)

**California Department of Social Services (DSS)**  
[COVID-19 Information and Resources](#)  
*Webpage includes links to Provider Information Notices/PINS for Adult and Senior Care (ASC) Programs*

**Centers for Disease Control and Prevention (CDC)**  
[COVID-19](#)  
[COVID-19 Your Health](#)  
[COVID-19 Variants of the Virus](#)  
[COVID-19 Recommendations for Older Adults](#)  
[CDC Guidance When You've Been Fully Vaccinated](#)

**State of California**  
[California COVID-19 Website](#)  
[Office of Governor Gavin Newsom – Executive Orders](#)



# Questions?

## **CBAS Bureau Contact Information**

Phone: (916) 419-7545

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