

California Department of Aging

April 14, 2020

CBAS TEMPORARY ALTERNATIVE SERVICES (TAS)



PRESENTERS



California Department of Aging Community-Based Adult Services Branch

- Jill Sparrow, Chief
- Denise Peach, Chief Emeritus
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HOUSEKEEPING

- 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
- Q & A throughout the webinar (submit questions via the webinar “Questions” box)

WHAT WE'LL COVER TODAY

CBAS Temporary Alternative Services (TAS)

- Background – Governor's Orders
- CBAS TAS Defined
 - Services
 - Staffing
 - Participants
 - Reimbursement
- Process For CBAS TAS Approval
 - Plan of Operation
 - Updated Staffing/Services Form
 - Provider Agreement
- CDA Reporting and Oversight
- What's Next
- Questions

BRIEF RECAP

- Governor Newsom – March 4th Emergency Declaration, series of Executive Orders
- DHCS requests of CMS for 1135 Waivers - Flexibility
- CDPH – All Facilities Letters (AFL) - COVID-19 safety practices, ADHC Flexibility
 - AFL 20-34 Highlights – Temporary waiver of specified statutory/regulatory requirements for ADHCs
 - Allows for flexibility of all Basic ADHC services and staff roles
 - No individual flexibility requests required
- DHCS – All Plan Letters (APL) – Direction to the Managed Care Plans
- CDA – All Center Letters (ACL) – Guidance to CBAS Providers Regarding CBAS Temporary Services

STATE GUIDANCE RELATED TO CBAS

- March 3 - CDPH [AFL 20-17](#)
- March 18 - CDA [ACL 20-03](#)
- March 21 - Executive Order [N-35-20](#)
- March 23 – CDPH [AFL-20-27.1](#)
- March 23 – CDA [ACL 20-04](#) (revised)
- March 26 – CDA [ACL 20-05](#)
- March 26 - CDPH [AFL 15-29](#)
- March 26 – [DHCS APL 20-007](#)
- March 27 – [CDA ACL 20-06](#)
- April 2, 2020 - [CDPH AFL 20-34](#)
- April 13, 2020 - [ACL 20-07](#)
- 1135 Waiver Letters to CMS requesting flexibility during emergency:
 - DHCS ([3-19-2020](#))
 - CDPH (3-24-2020)



THE TAKE AWAY'S

CBAS TEMPORARY ALTERNATIVE SERVICES (TAS)

WHAT IS IT?

- Short-term, modified service delivery approach
- Allows certified CBAS providers to deliver essential services to participants most at risk during the COVID-19 outbreak
- Telephonic and telehealth services, limited individual in-center activities, and in-home services for CBAS participants
- Person-centered services provided based on the assessed health needs identified in participants' current Individual Plan of Care (IPC); identified through subsequent assessments; and noted in the health record.

NOTE: Providers must consider the **participants' most urgent needs** and **deliver them in the safest possible manner**. Providers may **serve participants in person ONLY** when absolutely necessary and **when using infection control measures** to protect participants and staff to reduce exposure to COVID-19

CBAS TAS

REQUIRED SERVICES

All CBAS TAS providers are required to do the following:

- ✓ **Maintain phone and email access for participant and family support, to be staffed a minimum of 6 hours daily, during provider-defined hours of services, Monday through Friday.**
- ✓ **Provide a minimum of one service to the participant or their caregiver for each authorized day billed.**
This service could include a telehealth (e.g., telephone, live video conferencing, written communication via text or email) contact, a service provided on behalf of the participant, or an in-person “door-step” brief well check conducted when the provider is delivering food, medicine, activity packets, etc.
- ✓ **Conduct a COVID-19 wellness check and risk assessment for COVID-19 at least once a week, with greater frequency as needed.**

CBAS TAS

REQUIRED SERVICES (CONT.)

All CBAS TAS providers are required to do the following (cont.):

- ✓ **Assess participants' and caregivers' current needs** related to known health status and conditions, as well as emerging needs that the participant or caregiver is reporting.
- ✓ **Respond to needs and outcomes** through targeted interventions and evaluate outcomes.
- ✓ **Communicate and coordinate** with participants' networks of care supports based on identified and assessed need.
- ✓ **Arrange for delivery or deliver supplies** based on assessed need, including, but not limited to, food items, hygiene products, and medical supplies. If needs cannot be addressed, staff will document efforts and reasons why needs could not be addressed.

*Services provided on behalf of the participant include care coordination such as those listed above

Providers must:

Staff CBAS TAS with a:

- 1) Program Director
- 2) Registered Nurse(s), and
- 3) Social Worker(s) to carryout all CBAS tasks.

And

Have additional staff as needed to:

- Address the number of participants served and their identified needs
- Assist in the delivery of services required for CBAS TAS participation
- Fulfill provider's CDA approved *CBAS TAS Plan of Operation*.

CBAS TAS

REQUIRED STAFFING



Some points to remember:



All staff must function within their scope of practice, qualifications, and abilities.



Staff are not expected to convene at the center but must have methods to be able to work collaboratively as a team from remote locations.



CDA will review the Plan of Operation to ensure that staff levels are adequate to the number of participants served.

CBASTAS

REQUIRED STAFFING (CONT.)

QUESTIONS

- Do I only need to retain a Program Director, one nurse, and a social worker?
- Can social work assistants and LVNs provide services if an RN or MSW is available (remotely) to supervise/consult?



CBAS TAS – PARTICIPANTS SERVED

- **Participants who have previously been approved or are in the process of approval**
 - These participants will be considered “continuing” participants and may only require additional authorization for CBAS TAS if their treatment authorization period is expiring. Providers will need to work with their contracting MCPs, or DHCS for fee-for-service participants, regarding processes for reauthorizations.
- **New participants may be enrolled.**
 - Providers will need to consult with their contracting MCPs, or DHCS for fee-for-service, for guidance regarding the process for enrollment of any new participants.

CBAS TAS

DOCUMENTATION

Providers must document all minimum services required under CBAS TAS, as well as all services indicated in their CDA approved *CBAS TAS Plan of Operation*.

NOTE: This includes customary administrative records (e.g., staff timesheets, transportation logs, TAS Plan of Operation) **AND** participant health records.

Documentation to be included in **participant health records** includes but is not limited to:

- Care plans, action plans, and targeted interventions that have been modified as participants' needs change
- Services provided, including date, type of service, and name/signature of person providing
- Notes reflecting ongoing assessment of participant needs and progress with care plans

CBAS TAS

DOCUMENTATION (CONT.)

For CBAS providers admitting and serving new participants during CBAS TAS, the health record must include at least a:

- Telehealth assessment
- Care plan

NOTE: Providers should maintain existing processes with MCPs and DHCS for electronic communications and signatures.

QUESTIONS

- Formats for TAS assessments and care plans – e.g, can they come in form of progress notes?
- Traditional CBAS IPCs and the role of TAS 'action plans' and 'targeted interventions'?
- Are reassessments and a care plan needed from every MDT member? Including PT, OT, RD, ST?



CBAS TAS – REIMBURSEMENT

Providers will receive their existing per diem rate from their contracting managed care plans and DHCS fee-for-service, providing they:

- Meet all requirements for CBAS TAS participation, and
- Provide a minimum of one service* to the participant or their caregiver for each authorized day.

*This service could include a telehealth contact (e.g., telephone, live video conferencing, written communication via text or email), an in-person “door-step” well check conducted when the provider is delivering food, medicine, activity packets, etc. , or care coordination on behalf of the participant.

CBAS TAS – REIMBURSEMENT (CONT.)

Reimbursement will temporarily work as follows:

- The required CBAS center staff must be available to all CBAS participants during the specified hours for phone and/or email contacts initiated by CBAS participants and caregivers.
- Reimbursement for CBAS TAS is retroactive to March 16th, 2020.
- Providers pending approval for CBAS TAS as described in [ACL 20-07](#) may begin billing immediately.
- The claims format, information contained therein, coding, and submission process will remain the same.
- Payments will be subject to recoupment/cancellation if participation requirements for CBAS TAS are not met in good faith.

NOTE: If a participant or caregiver requests to be disenrolled from the program or refuses all services after attempts to reengage them in CBAS TAS during this period, they may be considered on hold until the return of traditional CBAS or discharged, as appropriate, based on existing discharge requirements. The provider may not bill for those individuals unless services are provided.

HOW PROVIDERS OBTAIN APPROVAL FOR CBAS TAS

Providers wanting to participate in CBAS TAS will need to submit the following to CDA for review and approval:

- [CBAS TAS Plan of Operation Form \(CDA 7012\)](#)
- [CBAS TAS Provider Participation Agreement \(CDA 7013\)](#)
- [Updated Staffing/Services Arrangement Form \(ADH 0006\)](#)

Form has minor revisions to the instructions to account for staffing and operational changes during this time.

NOTE: Forms & instructions are posted on CDA's website.

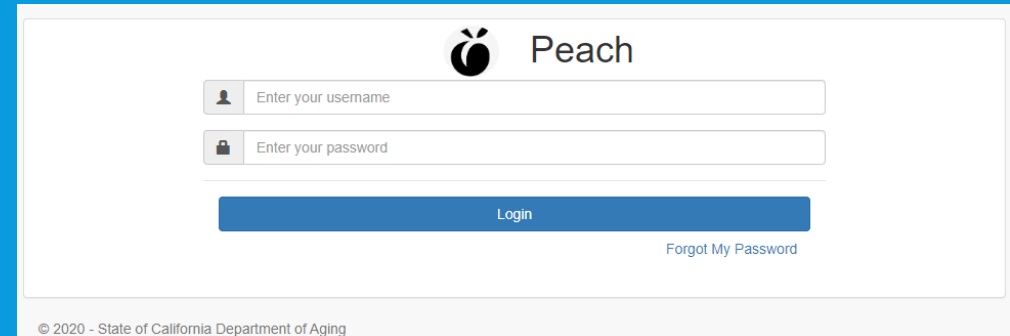
HOW PROVIDERS OBTAIN APPROVAL FOR CBAS TAS (CONT.)



- Providers wishing to participate in CBAS TAS must submit forms to CDA by Monday April 20, 2020.
- CDA will:
 - Expedite review of requests and communicate with providers to resolve any outstanding questions or concerns
 - Notify providers and MCPs of approvals and effective dates
- ❖ Providers that are unable to meet the filing deadline should contact CDA regarding a possible extension.
- ❖ Providers that fail to submit the required forms for participation in CBAS TAS or provide acceptable plans of operation will not be approved for CBAS TAS. CDA will notify those providers and their contracting MCPs of their status.

SUBMISSION PROCESS

- Complete and submit the TAS application by uploading to your center's POC folder within the Peach Provider Portal
- Go to: <https://providerportal.aging.ca.gov> using your Google Chrome internet browser
- Additional instructions are located in the TAS Application Instructions
- Complete instructions for managing your Peach Provider Portal account can be found on the [CDA webpage](#).



The screenshot shows the login interface for the Peach Provider Portal. At the top right, there is a peach logo and the word "Peach". Below this, there are two input fields: "Enter your username" and "Enter your password". A blue "Login" button is positioned below the password field. To the right of the button is a link that says "Forgot My Password". At the bottom left of the page, there is a copyright notice: "© 2020 - State of California Department of Aging".

WHEN CAN CBAS TAS BE PROVIDED?

- NOW and until further notice
- Effective dates for service will be:
 - March 16th, 2020 after the Governor's Orders,
or
 - The date they are scheduled to begin in the future, if services have not yet begun.

Services provided prior to March 16th, 2020, are subject to regular CBAS standards and processes.
- CDA will notify providers and MCPs of CBAS TAS approval. Effective dates for commencement of CBAS TAS for each provider will be certified by CDA in the revised *CBAS TAS Provider Participation Agreement*.

CDA REPORTING AND OVERSIGHT

CDA will conduct ongoing monitoring of CBAS TAS with:

- ✓ Regular calls to providers to ensure phone and email are readily available, to monitor the provider's Plan of Operation, and offer assistance
- ✓ Requests for administrative and participant health records for the purpose of data collection and verifying that CBAS TAS requirements are met

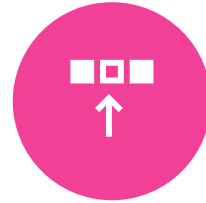
Providers must report to CDA changes of staffing, changes to their TAS Plan of Operation and unusual incidents



DEVELOP FAQs TO ADDRESS QUESTIONS RAISED DURING THIS WEBINAR AND BEYOND



RELEASE FURTHER ACL GUIDANCE BASED ON CHANGING CIRCUMSTANCES



PROVIDE ADDITIONAL WEBINAR UPDATES/TRAINING AS NEEDED



CONTINUE TO PARTNER WITH CAADS TO GET ASSISTANCE WITH PROCESS DEVELOPMENT, TO HEAR FROM PROVIDERS ABOUT BEST PRACTICES AND SHARE THEM



PARTICIPATE IN REGULAR WEBINARS AND CALLS WHERE WE HEAR AND LEARN FROM PROVIDERS ABOUT EXPERIENCES "ON THE GROUND"



CONTINUE TO PARTNER WITH DHCS, CDPH, AND MANAGED CARE PLANS TO ENSURE CONSISTENT POLICY GUIDANCE, ENSURE PROGRAM INTEGRITY, AND RESPOND TO THIS CHANGING ENVIRONMENT

NEXT STEPS

CDA WILL....

The background of the slide is a vibrant blue sky. In the upper portion, several large, white, stylized question marks are scattered across the frame. Below these, a horizontal band of white clouds stretches across the width of the slide. The lower portion of the slide shows more white, fluffy clouds against the blue sky.

CLOSING THOUGHTS AND QUESTIONS

THANK YOU

Thank you for joining us today and for the good work you're doing for the people we all serve.

Please keep flexibility and safety foremost in mind as you support our participants during these difficult times.

We're all in this together.

Thank you.



CDA CONTACT INFORMATION

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