



# CBAS Emergency Remote Services (ERS) Office Hours Webinar

November 30, 2022

# Today's Presenters

## **Denise Peach**

CBAS Retired Chief

## **Leigh Witzke**

CBAS Nursing Bureau Chief

## **Brett Hendrickson**

CBAS Field Support Data Analyst

# Welcome & Housekeeping

- We are happy you joined us today!
- Questions are welcome – please submit via the webinar “Questions” or “Q&A” box
- This webinar is being recorded and will be posted on the CDA website
- Please encourage staff and providers who are not able to join us today to listen to the reporting requirements webinar once posted

# Agenda

- Discharge Reporting Requirements
- ERS Data
- Pausing In-Center Services Related to Outbreaks (ACL 22-08)
- Examples of Concise CBAS ERS Initiation Forms (CEIFs)
- Q&A

# Discharge Reporting Requirements

- [CBAS Discharge Summary Report \(CDA 4008\)](#) is a tracking document that includes summary data on all discharge participants.
  - Refer to [CBAS Discharge Summary Report Instructions \(CDA 4008i\)](#)
- Discharge Summary Reports are to be maintained for participants discharged from a CBAS center throughout the year.
- Centers shall provide Discharge Summary Reports to CBAS upon request by CDA.
  - Providers should also submit Discharge Summary Reports to MCPs.
- CDA will require Discharge Summary Reports be submitted for 2022 by January 2023.

# CBAS Monthly ERS Reporting Requirements

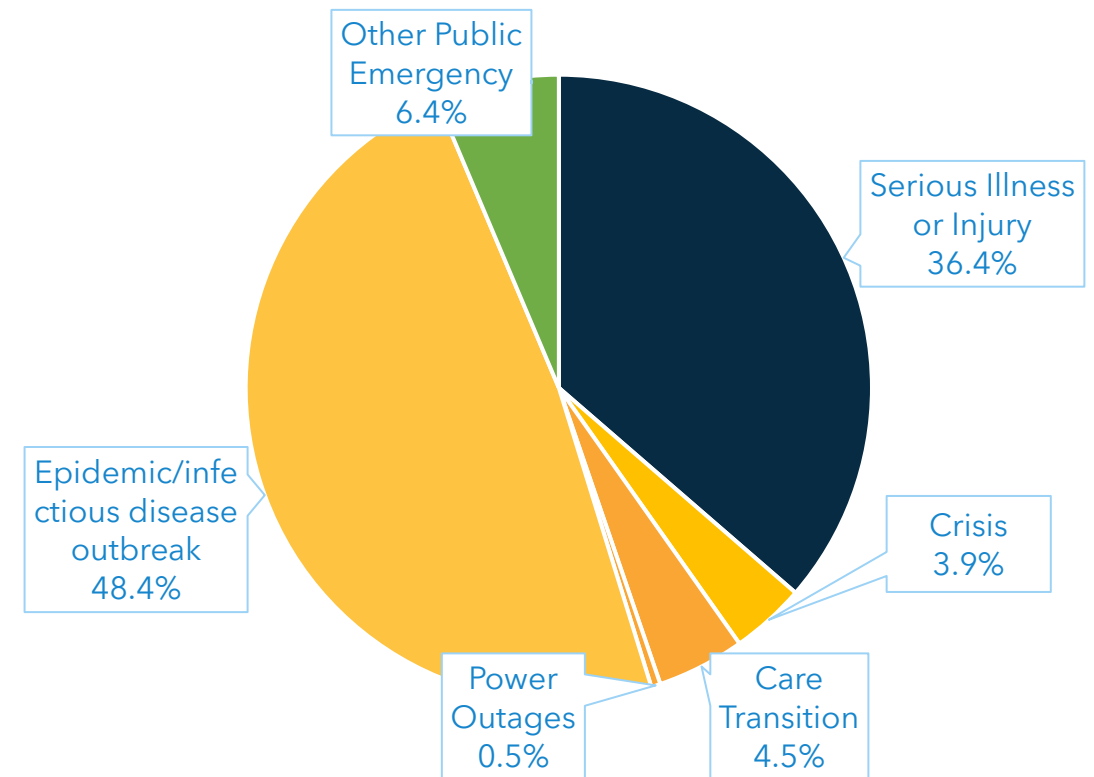
- Beginning **October 1st, 2022**, providers were required to report dates of service for each participant receiving ERS.
- CBAS providers are required to report ERS days by the **10<sup>th</sup> of each month for the previous month.**
  - For example, October ERS days to be submitted by November 10<sup>th</sup>, and November ERS days to be submitted by December 10<sup>th</sup>.
- This data will be used in conjunction with Monthly Statistical Summary Report (MSSR) data to account for individual and total days of ERS attendance.
- This will allow CDA to provide monitoring and oversight of the newly established ERS component of CBAS care.

# CBAS ERS Data\*

## Current ERS Events

	Current Events	Current Events %
<b># of ERS Events</b>	4,574	N/A
<b># of Centers Utilizing ERS</b>	152/280	54%
<b># of CBAS Participants**</b>	4,574	12.3%
<b>Total Personal Emergencies</b>	2,448	53.5%
<b>Serious Illness or Injury</b>	1,969	43.0%
<b>Crisis</b>	207	4.5%
<b>Care Transition</b>	272	5.9%
<b>Total Public Emergencies</b>	2,126	46.5%
<b>Power Outages</b>	0	0.0%
<b>Epidemic/infectious disease outbreak</b>	1,781	38.9%
<b>Other Public Emergency</b>	345	7.5%

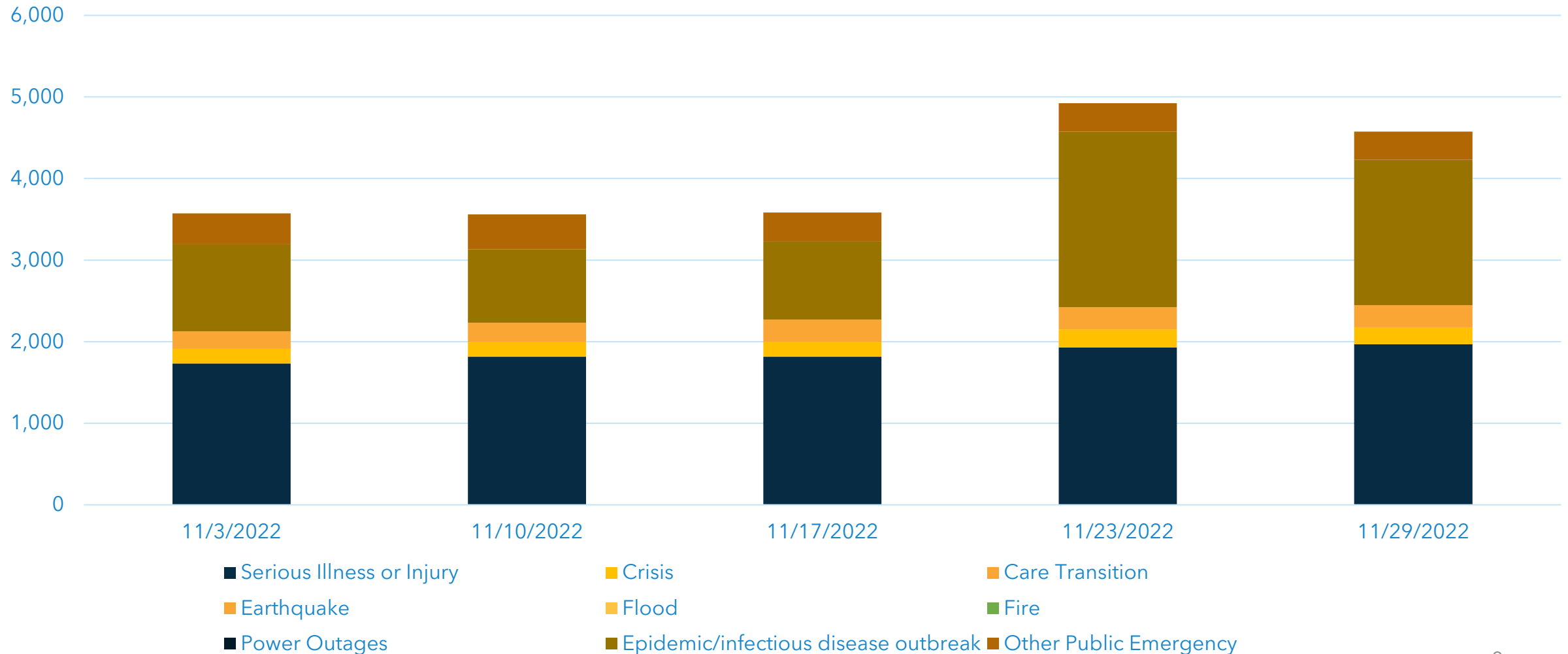
## Total ERS Categories



\*Current data as of November 29, 2022

\*\*% of CBAS Participants Calculates by the # of active ERS events/most recent available MSSR data

## Active ERS Events Over Time

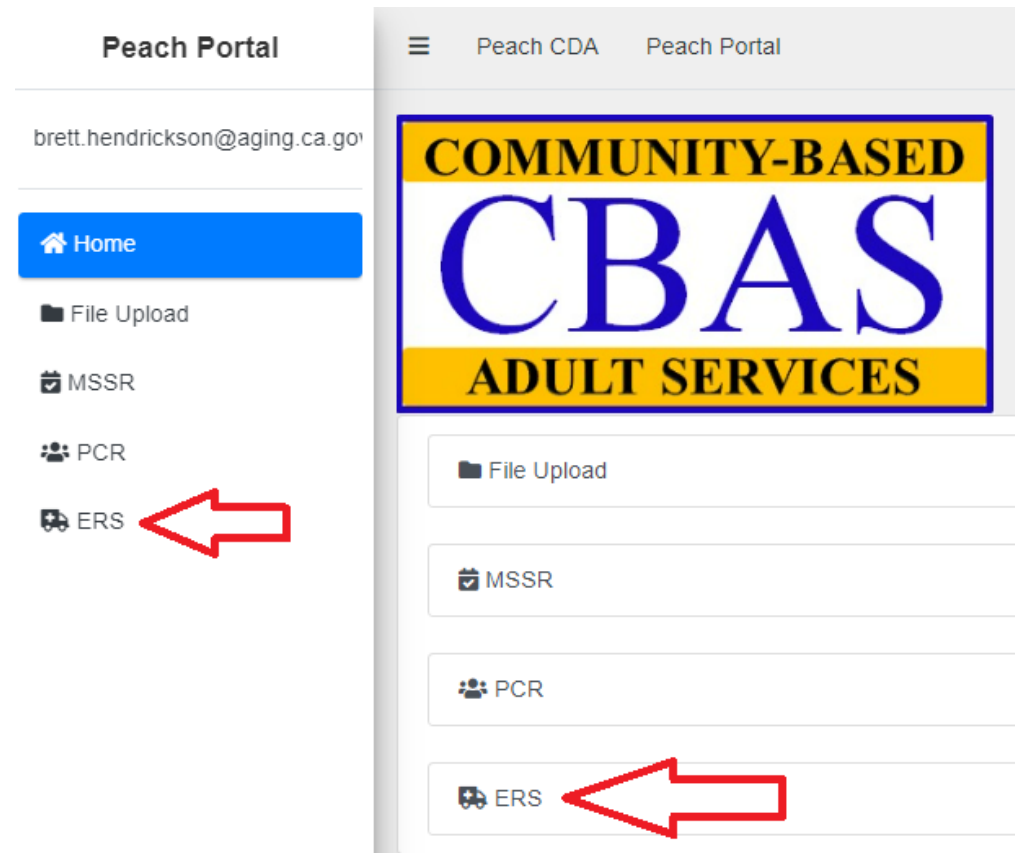


\*Current data as of November 29, 2022



# Accessing the CEIF (CDA 4000)

1. Log in to the [Peach Portal](#).
2. Select ERS from the list of options.



# Accessing the CEIF (CDA 4000)


3. Find the **Center** dropdown menu and select the appropriate center.

Emergency Remote Services

[+ New Initiation Form](#) [Bulk Initiation Form](#)

Emergency Date From

Emergency Date To

Center  

[CEIF In Progress 0](#) [Active ERS Events 0](#) [Closed ERS Events 0](#)

Show  entries

Search:

Event Id	Participant First Name	Participant Last Name	CIN	MCP/FFS	Emergency Date	Consent Date	Emergency
No data available in table							

Showing 0 to 0 of 0 entries

[Previous](#) [Next](#)

# Accessing the CEIF (CDA 4000)

## 4. Select + New Initiation Form.

### Emergency Remote Services

[+ New Initiation Form](#) [Bulk Initiation Form](#)

Emergency Date From  Emergency Date To  Center

[CEIF In Progress 0](#) [Active ERS Events 0](#) [Closed ERS Events 0](#)

Show  entries

Search:

Event Id	Participant First Name	Participant Last Name	CIN	MCP/FFS	Emergency Date	Consent Date	Emergency
No data available in table							

Showing 0 to 0 of 0 entries

[Previous](#) [Next](#)

# Review and Submission

1. Carefully examine each field for accuracy and verify that all requirements for ERS have been met.
2. Select **Review**

## Dates & Signature

I certify the following: The participant meets all criteria for receiving ERS and has been assessed by the center's registered nurse and/or social worker. The required information regarding the participant's need for, and the Center's provision of, ERS will be documented in the participant's health record.

Participant has 1) experienced a public or personal emergency that restricts or prevents their attendance in the center; and 2) requires medically necessary services and/or supports determined by CBAS MDT members to ensure essential continuity of care is maintained, assessed needs and service gaps are addressed. ERS supports and services promote return to center-based services and/or aid in a transitional period to/from the center **and** are not knowingly duplicative.

Name \*

Brett Hendrickson

Date

09/26/2022

Center Representative Title \*



Administrator



Program Director

 Review



# Review and Submission

## 3. Select **Submit and send to CDA**

Summary

Emergency Remote Services Initiation Form (CEIF) is ready to print/download for the following participant at Maywood Adult Day Health Care Center:  
  
**First Name:** Bugs  
**Last Name:** Bunny  
**CIN:** 12345678E  
**Plan:** Medi-Cal fee-for-service  
**Emergency:** Serious illness or injury  
**Emergency Date:** 09/21/2022  
**Consent Date:** 09/22/2022

Edit Form

Submit and send to CDA

4. A link to download the CEIF will be emailed to the **user logged in to Peach** upon submission. You can access the completed CEIF by email or directly from the Peach Portal.

# Updating Participant ERS Attendance Dates

1. Select the **Active ERS Events** tab.

New Initiation Form

Bulk Initiation Form

Emergency Date From

mm/dd/yyyy

Emergency Date To

mm/dd/yyyy

Center


Maywood Adult Day Health Care Center

CEIF In Progress 0

Active ERS Events 1

Closed ERS Events 0

Show 10 entries

	Event Id	Participant First Name	Participant Last Name	CIN	MCP/FFS	Emergency Date
	7	Bugs	Bunny	12345678E	Medi-Cal fee-for-service	9/21/2022


Showing 1 to 1 of 1 entries

# Updating Participant ERS Attendance Dates

2. Select the arrow next to the participant's name.

CEIF In Progress 0 Active ERS Events 1 Closed ERS Events 0

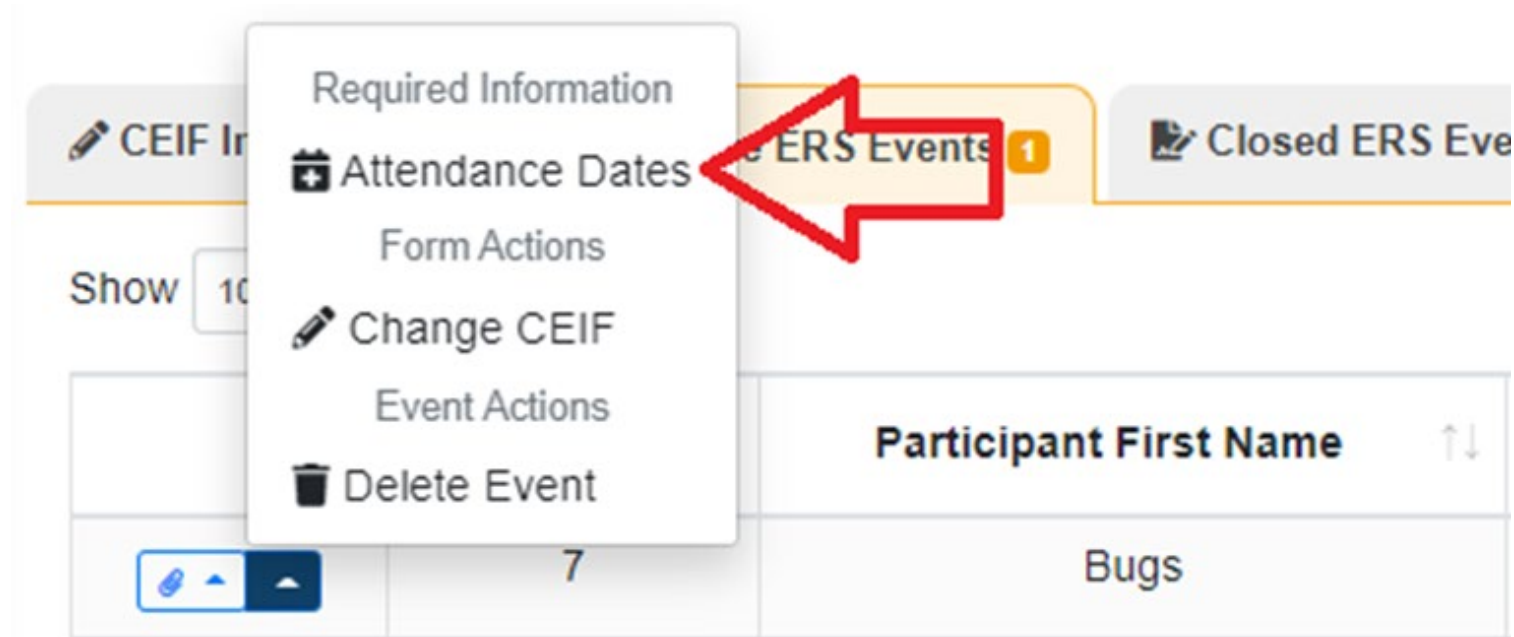
Show 10 entries

	Event Id ↑↓	Participant First Name ↑↓	Participant Last Name ↑↓
	7	Bugs	Bunny

Showing 1 to 1 of 1 entries

# Updating Participant ERS Attendance Dates

## 3. Select **Attendance Dates**.






# Updating Participant ERS Attendance Dates

4. Select all dates from the calendar in which the participant received ERS for the current CEIF.

### Attendance Days

Participant	CIN	Plan	Emergency
 Bugs Bunny	12345678E	Medi-Cal fee-for-service	Serious illness or injury

**Date of Emergency** 09/21/2022

**Date of Participant Consent** 09/22/2022

**TAR Range** Friday, July 1, 2022 - Saturday, December 31, 2022

**First Date ERS Provided** Thursday, September 22, 2022


September 2022

Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

No Dates Selected

Cancel Save Days

# Updating Participant ERS Attendance Dates





5. Remove a date by clicking on the  icon next to the date to be removed.

## Attendance Days

Participant	CIN	Plan	Emergency
 Bugs Bunny	12345678E	Medi-Cal fee-for-service	Serious illness or injury
Date of Emergency 09/21/2022			
Date of Participant Consent 09/22/2022			
TAR Range Friday, July 1, 2022 - Saturday, December 31, 2022			
First Date ERS Provided Thursday, September 22, 2022			

September 2022

Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

 9-22-22  
 9-23-22  
 9-24-22  
 9-26-22




Cancel

Save Days

# Updating Participant ERS Attendance Dates

## 6. Select **Save Days**

### Attendance Days

Participant	CIN	Plan	Emergency
 Bugs Bunny	12345678E	Medi-Cal fee-for-service	Serious illness or injury

**Date of Emergency** 09/21/2022


**Date of Participant Consent** 09/22/2022


**TAR Range** Friday, July 1, 2022 - Saturday, December 31, 2022


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18	19	20	21	22	23	24
25	26	27	28	29	30	

 9-22-22

 9-23-22


 9-24-22




Cancel

 Save Days






# Concluding ERS

1. Confirm all attendance dates have been reported.
  - a. Select the **Active ERS Events** tab.

Emergency Date From   Emergency Date To

 CEIF In Progress 0  **Active ERS Events** 1  Closed ERS Events 0


Show  entries




	Event Id 	Participant First Name 	Participant Last Name 
 	7	Bugs	Bunny

Showing 1 to 1 of 1 entries





# Concluding ERS

b. Select the arrow next to the participant's name.

Emergency Date From   Emergency Date To

 CEIF In Progress 0  Active ERS Events 1  Closed ERS Events 0

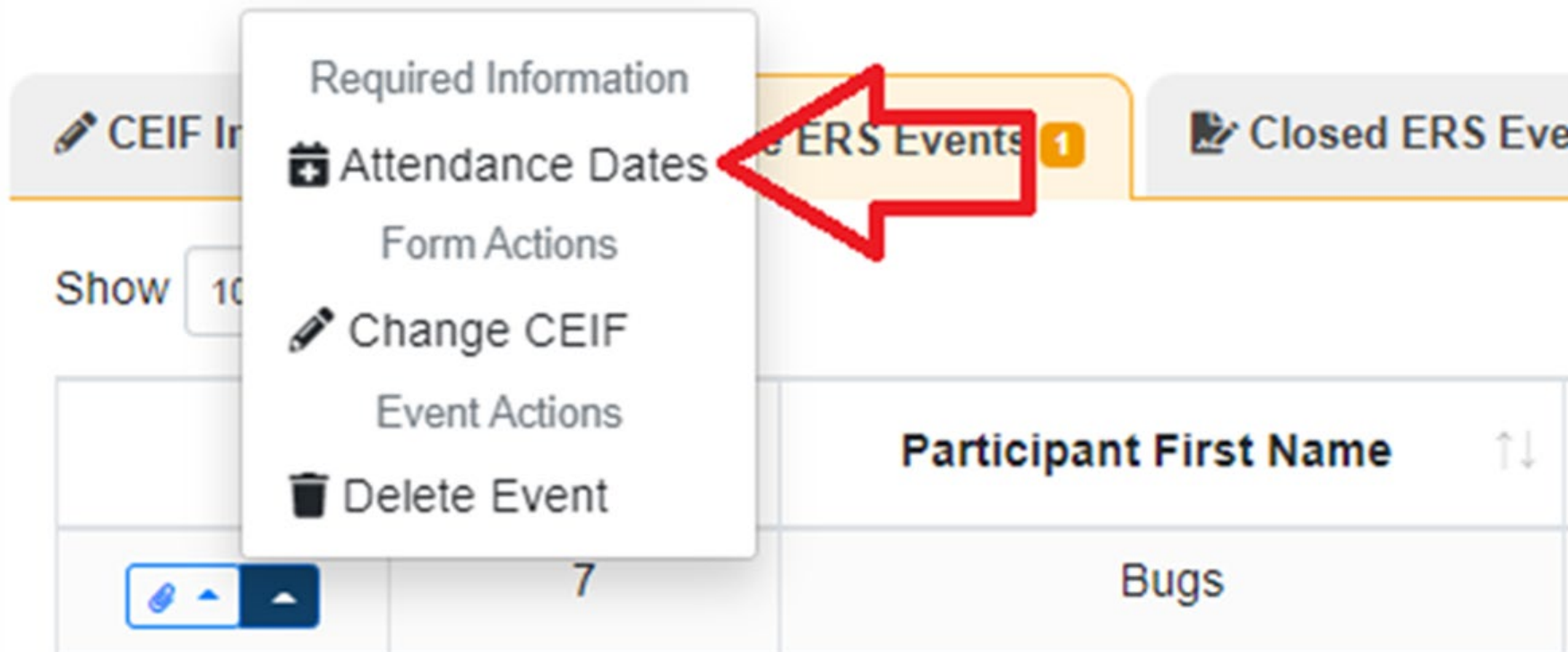
Show  entries

	Event Id 	Participant First Name 	Participant Last Name 
	7	Bugs	Bunny

Showing 1 to 1 of 1 entries

# Concluding ERS


## c. Select **Attendance Dates**



# Concluding ERS




## d. Confirm ERS Dates

### Attendance Days

Participant	CIN	Plan	Emergency
 Bugs Bunny	12345678E	Medi-Cal fee-for-service	Serious illness or injury
Date of Emergency 09/21/2022			
Date of Participant Consent 09/22/2022			
TAR Range Friday, July 1, 2022 - Saturday, December 31, 2022			
First Date ERS Provided Thursday, September 22, 2022			

September 2022

Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

 9-22-22  
 9-23-22  
 9-24-22


Cancel

Save Days

# Concluding ERS

e. Select **Save Days** if these days are accurate or edit accordingly.

### Attendance Days

Participant	CIN	Plan	Emergency
 Bugs Bunny	12345678E	Medi-Cal fee-for-service	Serious illness or injury

**Date of Emergency** 09/21/2022




**Date of Participant Consent** 09/22/2022

**TAR Range** Friday, July 1, 2022 - Saturday, December 31, 2022


**First Date ERS Provided** Thursday, September 22, 2022

September 2022

Su	Mo	Tu	We	Th	Fr	Sa
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18	19	20	21	22	23	24
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 9-22-22  
 9-23-22  
 9-24-22


Cancel




 Save Days







# Concluding ERS

2. Select the arrow next to the corresponding participant's name.

Emergency Date From   Emergency Date To

 CEIF In Progress 0  Active ERS Events 1  Closed ERS Events 0

Show  entries

	Event Id 	Participant First Name 	Participant Last Name 
	7	Bugs	Bunny

Showing 1 to 1 of 1 entries

# Concluding ERS

## 3. Select **Close Event**

Emergency Date From mm/dd/yyyy mm

CEIF In RS Events 1 Closed ERS Ever

Show 10

Required Information

- Attendance Dates 3

Form Actions

- Change CEIF

Event Actions

- ☒ Close Event
- Delete Event

Participant First Name ↑↓

7 Bugs

# Concluding ERS

## 4. Select **Close Event**

Close Event?

x

Are you sure you want to close this event?

Cancel

Close Event

# Concluding ERS

5. A green box will appear in the righthand corner of the screen stating "Success – the event was closed successfully".

Peach CDA Peach Portal

## Emergency Remote Services

[+ New Initiation Form](#) [Bulk Initiation Form](#)

**Emergency Date From**  
mm/dd/yyyy

**Emergency Date To**  
mm/dd/yyyy

**Center**  
Maywood Adult Day Health Care Center

[CEIF In Progress](#) [Active ERS Events](#) [Closed ERS Events](#)

Show 10 entries

Search:

Event Id	Participant First Name	Participant Last Name	CIN	MCP/FFS	Emergency Date	Consent Date	Emergency	Received Date
No data available in table								

Showing 0 to 0 of 0 entries

Previous Next

Success  
The event was closed successfully.

# Pausing In-Center Services

## [ACL 22-08 CBAS Emergency Remote Services \(ERS\) – Public Emergency Requirements \(9/20/22\)](#)

- Establishes requirements for state and local public disasters and public health emergencies
- Public emergencies vary in level of impact to CBAS centers and participants
- Temporary pausing of center-based services may be needed if:
  - ✓ Access to center not physically possible
  - ✓ Highly infectious disease outbreak or epidemic creates unsafe conditions for center-based operations

# Pausing In-Center Services

## [ACL 22-08 CBAS Emergency Remote Services \(ERS\) – Public Emergency Requirements \(9/20/22\)](#)

- COVID Outbreak
  - ✓ Identification of three or more suspected, probable, or confirmed COVID-19 cases within a 14-day period among people who are epidemiologically linked in the setting
  - ✓ In such instances, providers must notify and follow any additional guidance provided by the local health department
- Other Highly Infectious Diseases (Norovirus, Tuberculosis, etc.)
  - ✓ Consultation with the center staff physician AND determination by the local health department

# Pausing In-Center Services

## [ACL 22-08 CBAS Emergency Remote Services \(ERS\) – Public Emergency Requirements \(9/20/22\)](#)

### [CDA CBAS Incident Reporting Requirements](#)

- For public emergencies qualifying for and resulting in temporary pause of center-based services as defined above, providers are required to report as follows:
  - ✓ Send an [ADHC/CBAS Incident Report \(CDA 4009\)](#) to the California Department of Public Health (CDPH), CDA, and contracting managed care plans per CDA Incident Report requirements/[instructions](#), within 24 hours of incident
  - ✓ Notify CDPH and CDA in writing within 24 hours of conclusion of the temporary pause and resumption of center-based services
  - ✓ Notify CDA and CDPH in writing of any temporary pause in center-based services lasting more than two weeks

# Examples of Concise CEIFs

- **Your documentation informs your Managed Care Plan Partners**
- **Description of Emergency 320-character limit:** what has occurred to affect the Participant's ability to attend in-center services. Be specific:
  - **Public emergency example:** Wildfire (name) Ptp in evacuation zone & displaced, moved to temporary housing without services & supports and adaptive living equipment
  - **Personal emergency example:** MCI, DM1, Fall w/ fx 11/4/22 req center monitoring of pain, healing, medication effectiveness/compliance, BS, Bp, cog status until pain control, W/C & transp obtained, est 3wks



# Examples of Concise CEIFs

- **Background 520-character limit**

- **Example:** ptp unable to monitor own health status rel to Dx MCI. Req. structure & routine to maintain functional abilities. Stressors of recent fall w/ fx, pain, new med regime & disrupted routine increased confusion & increased need for services and supports. CG stressed & wrks during day.

- **Assessment 420-character limit**

- **Example:** Ptp needs nursing telehealth svcs qd to ensure med compliance, eval eff, walk ptp through BS/Bp cks, evaluate level of cog, pain, mobility, healing and safety needs. Ptp needs SW telehealth svc 2x/wk to coordinate w/c transp and provide 1:1 interaction

- **Proposed Services 320-character limit**

- **Example:** Nsg telehealth QD video obs for med adm BS/Bp assess pain healing mobility SW telehealth 2x/wk coord transp w/c, cg support, ptp 1:1 interaction

## California Department of Aging (CDA)

- [CBAS Webpages](#)
- [CBAS Emergency Remote Services](#)
- [CBAS All Center Letters](#)
- [CBAS Forms & Instructions](#)

## California Department of Public Health (CDPH)

- [CDPH All Facilities Letters \(AFLs\)](#)
- [CDPH COVID-19 Home](#)
- [CDPH Find All Guidance](#)
- [Get the Facts on COVID-19 Vaccines, Boosters, and Additional Doses \(10/20/22\)](#)
- [COVID-19 Booster Doses \(10/20/22\)](#)
- [Guidance for the Use of Face Masks \(9/20/22\)](#)
- [Updated Testing Guidance \(9/15/22\)](#)
- [Health Care Worker Vaccine Requirement \(9/13/22\)](#)
- [Guidance for Local Health Jurisdictions on Isolation and Quarantine of the General Public \(9/9/22\)](#)
- [Isolation and Quarantine Q&A \(9/9/22\)](#)
- [CDPH AFL 21-35 Guidance for In-Center Services and Operation of ADHCs during the Coronavirus Disease 2019 \(COVID-19\) Pandemic \(9/17/21\) \(Being revised\)](#)

## California Department of Industrial Relations

- [Cal/OSHA COVID-19 Prevention Emergency Temporary Standards](#)

## Centers for Disease Control and Prevention (CDC)

- [COVID-19](#)
- [Stay Up to Date with COVID-19 Vaccines Including Boosters](#)
- [Isolation and Precautions for People with COVID-19](#)
- [Long COVID or Post-COVID Conditions](#)
- [People with Certain Medical Conditions](#)
- [COVID-19 Treatments and Medications](#)

## State of California

- [COVID19.CA.GOV](#)
  - [Current Safety Measures](#)
  - [Vaccines](#)
  - [Masks](#)
  - [Testing](#)
  - [Safety in the Workplace](#)
  - [Quarantine and Isolation](#)



# Questions





## CBAS Bureau Contact Information

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