

Memo

To: Community-Based Adult Services (CBAS) providers

From: Health Plan of San Mateo

Date: April 17, 2020

Subject: CBAS Temporary Alternative Services (TAS) updates during COVID-19 public emergency

Dear CBAS Providers,

The Health Plan of San Mateo (HPSM) has received updated regulatory guidance for CBAS providers. This guidance includes important information about reimbursement and requirements for delivering alternate services during the COVID-19 public health emergency. We have summarized these below and encourage you to reach out with questions.

Overview of guidance

- The **revised [All Plan Letter \(APL\) 20-007](#)** from the Department of Health Care Services (DHCS) “provides Medi-Cal managed care health plans (MCPs) with policy guidance regarding the temporary authorization of Community-Based Adult Services (CBAS) provided telephonically, in members’ homes, and individually in centers, in lieu of congregate services provided at CBAS centers, during the period of this current public health emergency.” The guidance is in response to public health stay-at-home and social distancing guidance and directives resulting from the COVID-19 outbreak.
- The California Department of Aging (CDA) issued additional guidance in [ACL 20-07](#) to further clarify requirements for CBAS Temporary Alternative Services (TAS).
- The California Department of Public Health issued [All Facilities Letter 20-27.1](#) to provide guidance to adult day health centers to mitigate and prevent transmission of COVID-19.

There are certain provisions prescribed in APL 20-007 and CDA ACL 20-07 that will be required for CBAS centers to perform CBAS TAS. These requirements include but are not limited to:

- 1) Submission and Approval of CBAS TAS application to CDA
- 2) Meeting specific staffing and service requirements
- 3) Authorization and reimbursement requirements
- 4) Documentation and reporting requirements

More detail on each requirement is below.

1. How can CBAS centers submit their CBAS TAS application?

Per ACL 20-07, providers wanting to participate in CBAS TAS will need to submit the following to CDA for review and approval:

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

Forms are located on the [CDA website](#). Providers wishing to participate in CBAS TAS will be required to submit forms to CDA by Monday April 20, 2020. CDA staff are working diligently to expedite the decision process. Providers that are unable to meet the April 20, 2020 filing deadline should contact CDA regarding a possible extension.

2. What are the service and staffing requirements for HPSM CBAS TAS?

Upon approval by CDA, CBAS centers may provide CBAS TAS in accordance with CDA *ACL 20-07*. CBAS centers are granted time-limited flexibility to reduce day center activities and to provide CBAS TAS as appropriate, per *APL 20-007*, “telephonically, via telehealth, live virtual video conference, or in the home (if proper safety precautions are taken and no other option for providing services is able to meet the participant’s needs).” Please refer to CDA *ACL 20-07* for the list of approved services/tasks and minimum service and staffing requirements for each CBAS center. In addition, delivery of services must be based on a CBAS participant’s assessed needs as documented in the current Individual Plan of Care (IPC), and/or identified by subsequent assessment by the center’s multidisciplinary team.

3. What are HPSM’s reimbursement, authorizations, redetermination, and eligibility/enrollment requirements for CBAS TAS?

Reimbursement

CBAS centers are eligible to *receive their existing per diem rate* for the provision of CBAS TAS, and as described by *APL 20-007*. Reimbursement for CBAS TAS is retroactive to *March 16, 2020*. There will be no changes in the way you submit your claims, upon CDA CBAS TAS approval.

Redetermination/Reauthorization process

The **redetermination period** for CBAS services will continue to be evaluated **every 6 months**, utilizing the existing reauthorization process. However, a CBAS TAS **Action Plan** will now be **required** to be completed, per member. The Action Plan is a person-centered approach, targeted CBAS TAS intervention that will serve as a short-term care plan in addition to the members IPC. Action Plan minimum documentation requirements include:

- emergent needs of client during COVID period
- plan for care and follow up during COVID period
- minimum one daily TAS being provided for each member (i.e. wellness, telephone, email, video conferencing and/or doorstep delivery of services (food, medicine, activity packets, care coordination)

Eligibility and enrollment requirements

HPSM members, who have previously been approved or are in the process of approval, can receive TAS. These participants will be considered “continuing” participants and may only require additional authorization for CBAS TAS if their treatment authorization period is expiring.

New participants may be enrolled into CBAS TAS. Please follow the HPSM CBAS **existing process** for **new enrollees** during this time with the addition of the Action Plan review by the LTSS Nurse Case Manager (NCM).

For questions around TARS, enrollment and/or redetermination, please reach out to our LTSS NCM, Stheavi Tiv at Stheavi.Tiv@hpsm.org.

4. What are the monitoring and reporting requirements for HPSM CBAS TAS?

During this public emergency, there will be additional monitoring/reporting requirements regarding the delivery of CBAS TAS for HPSM members; these requirements include:

- 1) CBAS centers will be required to continue participating on **weekly outreach meetings** with the HPSM LTSS NCM to discuss staffing, operations, support needs, member outreach, and TAS services.
- 2) HPSM will conduct **monthly Utilization Reviews** of 2 TAS authorized participants receiving CBAS TAS for *at least 2 months*, per CBAS center. HPSM will send out a template of the checklist that will be used by the LTSS NCM for the Utilization Review.
- 3) CBAS centers are required to provide a **CBAS TAS weekly report** to HPSM for all members authorized for TAS, to include:
 - Participant/Member name
 - DOB
 - CIN
 - Date of Service
 - On Hold Status
 - Staff who provided the service
 - Type of Service Provided (minimum one daily TAS provided) described in APL 20-007 and ACL 20-07

HPSM will send out a template of the CBAS TAS Weekly report to HPMS contracted CBAS Centers.

- If a participant refuses services to TAS, this member will be considered as having an **ON HOLD** status until the return of traditional CBAS services. CBAS centers are restricted to bill while the member is on an ON HOLD status, unless services are being provided. CBAS centers must notify HPSM of all ON HOLD status members via the CBAS TAS Weekly report.

We want to thank you again for your on-going efforts to support our members and providing alternative services in the safest possible manner during the COVID-19 emergency. Please continue to refer to the [California Department of Public Health \(CDPH\)](#)¹, [CAADS](#)², [CDA](#)³, and [HPSM](#)⁴ websites for additional tools and the most up to date information on preventing the spread of COVID-19. In addition, we encourage you all to attend the **next HPSM CBAS Consortium Meeting on April 28, 2020.**

Should urgent matters arise during this time or if you have any additional questions, please do not hesitate to contact Luarnie Bermudo, Credentialing Manager at Luarnie.Bermudo@hpsm.org and Gale Carino, Integrated Services Manager at Gale.Carino@hpsm.org.

Sincerely,

Luarnie Bermudo
HPSM Credentialing Manager

¹ CDPH Website: <https://www.cdph.ca.gov/>

² CAADS Website: <http://www.caads.org/>

³ CDA Website: <https://www.aging.ca.gov/>

⁴ HPSM Website on COVID-19 related updates: <https://www.hpsm.org/provider/provider-news-updates/urgent-messages>