Re-Establishing Services

Public Health Emergency Shifting Activities
Federal Emergency Response Vehicles

- **HCBS 1915(c) Waiver – Appendix K**
  - 48 states submitted and approved Appendix K
  - Effective for up to one year, depending on state’s request
  - Can be retroactive
  - Adjustments only to activities allowable within 1915(c) waiver

- **1135 Waiver**
  - Flexibilities within Medicaid State Plan (and Medicare)
  - CMS created Blanket Waivers for COVID-19 Public Health Emergency (PHE)
  - Requires national PHE declaration; expire when PHE is declared terminated
  - Flexibilities regarding provider enrollment, HIPPA, timeline adjustments, and additional conditions
State Activities Towards Re-Establishing Services

• Identify Individual Impact
  • Risk and Benefit tools emerging
  • Person Centered planning adapted procedures
  • Maintain what’s working
  • Budget neutrality for return to service

• Identify Agency Impact
  • Provider Readiness review tools
  • Staffing capacity/capabilities
  • Physical space, equipment and supplies
  • Budget and cost analysis

• Identify System Impact
State Activities Underway

• All states engaging in discussions, developing tools;
• Some examples:
  • Hawaii- provider readiness assessment
  • Maine/Ohio – Risk Benefit Analysis tool
  • Pennsylvania – Transition to next phase individual planning guide
  • Connecticut – Survey of Families and Self Advocates
Unanswered Questions Remain
Scenario Planning

- Used when uncertainties exist
- Compare possibilities to identify potential scenarios
- Focus planning on the most likely scenarios
- Anticipate problems, discuss potential unanticipated challenges
Scenario Planning Part 2:

• Discuss each scenario’s alignment and misalignment with:
  • System values
  • Current rules/regulations
  • Risk to health of all people involved
  • Provider capacity and capabilities
  • Assurance of parity of service access
  • Advance the goals of the system
  • Allow for flexibility if infection rates increase

• Develop action planning for each area
<table>
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<th>Draft Scale for understanding vulnerability to COVID-19 infection:</th>
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| **Very proficient** | • Understands and maintains six foot physical distance  
• Does not physically touch others  
• Washes hands frequently with soap and water as per CDC UP guidelines  
• Fully practices personal hygiene with coughing/sneezing, wiping mouth;  
• Wears a face covering when outside of home at all times, and is comfortable with others wearing face covering |
| **Proficient** | • Understands and usually maintains six foot physical distance  
• Rarely touches others unless necessary for personal care needs;  
• Washes hands frequently with soap and water as per CDC UP guidelines with reminders from family or support staff.  
• Practices personal hygiene with coughing, sneezing, wiping mouth with reminders  
• Wears a mask when outside of the home with reminders; is comfortable with others wearing face covering. |
| **Somewhat proficient** | • Understands and usually maintains six foot physical distance with the support of others  
• Occasionally touches others in addition to when necessary for personal care needs;  
• Washes hands with soap and water as per CDC UP guidelines, with reminders from family or support staff, with occasional refusals.  
• Practices personal hygiene with coughing, sneezing, wiping mouth with reminders or assistance; may not initiate when needed.  
• Wears a mask when outside of the home with reminders; is comfortable with others wearing face covering. |
| **Little proficiency** | • Understands and maintains six foot physical distance only with support from others  
• Occasionally touches others unless frequently reminded to keep distance;  
• Cooperates with frequent handwashing as per CDC UP guidelines when assisted by staff.  
• Needs reminders and physical assistance to practice personal hygiene with coughing, sneezing, wiping mouth.  
• Wears a face covering for short periods of time when outside of the home; is comfortable with others wearing face covering. |
| **No proficiency** | • Does not understand or maintain six foot physical distance  
• Frequently touches others, regardless of reminders  
• Does not wash hands as per CDC UP guidelines  
• Does not demonstrate understanding of the need to practice personal hygiene with coughing, sneezing, wiping mouth  
• Refuses to wear a face covering at any time; is distressed when seeing others wearing face coverings. |
| **Unaware of any risk or prevention practices** | • The individual is unable to demonstrate any of the above skills related to personal hygiene, personal touch, physical distancing and is uncomfortable with wearing a face covering or is distressed by seeing other people wearing facial coverings. |