



FAQs for DDS Directive 01-083120:
Alternative Nonresidential Services (Alternative Services)

Q1. What are Alternative Nonresidential Services (Alternative Services)?

A1. Alternative Services is a way for consumers to receive nonresidential services that may have been disrupted by the COVID-19 State of Emergency. Service providers can offer supports that differ from their traditional program design and respond to any new needs and interests that have emerged as a result of the COVID-19 pandemic. Some examples are:

- Delivering food, personal protective equipment
- Delivering packets, equipment and supplies for activities and remote learning
- Wellness checks and discussion about current events
- Collaborative meetings to plan upcoming events
- Pre-recorded or live video classes to learn new skills
- Assisting with networking and development of employment and microenterprising opportunities
- Supporting set up, training and use of technology devices

Q2. Are Alternative Services required?

A2. No. This is an option that can be used to support the needs of consumers when services cannot be provided as they were before COVID-19.

Q3. Which vendors can provide Alternative Services?

A3. Please see [the Department's December 2, 2020 letter](#) and [the list of service codes](#) the Department initially identified as needing monthly rates for Alternative Services. As noted in the letter, services provided under service codes not identified in the letter may provide Alternative Services if approved by the regional center and Department.

Q4. What if a consumer needs services from a vendor that is not on the list of service codes applicable to Alternative Services?

A4. The regional center should be contacted to discuss the need for services and whether a request for an individualized exception should be submitted to the Department.

Q5. Will each vendor have to choose if they are going to provide all traditional or Alternative Services, or can it be determined on an individual consumer basis?

A5. The service delivery mode and types of services provided are based on the needs of each consumer. A vendor may provide traditional services to a portion of the consumers served and Alternative Services to other consumers; however, any Alternative Services provided to a consumer in a given month would result in billing using the Alternative Services monthly rate.

Q6. What are some examples of “Use of self-guided training and educational materials supplied to the consumer by the provider intended to support the consumer’s service?”

A6. If there is agreement and a benefit to the consumer, the service provider may prepare activities for the consumer to initiate at a time most convenient for the consumer. The materials may be assembled by the service provider and delivered to the person in a variety of methods. Some examples are supply kits delivered to the consumers home, a written workbook or lesson plan emailed to the consumer, and a pre-recorded video to be retrieved online.

Q7. Can services be provided during flexible hours?

A7. Yes. Services can be provided at any hours that benefit the consumer.

Q8. What is an individual service plan (ISP)?

A8. An ISP is a plan informed by the consumer and prepared by the provider that identifies and describes the services that will be provided to support the person’s needs, goals and objectives. The format may vary by provider and type of service, and some may refer to it as a treatment plan, plan of care, etc.

Q9. Is an individual program plan (IPP) meeting of the interdisciplinary team needed to initiate Alternative Services?

A9. No, it is not needed to initiate Alternative Services.

Q10. Can Alternative Services apply to Supported Employment?

A10. Yes. Providers of Supported Employment services may provide Alternative Services to consumer if traditional services can not be provided.

Q11. Can Alternative Services apply to Transportation Services?

A11. Yes. Providers of Transportation services may provide Alternative Services to consumers when traditional services can not be provided. Based on stakeholder input, DDS is reviewing to determine if there are adjustments to the alternative service model that may further support consumer and community needs. Any change will be provided through amended guidance.

Q12. Can Alternative Services include assistance with accessing the COVID-19 vaccine? (New)

A12. Yes. Assistance could include providing information about the vaccine, eligibility for vaccination, where to obtain a vaccine, and coordinating transportation.

Q13. Where can I find more information about the Self-Determination program?

A13. Interested consumers, families, or others are encouraged to visit the [Self-Determination Program website](#) to find out more information about California's Self-Determination Program. Individuals may also contact their regional center to find out the date of the next local volunteer advisory committee meeting.

Families and Consumers

Q1. What service types are covered by the Alternative Services directive?

A1. This Directive applies to many non-residential services, including services provided by day programs, early intervention, and transportation, etc. Because of state and local health rules, these providers may not be able to provide the same services they did before COVID-19. The Directive provides information about how to provide alternative services to meet consumer's current needs.

The Directive does not apply when a provider can provide the same services, which meet the consumer's needs, either in the way they were provided before COVID-19 or in a different location or via remote delivery. For example, a day program that provides the same services virtually and these virtual services meet a consumer's needs, is not providing alternative services. Similarly, individual therapy services which can be provided in a clinic that follows required safety protocols are not Alternative Services.

Q2. When can Alternative Services begin?

A2. Alternative Services can start as early as September 2020. The provider shall engage the consumer about his or her need for and interest in Alternative Services as an option. If the consumer is interested in using Alternative Services, the provider must notify the regional center. The consumer must also receive a copy of a new or revised service plan.

Q3. What must providers do if they are providing Alternative Services?

A3. The provider must do the following:

- Make sure the Alternative Services meet a consumer's current needs
- Engage with consumers and families about their service needs and the use of alternative services
- Follow state and local health orders and licensing requirements
- Train their staff and consumers on safe delivery of in-person services, if in-person services are provided
- Be creative, resourceful, and make modifications to how services are provided

Q4. How will providers be expected to engage consumers and families about their service needs?

A4. Providers are expected to facilitate an inclusive and individualized implementation of the Alternative Services directive.

- The provider must engage with each consumer to find out if he or she needs and is interested in alternative services. You can decide if these services will help you and if you want to participate.
- The provider should give consumers and families information so they can understand the flexible and creative Alternative Services options.
- The provider should ask consumers and families about their needs and ideas about options that work best for them. If you are not asked, you should talk about your needs and offer any ideas you have.
- If the consumer or authorized representative gives permission, the provider can work with other providers that also have service authorizations for the same consumer to best support the consumer's needs.

After meeting with you, the provider will do the following:

- Document the conversation with the consumer including the date, who participated in the conversation, and a description of the consumer's and family's input.
- Notify your regional center that you are interested in receiving Alternative Services.
- If you agree that you want Alternative Services, the provider must give you a new or updated service plan with details about the type and amount of alternative services that will be provided. The service plan may involve services provided in collaboration with other service providers, including residential service providers.
- The new or updated service plan will be provided to you.
- The provider must also tell consumers the specific steps they can take if they disagree with the Alternative Services offered by the provider. For example, the consumer or family may disagree with the proposed services because they are not offered at a convenient time, are not offered frequently enough, or will not meet other needs.

Q5. What are examples of Alternative Services?

A5. Alternative Services include, but are not limited to, the following:

- Supports to minimize the exposure to or impact of COVID-19 on a consumer;
- Completion of an individual assessment of skills, preferences, and service needs for a consumer;
- Completion of a service plan to provide needed services for a consumer;
- Delivery of supplies or other items to the consumer's home needed to provide services or supports;

- Use of self-guided training and educational materials supplied to the consumer by the provider intended to support the consumer's service;
- Skills training to individuals within the consumer's household who are specifically designated to support the consumer;
- Supports for transition to the Self-Determination Program; and
- Other modifications to nonresidential services that are approved by the consumer that further or achieve his or her service needs.

Q6. What is the Regional Center's role with Alternative Services?

A6. Your service coordinator can help you identify service options or different providers if your current provider is unable to meet your needs or provide the necessary support services. Since your service needs may have changed because of COVID 19, you can also discuss the need for different or more services with your service coordinator.

Within 30 days of learning about a consumer's interest in Alternative Services from the provider, the regional center will notify you, in your preferred language, confirming the request for Alternative Services. The notice will include contact information for the consumer's service coordinator and their supervisor. If you have questions you should contact your service coordinator or their supervisor.

Q7. What steps can I take to make sure that Alternative Services meet my or my family member's needs?

A7. Think about your or your family member's individual's goals, needs and services before you speak with your service provider. You may want to use the Family Engagement Guide to help you think about your current needs and the kinds of services that will meet these needs. You can find [the Family Guide here](#).

If your provider is offering Alternative Services, look at the list of possible Alternative Services in question 4. Which services may be helpful to you and which service types may not help you? Are there other services or options that are not listed that you want to discuss? Do you need training or supplies to access any of these services? Ask questions so you understand the flexible and creative options being offered. Think about ways service can be coordinated with other providers and share that information.

Ask your service coordinator about other ways services can be provided. For example, under Participant-Directed Services, you can directly hire a person you choose, including a family member to provide some services. More information about participant directed services may be found [here](#).

Q8. What can I do if my provider does not provide services under the Alternative Services directive and I have questions about the services I or my family member receive?

A8. To ensure the health, welfare, and safety of regional center consumers during the COVID 19 Pandemic, DDS allowed many services to be provided in an alternate location or through remote electronic communications, including Skype, Facetime, video conference, or telephone conference. The flexibility to provide services in an alternate location or through remote means, should not have changed the frequency or duration of any IPP service absent the agreement of the consumer's IPP team. If the consumer requested or agreed to have services provided in an alternative location or through remote means, the provider notified the regional center and the regional center sent a letter, to the consumer in their preferred language, confirming this change. Information about these requirements may be found [here](#).

If you have concerns about the services you or your family member are receiving you should speak with your service provider and/or Service Coordinator. For example, you may have concerns about the amount of the service, the hours the services are provided or no longer think that remote services work for you or your family member. Your provider may be able to adjust you or your family members services. Your service coordinator may be able to identify other service providers or services that can better meet your need. You may also want to discuss using Participant Directed Services with your Service Coordinator. You may find it helpful to think about the areas listed in Question 7 or [the Family Guide](#) to prepare for your discussion with your service provider or service coordinator.

Vendors and Service Providers

Q1. We are still in a State of Emergency so why did the retainer payments (billing for consumer absences) have to end?

A1. Consumers needs for nonresidential services continue during the State of California's stay-at-home order. Additionally, the federal Centers for Medicare and Medicaid Services (CMS) has clarified that federal funding is time-limited for retainer payments (billing for consumer absences). Alternative Services translates services developed in response to COVID-19 to developmental services eligible for ongoing federal reimbursement during the State of Emergency.

Q2. Do I need to complete Enclosures A, B, or C included in the July 17, 2020 directive?

A2. No. The July 17, 2020 Directive introduced the structure with enclosures A, B, and C as sample documents. Since July 17, 2020, the structure and documents have been updated. Providers should not use the sample documents. DDS released an Enclosure for Certification with the August 31, 2020 Directive that needs to be submitted by providers of Alternative Services before requesting reimbursement.

Q3. Do I need submit a COVID-19 Protection Plan Verification?

A3. The draft COVID-19 Protection Plan Verification shared by DDS in June has not been finalized and is not required by DDS. Providers must review the requirements for compliance with state and/or local public health guidelines, which in some cases may require written protection plans for other oversight agencies.

Q4. Other than delivering supplies to my consumers, I am providing the same services as I did before COVID via video conferencing. Does that make this Alternative Services, or will they continue to be billed the same way?

A4. If the packet or supplies are to be used in lieu of traditional service delivery, it is Alternative Services. If the packet or supplies are to be used to support traditional service delivery, it is not Alternative Services.

Certification

Q5. Who is required to submit the Certification for Alternative Services (Enclosure) to the regional center?

A5. Service providers that cannot provide services in the traditional way and/or through remote options and intend to provide and bill for Alternative Services must submit certification for each vendored service to the regional center prior to requesting reimbursement claims. The certification is only required once unless there are changes to the alternative services delivered. The [certification can be found here](#).

A6. Is regional center approval of the certification required?

A6. No. The certification serves as the provider's affirmation of the requirements for the delivery of Alternative Services.

Q7. Will a program design revision or new vendorization be needed to provide Alternative Services?

A7. No. Service providers do not need to revise the program design or apply for a new vendorization.

Q8. Are providers of Alternative Services responsible for all of the types of Alternative Services listed on the Enclosure?

A8. No. Providers should check any/all types that they plan to offer.

Q9. Are providers of Alternative Services responsible for all of the Certifications listed on the Enclosure?

A9. Yes. Providers are responsible for all of them.

Billing

Q10. Can I still provide services and bill for the established daily or hourly rate?

A10. Yes. Services that are provided in original form, including remotely or in alternate locations, should be billed at the established rate for each unit of service. However, service providers may not additionally bill the monthly unit rate for Alternative Services for the same consumer.

Q11. What if I am providing services to some consumers in traditional form, and some consumer via Alternative Services?

A11. A service provider may provide and bill for some consumers in traditional form, and other consumers via Alternative Services. Each consumer's billing should be either the traditional form or alternative services in a given month. If all or some services in the month were provided via alternative delivery, the service provider should bill the alternative monthly unit rate. A reminder, that Alternative Services are intended if traditional services are not feasible to meet the individual's needs, but alternative options will.

Q12. What rate is used if the consumer wants a combination of traditional services and Alternative Services?

A12. A combination of services should be billed using the Alternative Services monthly rate.

Q13. How is the monthly unit rate determined and when will I receive it?

A13. Please see [the Department's December 2, 2020 letter](#) which explains the basis for the monthly rate calculations. An overview of the rate calculation methodology can be found [here](#).

Your regional center has the rates and backup information and will provide you a file that includes all of the rates calculated for your Federal Employer Identification Number (EIN) within that regional center. Regional centers were able to provide the rates beginning in December 2020.

Q14. When will rates for Transportation Services and Group Supported Employment be established?

A14. Guidance is coming soon for rates to be used beginning March 2021.

Q15. Are there monthly rates for each subcode?

A15. Yes. There are monthly rates for each service and subcode combination.

Q16. What if I don't agree with the rate(s)?

A16. Questions regarding the calculation of your rate(s) should have been directed to your vendoring regional center by January 31, 2021. A suggested template to submit questions can be found [here](#).

Q17. When do I bill using the monthly unit rate?

A17. Beginning with services provided in January 2021.

Q18. How are rates calculated if we don't have 12 months of history for everyone or the number of people served changed?

A18. The monthly rate for everyone receiving services from the provider will be the average per person, per month cost for the 12 months ending February 2020. Only months where services were provided will be included in the calculation.

Q19. How will the rate be determined for consumers new to my services since February 2020?

A19. The vendor's monthly rate applies to all consumers served, including any new consumers.

Q20. How will the monthly unit rate be determined for new vendors that began services since February 2020?

A20. COMING SOON

Q21. Will I have a different rate for each consumer, or one rate for all?

A21. Beginning in January 2021, each provider of Alternative Services will have a monthly unit rate that will be used for all consumers receiving Alternative Services.

Q22. Can the Alternative Services rates be increased due to changes in the statewide minimum wage?

A22. Yes, the monthly rates can be adjusted if applicable. See [the Department's December 21, 2020 letter](#) regarding the minimum wage increase.

Q23. Am I eligible for certification and billing for Alternative Services if I did not bill for consumer absences (retainer payments)?

A23. Yes. All providers of nonresidential services are eligible to provide Alternative Services, regardless of prior billing for consumer absences (retainer payment).

Q24. If a consumer has been unresponsive to attempts to contact him/her, will I be able to bill for services based upon the prior average monthly attendance?

A24. No. As of September 1, 2020, service providers will only be able to bill the monthly unit rate for consumers for whom Alternative Services were provided each month.

Q25. The Directive stating retainer payments are to end August 31, 2020 was extended until October 14, 2020, so is that the new end date for retainer payments?

A25. No. The Directive extended until October 14, 2020 was amended to conform with the July 17, 2020 Directive stating retainer payments end August 31, 2020. It does not change the retainer payment end date of August 31, 2020.

Q26. Will I be able to bill for services to consumers not previously served by my program?

A26. Service providers can bill for services to consumers for whom you have an approved purchase authorization.

Reporting

Q27. How will the monthly report be submitted?

A27. Beginning September 2020, provider monthly reports are to be submitted using SurveyMonkey. Links to the reports and samples are located [here](#). Further guidance is forthcoming for future reporting.

Q28. For monthly reports, if my program involves multiple vendorizations, do I need to submit a report for each one?

A28. Yes. A report for each vendorization (vendor number and service code combination) must be submitted.

Q29. For monthly reports in SurveyMonkey, if I serve consumers from multiple regional centers, do I need to submit a report for each regional center?

A29. No. All consumers served by the vendorization may be included in the same report.

Q30. If I started a report in SurveyMonkey, can I return to it later to delete or revise it?

A30. If a report needs to be deleted or revised, please send an email to the Department at DDSC19Directives@dds.ca.gov to have the previous survey submission deleted. The request must include your program name, vendor number, and service code, and specify which reporting month needs to be deleted.

Q31. For monthly reports in SurveyMonkey, how will I know if my completed report was accepted?

A31. Once you have clicked “Done” on the last page of the report, it has been accepted. No confirmation will be sent to you after the survey is submitted. If confirmation is needed, please email the Department at DDSC19Directives@dds.ca.gov with your program name, vendor number, and service code.

Q32. Will I need to report the number of hours each consumer is served each day?

A32. No. There is no need to report the number of hours served each day. Refer to the Directive for the required reporting, which includes, but is not limited to the types of services provided and the number of days each consumer received Alternative Services.

Q33. If I am providing services in the usual way, except remotely, do we still need to track services provided and turn in the monthly report?

A33. No. The monthly report is not needed for vendors who are not providing Alternative Services.

Q34. I was previously told the monthly reporting would be done in eBilling beginning January 2021. Do I have to do this as well as the SurveyMonkey reporting?

A34. No. For January 2021, providers only need to report using SurveyMonkey. Although the eBilling system has added features for reporting, providers only need to mark attendance (using the checkmarks) for the days services were provided on the monthly rate invoices.

