



### Notes from 06.01.20 Weekly COVID TA Call

#### 6.1.20

- **State Dept. Representative Updates, if attending**
  - None at this time.
- **Alliance Updates**
  - **HCPF Webinars/Team Alliance Webinars:**
    - It is unclear if HCPF will be moving to every other Friday. We will keep our TA Webinars every week through June. We have invited HCPF to join our TA Webinars on their off week. They are deciding if they will do more in-depth webinars or join our meetings. More to come.
    - Keep sending us questions for state departments and we will continue to help follow up.
  - **Alliance Virtual Summit:** Registration is open! Speakers have been announced! Free to all Alliance members and staff! <https://www.alliancecolorado.org/2020virtualsummit>
    - **Please be sure to sign up for sponsor breakout sessions;** the Summit is free for members because of them!
  - **Alliance Town Hall with Colorado's U.S. Senators and GRACE members!** **Send us questions today for your US Senators!** Enter questions into the chat box! If we can get on the Senator's schedules in June or early July, this event will be free and open to all Alliance members and staff.
    - Alliance will use a Zoom webinar platform. All callers will be on video/audio mute until the Q&A section (time permitting).
    - Registration is required.
    - This meeting is by invitation-only and is an Alliance membership benefit (Goal: 200 guests).
    - Press is welcome upon the request of the Senators.
    - We will have 12 presenters and will ask 7 questions.
    - We provide the Senators with all questions in advance of the meeting.
    - If desired, we will provide the Senators with email addresses of all attendees.
    - The meeting will be recorded and will likely be available to the public on the Alliance website.
    - Alliance can provide talking points to Senators upon their request.
  - **Outbreak Data as of 5/29/20:** It looks like the three outbreaks in group homes/PCAs in the IDD community have been resolved! Click [HERE](#) to view the outbreak data.
  - **Hospital Visitation Issues:** Alliance, Atlantis Community, Colorado Cross Disability Coalition, Disability Law Colorado, JFK Partners, The Arc of Colorado and The Colorado Developmental Disabilities Council is asking the state to consider issuing a statement on the need for all hospitals and medical facilities to allow exceptions to their no-visitor or limited-visitor policy for individuals with disabilities who rely on a support person. DLC has taken the lead and drafted a "Hospital Visitation Exemptions for Individuals with Disabilities Policy. An official letter is expected to be drafted this week. We will send to Exec for final sign-on approval.
    - **Please contact Josh ASAP if you are experiencing any issues with hospitals allowing a support person to stay with someone in the hospital.**
  - **Testing Update:**
    - Surveillance Testing: (National Guard will be available through July) State lab process is to take tests to 86 residential care facilities. Overall, it will be over 18,000 per week. Happening soon! We expect this process will include group homes soon. We will follow up on this.

- Symptomatic Testing: Anyone with symptoms can get a test. Contact your health care provider, local community-based testing sites, specialized testing sites, or private sector testing partners. [Click HERE for more information.](#)
    - Testing Guidance Website: <https://covid19.colorado.gov/covid-19-in-colorado/about-covid-19/testing-for-covid-19>
  - **PPE Update:**
    - Task force is working on a system to allow group homes (and other facilities) to enter requests in real time.
    - Still work through the state process that we have shared in the past to request PPE. Let us know if you are having issues!
- **Governor's office Updates**
  - [Gov. Polis Signs Executive Orders In Response to COVID-19 Pandemic - Extension of emergency to June 21 \(5.26.20\)](#)
  - [Governor Polis Issues Guidance for Restaurants, Summer Camps and Private Camping \(5.26.20\)](#)
    - Children's day camps and youth sports camps will open on Monday, June 1, 2020. Residential overnight camps will be closed in June. Decisions for July and August overnight camps will be made in mid-June. Please ensure you are also complying with Medicaid guidance.
- **Colorado Legislative Report by Emma Hudson Consulting and Colorado Legislative Strategies**
  - Tomorrow is second reading for the budget. The amendment package for the budget came out today. There are 70 amendments to the budget from the House. Most of them are from Republicans. There are not many substantive amendments, just general cuts, and we can expect the vast majority of them will die. There are no amendments that have a big impact on IDD at this point.
  - They are doing caucuses on the amendments this afternoon for the budget.
  - The budget includes a -1% common policy provider rate cut. Everybody got at least a 5% rate cut except us.
    - Time frame for 1% cut being solid? We suspect it will be on the Governor's desk next week (June 12<sup>th</sup>) and he will sign immediately because it is already overdue.
  - 2020 Bills
    - SB20-205
      - Alliance is taking a monitor position. This is a bill from Democratic leadership to put forward paid sick leave. The Alliance GRACE committee has been discussing this and asked some questions of the proponents and sponsors and based on their answers, we decided on a monitor position. The paid sick leave bill will require that during times of a public health crisis that employers offer paid sick leave for up to two weeks and it is earned for every hour they work, so for every 30 hours they work, they earn 1 hour of paid sick leave and get that during a crisis such as what we are in now. After that time, starting in January 2021, they can earn paid sick leave with up to 48 hours. Any employer that provides more than that paid sick leave is in compliance with the bill.
    - HB 20-1363 Repeal Report on Increase Rate for Direct Support
      - HB20-1363 would remove the next two years of reporting for HB18-1407, just passed second reading in the House with Republican and Democratic support and zero discussion: good news.
    - SB 20-207 Unemployment Insurance
      - We have been working hard on this bill. The bill sponsors were trying to make sure that people who need to access UI can do so, but unfortunately in their efforts to do that, they altered the definition of Independent Contractor. In the introduced bill, they take out all the tests that we use for determining an Independent Contractor and the bill would've made the Host Home illegal or obsolete. We think there is an amendment that will fix this, and GRACE will discuss.
  - Visit the [GRACE Committee Page](#) for the 2020 Bill Review Document
  - View the 2020 Member Bill Tracker [HERE](#) to see what we are following and our positions and comments.
- **CDHS: OEC Update**

- El Colorado has been asked to look at budget reductions and has been working with CCBs to get some ideas. They are expecting a 10% reduction over the next year, so they will be planning for an overall decrease in the EI line of \$6 million. Your EI Task Force will be meeting with OEC tomorrow and will be working with GRACE on any legislative approach. For now, the EI lines are funding except for 6% 2020-21 caseload growth and the JBC said they can revisit caseload growth as a supplemental.
  - CCBs: if you are willing to share your budget reduction proposal, sent it to Kylie today so the Alliance Members of the EI Task Force can review them prior to our meeting tomorrow afternoon.
- **CDPHE Updates**
  - None at this time.
- **HCPF Updates**
  - **HCPF Webinar highlights**
    - CDPHE:
      - 747 on-site infection control surveys have been completed. Have issued only 0.3 citations per survey.
      - Isolation plans have been reviewed. Per a request from the Governor's office, they will be redacting personal information and making the plans available on CDPHE's COVID website. No revisions or subsequent drafts, only initial submissions, will be posted.
    - CDLE: answered a couple of questions related to reasonable accommodations in the workplace.
      - Still waiting to hear back on questions from members about people that fall under the definition of "vulnerable" being able to return to work and how you, as employers, should treat the situation.
    - Residential Strike Force update
      - Rolling out broader testing to residential facilities – new contracts will allow over 18,000 tests per week.
    - New guidance:
      - Operational Memo 60 – provides clarification for Supported Community Connector and Community Connector services using LRP. Any services authorized and provided prior to issuance of OM 46 (4/23/20) will be paid and providers do not have liability for these claims unless rendered without appropriate Case Manager authorization. However, the levels in a person's PAR must be re-set to levels on March 24 to maintain cost neutrality.
    - FAQ Document from HCPF:
      - Day program: if you can ensure that people are separated into different suites with different bathrooms within a building, it is okay to have more than one group of 10.
      - Non-Medical Transportation: two people who live together can ride together.
      - Enhanced rates for residential, PC, homemaker are still scheduled to end 6/30.
  - **Answers to recent Qs:**
    - Can stimulus checks be used for room & board?: HCPF checking to clarify. Likely that they could not provide more nuanced guidance in their role as a state agency. We suspect that if these are Personal Needs Funds that there is not additional restriction on how those can be used.
      - Chat from Dawn Jacobs: Regional Centers were given instruction that the stimulus check could not be used for room and board. Dawn Jacobs says that Operational Memo on March 27, 2020 states that the stimulus cannot be counted as income.
        - Chat from Ellen: HCPF's memo says that the stimulus payments cannot be counted as income for the purposes of their eligibility for Medicaid. The memo also says "stimulus payments shall not be considered in provider reimbursement calculations" - our question is whether room & board falls within "provider reimbursement calculations" or not.
        - Chat from Dawn: It does state that it goes into their personal needs account. The needs account can run over the cap for 12 months. And in our or my specific ICF it does state that patient liabilities (or room in board for us) cannot be increased.

- Chat from Steve Dahlman: I wonder if the stimulus /R&B question comes down to agencies who are Rep Payee and has authority to deduct R&B directly from benefit payments (I think a checkbox on the PNF-1 form) cannot automatically deduct R&B from the stimulus check?
      - Ellen said that interpretation makes sense, although this is not my area of expertise.
      - Retainer payments will last through at least through June 21. HCPF feels confident to say that providers will have at least two weeks of notice prior to the end of retainer payments.
      - 1% rate decrease will be applied across-the-board. HCPF has no authority to target the decrease differentially across services.
      - Day program questions: see updated FAQs
      - Individual assessments of risk were completed for individuals served and the results were shared with the individual and CCBs, with a request for CCBs to reach out to members. This info may be useful in assessing how people participate in day/employment services. We asked if HCPF could share their algorithm used to conduct these assessments and Bonnie Silva is checking on that.
- **Federal Updates**
  - As of 5/20 – all states have submitted provider data, but there are extreme variations in the quality of the data from state to state. HHS still working on disbursement algorithm; HHS has not spent the majority of the money that's been allocated to them. Likely don't think they have enough correct provider info to allocate funds – they need to be able to reverse-engineer a percentage by figuring out how much they have to spend and how much the prior-year revenues of providers were. (Names and addresses are the only thing we think they have for all states). Increasing frustration. Sign-on letter in House.
  - 4<sup>th</sup> COVID package (HEROES Act) may be complete in June but could be July. Seems to be bipartisan agreement to keep HCBS in. Increasing pressure on HHS given that the HEROES Act is going to take too long.
- **Chat box Q&A**
  - Has there been any clarification about the IRSS question regarding family contacts and visits that was posted by CDPHE last week? It was not particularly clear guidance.
    - Ellen was unaware CDPHE posted this. Is it the updated HCPF FAQ's that address the family visits?
      - Ellen got clarification from Colin on Friday that when there is a conflict between what the FAQ says and a previously issued Department Memo, that the FAQ has the same enforcement as the memos and providers should follow the most updated version of guidance, which in most cases is in the FAQ because it is more frequently updated, and not a memo. The FAQ shows the date and time it was updated. We recognize this is difficult to manage but checking it daily would be your best approach.
  - Where do we find the Permission to reopen day programs form?
    - [https://docs.google.com/forms/d/e/1FAIpQLSd-JljzFIH3E7g4P2\\_OgM\\_nZsXkf5xcB6pLCTYGd20ITSIYGg/viewform](https://docs.google.com/forms/d/e/1FAIpQLSd-JljzFIH3E7g4P2_OgM_nZsXkf5xcB6pLCTYGd20ITSIYGg/viewform)
      - One of the questions on the Permission to Reopen Day Program form is whether the "suites" (as they call them) have separate HVAC systems. Has anyone filled that out and found that to be a problem?
- **Questions from Members for Departments:**
  - **HCPF**
    - For the past 4 weeks, HCPF has said guidance is forthcoming on provisional telehealth approvals, but it hasn't come through yet. Does the Alliance team know more about this? What is the best way for families, task forces, providers, etc. to testify to the clinical effectiveness on telehealth in order to keep telehealth as an ongoing approved method for service delivery?

- We submitted this question to HCPF a couple weeks ago and HCPF has not closed the loop on this with us yet. They have said that they foresee the use of remote service provision being something they can continue in the future.
    - What state legislative issues are there around telehealth?
  - For stimulus and room/board - do counties share authority to make that call?
  - Can we encourage HCPF to update memo for family visits?
    - We will put pressure on HCPF regarding this. They can't create a one-size-fits-all approach on this. If you have recommendations you would like to see in the guidance on this, please email Ellen.
  - I thought I heard HCPF say that once "regular" day program is provided, even at less than 100%, negates your ability to bill retainer units. That is different than "alternative day programming". Is that correct?
    - Colin said they are planning to provide additional clarity on this.
- CDPHE
  - n/a
- **Opening Day Programs Discussion:** Hear from fellow members! What questions should you be asking yourselves, what snags you need to figure out, and things your agency should be doing to get it right.
  - North Metro Community Services
    - Started very slow last week. Have a couple homes no longer being used that they are using now and have a rented site where they do Day Program and they are doing groups of 4-6 people plus staff. Transportation provided by the provider or family. Temperatures etc. are being checked before the person driving them leaves.
    - Based on guidance received Friday and the FAQ, NMCS is looking at putting together a couple groups in their main building and expanding groups in their other locations. Looking to do a morning session and afternoon session with time in between so they are not feeding anyone and have time to clean before the next group.
    - Will submit application to HCPF this week and see if they can get more going.
    - NMCS does have separate HVAC system so they don't have to worry. The HVAC company NMCS uses has filters that are adequate to filter out any possibility of the virus traveling via HVAC.
  - Colorado Bluesky
    - Looking at running a 7-day a week program from 9am – 7pm with two shifts. Size would be 8 individuals and 2 staff. Serve 65 in day program currently and each week more of them are wanting to come back. Hoping that by extending the days and hours they can meet the needs of those that want to come back.
  - PPCH - Employment Supports
    - ANCOR has put out guidance about some risk-benefit decision making that is occurring in other states. Ohio has put out a state-level process to make sure anyone coming back into services has made the decision with a team to really understand the risks and benefits.
    - PPCH has taken that work and modified it to work for them and included situational-related risks, health-related risks and home-related risks and going over the benefits of returning to work (how great or how big is the need or desire to return).
    - Conflicting Guidance:
      - CDLE said on a chat in early May that having someone not return to work because they have health-related risks or are disabled is illegal. HCPF memo which has group employment in the return to day program memo, says they may not return. Several individuals are demanding they return to work and this has put PPCH in a hard spot.
  - Dugarvin Colorado Springs
    - Started a couple weeks ago and are only doing one on one at this time. Doing things like picking up fast food and going on hikes and fishing. Also still doing virtual programs.
  - DDRC
    - Starting to introduce 1:1 services, remote expansion and looking to the future about what Day Services may look like. A concern for the long term is how the rates were established and the staffing ratios inherent in those rates to support the traditional types of specialized habilitation

and supported community connections. One of the things DDRC is talking about is how do we look at the supports we provide differently for those individuals? Maybe participation in Day Services was not a particularly meaningful activity but was necessary for supervision so a family member could work or have respite. Part on the longer-term conversation with HCPF is how do providers start shifting those services into different types of categories? In the long term, they will not be able to sustain providing spec hab or SCC on a 1:1 basis based on the rate structures so DDRC will have to look at introducing different types of services and categories that have more financially stable reimbursement rates.

- They will be looking at a 7-day a week model.
- Community Link
  - Have about six 1:1 they are serving in the community and maintaining 6-ft distancing and not serving anyone who won't wear a mask at this time. Pressure to open their day program came from the clients. They have a building where they can split into "suites" and have been doing outdoor activities as well.