

Frequently Asked Questions and Answers (FAQ) on SDS Forms/Processes/Procedures for Home and Community-Based Waiver Services Affected by COVID-19 and Appendix K

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Section I: Service Safety and Resources

Q1: How do I know what to do to keep myself, my staff, and recipients safe during the COVID-19 emergency declaration?

A1: Follow the current Alaska [Health Mandates and Health Alerts](#) as well as other COVID-19 information at <http://dhss.alaska.gov/dph/Epi/id/Pages/COVID-19/default.aspx>. (**revised 06/19/2020*)

Q2: Are the health mandates requirements?

A2: Yes, all [Health Mandates](#) must be followed.

Q3: What happens if someone I serve gets diagnosed with COVID-19 or sees a medical professional who thinks they may have COVID-19?

A3: Fill out a [Critical Incident Report \(CIR\)](#), then follow your agency's COVID-19 health and safety plan when providing services to the person.

Q4: What if someone in my licensed ALH needs to move out because they have COVID-19? Can an alternate residence be licensed to serve them?

A4: If the resident has been diagnosed with COVID-19, or a medical professional has determined that they person probably has COVID-19, fill out a [Critical Incident Report](#). If it is not possible for the residential setting to keep health and safety according to the facility's COVID-19 health and safety plan, the resident or others may need to move. Contact Assisted Living Licensing to request a temporary assisted living license for another setting (a hotel, an unlicensed residence etc.) if that is necessary. Work with the individual's care coordinator to submit the COVID-19 Appendix K Personal Center Support Plan form.

Q5: What happens if someone in my licensed ALH needs to be isolated because of COVID-19?

A5: Fill out a [CIR](#) and follow the Alaska [Health mandates](#) and [Health Alerts](#) for COVID-19 in assisted living facilities. *(*revised 06/19/2020)*

Q6: Do you have any suggestions if providers are looking for Personal Protective Equipment (PPE)?

A6: Please see the April 8, 2020 SDS E-Alert posted under "Resources" on the [SDS COVID](#) webpage for specific guidance on PPE for DSP.

Q7: Is there a hotline for all Alaskans to call in and receive free suggestions of how to help stay mentally fit in these very stressful and scary times, especially important for individuals experiencing special needs?

A7: Alaska 2-1-1 provides available sources. Additional links are available on the [SDS COVID-19](#) webpage.

Q8: How do I find out the latest info on maintaining HIPAA compliance during COVID?

A8: Visit <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>. Please see the April 13 SDS E-Alert posted on the [SDS COVID-19](#) webpage for guidance on appropriate platforms to use when providing long term services and supports.

Q9: What should providers and recipients do if they are concerned about safety for staff going into recipients' homes? *(*added 04/27/2020)*

A9: DSPs should follow [Health mandates](#) and [Health Alerts](#), CDC guidance, and Provider's procedures to reduce risk for recipients and staff. It is the recipient's choice to allow staff into their home. SDS recognizes that some recipients will need hands on care. Providers are encouraged to use universal precautions to maintain safety for recipient and provider. If there are concerns about recipient safety, a [Central Intake Report \(CIR\)](#) must be filed on-line. *(*revised 06/19/2020)*

Q10: How can providers provide services while maintaining social distancing for services that require close contact? *(*added 05/18/2020)*

A10: According to health mandates, the agency providing the essential service must create and adhere to a plan to protect health and safety of service recipients and employees delivering the service. The plan and how it is carried out needs to comply with [Alaska Health mandates](#), [Health Alerts](#), [Senior and Disabilities Services alerts](#), and the CDC COVID-19 guidance. Since there are so many case specific scenarios and changing factors, it is up to the agency to be sure they are compliant. This includes not delivering a service, if that is the best way to be compliant with current requirements and the individual has other ways to get health and safety needs met.

Q11: Does a client have the right to require direct support staff to take their

temperature before they enter the client's home? (**added 05/18/2020*)

A11: Agencies providing essential services must follow the [State of Alaska Health mandates](#), [Health Alerts](#), and any [other alerts given out by Senior and Disabilities services](#). Individuals are encouraged to contact their service provider to find out what their COVID-19 health and safety plan is for people getting services and staff.

Q12: Who will end the Emergency Declaration? (**added 05/18/2020*)

A12: The Emergency Declaration will be ended by the Governor. SDS has approval to allow flexibility during the Emergency Declaration and may update or resume requirements during this timeframe.

Section II: HCBS Waiver Service Delivery

Q1: Can a service be reimbursed if the Direct Service Professional (DSP) takes a recipient out for walks/exercise and practices social distancing?

A1: Yes, if it is a habilitative service addressing goals and objectives in the recipient's support plan. Staff and recipient must practice social distancing and CDC recommended hygiene methods.

Q2: Can I move the people in my assisted living home to my rural cabin to do more social isolation?

A2: No, due to current travel restrictions regarding discretionary travel. Your COVID-19 health and safety plan should give directions for social isolation in your current residence. A change in residential setting needs to abide by current [Health mandates](#) including those for travel.

Q3: Can day habilitation and adult day be delivered and reimbursed if done at the person's residence?

A3: Yes, by distance delivery or by a person hired by an agency to provide the service.

Q4: Can day habilitation and adult day be delivered by someone living in family habilitation home, residential supported (assisted) living home, or other employees of a group home?

A4: During the Emergency Declaration, a group home is an approved alternate setting for providing day habilitation. The service may be provided by another agency, or the same agency **as long as there are separate staff providing the services** (e.g. same employee is not delivering Residential Habilitation services and day habilitation at the same time). (**revised 05/18/2020*)

Q5: Can day habilitation and adult day be delivered online in a virtual

interactive format such as Zoom, Skype, or other platforms while the person is at home?

A5: Yes, if this is determined to be the best fit for the recipient, you are maintaining HIPAA compliance regardless of platform, and the service includes goals and objectives for the appropriate services. If there are changes to the approved service other than the setting the service is provided in, an amendment must be submitted by the care coordinator. If an amendment is submitted, a description of how the services provided in the alternate setting should be noted. If there are no changes to the service other than the setting, the COVID-19 Appendix K Person Centered Support Plan does not need to be submitted. (**revised 04/27/2020*)

Q6: Who bills for online adult day or day habilitation?

A6: The agency provider that is employing the DSP to conduct the webinar sessions and is the named provider in the approved support plan.

Q7: Due to requirements for social distancing, can a recipient change group day habilitation to individual? Can a person change congregate meals to home delivered meals?

A7: Yes, work with the care coordinator to submit required changes.

Q8: Is it agreeable to flex service as needed - not requesting more time, just using what has already been approved with variation from the weekly average?

A8: Small variations in scheduling of weekly services continue to be allowed with no amendments, according to needs of the recipient as identified in the support plan.

Q9: Can services be "made up" if not provided during hunker down time?

A9: No, the waiver authorization process does not allow a way to make up services later if not used. Services are designed and approved to meet needs identified in a support plan. If service delivery changes significantly, an amendment is needed. Use the COVID-19 Appendix K Person Centered Support Plan Request form for COVID-19-related changes to services (document in Section B of the form). The regular amendment process should be used to request changes to approved services outside of the approvals available in Section B.

Q10: Will Appendix K changes date back to the emergency declaration?

A10: Appendix K was approved with a start date of March 11, 2020, the State of Alaska Emergency Declaration date. Changes to services can be approved back to that date; service documentation requirements must be met.

Q11: Can a parent provide Respite in their own home?

A11: Another parent or family member can provide Respite for the primary care giver, or a respite worker can come into the home.

Q12: Can all Day Habilitation hours be converted to Supported Living hours (inside the home) without a formal amendment?

A12: No, the regular amendment process must be followed. Submit a [UNI-03](#) amendment including supporting goals, objectives, and interventions to request this change. (**revised 04/27/2020*)

Q13: If a client with complicated health concerns moved out of the Group Home to live with mom to reduce exposure to the potential of another member of the GH getting COVID-19, can the service be updated to Supported Living and have mom become the paid caregiver?

A13: It's possible. It must be requested through a regular amendment [UNI-03](#) because it would add a new service to a support plan. Work with the care coordinator to amend the support plan and changes to goals, objectives, and interventions. See Section III, Q10 about having a family caregiver be the DSP. (**revised 04/27/2020*)

Q14: Which services can be provided using distance delivery?

A14: Current guidance for the following services:

Respite: No. SDS is not currently permitting this service to be delivered from a distance.

SDS is currently approving the following services to be provided using distance subject to conditions noted below:

- Care Coordination
- Day Habilitation
- Residential Habilitation: In Home Supports and Supported Living
- Intensive Active Treatment
- Adult Day
- Provider-site-specific Supported Employment

Conditions:

- Distance delivery is determined to be the best fit for the recipient during the Emergency Declaration period;
- HIPAA compliance is maintained regardless of platform;

- Delivery of the service includes measurable goals and objectives and outcomes, as presented in written documentation and case notes; and
- The model for distance delivery must support the unique needs of the individual and be well-defined.

Because of limitations on available technology, individuals that require extensive physical prompting or redirection may not benefit from services being provided via distance delivery. *(*revised 04/27/2020)*

Q15: Can a recipient replace Supported Employment (SE) for another service using the COVID-19 Appendix K Person Centered Support Plan Request form?

A15: No. The regular amendment process using the [UNI-03](#) should be followed to request a change to Supported Employment services. *(*revised 04/27/2020)*

Q16: Is Respite available if there is no other household member available to provide Respite? *(*added 04/27/2020)*

A16: SDS wants to support social distancing health mandates through Appendix K authorized changes. This includes household members being hired as staff to provide services in the recipient's home. However, CMS rules do not allow caregivers to respite themselves. If there is no other household member to provide respite, the choices are having a worker come into the home to do the respite or provide another service, or not receive the service of respite.

Q17: Can Respite be provided to allow an unpaid caregiver to go to work? *(*added 04/27/2020)*

A17: Through the Emergency Declaration period, SDS is temporarily approving Respite to be provided when primary caregiver goes to work.

Q18: Can individuals receiving Supported Employment return to work? *(*added 05/18/2020)*

A18: Group congregate supported employment settings are still closed.

The Supported Employment provider must have a plan for health/safety of the individual and staff who deliver any of the waiver services. The community place of employment must have a plan for health/safety of its employees and any members of the public they serve. The plan(s) must follow all [Health mandates](#) and follow [Health Alerts](#).

For people living in group homes, SDS strongly encourages the agency providing residential services to contact Assisted Living Licensing to make sure that the agency is in compliance with licensing requirements for social distancing and residential services when considering services provided outside the home and increasing residents' involvement in the greater community.

Q19: If an individual is receiving Family Habilitation services can another household member provider Respite? (**added 05/18/2020*)

A19: No. SDS regulations prohibit another resident in a Family Habilitation home from providing Respite; this was not waived in Appendix K.

Q20: If Group Home staff are assisting individuals to participate with on-line Day Habilitation delivered by another agency, can they be paid for these DH services? (**added 05/18/2020*)

A20: No, the assistance the GH provides to the individual would be similar to assistance given during non-COVID-19 to help the individual prepare for their community DH. Virtual DH is generally for a shorten length of time due to engagement limitations.

Section III: Provider Certification/Quality Assurance

Q1: Are background checks for new hires being waived due to the COVID-19 emergency?

A1: All new hire direct support staff must still complete a background check with the Background Check Unit (BCU). BCU is allowing provisional clearances prior to the arrival of the fingerprint card. The fingerprint card is due to the BCU within 60 days vs 30 days, during this timeframe. (**revised 5/18/2020*)

Q2: What if I have a problem related to needing staff to be background checked immediately or as soon as possible?

A2: Contact the BCU directly.

Q3: Staff are coming due to renew their first aid/CPR certifications. There are no face to face classes scheduled at this time due to social distancing rules. What are the requirements?

A3: SDS will extend first aid and CPR training certification requirements for another year (if they come due during the disaster period). SDS is also waiving the hands on CPR skills test requirement for new hires during the disaster period, but not the requirement for FA/CPR training. The provider must document the training allowance in the employee's personnel file training records. (**revised 06/19/2020*)

Q4: Can guardians, parents of minors, and spouses with a legal duty to support be paid to provide services?

A4: Yes, in order to help recipients receive their current approved services, guardians and adults 18+ who have a legal duty to support and who live with the recipient may be employed by an agency that provides these services: Chore, Respite, and Residential Habilitation In Home Supports and Supported Living. SDS is also approving Day Habilitation while seeking to add it to the list of services approved in Appendix K. The

potential care provider must be able to pass a background check and must be trained on documenting goals/objectives and service notes.

*This staffing flexibility continue until further notice or until the Emergency Declaration is over, whichever is sooner. (**revised 05/18/2020*)

Q5: Can a guardian, parent or other with duty to support be hired to work in a licensed assisted living home?

A5: No.

Q6: My provider certification will be due soon. Are there any changes to current requirements due to COVID-19?

A6: Yes, at this time renewal certification segments coming due during the disaster period starting March 11, 2020 will be extended for six months. SDS will process applications that were received prior to the disaster period as they can and may request information through pend notices. SDS will work with providers on timelines for submission of requested items to include extending response times as necessary.

Q7: Has the self-audit report due date been extended past June 7th? I didn't see it mentioned in the appendix but wanted to check.

A7: The Program Integrity Unit received approval to suspend the deadline for self-audits in the Governor's most recent Order of Suspension, effective April 9, 2020. [SDS E-alert](#), April 29, 2020 updated that provider self-audits have been extended to December 31, 2020. (**revised 5/18/2020*)

Q8: Should providers suspend monthly visits for Family Habilitation Homes (maybe going to 6 month visits until this pandemic has passed)?

A8: Providers should conduct visits using technology instead of conducting visits in person.

Q9: Our meal delivery drivers are all volunteers and they are also all seniors. Bringing on other drivers at this stage would require fingerprinting and background checks which delays the immediate assistance we need. Is there a recommendation for this?

A9: Volunteers that are in contact with recipients or Protected Health Information (PHI) must continue to follow existing background check requirements. The Background Check Unit has an expedite process to issue provisional checks without fingerprints during the Emergency Declaration.

Q10: Are we expected to hire guardians if providers have DSP options available?

A10: SDS has no expectation that providers must hire guardians and family caregivers. Providers may have staff available to support families and can offer their support safely. Recipients may decline to work with available DSPs but the agency is under no obligation to hire family caregivers as DSPs. (**revised 04/27/2020*)

Q11: What are providers expected to pay as an hourly rate to guardians/family caregivers who are hired as DSPs?

A11: Please refer to Alaska Department of Labor wage and hour guidelines for compliance with wage and hour rules: <https://labor.alaska.gov/lss/whhome.htm>.

Q12: How are providers insulated from future audits, when we can't guarantee that guardian supports are being provided as regulated by CMS, and SDS?

A12: The agency is not insulated. Hiring policies and employee standards should remain the same. If a guardian or family caregiver is hired as a DSP, the DSP must follow all agency policies and procedures for providing care, to include documentation, to ensure the health and safety of the recipient. (**revised 04/27/2020*)

Q13: Is the new staff requirement for a TB test waived during COVID?

A13: TB testing is not a requirement for certification by SDS, however it continues to be a requirement for Assisted Living Homes licensed by the Residential Licensing Unit of the Division of Health Care Services. Please contact your licensing specialist for questions on this topic.

Q14: How is the recertification date being determined for two years from now (would it be the original month or would it now be whenever you get the packet in/30 days from that date)? Why was the recertification deadline not pushed back the full year as indicated in Appendix K? (**added 04/27/2020*)

A14: Once a provider renews certification, whether they were issued an extension or not, if approved, a new two-year certification will be granted from the SDS determination date forward, just as it is now. As far as the "up to one year" approval SDS was granted in Appendix K, SDS has the flexibility to determine the period of time issued up to one year while balancing both provider needs and workload for the division, both of which are critical.

Q15: Agency staff need Medication Administration training in order to administer meds for a recipient. In the regulations, it states that an RN must provide this training. Due to the COVID-19 travel restriction, an RN is unable to travel to the recipient's location, and cannot provide the training through distance delivery methods. Can the recipient's guardian train staff on

medication administration until the emergency health crisis is over? (**added 04/27/2020*)

A15: Yes, if it is documented that there are no other training resources or options.

Q16: Can providers use DocuSign or other programs that are HIPAA approved for any forms or documents between provider and clients? (**added 5/18/2020*)

A16: The Division recently issued guidelines on allowing electronic signatures for use with forms and documentation. <http://dhss.alaska.gov/dsds/Documents/covid-19/ElectronicSignatureCOVIDGuidance.pdf>

Section IV: Applications and Care Coordination

A separate FAQ has been developed for Care Coordinators please see the COVID-19 webpage for this information: <http://dhss.alaska.gov/dsds/Pages/Covid-19procedures.aspx>. (**revised 04/27/2020*)