Frequently Asked Questions on Status of Alaska's Appendix K and 1135 Flexibilities as of November 23, 2020

1. Are all Appendix K applications extended until March 10, 2021?

Response: At subsection g of Appendix K #1 (approved through March 10, 2021), CMS awards flexibility to renew support plans using different methods during COVID-19. To expedite renewal of support plans that have no changes in services requested, SDS developed the COVID-19 Appendix K Person Centered Support Plan Request form (the "Short Form"). This "Short Form" can be used for renewing support plans with start dates before March 11, 2021 that have no changes. If services are being modified, a support plan renewal using the "regular" form (Uni-02) should be submitted. For support plans with start dates of March 11, 2021 or later, a full support plan (the Uni-02) must be submitted within regulatory timelines.

2. Are family members going to be able to provide these services and in any location until March 10, 2021?

Response: At subsection c of Appendix K #1 for waiver services (and 1135 amendments to the Medicaid State Plan for personal care services and Community First Choice personal care services), CMS approved that family caregivers can be hired by a provider agency and paid to provide certain services through March 10, 2021.

At subsection b-4 of Appendix K #1, CMS approved that certain services can be provided in alternative locations through March 10, 2021. The approved Appendix K #1 can be found here: <u>http://dhss.alaska.gov/dsds/Documents/covid-19/COVID-App-K-CMS-RAI-responses.pdf</u>

3. Are LOCs being automatically renewed until March?

Response: **No.** Level of Care applications due after January 31, 2021 will receive full assessments. If a recipient's level of care expires January 31, 2021 or later, care coordinators must submit full renewal applications.

4. Are App K Short Forms going to work for plans renewing by 03/10?

Response: If the start date of a support plan (new or renewal) is March 11, 2021 or later, a full support plan (Uni 02) must be submitted. Amendments to support plans with an effective date of March 11, 2021 or later must also use the regular amendment process and form (Uni 03).As a reminder, support plan renewals are due 45 days before the start date of the next plan year.

5. Are multiple visits going to be allowed to be billed for?

Response: **No**. SDS notified care coordinators in a July 21,2020, SDS E-Alert that the flexibility to allow billing of two units of care coordination per month was discontinued as of September,

2020. Care coordinators should not request reimbursement for more than one unit of monthly care coordination for service provided from September 1, 2020, onward.

6. Are face to face visits limited until March 2021?

Response: At subsection b-4 of Appendix K #1, CMS approved that certain services, including care coordination visits, can be provided in alternative locations, including telework settings, through March 10, 2021.

7. Are attestations still acceptable in place of wet signatures?

Response: Yes. At subsection g of Appendix K #1, CMS awards flexibility to renew support plans using different methods during COVID-19 through March 10, 2021. This means that attestations in place of signatures are accepted until March 10, 2021. Electronic signatures and wet signatures are acceptable ongoing.

8. An agency asks whether legal guardians are still able to provide paid services without permission of the court. The governor's declaration only mentions "family members" on page 6 of his declaration under 7 AAC 130.202, but it is presumed he also intends to relax the entire reg which includes legal guardians?

Response: Yes. At subsection g of Appendix K #1, CMS approved for waiver services (and 1135 amendments to the Medicaid State Plan for personal care services and Community First Choice personal care services), that family caregivers and legally responsible individuals (if not already permitted under the waiver) can be paid to provide certain services (assuming they are hired by a provider agency to do so) through March 10, 2021.

- Can SDS provide clarification on Day Habilitation as it relates to App K? If more than the regulatory limit was approved for a recipient last year, can the App K Short Form be used to request the same amount for the next year after the 12/31 regulations change?
 Response: Effective January 1, 2021, SDS will be applying the new Day Habilitation regulations.
 Requests received after that date will be reviewed using the new regulations. After December 31, 2020, all requests for Day Habilitation beyond the approved regulatory amount will need to be submitted using the regular forms (Uni-02 and Uni-03).
- 10. Do we need to get background checks for staff before employment? How about those who expire during the PHE declaration?

Response: Yes and Yes. At subsection d.i of Appendix K #1., (and 1135 amendments to the Medicaid State Plan services), CMS approved that provisional background checks (which do not need fingerprints) beyond the allowed 30 days may be acceptable.

Further questions? Contact sdstraining@alaska.gov