

NH Department of Health and Human Services (DHHS)
Division of Long Term Supports and Services
Bureau of Elderly and Adult Services (BEAS)

105 Pleasant St.
Concord, NH 03301

STATE OF NEW HAMPSHIRE BEAS GENERAL MEMORANDUM (GM)	
DATE:	May 14, 2020
TO:	Deborah Scheetz, Director, Division of Long Term Supports and Services; All BEAS Staff; Choices for Independence Independent Case Managers and CFI Providers, Shawn Martin, Jayne Jackson, Donna Walker, Susan Buxton, Christine Tappan, DHHS, Kerrin Rounds, DHHS.
FROM:	Wendi Aultman, Bureau Chief, Elderly and Adult Services
SIGNATURE:	
SUBJECT:	COVID-19 Emergency Appendix K Choices for Independence Waiver (CFI) Guidance
GM NUMBER:	20-20 GM
EFFECTIVE DATE:	March 18, 2020
REGULATORY GUIDANCE:	This memo is a communication tool circulated for informational purposes only. The goal is to provide information and guidance to the individuals to whom it is addressed. The contents of this memo and the information conveyed are subject to change. This communication is not intended to take the place of or alter written law, regulations or rule.

MEMORANDUM SUMMARY	
The purpose of this memorandum is to:	
<ul style="list-style-type: none"> • Provide statewide guidance on the Approved Appendix K Emergency preparedness and Response and COVID-19 Addendum for the CFI Waiver. 	

The Bureau of Elderly and Adult Services (BEAS) is working with its federal and state partners, as well as other divisions within the Department of Health and Human Services (DHHS), to ensure that families and individuals continue to receive supports and services during the COVID-19 Emergency.

The Division of Long Term Services and Supports (DLTSS) provides the oversight for the state's four Home and Community Based Services (HCBS) 1915(c) waivers managed programmatically through the Bureau of Developmental Services (BDS) and BEAS. DLTSS works with the Division of Medicaid Services (DMS) to ensure that New Hampshire's DHHS is operating in accordance with the Centers for Medicare and Medicaid Services (CMS).

New Hampshire has been approved to implement temporary changes to the four 1915(c) HCBS waivers to accommodate potential issues with staffing shortages and the need for service provision outside of approved service descriptions to ensure that participant health and safety needs are

addressed during the COVID-19 Emergency. In addition, the state is looking at flexible options to ensure the stability of the HCBS system that has been firmly established as a cost effective option for participants, their families, and others engaged in care.

The approved Appendix K and other Special Medicaid Notices can be found at this link:
<https://www.dhhs.nh.gov/ombp/medicaid/covid19.htm>

If needed, additional guidance will be created by the Department and posted at this link:
<https://www.dhhs.nh.gov/dcbcs/covid-guidance.htm>

Guidance for NH Choices for Independence Waiver:

What temporary or Emergency-Specific Amendments are being requested for CFI?

- Allow spouses to provide personal care services.
- Allow a family member to be paid to render services to an individual.
- Permit temporary flexibilities as follows:
 - The respite cap of 30 days will be increased to 90 days per State Fiscal Year. Respite services require prior authorization under the Choices for Independence (CFI) program, preventing duplicate billing for both HCBS and Institutional Care Services.
 - The limit for Community Transition Services (CTS) may be increased, not to exceed a \$2,500 upper limit, as needed. CTS are not being used to set up temporary isolation residences.
- Permit temporary settings flexibilities as follows:
 - During times of emergency declaration, homemaker services may be provided in Adult Family Care settings. Personal Care Services may be provided in a setting necessary to ensure the health and safety of participants. These settings may include hotel, motel, shelter, church, or any facility based setting which will not duplicate service regularly provided by the facility based setting.
 - Adult Medical Day Care services may also be temporarily provided in a home setting provided the method comports with Center for Disease Control (CDC) recommendations and that will ensure the health and welfare of the individuals served. These additional services will be documented in a schedule within the individual's care plan. For more information see guidance memo: [Joint Memo: COVID-19 Emergency Guidance for Adult Medical Day Services](#)  (May 8, 2020).
- Allow home delivered meals to be provided if needed due to the COVID-19 Emergency in supportive housing and residential care settings.
- Allow Personal Emergency Response Services to be provided in Residential and Adult Family Care Settings without needing to request a waiver of the CFI rule He-E 801.
- Allow modification of the certification requirement that indicates that the maximum number of individuals served in a service location (licensed or certified) may be exceeded to address staffing shortages or accommodate use of other sites as quarantine sites.

- Permit adding an electronic method of signing off on required documents such as the person-centered service plan.
- Allow Level of Care re-evaluations or Medical Eligibility Assessment (MEA) redeterminations deadlines to be extended for 12 months.
- Allow CFI Case Management to be conducted remotely as well as allow monitoring of services to be conducted remotely through a minimum weekly contact with CFI participants.
- Allow, if requested and/or necessary, modifications to a person-centered plan, as driven by individualized participant need or choice, circumstance, and consent.
- An electronic signature will be accepted. A phone call or text may be used for individual/legal guardian approval, but it must be followed with email or paper documentation dated and signed on the date the change is authorized.
- Allow participants that require hospitalization to temporarily receive HCBS waiver Home Health Aide services in a hospital setting where the participant requires these services for communication, behavioral stabilization, and/or intensive personal care support needs. These additional services will be documented in a schedule within the individual's care plan and will require a prior authorization and will be billed separately.
- HCBS services may be delivered in an acute care hospital if:
 - 1) They are part of a plan of care;
 - 2) They meet needs of the individual that are not addressed by hospital services;
 - 3) They do not substitute services that the hospital is required to provide; and
 - 4) They are designed to provide smooth transitions to home and community-based settings and to preserve functionality.

What are some other flexibilities requested by the Department?

- Add an electronic method of service delivery (e.g., telephonic) allowing services to continue to be provided remotely in the home setting for:
 - Service coordination/Case management
 - Personal care services that only require verbal cueing
 - Participant directed and managed services
 - Monthly monitoring (i.e., in order to meet the reasonable indication of need for services requirement in 1915(c) waivers).

What billing codes and Systems Changes have been implemented to allow for these flexibilities?

BEAS has developed a table to ensure all the changes and adjustments to authorizations and billing are in line with the flexibilities if they are needed. See Table 1 for more information.

Table 1: Medicaid Choices for Independence Waiver
Medicaid Choices for Independence Waiver

1. New Services

Program	Procedure Code	Mod 1	Mod 2	Description	Begin Date	Service Authorization / Billing Instructions	Comments
CFI Waiver	G0156	HC	U9	Home Health Aide 8+ units in a Hospital - COVID-19; 15 min	3/18/2020	<ul style="list-style-type: none"> Service authorizations required 	<ul style="list-style-type: none"> Service where home health aide assistance is required while the client is in the hospital Rate = \$6.22
CFI Waiver	S5170	HC	U1	Home Delivered Emergency Meals Pack- COVID-19; per meal	3/18/2020	<ul style="list-style-type: none"> Does not require service authorizations Up to 28 meals can be billed as part of an emergency meals pack 	<ul style="list-style-type: none"> No involvement by case manager needed for service authorizations Rate = \$7.49

2. Services Allowed via Telehealth

Program	Procedure Code	Mod 1	Mod 2	Mod 3	Description	Begin Date	Service Authorization / Billing Instructions	Comments
CFI Waiver	S5102	HC	U2	GT	Day Care Services (Adult Medical Day Care) via Telehealth; per day	3/18/2020	<ul style="list-style-type: none"> Service authorizations are required. Use the regular AMDC service. Existing approved SAs can be used or new SAs will need to be entered and approved. For billing, providers will use existing AMDC codes and add to the claim: <ul style="list-style-type: none"> Additional Modifier = GT Place of Service = 02 	<ul style="list-style-type: none"> Not a new service Rate = \$52.80
CFI Waiver	T1030	HC	GT		Skilled Nurse via Telehealth; per visit	3/18/2020	<ul style="list-style-type: none"> Service authorizations are required. Use the regular Skilled Nursing service. Existing approved SAs can be used or new SAs will need to be entered and approved. For billing, providers will use existing Skilled Nursing codes and add to the claim: <ul style="list-style-type: none"> Additional Modifier = GT Place of Service = 02 	<ul style="list-style-type: none"> Not a new service Rate = \$97.60
CFI Waiver	T1016	HC	U1		Case Management; per day	3/18/2020	<ul style="list-style-type: none"> Service authorizations are required. Use the regular Case Management service. 	<ul style="list-style-type: none"> Not a new service Rate = \$9.13
CFI Waiver	T1019	HC	U1		Personal Care Agency Directed; per 15 minutes	3/18/2020	<ul style="list-style-type: none"> Service authorizations are required. Use the regular Personal Care service. 	<ul style="list-style-type: none"> Not a new service Rate = \$4.74
CFI Waiver	T1019	HC	U2		Personal Care Consumer Directed; per 15 minutes	3/18/2020	<ul style="list-style-type: none"> Service authorizations are required. Use the regular Personal Care service. 	<ul style="list-style-type: none"> Not a new service Rate = \$4.74