

## 6-30-20 DBHR COVID Call

Slide deck available at: <https://www.hca.wa.gov/assets/program/weekly-covid-19-call-for-bh-providers-20200421.pdf>

PPE survey – no baseline on needs for BH providers. Doing point in time survey. Please complete so understanding of unmet demand.

## Sarah Garcia – Community Services Division = COVID-19 Policy Changes

Moved most services to accessible by phone (out of offices). Call 1-877-501-2233 to reach customer contact center and apply for benefits or review eligibility. Can also Complete interview over phone, make changes, request replacement card, etc.

EBT cards customer assistance 1-888-328-9271

TANF changes to alleviate hardships – services available primary by phone. Usually 60 months in 5 year limit. All families meet exemptions available (even if previously deemed ineligible).

Requirement for WorkFirst activities to get TANF lifted.

WorkFirst orientation – were in office previously, now telephone option available.

Disaster Cash Assistance Program (DCAP) – Temporary cash assistance for folks who don't qualify for TANF, Unemployment. Sliding scale one month payment based on family size. \$ goes on EBT card.

## FOOD ASSISTANCE

- Food benefits were automatically supplemented to reach maximum food suppleneet for household size. Approved on month to month basis. Anticipate will be active in July. Requires federal and state emergency declarations in effect.
- Not disqualifying/terminating from participation r/t not engaged in work activities
- Pandemic EBT – families with K-12 children who are eligible for free or reduced meals, will begin June 28<sup>th</sup>. Automatically added to EBT cards, staggered start dates.
- If not on SNAP – if eligible for free/reduced lunch, must apply through [Wahsingtonconnection.org](https://www.washingtonconnection.org) before July 31<sup>st</sup>. apply for "Pandemic EBT"
- Extended certification periods –An extend eligibility for 6 months for folks who would have recertified in April, May, June.

## AGED, BLIND, DISABLED (ABD) /HOUSING ESSENTIAL NEEDS (HEN)

- Modified evaluation contracts to allow telephonic psych evaluations
- Benefits for Medicaid clients will not be terminated unless move out of state or request d/c.

Q - Person has primary short-term incapacity r/t SUD are they eligible for HEN? For HEN need to be incapacitated for at least 9 months.

## Q&A

Q – Telehealth projected date when no longer allowed for treatment?

A – No set date, commitment and authority through state plan to continue through pandemic.

Q – Special populations and masks (ex people with autism)

A - need to respect inability to tolerate masks. If there is a situation where person can't tolerate mask, staff need to be extra mindful of their self-preservation – physical spacing, face shield, mask for providers. The room will need to be cleaned well after the individual has left.

Q – Is eye protection for regular outpatient procedures (like outpatient therapy) or just aerosol generating procedures?

A – If seeing someone who you think has COVID recommendation is facemask and goggles or face shield to protect eyes, nose, mouth.

## Jason McGill – HCA

- Telehealth – State will do all it can to continue robust telehealth going forward. For Medicaid paying parity and that will continue. Question is HIPAA waiver received from federal government and whether that will continue to be available. 1) need federal emergency declaration to be renewed – still not confirmed. 2) a few details under state rules r/t practice rules for face-to-face that will need specificity and 2) 42cfr Part 2 needs to be put into permanent rule.
- Provider relief fund for Medicaid providers – fairly complex online federal portal to input data. The qualification process is “problematic” and would love to hear if not applying b/c believe not qualified or b/c of other challenges. Let Jason McGill know.
- If you received \$ through **previous medicare funding**, can't receive this fund. If you received \$ through nursing home/hospital or other funding sources you may be qualified to receive funds through this. HCA thinks this is unfair and challenging federal government on this. There May Be future funding allocation.

Q – still use CPT codes for BH instead of using modifiers? A – Yes, hasn't changed. See Telehealth billing policy guide it is available on the HCA webpage. Link to the Apple Health policy/billing COVID FAQ ("Telehealth Guide")... <https://www.hca.wa.gov/assets/billers-and-providers/behavioral-health-policy-and-billing-COVID-19.pdf?v=4>

Q DBHR continue? A – yes, plan to continue to hold the meetings. furlough may change presentation approach.

Q – Increasing # positive cases in state and plans to control – Percent of cases among total people tested is increasing. Central WA counties are largely due to agricultural workers – housing and working closely

together increases opportunities for spread. As restrictions have relaxed, people out and about and “social mixing.” Plan – encourage: face masks, limit contact outside family/close circle, if continues to rise and recommendations aren’t followed/don’t impact the rising # of cases, there will be a shut down again.

Q – Guidance for community based services like home visiting

A- Think someone is working on that, will find out if Crisis Responders or other have come up with protocols already.

Q – When does the emergency declaration expire?

A- Unknown. Federal support of testing is extended through August 31<sup>st</sup>. Hope that means extending state of emergency longer as well.

Q – How long to let a room set after disinfecting and before letting next patient use it?

A – Info unavailable on this call. See guidance on CDC webpage.

Link to an updated Eligibility Overview of Washington Apple Health (Medicaid)

programs: <https://www.hca.wa.gov/assets/free-or-low-cost/22-315.pdf> updated April 2020

Furloughs – start this week. Different day of week for each staff so that doors are open M-F. Also no overtime is being permitted, which further limits workhours of staff who are over-time exempt. Responsiveness will decrease for these reasons.

42 CFR – what are the rules with telehealth and SUD groups – A - Waiver? Use of technologies are relaxed. From around country know people are doing groups. Not sure it is spelled out in FAQs. Follow same protocol using telehealth that you would follow in person. Preface meeting with confidentiality frame, make sure you know the clients are who they should be (see ID). Re having other people in the room with a client is a sensitivity issue. Remind people to be in a private room AND/OR get agreement from participants that there may be people walking in the background.

Request for 42 CFR discussion at DBHR call. Many providers have put SUD groups on hold because not sure about this. Plan to bring as topic for upcoming call.

42CFR – will it affect new contracts.

David Dickinson SAMSHA Regional Admin – sent link to current existing guidance. Doesn’t recall language regarding the group question and privacy. Anticipate additional guidance r/t Congress’ push for greater alignment with HIPAA. Link to SAMHSA’s 42 CFR guidance <https://www.samhsa.gov/sites/default/files/covid-19-42-cfr-part-2-guidance-03192020.pdf>