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> Oct. 20, 2023 MB# 23-054

MEDICAID BULLETIN

TO: Home and Community-based Waiver Service Providers

SUBJECT: Reminder: Some Appendix K Flexibilities Issued During the COVID-19 Public Health Emergency Expire Nov. 11

On May 23, 2023, the South Carolina Department of Health and Human Services (SCDHHS) issued <u>Medicaid bulletin MB# 23-020</u> with an update on the status of temporary flexibilities for use in home and community-based services (HCBS) that are delivered through waiver programs. That bulletin announced many of the flexibilities issued under Appendix K waivers approved during the COVID-19 federal public health emergency (PHE) by the Centers for Medicare and Medicaid Services (CMS) will expire Nov. 11, 2023.

SCDHHS is issuing this bulletin to remind providers of flexibilities that will no longer be in effect for dates of service on and after Nov. 12, 2023. Affected HCBS waivers include:

- Intellectual Disability/Related Disabilities (ID/RD);
- Community Supports (CS);
- Head and Spinal Cord Injury (HASCI);
- Community Choices (CC);
- HIV/AIDS;
- Mechanical Ventilator Dependent (VENT);
- Medically Complex Children (MCC); and,
- Palmetto Coordinated System of Care (PCSC).

The updates referenced in this bulletin are specific to the temporary flexibilities that were created during the COVID-19 PHE through Appendix K waivers and do not impact other agency policies that existed prior to the PHE or addressed in other Medicaid bulletins regarding temporary flexibilities, unless specifically indicated.

Flexibilities Remaining through Approved Amendments/Renewals

As referenced announced in <u>MB# 23-048</u> and <u>MB# 23-050</u>, CMS recently approved waiver applications that updated policies related to reimbursement of family members. These changes

are outlined in the <u>Community Long-Term Care provider manual (Section 6)</u> and will remain in effect.

Flexibilities Ending Nov. 11, 2023

Effective Nov. 12, 2023, the following temporary flexibilities will no longer be available:

| Temporary Flexibility | CS | ID/RD | HASCI | СС | HIV/AID | VENT | PCSC | МСС |
|------------------------|--------|--------|--------|--------|---------|--------|--------|--------|
| | SC.067 | SC.023 | SC.028 | SC.040 | S | SC.401 | SC.168 | SC.067 |
| | 6 | 7 | 4 | 5 | SC.0186 | 81 | 6 | 5 |
| Remove weekly limits | | Х | Х | | | | | |
| from the Attendant | | | | | | | | |
| Care/Personal | | | | | | | | |
| Assistance service for | | | | | | | | |
| needs related to | | | | | | | | |
| closure of | | | | | | | | |
| Department of | | | | | | | | |
| Disabilities and | | | | | | | | |
| Special Needs (DDSN) | | | | | | | | |
| day programs or | | | | | | | | |
| adult day health care | | | | | | | | |
| (ADHC) centers | | | | | | | | |
| Add Respite/Personal | | Х | | | | | | |
| Care service hours | | | | | | | | |
| for those displaced | | | | | | | | |
| from day programs | | | | | | | | |
| and/or ADHC services | | | | | | | | |
| Allow up to two (2) | Х | Х | | | | | | |
| home-delivered | | | | | | | | |
| meals per | | | | | | | | |
| day/fourteen (14) | | | | | | | | |
| meals per week for | | | | | | | | |
| ADHC recipients | | | | | | | | |
| Allow non-traditional | Х | Х | | Х | Х | Х | | |
| home-delivered meal | | | | | | | | |
| service providers | | | | | | | | |
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| Temporary Flexibility | CS SC.067 6 | ID/RD SC.023 7 | HASCI SC.028 4 | CC SC.040 5 | HIV/AID S SC.0186 | VENT SC.401 81 | PCSC SC.168 6 | MCC SC.067 5 |
|-------------------------|-------------------|----------------------|----------------------|-------------------|-------------------------|----------------------|---------------------|--------------------|
| Allow day services | х | X | х | | | | | |
| (day activity, career | | | | | | | | |
| preparation, | | | | | | | | |
| community services, | | | | | | | | |
| employment | | | | | | | | |
| services) to be | | | | | | | | |
| provided in | | | | | | | | |
| residential settings | | | | | | | | |
| Renew participant | Х | Х | Х | | | | | |
| service plans for 12 | | | | | | | | |
| months under certain | | | | | | | | |
| conditions (if a | | | | | | | | |
| meeting is held with | | | | | | | | |
| the individual and/or | | | | | | | | |
| representative, if the | | | | | | | | |
| case manager | | | | | | | | |
| contacts the | | | | | | | | |
| participant using | | | | | | | | |
| allowable remote | | | | | | | | |
| contact methods) | | | | | | | | |
| Modify service plans | Х | Х | X | Х | Х | Х | | |
| for additional | | | | | | | | |
| supports and/or | | | | | | | | |
| services in response | | | | | | | | |
| to the COVID-19 PHE | | | | | | | | |
| Allow for completion | х | Х | X | | | | | |
| of critical incident or | | | | | | | | |
| abuse, neglect and | | | | | | | | |
| exploitation final | | | | | | | | |
| report outside of | | | | | | | | |
| typical timeframes | | | | | | | | |
| (10 days) | | | | | | | | |
| Suspend requirement | х | х | X | | | | | |
| of two (2) waiver | | | | | | | | |
| services monthly | | | | | | | | |
| provided to the | | | | | | | | |
| participant | | | | | | | | |

| Temporary Flexibility | CS | ID/RD | HASCI | СС | HIV/AID | VENT | PCSC | МСС |
|------------------------|--------|--------|--------|--------|---------|--------|--------|--------|
| | SC.067 | SC.023 | SC.028 | SC.040 | S | SC.401 | SC.168 | SC.067 |
| | 6 | 7 | 4 | 5 | SC.0186 | 81 | 6 | 5 |
| Allow all reviews by | _ | | | X | X | X | - | X |
| the state's quality | | | | | | | | |
| improvement | | | | | | | | |
| organization and | | | | | | | | |
| other auditing | | | | | | | | |
| activities to be | | | | | | | | |
| performed as off-site, | | | | | | | | |
| desk reviews of | | | | | | | | |
| information shared | | | | | | | | |
| by the provider, or | | | | | | | | |
| deferred past the | | | | | | | | |
| required timeliness | | | | | | | | |
| period if onsite | | | | | | | | |
| reviews are required | | | | | | | | |
| Disallow visitors of | Х | Х | Х | Х | Х | Х | Х | Х |
| the participant's | | | | | | | | |
| choosing at any time | | | | | | | | |
| to minimize the | | | | | | | | |
| spread of infection | | | | | | | | |
| related to the COVID- | | | | | | | | |
| 19 pandemic | | | | | | | | |
| Authorize case | Х | Х | Х | | | | | |
| management entities | | | | | | | | |
| to provide direct | | | | | | | | |
| service (conflict of | | | | | | | | |
| interest) | | | | | | | | |
| Allow an extension | Х | Х | Х | | | | | Х |
| for reassessment and | | | | | | | | |
| reevaluations up to | | | | | | | | |
| one year past the | | | | | | | | |
| due date | | | | | | | | |
| Conduct | Х | Х | Х | Х | Х | Х | Х | Х |
| assessments, | | | | | | | | |
| evaluations, and | | | | | | | | |
| person-centered | | | | | | | | |
| service planning | | | | | | | | |
| meetings | | | | | | | | |
| virtually/remotely in | | | | | | | | |
| lieu of face-to-face | | | | | | | | |
| meetings | | | | | | | | |

| Temporary Flexibility | CS | ID/RD | HASCI | СС | HIV/AID | VENT | PCSC | МСС |
|---|--------|--------|--------|--------|---------|--------|--------|--------|
| | SC.067 | SC.023 | SC.028 | SC.040 | S | SC.401 | SC.168 | SC.067 |
| | 6 | 7 | 4 | 5 | SC.0186 | 81 | 6 | 5 |
| Add an electronic method of signing off on required | X | X | X | X | X | X | | x |
| documents (e.g., | | | | | | | | |
| service plans). This | | | | | | | | |
| will discontinue the use of verbal | | | | | | | | |
| attestation. Existing | | | | | | | | |
| electronic signature | | | | | | | | |
| processes will remain | | | | | | | | |
| in place | | | | | | | | |
| Add an electronic | x | x | x | x | x | x | | |
| method of service | | | | | | | | |
| delivery (e.g., | | | | | | | | |
| telephonic) for the | | | | | | | | |
| following services: | | | | | | | | |
| case management, | | | | | | | | |
| in-home habilitation, | | | | | | | | |
| monthly monitoring | | | | | | | | |
| Add an electronic | | | | | | | | Х |
| method of service | | | | | | | | |
| delivery (e.g., | | | | | | | | |
| telephonic) for the | | | | | | | | |
| RN care coordination | | | | | | | | |
| service Add an electronic | | | | X | x | x | | |
| method of service | | | | ^ | ^ | ^ | | |
| delivery (e.g., | | | | | | | | |
| telephonic) for the | | | | | | | | |
| following services: | | | | | | | | |
| case management, | | | | | | | | |
| monthly monitoring | | | | | | | | |
| Add an electronic | | | | | | | X | |
| method of service | | | | | | | | |
| delivery (e.g., | | | | | | | | |
| telephonic) for case | | | | | | | | |
| management, | | | | | | | | |
| monthly monitoring | | | | | | | | |
| and high fidelity | | | | | | | | |
| wraparound services | | | | | | | | |

| Temporary Flexibility | CS SC.067 6 | ID/RD SC.023 7 | HASCI SC.028 4 | CC SC.040 5 | HIV/AID S SC.0186 | VENT SC.401 81 | PCSC SC.168 6 | MCC SC.067 5 |
|-----------------------|-------------------|----------------------|----------------------|-------------------|-------------------------|----------------------|---------------------|--------------------|
| Add in-home | | Х | Х | | | | | |
| supports as a | | | | | | | | |
| participant-directed | | | | | | | | |
| service. This service | | | | | | | | |
| can be provided by a | | | | | | | | |
| legally responsible | | | | | | | | |
| person and/or a | | | | | | | | |
| relative/legal | | | | | | | | |
| guardian | | | | | | | | |
| Allow parents of | | | | X | Х | Х | | |
| minor children to | | | | | | | | |
| provide personal | | | | | | | | |
| care services | | | | | | | | |
| Allow up to one (1) | | | | X | Х | Х | | |
| home-delivered meal | | | | | | | | |
| per day/one (1) | | | | | | | | |
| additional case of | | | | | | | | |
| nutritional | | | | | | | | |
| supplements per | | | | | | | | |
| month | | | | | | | | |
| Delay onsite review | | | | Х | Х | Х | | |
| of environmental | | | | | | | | |
| modifications | | | | | | | | |
| throughout the PHE | | | | | | | | |
| Evaluate | | | | X | Х | Х | | |
| performance/ | | | | | | | | |
| completeness of | | | | | | | | |
| environmental | | | | | | | | |
| modifications | | | | | | | | |
| electronically | | | | | | | | |

| CS SC.067 6 | ID/RD SC.023 7 | HASCI SC.028 4 | CC SC.040 5 | HIV/AID S SC.0186 | VENT SC.401 81 | PCSC SC.168 6 | MCC SC.067 5 |
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| | SC.067 6 | SC.067 6 7 | SC.023 SC.028 6 7 1 1 | SC.067 SC.023 SC.028 SC.040 6 7 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | SC.067 SC.023 SC.028 SC.040 S 6 7 4 5 SC.0186 1 1 1 1 1 1 1 1 1 1 1 1 1 1< | SC.067 SC.023 SC.028 SC.040 S SC.0186 SC.01 6 7 4 5 SC.0186 S1 1 1 1 1 1 SC.0186 S1 1 1 1 1 1 1 SC.0186 S1 1 | SC.067 SC.023 SC.028 SC.040 S SC.0186 SC.401 SC.168 G Image: Strain strai |

| Temporary Flexibility | CS | ID/RD | HASCI | СС | HIV/AID | VENT | PCSC | MCC |
|------------------------|--------|--------|--------|--------|---------|--------|--------|--------|
| | SC.067 | SC.023 | SC.028 | SC.040 | S | SC.401 | SC.168 | SC.067 |
| | 6 | 7 | 4 | 5 | SC.0186 | 81 | 6 | 5 |
| Exceed service | Х | Х | Х | Х | Х | Х | | |
| limitations (including | | | | | | | | |
| limits on sets of | | | | | | | | |
| services as described | | | | | | | | |
| in Appendix C-4) | | | | | | | | |
| Modify provider | Х | Х | Х | | | | | |
| qualifications | | | | | | | | |
| Modify licensure or | Х | Х | Х | | | | | |
| other requirements | | | | | | | | |
| for settings where | | | | | | | | |
| waiver services are | | | | | | | | |
| furnished | | | | | | | | |
| Increase the cost | Х | | | | | | | |
| limits for entry into | | | | | | | | |
| the waiver | | | | | | | | |

In addition to the preceding guidance, DDSN has also provided direction to providers in memorandums issued May 4, 2023 and Sept. 20, 2023.

A comprehensive list of the COVID-19-specific policy guidance SCDHHS issued during the PHE is publicly available <u>here</u>. Individuals with questions regarding this bulletin can email <u>MedicaidWaiver@scdhhs.gov</u>.

Thank you for your continued support of the South Carolina Healthy Connections Medicaid program.

/s/ Robert M. Kerr