COVID-19 Updates

HCPF Office of Community Living

Presented by:
Dr. Lisa Latts and Bonnie Silva

March 27, 2020

Overview

Colorado Department of Public Health & Environment (CDPHE) Update

- Greg Schlosser, Branch Chief

Update on COVID-19 status in Colorado

- Dr. Lisa Latts, Chief Medical Officer

Update from Colorado Cross Disability Coalition (CCDC)

- Julie Reiskin, Executive Director

Update of Department Guidance issued so far

- Bonnie Silva, Office of Community Living Director

Update on Federal Requests

- Bonnie Silva, Office of Community Living Director

Questions/Feedback

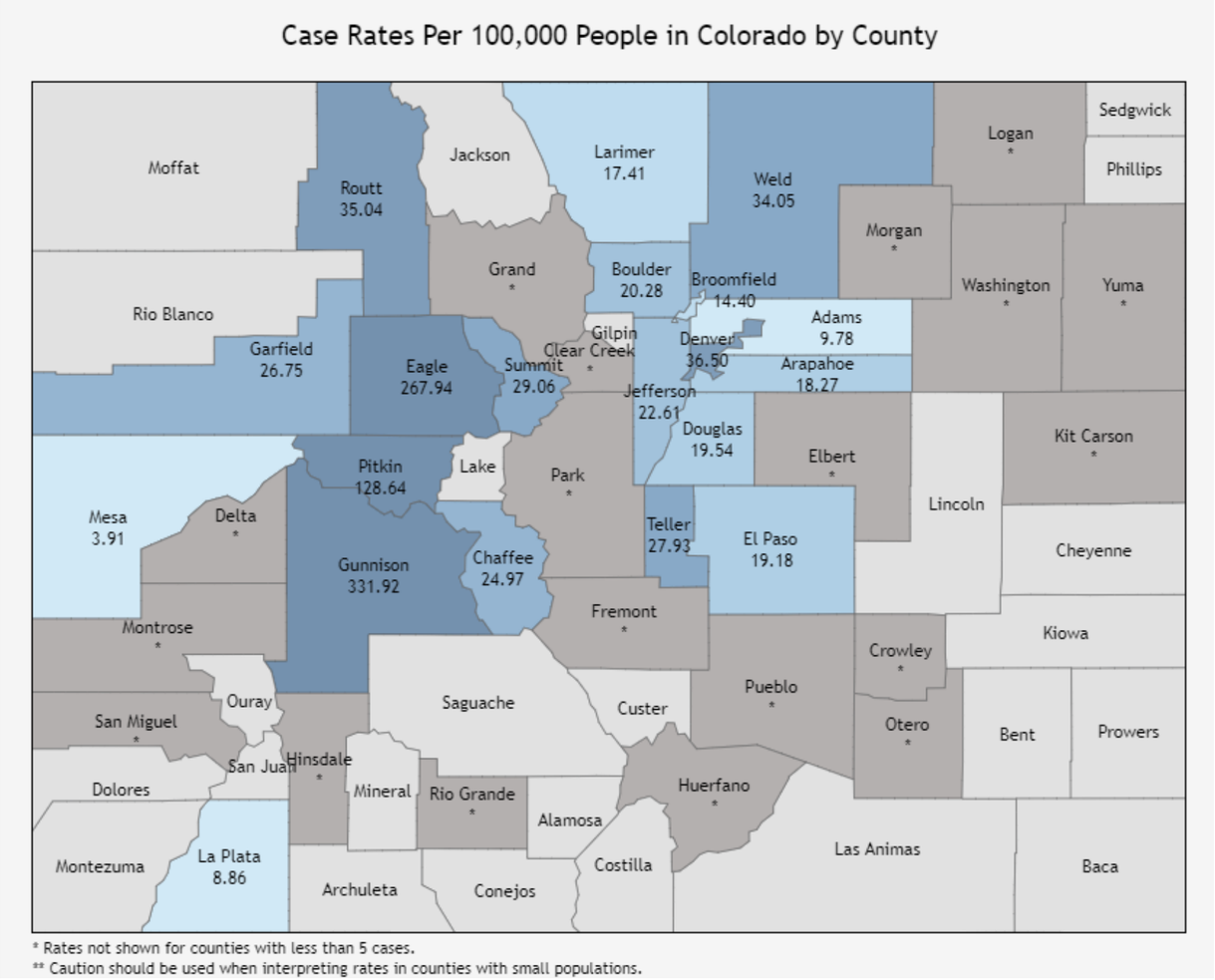
- Responses to top question of last week and opportunity for new questions and answers

Update

COLORADO
Department of Public Health & Environment

COVID-19 in Colorado

- 1,430 cases in CO*
  - US: 82,404
  - World: 526,044
- 184 hospitalized
- 39 counties
- 10,122 people tested
- 24 deaths
- 9 outbreaks at residential and non-hospital health care facilities



Exposure Risk Categories

Risk Level	Travel-associated Exposures*	Exposures Identified through Contact Investigation
High	Not applicable	Living in the same household as, being an intimate partner of, or providing care in a nonhealthcare setting (such as a home) for a person with symptomatic laboratory-confirmed COVID-19 infection without using recommended precautions for home care and home isolation
Medium (assumes no exposures in the high-risk category)	Travel from a country with widespread sustained transmission	Close contact with a person with symptomatic laboratory-confirmed COVID-19
	Travel from a country with sustained community transmission	On an aircraft, being seated within 6 feet (two meters) of a traveler with symptomatic laboratory-confirmed COVID-19 infection; this distance correlates approximately with 2 seats in each direction
	Travel on a cruise ship or river boat	Living in the same household as, an intimate partner of, or caring for a person in a nonhealthcare setting (such as a home) to a person with symptomatic laboratory-confirmed COVID-19 infection while consistently using recommended precautions for home care and home isolation
Low (assumes no exposures in the high-risk category)	Not applicable	Being in the same indoor environment (e.g., a classroom, a hospital waiting room) as a person with symptomatic laboratory-confirmed COVID-19 for a prolonged period of time but not meeting the definition of close contact
No identifiable risk	Not applicable	Interactions with a person with symptomatic laboratory-confirmed COVID-19 infection that do not meet any of the high-, medium- or low-risk conditions above, such as walking by the person or being briefly in the same room.

CDC Guidance

- Recommended precautions for household members, intimate partners, **and caregivers** in a nonhealthcare setting of: A patient with symptomatic laboratory-confirmed COVID-19 OR A patient under investigation
  - www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html
- Guidance on isolating at home:
  - www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html
- Guidance on home care for COVID-19 patients:
  - www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html
- Definitions of isolation and quarantine:
  - covid19.colorado.gov/isolation-and-quarantine

Return to Work

- Time-since-illness-onset and time-since-recovery strategy (**non-test-based strategy**) Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:
  - At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
  - At least 7 days have passed *since symptoms first appeared*

- **Test-based strategy** (currently only for Health Care Personnel) who have COVID-19 who have symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:
  - Resolution of fever without the use of fever-reducing medications and
  - Improvement in respiratory symptoms (e.g., cough, shortness of breath) and
  - Negative results of a COVID-19 from at least two consecutive nasopharyngeal swab specimens collected ≥24 hours apart_(total of two negative specimens)

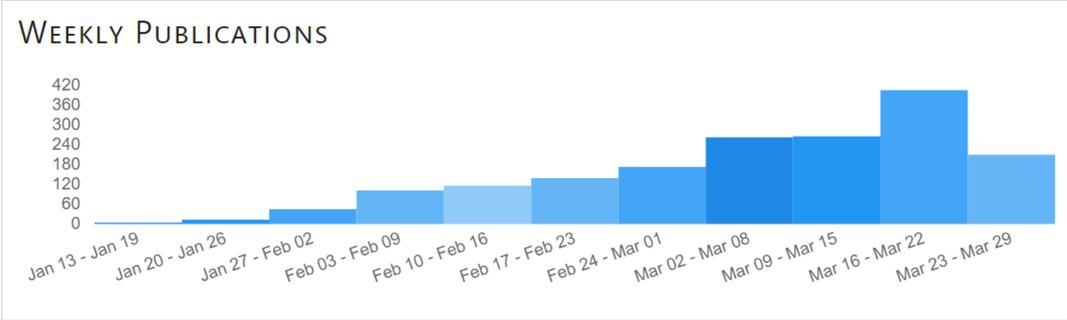
www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html

COVID-19 Rumors

Hold your breath for 10 seconds

- RUMOR: Don't take ACE-I or ARBs for high blood pressure
  - No evidence. Current recommendations: Don't change
  - https://jamanetwork.com/journals/jama/fullarticle/2763803
- RUMOR: Advil/Motrin makes COVID-19 worse
  - No evidence. OK to take before, during or after infection.
  - www.wired.com/story/the-ibuprofen-debate-reveals-the-danger-of-covid-19-rumors/

- Chlorquine and Hydroxychloroquine to treat COVID-19
  - Ongoing clinical trials. Looming shortages

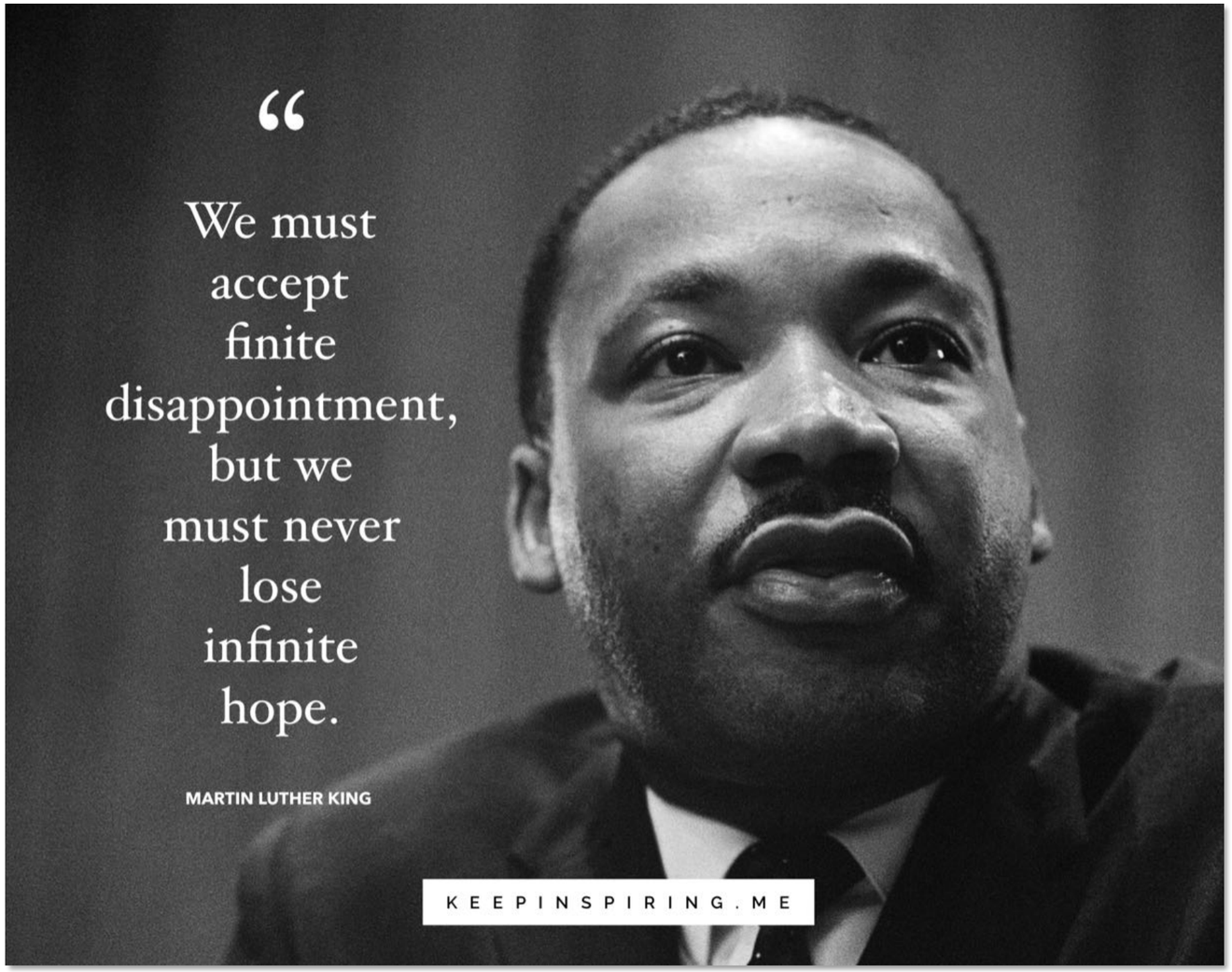


COLORADO CROSS-DISABILITY COALITION

- Statewide organization run by and for people with all types of disabilities
- We do disability rights advocacy using a social justice lens
- We have agreed to coordinate communication between our community (not just CCDC members but the whole disability community) and HCPF to help with overwhelm. #DoingMyPartCO
- Email covid@ccdconline.org
- Website www.ccdconline.org/covid-19-resources-links-and-information/

Major concerns already addressed

- No one gets kicked off Medicaid during the crisis
- Case managers can do remote visits
- Some people getting other HCBS services via telemedicine
- HCPF created letter for personal care workers for use during stay at home order



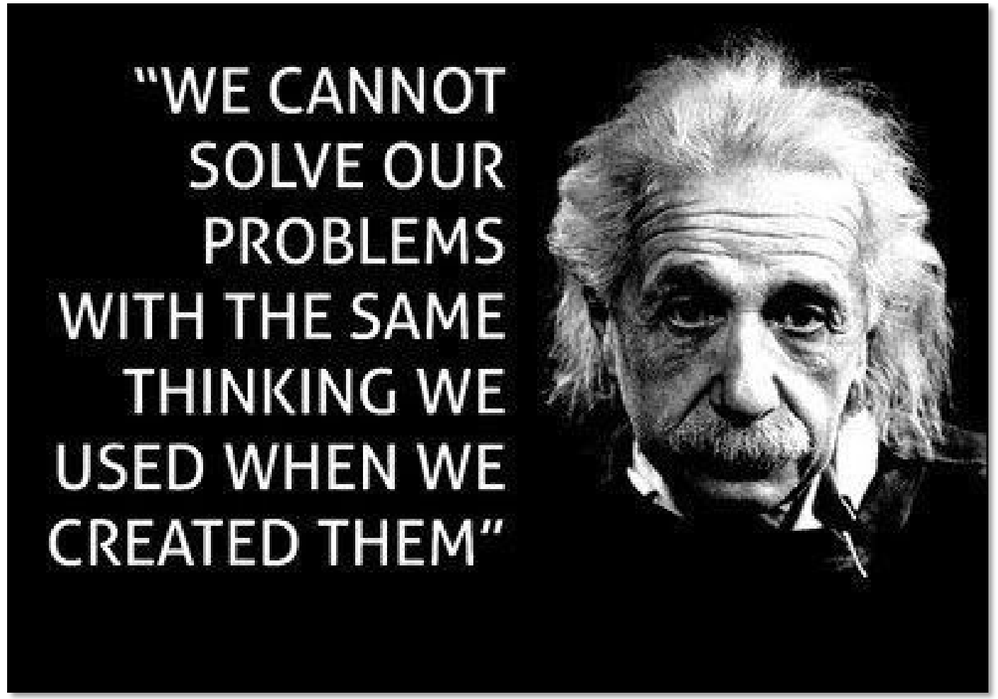
What Now?

- We are in pre-crisis or actual crisis in terms of health care operations.
- This means a suspension of normal practices.
- Health care systems have to focus more on life preservation not optimal health so some things might not be able to happen.
- The reason for sacrifice now is to keep a health system functioning so horrible decisions like rationing are either prevented or limited.
- We are strong and resilient and our first question should always be how can I help.

#DoingMyPartCo

What can you do?

- Think about others, we all can help someone else
- #FactsNotFear
- When news comes out, do not react, check the facts, give us time to communicate
- Get involved and stay involved
- Respond to requests for action



This is a marathon not a sprint

- Take a breath
- Try to relax
- Take time away from Social Media and News
- Self Care is important
- Remember that leaders from our community are being invited to participate in policy decisions by state and local agencies. We are getting the information out as quickly as possible.

Previous Guidance

Case Management Agencies

Operational Changes

- OM 20-018
- OM 20-019

PASRR Changes

- IM 20-015

Critical Incident Reporting for COVID-19

- OM 20-022

Facilities and PACE

Infection Control And Prevention of COVID-19 in Nursing Homes (CMS)

- CMS QSO-20-14-NH

HCBS Providers

Long-term Care and Congregate Settings

- OM 20-017

Day Program Service Providers

- IM 20-017

HCBS Therapy Services

- OM 20-020

Guidance for Program Closures Due to COVID-19

- OM 20-021

All COVID-19 related memos can be found here:

www.colorado.gov/hcpf/covid-19-provider-information

New Guidance Issued

OM 20-023

OM 20-024

All COVID-19 related Memos can be found here: www.colorado.gov/hcpf/covid-19-provider-information

OM 20-023

TITLE: COVID-19 COMMUNICATION FOR SUPERVISION REQUIREMENTS FOR CLASS B LICENSED HCBS PROVIDERS

- **Supervision should be flexible** to the needs of the member
- **Supervisory visits, recertification visits, and new member assessments** may be conducted **remotely**
- **Care plans may be modified** at the request of the member or representative to best meet the needs of the member

Link: OM 20-023

OM 20-024

TITLE: CHANGES TO BENEFITS AND SERVICES IN RESPONSE TO COVID-19

- The Department is implementing temporary provisions to **prohibit services from being provided in group settings** and allow for **flexibility in the delivery of services**.
- OM 20-024 contains complete table of information on the **services modified**, the temporary **allowable provisions**, and the **action needed from case management agencies and providers**.
- **At no time** shall the delivery of community-based services include **more than ten people, to include support staff**. At all times, support staff shall **ensure social distancing** recommendations of **at least 6 feet** are followed

Link: OM 20-024

Appendix K
1115 Waiver
1135 Waiver
Update

COLORADO
Department of Health Care Policy & Financing

1570 Grant Street
Denver, CO 80203

Colorado's COVID-19 Emergency Waiver Overview

Last Updated: March 2020

Background & Process

The Centers for Medicare and Medicaid Services (CMS) is working with States to provide additional program flexibility for Medicaid/Children's Health Insurance Program (in Colorado, "CHP+") to address the COVID-19 pandemic. When possible, we are implementing flexibility through existing authority, such as emergency rulemaking related to telemedicine. The process to ask CMS for flexibility is called a waiver. The two primary types of waivers States are using to ask for flexibility are Section 1115 and 1135 waivers.

In addition, states can ask for flexibilities through an Appendix K amendment for 1915(c) Home and Community Based Service (HCBS) waivers. Appendix K is used by states to advise CMS of expected changes to its waiver operations or to request an amendment to its approved waiver programs during an emergency. Colorado was proactive in asking for flexibility. We submitted our first request and asked for additional flexibility for our ten (10) HCBS waivers on March 13, 2020, before many other States and before the federal government had finalized its preferred process for requests. We submitted the 1135 waiver on March 24, 2020. Development of a waiver usually takes months; the Department completed our waiver request in days given the urgency of COVID-19.

Submitting our request for flexibility to the federal government is only a first step. CMS may not approve all of our requests under our first submissions. CMS is also requesting that we resubmit several of our requests through a different waiver (1135), state plan amendments, or other documents that CMS can quickly review.

We are in ongoing conversations with our federal partners as they consider our requests. We will update this fact sheet as more information becomes known.

What We've Asked For

During this pandemic and in any economic downturn that may follow, enrollment in Health

Link: https://www.colorado.gov/pacific/sites/default/files/COVID%20Emergency%20Waiver%20Overview%20-%203-25-2020.pdf

Top Question Topics

Eligibility

CDASS

Alternative Settings

Eligibility

Do members still need to go through the annual redetermination process during the pandemic?

Yes, members still need to go through the annual redetermination process. However policy is being modified to allow self-attestation of eligibility criteria. System changes also being made to prevent members from being discontinued if they no longer qualify.

Eligibility

If I'm on the Buy-in Program and lose my job because of the pandemic and can't pay my premium, will I lose my benefits?

No, benefits will not be lost if you lose your job and can't pay your premium. System changes are being made to prevent members from being discontinued.

Eligibility

Do members still need to access at least one service every 30 days to remain eligible for waiver services?

Yes. The Department requested to waive this requirement and it was denied by CMS. The guidance is to leverage technology service delivery options and/or paid family caregivers.

CDASS

Are my attendants for CDASS considered essential workers under Governor Polis's recent "Shelter In Place" Order?

Yes. CDASS attendants are considered essential home care workers who are permitted to work during the State of Emergency and "Shelter In Place" order.

Alternative Settings

Does providing services in "alternative settings" mean that members will be moved into nursing facilities?

The Department has requested the ability to provide care in alternative locations, i.e., if a hospital services in a hotel. This request is still pending with CMS.

New questions or issues?

What should we be thinking of for the next 2 weeks?

Stay Engaged

Email us

HCPF_HCBS_Questions@state.co.us

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More Information

www.cdc.gov/coronavirus/2019-ncov/

www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page

covid19.colorado.gov

Local Public Health Agencies

www.colorado.gov/cdphe/find-your-local-public-health-agency

www.colorado.gov/hcpf/COVID

Next Steps

Thank You!