



Developmental Disabilities Administration (DDA) Updates

Bernard Simons, DDA Deputy Secretary

December 18, 2020



Deputy Secretary's Agenda



- Opening Remarks
- Deputy Secretary Update
- COVID-19 Regional Update
- Kenneth A Feder, PhD, Epidemic Intelligence Service Officer for the Center for Disease Control and Prevention, Maryland Department of Health Infectious Disease Epidemiology and Outbreak Response Bureau



- The DDA's highest priority is the health, safety, and wellbeing of people with intellectual and developmental disabilities, their families, staff, and providers
- The DDA is committed to transparency with all of our stakeholders to ensure we are all working with the same information to support our shared missions
- Thank you for your continued support in joining me during these webcast so that we can stay in-touch and be able to provide you with the most current information

During yesterday's Governor Larry Hogan press conference, he announced a series of actions to slow the spread of COVID-19 during the holiday season, including new testing and quarantine requirements for travel, and a new public health advisory to limit gatherings. In addition, the governor announced an additional \$180 million in emergency economic relief that includes \$40 million to Developmental Disability Providers. He mentioned the 4% increase would take place in January instead of July 2021



Executive Orders Authorizing Quarantine and/or Testing of Traveler

MDH Amended Directive and Order Regarding Health Care Matters:

- Applies to Marylanders traveling out of state and individuals who travel into Maryland
- Requires a test immediately upon arrival or within 72 hours before travel into Maryland
- Encourages a retest within 72 hours of arrival in Maryland
- Exception for employee commuters and travel between VA, DC, WV, DE, PA
- Becomes an advisory recommendation 1/31/2021 unless extended



MDH Notice- COVID-19 Advisory- Large Gatherings, Essential Travel, and Mandatory Travel Testing:

- Recommended to avoid indoor gatherings of more than 10 people
- Recommends limiting travel to essential purposes only
- Refers to Sec. Health Care Matters Order for mandatory testing after traveling



Personal Protective Equipment (PPE)

- This past week the regions distributed our six (6) round of PPE
- If you are having a hard time getting PPE from your local health department, please contact your Regional Director
- Providers are urged to advocate at their local level as the Governor has encouraged county leaders to utilize some of their remaining CARES Act resources for critical PPE, particularly gloves, gowns, and masks



Maryland's Vaccination Plan

- At this time, Maryland is focused on Phase 1A-Getting the initial federal allocation of 155,000 COVID-19 vaccine doses out to hospitals, nursing homes (residents/staff), and first responders
- The State of Maryland is working to get nursing homes and hospitals their doses as soon as possible and hope to have more comprehensive answers at a later point as we get more information from the federal government's Operation Warp Speed. We are now working on detailed operations plans which we expect to have more information on over the next four to six weeks

Appendix K

- We are hearing the Center for Medicare and Medicaid Services (CMS) intends to establish a policy that would allow Appendix Ks to extend beyond their traditional one-year time limit
- CMS is seeking to have the lifespan of the Appendix K be tied to the length of the Public Health Emergency (PHE)
- CMS is also seeking to provide an addition time period after the PHE ends so states can unwind the emergency flexibilities



Retainer Days

- DDA's revised Appendix K was submitted to CMS on 12/14/2020 to:
 - Remove "consecutive" requirement
 - Request for multiple episodes of retainer payments for specific services up to a maximum amount of days
 - Community Living Group Home services up to 60 days
 - Employment Services, Supported Employment, Community Development Services, Career Exploration, Day Habilitation, Supported Living, and Personal Supports up to 30 days
 - As per required by CMS when multiple episodes are used, guardrails were included for which providers will need to attest

Retainer Days

- These guards are noted in CMSs FAQs and relate to:
 - Acknowledging that retainer payments will be subject to recoupment if inappropriate billing or duplicate payments for services occurred
 - Attestation from the provider that it will not lay off staff, and will maintain wages at existing levels
 - Attestation from the provider that they had not received funding from any other sources, including but not limited to unemployment benefits and Small Business Administration loans, that would exceed their revenue for the last full quarter prior to the public health emergency

Amendment #3 Update

- DDA Waiver Amendments # 3 were submitted to CMS on 10/30/2020
- CMS initial response and questions received on 12/4/2020 and 12/11/2020
- Department response and updates to waiver to be submitted this week
- DDA will share information and guidance on amendments implementation and timelines

EVV Implementation

There are two new policy changes from the MDH In-Home Supports Assurance System (ISAS) team for Personal Support Providers:

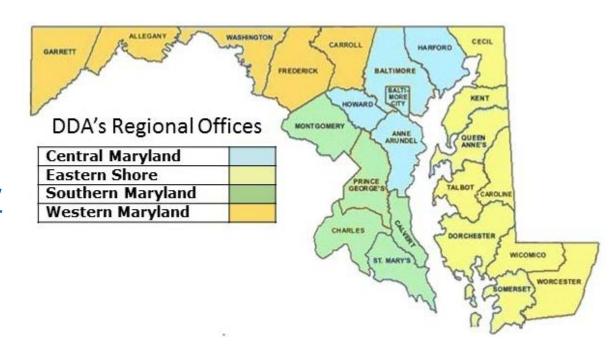
- MDH ISAS team has extended the grace period for DDA Providers
 Missing Time Requests (MTRs) through the end of February 2021
 - ISAS team will not track the number of MTRs per Direct Support Professional (DSP), per month, until March 1, 2021
 - Starting March 1, 2021, ISAS team will review any MTRs beyond six
 (6) per month, per DSP

- Effective March 1, 2021, providers will now have up to one month from the Date of Service to submit Missing Time Requests, making this a rolling deadline
- Late MTRS beyond the one-month may not be approved for payment
- See the links below announcing the changes and the updated ISAS policies
 - MPS Letter announcing the change (12.15.2020)
 - Updated <u>ISAS Policies</u> (12.15.2020)



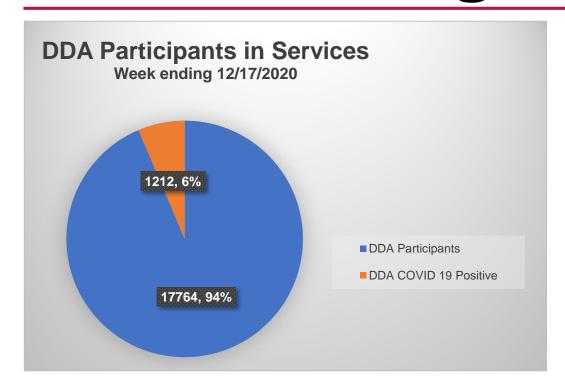
COVID-19 Regional Updates

- SMRO- Onesta Duke onesta.duke@maryland.gov
- **ESRO** Kim Gscheidle <u>kimberly.gscheidle@maryland.gov</u>
- CMRO- Nicholas Burton nicholas.burton@maryland.gov
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DDA Tracking



There are 17,764 people supported in services by the DDA of which 6% (1212 have tested positive for COVID-19.

POSITIVE PARTICIPANTS BY REGION

WEEK ENDING 12/17/2020

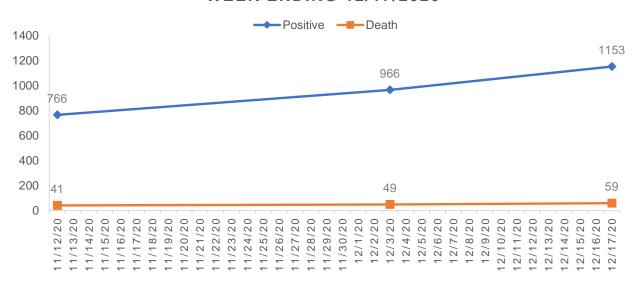


CMRO 534 Positive; Increase of 95 ESRO 73 Positive; Increase of 0 SMRO 406 Positive; Increase of 45 WMRO 140 Positive; Increase of 47

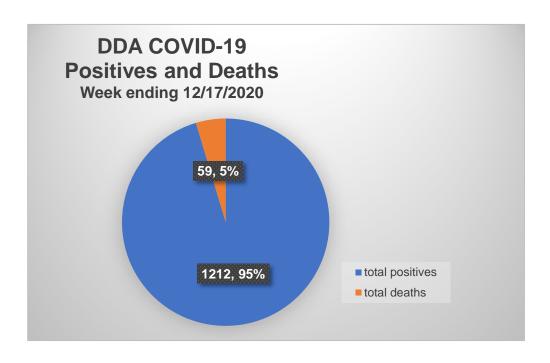


DDA Tracking

POSITIVE PARTICIPANTS STATEWIDE WEEK ENDING 12/17/2020



There have been 1153 participants reported as having tested positive for COVID-19 of which there have been 59 deaths. This is an increase of 10 from the last report



The 59 deaths represents approximately 5% of all (1212) participants that tested positive.





Updates and Clarifications to Group Home COVID-19 Guidance

Kenneth A Feder, PhD, Epidemic Intelligence Service Officer for the Center for Disease Control and Prevention

Maryland Department of Health

Infectious Disease Epidemiology and Outbreak Response Bureau

Agenda

- Checklist of Recommendations for Group Home Outbreak Revised December 16, 2020
- Isolation vs quarantine: what is the difference?
- Isolation described
- Quarantine described
- Exceptions to quarantine and isolation: are they permitted?
- Preparing for Christmas holiday



Isolation vs Quarantine

- "Isolation" and "Quarantine" refer to two different groups of people, who have two different sets of guidance
- **Isolation** is for a person has <u>tested positive</u> for COVID-19
- Quarantine is for a person who has <u>not tested positive</u> for COVID-19, but has had a high-risk exposure
- What they have in common: both mean "separate yourself from others"



Isolation: when you test positive

- Who should isolate?
 - Anyone who tests positive for COVID-19
- How long should that person isolate?
 - If symptomatic: until 10 days have passed since symptom onset
 - If asymptomatic: until 10 days have passed since specimen collection
 - Plus: the person must have no fever for 24 hours
 - Plus: the person must feel mostly better
- Can isolation be shortened, or are there exceptions?
 - No, (almost) never. Call your local health contact if there is a true staffing crisis and you want this option considered for staff

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

Quarantine: when you are exposed (1/3)

- Who should quarantine?
 - Anyone who has had a "high risk" exposure to COVID-19?
- What does "high risk" exposure mean for DDA clients:
 - Another resident or staff in the home tests positive for COVID-19
 - The client had close contact with someone with COVID-19 outside the home
 - The client is told by a health department contact tracer they were exposed to COVID-19 outside the home
 - A client received medical care unrelated to COVID-19 that required an overnight stay in the hospital
 - A client spends time dining with, or sleeping in the homes of, family or loved ones

 Maryland

Quarantine: when you are exposed (2/3)

- Who should quarantine?
 - Anyone who has had a "high risk" exposure to COVID-19?
- What does "high risk" exposure mean for DDA staff:
 - The staff had close contact with someone with COVID-19 during work and did not use proper personal protective equipment (see: https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html)
 - The staff had close contact with someone with COVID-19 outside work
 - The staff is told by a health department contact tracer they were exposed to COVID-19 outside the home

Quarantine: when you are exposed (3/3)

- How long should a person quarantine?
 - 14 days following their last exposure, assuming they do not test positive (in which case they start isolation)
- Do people in quarantine need to be tested for COVID-19?
 - Yes. We want to know if they actually are actually infected
- Can quarantine be shortened, or are there exceptions?
 - Yes: if you need staff to work during their quarantine, they may do so
 - Yes (**NEW**): CDC has more general options for shortening quarantine if doing so would be helpful:

https://www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-options-to-reduce-quarantine.html

Isolation vs Quarantine of Staff

- The most important distinction:
 - If your staff were *exposed* to COVID-19 and are in <u>quarantine</u> you **may** bring them back to work to care for residents when needed. You do not need to ask permission
 - If your staff *tested positive* for COVID-19 and are in <u>isolation</u> you **may not** bring them back to work. You may ask permission for an exception from the local health department, but it usually will not be granted



Preparing for Holidays (1/3)

- Continue to prohibit visitors in your group homes
- Safest choice for residents: do not visit loved ones during the holiday
 - CDC advisory against holiday travel
 - MDH advisory against holiday travel out of state
- Prohibited from holiday visitation:
 - Residents in <u>isolation</u> because they have tested positive
 - Residents in quarantine because of exposure



Preparing for Holidays (2/3)

- Do not permit visitation to a household where:
 - Someone has COVID-19
 - Someone has been tested for COVID-19 but is still awaiting their test results
 - Someone has recently been exposed to COVID-19 or been instructed to quarantine by their health department because of possible exposure to COVID-19
 - Someone has any symptoms of COVID-19



Preparing for Holidays (3/3)

- What to do if residents do visit loved ones during holiday:
 - Group home residents diagnosed with COVID-19 while visiting family may not return to their group home. They should remain with family until they have completed their recovery
 - Group home residents exposed to COVID-19 while visiting family may not return to their group home. They should remain in quarantine with family until 14 days have passed since last exposed to someone with COVID-19
 - When group home residents return to their group home, they should complete a 14-day "quarantine"
 - Residents should consider being tested for COVID-19 before returning to their group home, to verify they are negative at the time of their return
 - Residents should consider being tested for COVID-19 a few after returning to their group home, to verify they remain negative. However, a negative test result does **not** change the recommendation for a 14-day quarantine

Questions



Please join us for our 2021 Webinar Series:

- January and 22 at 1pm
- February 5 and 19 at 1pm
- March 5 and 19 at 1pm
- April 2, 16, and 30 at 1pm
- May 14 and 28 at 1pm

