

#### Virtual Supports

Traditional ID/DD Home and Community Based Waiver





- Overview of Virtual Supports
- Review of policy
- Virtual Supports documentation in the service plan
- Questions/Comments



## Overview of Virtual Supports

- Virtual supports for certain services was included in the appendix K to allow flexibility during the COVID PHE
- The COVID PHE ended May 11, 2023.
- Traditional IID/DD HCBS Waiver(DD waiver) Appendix K flexibilities end November 11, 2023
- Virtual supports will be included in the DD Wavier effective November 1, 2023.



## Overview of Virtual Supports

Prior to approving virtual supports, Centers for Medicare and Medicaid Services (CMS) requires that states ensure the following areas are addressed in the waiver and policy:

- Privacy
- HIPAA
- Community Integration
- Health and Safety



## Virtual Supports Definition

The use of interactive audio and video telecommunications technology by a DD licensed provider agency or authorized vendor at a distant site to deliver approved Home and Community Based Services at an originating site, over a secure connection that complies with the requirements of state and federal confidentiality laws.

#### Virtual Supports

Virtual supports are not a distinct, separate service in the DD Waiver, but a method by which certain services may be delivered to an individual.

The purpose of virtual supports is to:

- maintain or improve an individual's functional abilities
- enhance interactions
- support meaningful relationships
- promote their ability to live independently
- meaningfully participate in their community

Virtual supports are geared towards intentional learning (e.g., career planning, taking a cooking class, skill building) and can also be used towards helping a person do something more independently like remote job coaching.

### Virtual Supports

#### **Services:**

- Behavioral Consultation
- Independent Habilitation
- Individual Employment Services
- Parenting Supports
- Infant Development (home visits, consultations, and IFSP reviews)

# Virtual SupportsRequirements

Direct supports can be delivered via virtual supports, provided the following are met:

- The virtual supports ensure the individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
- The virtual supports do not isolate the individual from the community or interacting with people without disabilities.
  - The individual has other opportunities for integration in the community. i.e., daycare, shopping, community appointments, volunteering, church, social and recreation activities, etc.
- Virtual supports reinforce community integration.
  - Encouraging the individual to engage in community life as independently as possible, to be able to safely engage in activities in his or her home or in the community without relying on the physical presence of staff to accomplish those activities.
- The use of virtual supports to provide direct support has been agreed to by the individual and their team.



Individuals must have an informed choice between in-person and virtual supports.

- The individual must always have the option to request in-person services
- Services may not be delivered via virtual support 100% of the time. Virtual supports may supplement in-person direct supports
- Individuals must affirmatively choose virtual service provision over in-person supports.

# Virtual SupportsRequirements

- The use of virtual supports is to provide direct support for pre-planned activities that are outlined in the Person-Centered Plan.
- Virtual supports are not intended to be used to shorten drive time, save on costs, account for lack of staff, out of convenience for the provider, or to provide surveillance.
- The virtual supports must be delivered with the individual present using:
  - non-public facing technology platform
  - secure connection
  - real-time interaction with audio and visual capabilities
  - staff member must both see and hear the individual.
  - Virtual Supports cannot be recorded.
- Text messaging, phone calls, and emailing do not constitute virtual supports.

#### Virtual Supports-Requirements

### The use of cameras during virtual supports in bathrooms or bedrooms:

- Individual Employment Supports-
  - Use of cameras in the bathroom and bedroom are never permitted
- Behavioral Consultation-
  - Use of cameras in bathrooms are never permitted.
  - Use of cameras in bedrooms may be permitted if there is no impact to the individual's dignity and privacy.
    - For example, identifying a place where the individual goes to calm, which may be the bedroom.

#### Virtual Supports-Requirements

### The use of cameras during virtual supports in bathrooms or bedrooms:

- Independent Habilitation, Infant Development, and Parenting Supports-
  - Use of cameras in bathroom and bedrooms may be permitted if there is no impact to the individual's dignity and privacy.
    - For example, there may be some tasks allowed such as brushing teeth, choosing clothes, or medications that do not impact the individual's dignity and privacy.
    - Infant development services are provided within the context of daily routines, therefore, in virtual supports, this may mean that parent coaching is provided during a toileting or bathing routine and camera use would be appropriate and would not violate the dignity of the individual.

#### Virtual Supports- Requirements

- Virtual supports, including use of phones, cannot be used to assess an individual for a medical emergency.
  - The Emergency Backup Plan section of the service plan should address medical emergency needs when virtual supports are delivered.
- Virtual supports must comply with all federal and State requirements, policies, guidance, and regulations.
- Virtual supports may be started or discontinued any time at the individual and/or legal decision maker's request and a team meeting must occur to discuss other options.

### Virtual Supports- Service Limitation and Utilization

- The combination of virtual supports and direct supports for a given service cannot exceed services authorized.
- Virtual supports cannot be furnished or billed for two services at the same time (e.g., Independent Habilitation and Individual Employment Supports).
- If the individual requires hands on assistance for a specific task, then virtual supports service delivery cannot be an option for that task but may be utilized for other tasks that do not need hands on support.

#### Virtual Supports Checklist

A Virtual Support Checklist (state form) will be required to be completed by the DD Program Manager and the team during the person-centered planning process and determine an estimated number of hours.

- Checklist will be required to be completed prior to start of virtual supports and annually.
  - It will act as a safeguard to ensure virtual supports can help meet the needs of the individual in a way that protects the right to privacy, dignity, respect, and freedom from coercion. Any issues will be addressed prior to the implementation of remote supports.
- The checklist must be attached to the service plan in Therap.
  For the IFSP, it will be attached to the document section.
- For infant development, the parental consent and prior written notice page will serve as consent for virtual supports.
- For other services, the service plan signature page will serve as consent.

#### **Virtual Supports- Service Plan Documentation**

The Service plan will have a specific section to document virtual supports. The plan must identify:

- The service identified using virtual supports
- The start, end, or termination date
- Comments Section
  - What pre-planned tasks, supports, and objectives can be done remotely and what needs to be done in person.
  - Identify the technology platform used to deliver the service. (e.g., Microsoft teams, zoom for healthcare)
  - List an estimated number of hours that will be delivered.
  - Any other team discussions and decisions.

This section is completed by the DDPM





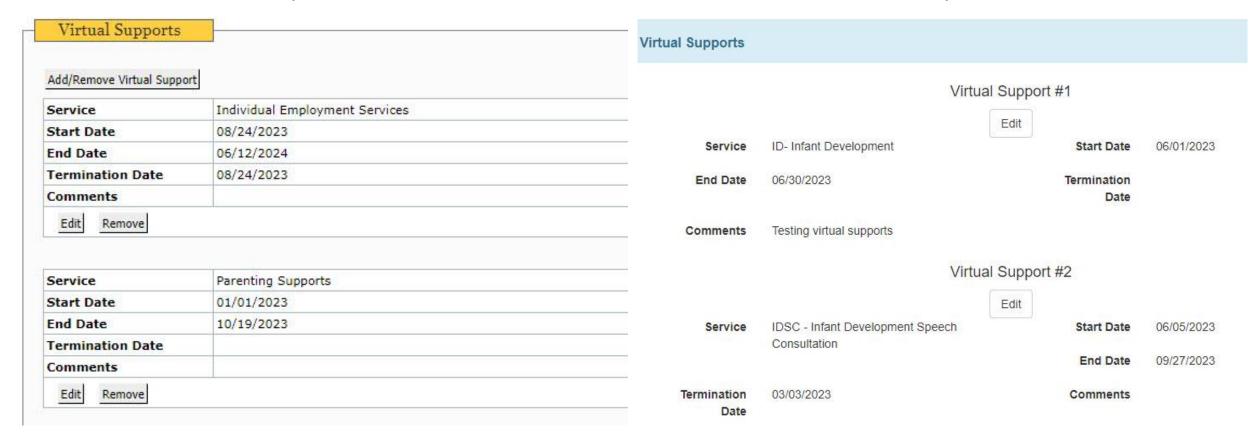
#### Virtual Supports- Service Plan Documentation

- Each service using virtual supports must be listed separately.
- The end date cannot be past the end date of the service plan start and end dates.
- If any virtual supports will be discontinued prior to the service plan end date, the service plan will be updated in the virtual supports section to enter the termination date along with reasons for termination in the comment box.
  - A service plan update may be used to complete this.
- At least annually, or more frequently if needed, teams will review the quality and effectiveness of virtual supports to meet the person's needs and preferences.
  - The DDPM will review and document satisfaction and progress of virtual supports in the satisfaction section of the QER document.
- If health and safety concerns arise, the team shall meet to determine if tasks, estimated number of hours, and virtual supports need to be updated. A service plan update may be used to document this.

#### Virtual Supports- Requirements

#### OSP template

#### IFSP template



# Virtual SupportsProviders

**DD Licensed Providers** may choose to provide virtual support options under the DD waiver

- The DD licensed provider will need to identify on the licensure application the service(s) they choose to provide virtually.
  - This will need to be completed prior to starting virtual supports
- The delivery of virtual supports must be documented appropriately.
  - Similar to any in-person direct supports (name of staff person providing supports, name of provider, name of service, date of services, and start/end times), AND identify the technology platform used.
  - There will not be separate billing codes for virtual supports.

#### Virtual Supports- Providers

The DD Licensed Provider must develop and maintain written policies to address processes for preventing and responding to a medical emergency during use of virtual supports, train direct support staff on those policies, and advise individuals and their person-centered planning team regarding those policies. At a minimum, such policies must address:

- Identifying whether the individual's needs, including health and safety, can be addressed safely via virtual supports;
- Processes for requesting such intervention if the individual experiences an emergency during provision of virtual supports, including contacting 911 if necessary;
- How the provider will ensure the individual's rights of privacy, dignity, and respect, and freedom from coercion and restraint;
- How the provider will ensure the virtual supports used meets applicable information security standards;
- How the provider will ensure its provision of virtual supports complies with applicable laws governing individuals' right to privacy;
- Process on how to discontinue supports when the individual's needs, including health and safety, can no longer be addressed via virtual supports;
- Contingency plan for service delivery if technology fails during a virtual supports service or an individual does not connect at a scheduled time;
- Incorporate virtual supports into their privacy and security (confidentiality) policies and procedures. Including how/where staff can provide supports in a location that promotes privacy and confidentiality.

### Virtual Supports-Providers

#### Any **DD Licensed Provider and/or Behavior Consultation vendor**

 The DD Waiver will not fund any costs associated with the provider obtaining, installing, implementing, or using virtual supports. These costs, in the delivery of new business models, are part of the provider's operating cost.

Examples of costs that will not be funded by the DD Waiver programs are:

- Equipment;
- Internet;
- Software applications;
- Training and support for the individual using virtual services; and
- Other related expenses such as additional staff and training.
- The provider ensures that any and all services delivered via virtual supports will change to in-person service delivery if chosen by the individual and/or the legal guardian.

## Virtual SupportsProviders

Infant Development Providers must follow all compliance for DD License Providers and the following.

- Evaluation/Assessments and initial/annual IFSP development must be completed in person, with the exception of children in the NICU. IFSP reviews, home visits and consultations may be conducted virtually.
- Virtual visits are expected to satisfy all requirements of the pay-point and maintain the same level of quality provided during in-person visits. State and program best practices must continue to be used.
- Virtual Visit Follow-Up:
  - All paperwork (Prior Written Notices, IFSP Signatures, etc.) must still be completed timely and with one of the acceptable types of signatures (wet signature or digitally signed- not typed).
  - If, while receiving virtual visits, a child or family is not making progress commensurate to the level expected if the services were provided in-person, the team must meet to discuss changing services to in-person.

#### Virtual Supports- Quality Assurance

- At least annually or more frequently if needed, individuals and their teams shall review the quality and effectiveness of virtual supports to meet the individual's assessed needs and preferences.
- The DDPM shall review and document satisfaction and progress of virtual supports during the quarterly review process (QER).
- Health and safety concerns that may arise shall be discussed in the team process or other appropriate means.

#### Virtual Support-Next Steps

- All Appendix K flexibilities will expire on November
   11, 2023
- CMS has approved virtual supports within the DD Waiver effective November 1, 2023.
- Providers and DDPMS should start identifying and having team meetings for individuals who are currently receiving virtual supports under Appendix K to determine if the individual will continue receiving virtual supports after October 31, 2023.
  - The Virtual Support Check List and service plan update will need to be completed prior to November 1, 2023.
- For individuals who would like to start virtual supports after November 1, 2023, teams will follow the new virtual support policy.

#### Virtual Supports- Next Steps

#### **DD Provider Licensing**

- Providers who are currently or would like to start providing virtual supports must complete the SFN 1794 to add this option to the license.
  - There is a check box for each service where virtual supports are allowed.
- Virtual supports policies must be submitted with SFN 1794.
- In order to continue to provide virtual supports after November 11, 2023, all forms and policies must be submitted to the DD Licensing Administrator no later than October 6, 2023 so approval can be provided prior to the ending of the Appendix K flexibilities.

- All Appendix K flexibilities will expire on **November 11, 2023**, 6 months after the PHE ends. Here are some examples of flexibilities that will expire.
- For additional information on unwinding activities visit the DD Section's website at https://www.hhs.nd.gov/dd

During Covid-19 PHE	On November 12, 2023
Service activities and location may vary outside of the scope of the service definition in order to meet the health and safety needs of the participant. (Day Habilitation, Prevocational Services, Small Group Employment Supports, Individual Employment Services)	All waiver service activities must meet the scope of the service definition and be provided in locations described in the approved waiver application.
	<ul> <li>For example, the appendix K allowed day services (Day Habilitation, Pre-Vocational Services, and Small Group Employment Services) to be provided in the home, but now must be provided in the community, employment location, or licensed facility.</li> </ul>
	<ul> <li>Teams must identify the people who this will affect.</li> <li>Team meetings should be held to discuss the transition and make any necessary service plan updates effective by November 11, 2023.</li> </ul>

Gervices

During Covid-19 PHE	On November 12, 2023
<ul> <li>Staff Training</li> <li>Trainings that can be completed online, rather than in person, will be allowed.</li> <li>First Aid, Cardiopulmonary Resuscitation (CPR), and Therapeutic response have hands on requirements and must be completed in 6 months once the state of emergency is lifted with the course instructor in the respected area.</li> <li>Annual trainings may be extended for up to 6 months after the emergency is lifted.</li> <li>The minimum requirements for new staff have been modified and include the following; Serious Events/Abuse Neglect Exploitation and GER reporting, Rights, Client specific /site specific training, Medication Administration (only if the staff will be passing medications); Health Insurance Portability and Accountability Act</li> </ul>	<ul> <li>Providers will have 6 months after the PHE ends to get staff up to date on training and orientation.</li> <li>Providers will be required to follow PI 18-05 for all staff trainings and orientation.</li> <li>Trainings will continue to be allowed online.</li> <li>Those with hands on requirements must be completed in person for that portion of the trainings (i.e. first aid, CPR, and Therapeutic response)</li> </ul>
(HIPAA)/Protected Health Information (PHI), Hand washing/Occupational Safety and Health Administration (OSHA)/Center for Disease Control and Prevention (CDC) recommendations, Agency specific guidelines, CPR/1st aid, and Therapeutic responses (TR).  DD license providers may use the self-disclosure state form number (SFN) 1792 for a staff who has lived out of state in the last 5 years and the state they are in contact with is unavailable due to with Covid-19.	SFN 1792 is only completed in instances where the prospective employee previously lived in a state where state law prohibits the state from disclosing relevant criminal records and child abuse checks, or lived in a country where criminal records are unavailable.

During Covid-19 PHE	On November 12, 2023
<ul> <li>Assessments may be conducted outside of the participant's home or by telephone to accommodate the changes in service needs.</li> <li>Allow remote/telephone participant monitoring by Developmental Disability (DD) Program Managers where there are currently face-to-face requirements</li> <li>Participant's team meetings and plan development may be conducted entirely using telecommunications.</li> </ul>	Team meetings, services planning assessments and monitoring must be completed in-person. Team members may participate in team meetings virtually based on State policy. The Overall Service Plan (OSP) instructions will be updated to reflect:  • Meetings should be conducted primarily in-person to promote active participation, collaboration, and personal connections. However, some team members may participate via phone, virtually, or other means if they are unable to attend in-person.  • There may be situations where minor service plan updates are needed and can be communicated to the person and other team members using other formats.
Providers are able to restrict the HCBS settings regulation right to have visitors.	Per the HCBS settings rule, providers can no longer restrict individual's rights to have visitors at any time they choose

an Services

During Covid-19 PHE	On November 12, 2023
Agencies that provide Residential Habilitation may be eligible to receive an increased payment to assist in the cost when the participant is unable to receive a day service (day Habilitation, Prevocational Services, Small Group Employment, and Individual Employment) in the regular location.	Increased payment is no longer available.
Temporarily suspend the federal requirement that In home Support is not authorized when Part B services of Individuals with Disabilities Education Act (IDEA) are offered in person through ND Department of Public Instruction.	Per Traditional IID/DD HCBS waiver, In home Support is not authorized when Part B services of IDEA are offered in person through ND Department of Public Instruction.



**Virtual Supports** 

**Questions/Comments** 

