Retainer Payment and Remote supports Q&A
Issued September 25, 2020

1. Will an attestation be required for individuals’ retainer payments requested, approved, and paid prior to September 1, 2020?
A: Yes, although a new DHS-DD-C305 is not required. The CSP must submit a list of participants for whom retainer payments have been received and attach a single, signed attestation.

2. Can a request for retainer payment be submitted when a person leaves services for a typical home visits or vacation?
A: No, regular home visits and vacations do not qualify for retainer payments. The absence from services must be due to the pandemic and telephonic and virtual supports must be ruled out as a viable option by the person’s team.

3. Although individuals went home and stayed home in mid-March, retainer payments were requested per direction from DDD due to no habilitative goal being met although we continued to coordinate psychiatric services. Retainer payment periods have been exhausted for some participants and the CSP is currently providing this support without compensation. What are our options?
A: DDD recommends the person’s team convene to discuss the person’s goals and supports and whether revisions to the ISP are necessary due to the pandemic. Mental and emotional health are crucial and include supports beyond scheduling and coordinating appointments and medications for the person, such as teaching and/or reinforcing coping skills, for example. If the team deems it appropriate, in-person or virtual supports may be an option and a Significant Change Request (SCR) may be submitted to re-open habilitative services.

4. Is a CSP eligible for retainer payments if they have received COVID relief funding from another other sources (i.e. PPP and small business loans) in order to receive retainer payments?
The provider can receive funding; however, it cannot be duplicated or exceed what they would have accrued if not for the closure/pandemic. For example, a provider can receive a small business loan to pay for administrative costs to keep their business then receive retainer payments to pay for payroll. Two different purposes, two different funds but does not and it cannot exceed what they would have normally received for revenue. The purpose of the retainer payment is to retain/keep staff in order to deliver services to individuals.

5. Is a Significant Change Request required to be submitted to DDD immediately when a participant’s services are altered (i.e. in-person services or virtual supports provided at a lesser scope, frequency, or duration than approved through the Consumer Service Authorization)? Is there a requirement regarding how long the services will be reduced, i.e. the person must be quarantined due to a positive COVID test result or exposure?
A: DDD will apply guidance provided through Policy Memo 11-04 HCBS Extended Absence to COVID-19 related changes to services. Therefore, a Significant Change Request is required if the participant’s services have been provided at a lesser scope, frequency or duration for over 30 days.

6. The 10-day notice requirement for reduction in service is effective Sept 1, 2020. For people whose services were reduced in March and have continued to be reduced, what is our deadline to provide the reduction notice, teams to meet, etc.?  
A: Notice is not required for services reduced prior to September 1, 2020. Any reductions effective prior to that date will be documented by Case Managers in quarterly monitoring or in the ISP. DDD will provide further guidance to Case Managers in the near future.

7. An SCR and reduction of services notice is now required for the lesser scope and frequency if a person who received day services daily pre-pandemic and now receives one time weekly via telephonic or virtual supports. What should the ISP reflect for number of hours for reduced day services be for that one-time weekly contact?  
A: Day & Employment rates are based on one-hour increments of service. the number of hours should reflect the schedule and frequency of the telephonic and remote supports. For example: 
- John received 30 hours of day services pre-pandemic. He is now staying at home with family and not attending in-person services. His team has established a schedule to provide virtual supports five times weekly, for at least 30 minutes each, to assist John with reviewing his daily schedule, doing virtual tours of places John would like to visit, playing Words with Friends, answering questions John may have about when day services will re-open.  
  o Significant Change Request submitted to reduce Day Services from 30 hours/week to 5 hours/week.

8. Could Community Support Providers experience a financial hardship with the requirement to submit a SCR to reduce services thereby likely reducing the daily rate for the person?  
A: It is likely that CSPs will experience reduction of revenue as a result of reducing services to reflect the lesser scope, frequency and duration of telephonic and virtual supports; however, DDD encourages CSPs to be creative in their provision of telephonic and virtual supports to reduce the time and workforce required to provide 1:1 virtual supports. Options might include small group Zoom meetings so people can visit and interact, play virtual Bingo or other online games, trivia, etc. CSPs may not bill for services not provided and to do so is considered Medicaid Fraud.

9. Day Services re-opened and then closed again due to community spread after September 1, 2020. Does a notice of reduction need to be completed?  
A: The CHOICES Appendix K allows for habilitative supports to be provided in settings that would not typically meet standards set forth by the HCBS Settings Final Rule. Through January 26, 2021, day services provided in the person’s home or an alternate location are allowable. As long services are being provided at the same scope, frequency, or duration as pre-pandemic, a notice of reduction of services is not necessary.

10. Supports to participants who were working towards goals related to self-administering medications pre-pandemic have been halted, i.e. medication administration certified staff assisting participants to fill their medication minders has not been occurring either in-person or virtually. In the past, we have been directed that even med certified staff filling medication reminders is considered dispensing medications and against regulations. Could reconsideration be given so staff can fill medication minders for participants?  
A: DDD consulted with the Department of Health regarding this matter. The following direction was provided: Medication is considered dispensed after it comes from the pharmacy, so a nurse filling a
patient’s med minder is not considered dispensing. The Board has an advisory opinion on this topic, which includes guidance regarding whether the task can be delegated. See #4: https://doh.sd.gov/documents/MedicationAdministrationRNLPN.pdf.

11. A participant returns to the CSP after spending months living at home with family where they participated in remote supports the entire time. However, the participant’s day service hours were 30 hours per week prior to COVID, and now is only getting 4 hours a week of day services upon their return to the CSP due to COVID precautions. Do we complete an SCR for a reduction of services? If so, would the Sept. 1 timeline affect this, or would this be true for anyone in this scenario regardless of the date they returned to the CSP?
A: If the change in hours occurred prior to September 1st, an SCR is not necessary, but the CM must document the change in the ISP. If the change occurred after September 1st, an SCR should be submitted and the CSP must issue a reduction of services notice.

12. Participants who only receive day services returned to the CSP day program when it reopened on Sept. 1st. After one week, the day program closed again due to positive COVID test results and exposure risk. It was only a matter of days that participants were able to attend day services, and now the participants are back at home receiving remote supports, as they were prior to September 1st. Does this qualify as a reduction in services and submission of a Significant Change Request?
A: Refer to Question #4. Changes which occur after September 1st which result in participant service reduction (initiated by either the provider or participant/guardian) for over 30 days require a Significant Change Request.

13. A participant tested positive for COVID-19 after September 1, 2020 and left the group home to stay with family during the quarantine period. Residential and Day Services are being provided remotely during this timeframe. What course of action should be taken in this situation?
A: If the reduction of day services continues for over 30 days, a Significant Change Request for a reduction of services should be submitted to DDD to reduce residential from Level 1 Group Home to Family Home residential services and revising the number of hours the participant will receive virtual day services.

14. A participant tested positive for COVID-19 after September 1, 2020 and left the group home to stay with family during the quarantine period. Residential supports are not being provided virtually. What course of action should be taken in this situation?
A: If the reduction of day services continues for over 30 days, a Significant Change Request for a reduction of services should be submitted to DDD. Because residential supports are not being provided, the CSP may submit a request for a Retainer Payment for residential services only.