

Guidance regarding CCS and CIE Services:

Customized Community Supports (CCS):

CCS providers may continue to bill for services as outlined on the individual's current and approved budget in certain circumstances. The CCS scope of service and standards have been modified to adhere to the Governor's Public Health Executive Orders and guidance to stay at home. All CCS services must be provided in the home until further notice.

- 1) ***When an individual has the same provider agency for CCS and LCA*** (Living Care Arrangement):
 - a. The agency will be able to bill CCS during the time the individual normally attends CCS, but no more than 30 hours per week. Please note: If the individual has both CCS-G and CCS-I on the budget for the same provider agency the agency cannot bill for both services at the same time. In this instance, CCS-G should be billed, as opposed to CCS-I.
 - b. Provider agencies cannot convert all CCS-G units to CCS-I units.
 - c. If the provider agency does not have an adequate number of CCS-G units to continue to provide services in the home, budget revisions can be submitted to request an increase in CCS-G units. The request for an increase in additional units cannot exceed 1440 units CCS-G Cat 2. The end date must be no later than June 30, 2020. That number of units is equivalent to 30 Hours a week of CCS-G Cat 2 for 12 weeks.
 - d. **Please note:** This decision must be documented in IDT meeting minutes. The IDT minutes reflecting this decision must be submitted to the Outsider Review as justification of the revision with the revision request.
 - e. Case Managers must facilitate these requests, if necessary, via the Retroactive Revision process with a start date of March 16th, 2020.
 - f. The Outside Reviewer will separately track these requests to ensure consistency with this guidance. For Class Members, these revision requests are to be submitted to the TPA.

- 2) ***When an individual has a different CCS provider agency from their LCA provider agency (excluding Family Living which is addressed below):***
 - a. Agencies should examine whether it is feasible to allow the CCS staff in the home to provide services. The expectation from DDSD is that the CCS provider and the LCA provider work together during this time of crisis to support the individual in the home to comply with the Governor's Executive Order to stay at home.
 - b. If it is not feasible for the LCA provider agency to allow a CCS staff from another agency to work in the home, the LCA provider agency cannot request/add CCS services for their agency on the budget. ***CMS will not allow duplicative payments for the same individual for the same service from multiple providers.***
 - c. Only if the CCS-G provider agency does not have the staff to accommodate CCS services in the home, the LCA provider agency can request CCS-G (Cat 2) to be placed on the budget. The request for an increase in additional units cannot exceed 1440 units CCS-G

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Cat 2. The end date must be no later than June 30,2020. That number of units is equivalent to 30 Hours a week of CCS-G Cat 2 for 12 weeks.

- d. **Please note:** This decision must be documented in IDT meeting minutes and is reviewed on a case by case basis. The IDT minutes reflecting this decision must be submitted to the Outsider Review as justification of the revision with the revision request.
 - e. Case Managers must facilitate these requests, if necessary, via the Retroactive Revision process with a start date of March 16th, 2020.
 - g. The Outside Reviewer will separately track these requests to ensure consistency with this guidance. For Class Members, these revision requests are to be submitted to the TPA.
 - f. If CCS providers cannot provide services in the individual's home, and the LCA provider is not billing for the service in the home, the CCS providers may bill up to 80% of that individual's budget to retain workforce. A Provider may not bill more than 5 consecutive days in a row. **Please Note:** In this scenario, it is the expectation of DDSD that CCS employees are not laid off to preserve workforce.
- 3) ***When an individual utilizes Family Living (FLP) and Customized In-Home Supports (CIHS):***
- a. Agencies should examine whether it is feasible to allow the CCS staff in the home to provide services. The expectation from DDSD is that the CCS provider and the LCA/CIHS provider work together during this time of crisis to support the individual in the home to comply with the Governor's Executive Order to stay at home.
 - b. If an FLP does not want a CCS staff to provide CCS in the home, then the FLP must provide 24-hour care.
 - c. If an individual wants a family member, friend, natural support to be employed as CCS staff by the LCA/CIHS Provider, it is permissible for the duration of the emergency (example: hiring the Sub Care Provider as CCS provider for the duration of the emergency). **Please Note:** The FLP sub-contractor cannot be hired as the CCS staff.
 - d. To not deplete Sub Care hours, budget revisions can be submitted to request an increase in CCS-G units. The request for an increase in additional units cannot exceed 1440 units CCS-G Cat 2. The end date must be no later than June 30, 2020. That number of units is equivalent to 30 Hours a week of CCS-G Cat 2 for 12 weeks.
 - e. **Please note:** This decision must be documented in IDT meeting minutes and is reviewed on a case by case basis. The IDT minutes reflecting this decision must be submitted to the Outsider Review as justification of the revision with the revision request.
 - f. Case Managers must facilitate these requests, if necessary, via the Retroactive Revision process with a start date of March 16th, 2020.
 - h. The Outside Reviewer will separately track these requests to ensure consistency with this guidance. For Class Members, these revision requests are to be submitted to the TPA.

Community Integrated Employment (CIE) Services:

CIE providers may continue to bill for services as outlined on the individual's current and approved budget. The CIE scope of service and standards have been modified to adhere to the Governor's Public Health Executive Orders and guidance to stay at home. All CIE services must be provided in the home until further notice.

- 1) ***When an individual has the same provider agency for CIE and LCA:***
 - a. The agency will be able to bill CIE during the time the individual normally receives CIE services. Provider agency cannot bill for two CIE services at the same time. **Example:** If an individual has both CIE and CIE-Self Employment on the budget for the same provider agency the agency cannot bill for both services at the same time.
 - b. Provider agency cannot request current and approved CIE units on the budget to be converted to CCS services or different CIE services.
 - c. CIE providers may also count advocating with employers for job retention, related to COVID-19, for individuals as a billable activity under CIE.
- 2) ***When an individual has a different CIE provider agency from their LCA provider agency:***
 - a. Agencies should examine whether it is feasible to allow the CIE staff in the home to provide services. If it is not feasible for CIE staff from another agency to work in the home, the LCA provider agency cannot request/add CIE services for their agency on the budget. The expectation from DDSD is that the CIE provider and the LCA provider work together during this time of crisis to support the individual in the home to comply with the Governor's Executive Order to stay at home. ***CMS will not allow duplicative payments for the same individual for the same service from multiple providers.***
 - b. If the existing CIE provider agency on the individuals current budget does not have staff to accommodate CIE services in the home, the LCA provider agency can request CIE services provided they have an existing Provider Agreement to provide CIE Services.
 - c. **Please note:** This decision must be documented in IDT meeting minutes. The IDT minutes reflecting this decision must be submitted to the Outsider Review as justification of the revision with the revision request.
 - d. Case Managers must facilitate these requests, if necessary, via the Retroactive Revision process with a start date of March 16th, 2020.
 - e. The Outside Reviewer will separately track these requests to ensure consistency with this guidance.
 - f. If CIE providers cannot provide services in the individual's home, and the LCA provider is not billing for the service in the home, the CIE providers may bill up to 80% of that individual's budget to retain workforce. A provider may not bill more than 5 consecutive days in a row. **Please Note:** In this scenario, it is the expectation of DDSD that CIE employees are not laid off to preserve workforce.
- 3) ***When an individual continues to work in an essential position:***

The CIE provider may provide job coaching and maintenance services via phone or technology, if appropriate.