

**NUMBER**  
#20-25-02

**DATE**  
Aug. 24, 2020

**OF INTEREST TO**  
County Directors

Social Services Supervisors and  
Staff

Managed Care Organizations

Tribal Agencies

Providers

**ACTION/DUE DATE**  
Immediately

**EXPIRATION DATE**  
May 19, 2022

## Customized living rate add-on payments for settings with confirmed cases of COVID-19

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### TOPIC

Information about a temporary rate add-on for customized living services delivered to Elderly Waiver (EW), Community Access for Disability Inclusion (CADI), and Brain Injury (BI) Waiver program participants who live in a setting that has been determined by the Minnesota Department of Health to have at least one case of COVID-19.

### PURPOSE

The purpose of this bulletin is to:

1. Define provider eligibility for the customized living rate add-on.
2. Describe the rate add-on payments, including how the payments are made and how long provider settings can receive payments.
3. Describe the terms and conditions that apply to add-on payments.

This bulletin was revised on August 24, 2020 to change the due date for returning attestations to DHS from August 31, 2020 to September 30, 2020. All other bulletin content is the same as before.

### CONTACT

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### SIGNED

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### TERMINOLOGY NOTICE

The terminology used to describe people we serve has changed over time. The Minnesota Department of Human Services (DHS) supports the use of "People First" language.

## I. Background

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People who receive customized living services are especially vulnerable to COVID-19 because of their age, underlying health conditions and their proximity to other COVID-19 susceptible people. The state's goal is to support providers to ensure the health and safety of people who receive customized living services, during this emergency period.

This bulletin describes add-on payments available through the authority granted to the Commissioner under [Minnesota Statutes, section 12.A.10](#). These payments are available to eligible customized living providers serving people in the Elderly Waiver (EW), Community Alternative for Disability Inclusion (CADI), or Brain Injury (BI) waiver programs to help cover additional costs associated with COVID-19.

DHS will provide a 50% rate add-on for customized living services for 45 days, beginning the date the provider setting had at least one COVID-19 exposure, as determined by the Minnesota Department of Health (MDH). This rate add-on is available to providers delivering services in a setting that has had at least one confirmed COVID-19 case among its residents or staff between March 13, 2020 and July 31, 2020.

## II. Eligibility for the customized living rate add-on

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To be eligible for the rate add-on, a setting that provides customized living services must:

- Have at least one MDH-confirmed COVID-19 exposure between March 13, 2020 and July 31, 2020. Confirmed exposure may include health care workers and/or residents. Confirmed exposure does not need to involve a waiver program participant.
- Provide customized living services and/or 24-hour customized living services to one or more waiver program participants through EW, CADI or BI waiver programs during the period the provider is eligible for the rate add-on.
- Submit a DHS attestation form that indicates the provider agrees to certain conditions for receiving the additional payments.

Eligible provider settings will receive add-on payments for 45 days, regardless of the length of the COVID-19 outbreak in the setting. Each provider setting is limited to one 45-day add-on payment period.

### **How eligible provider settings will be identified, notified and set up to receive add-on payments**

MDH will provide DHS with information about settings that have had at least one confirmed COVID-19 exposure beginning March 13, 2020. MDH will also provide DHS with information on settings with confirmed exposure of COVID-19 on an ongoing basis. DHS will use this information to identify customized living providers enrolled in Minnesota Health Care Programs (MHCP). DHS will communicate directly with identified customized living providers to request they complete the attestation, which they must complete and return to DHS before add-on payments are made.

DHS will send attestation forms directly to MHCP-enrolled customized living providers in identified settings as soon as DHS determines a provider is eligible for add-on payments. Attestation forms can be submitted to DHS as of the date of this bulletin's publication and must be submitted by or before September 30, 2020. Providers that are not currently serving any waiver participant in an eligible setting may still choose to submit an attestation

form. The provider will receive the add-on payment for customized living services delivered to any eligible person in that setting for all dates of service during the 45 day period.

Since rate add-on payments can occur retroactively back to March 13, 2020, DHS will begin by working with providers in settings with confirmed COVID-19 exposure prior to the publication of this bulletin. Providers should allow 10 business days after their first confirmed COVID-19 exposure for DHS' communication related to the rate add-on. If a provider has not heard from DHS after 10 business days, they may contact DHS at [DHS.AASD.HCBS@state.mn.us](mailto:DHS.AASD.HCBS@state.mn.us). DHS will work with the provider and MDH to determine whether the provider meets the eligibility criteria.

### III. Rate add-on payments

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#### How add-on payments are calculated

The rate add-on will equal 50 percent of the total amount of paid claims for customized living services delivered to eligible people in the eligible provider setting for dates of service within the 45-day time period of provider eligibility. Eligible people are waiver program participants who received customized living services through EW, CADI or BI waiver programs during the time period the provider setting is eligible for the rate add-on.

Submit claims as usual for the amount authorized for an individual waiver participant through typical customized living rate-setting mechanisms and communication with case managers/care coordinators.

#### Add-on payments do not impact participant's individualized rates or EW monthly limits and caps

Add-on payments are not made through changes to participant's individualized customized living rates, but as adjustments to customized living paid claims. Case managers/care coordinators do not need to adjust individual customized living service plans, service agreements, units, or rates as a result of a provider setting being eligible for the rate add-on. Case managers/care coordinators should follow guidance in Section V about meeting the needs of individual waiver participants, if there are any changes to a person's needs.

Add-on payments do not count against EW participants' monthly customized living service rate limits or their monthly EW case mix budget caps.

#### Claims eligible for the payment add-on

Rate add-ons are available for eligible provider settings beginning on the date the provider had one MDH-confirmed COVID-19 exposure retroactive to March 13, 2020.

Claims eligible for the rate add-on must:

- Have dates of service that begin on or after the date the provider had one MDH-confirmed COVID-19 exposure and end 45 days after the begin date of provider eligibility.
- Be valid and have a paid amount (the claim is paid for an eligible home and community-based services (HCBS) participant).

As noted in the bulleted list above, add-on payments will occur for 45 days after the first date of eligibility. For example, if the setting's first confirmed exposure was on April 1, the add-on payments would be applied to eligible claims for dates of service from April 1 to May 15, 2020. If the first confirmed exposure was July 31, the final day a provider can become eligible, the add-on payments would be applied July 31 to September 13, 2020.

### **How the add-on will be paid for fee-for-service claims**

The rate add-on will be applied as a gross claims adjustment. DHS will calculate the total fee-for-service paid claims amount for customized living submitted by an eligible provider for all waiver program participants served in the provider's eligible setting. The gross adjustment will occur as part of the usual fee-for-service claims and remittance-warrant cycle.

For example, if an eligible provider has a total dollar amount of \$10,000 paid on claims for five program participants in the eligible setting, the amount of the rate add-on applied as a gross claims adjustment would be \$5,000. This amount is paid as a gross adjustment based on the total amount paid to an eligible provider, not paid per line item or per waiver participant amount claimed.

Since the add-on payments will occur as adjustments to claims, the add-on payments will naturally occur on warrants later than the warrant that included the eligible claims. In many cases, the add-on will be paid two-four weeks after the warrant that included the eligible claims. The gross adjustment will appear as a separate entry on the provider remittance.

### **Managed Care Organizations must pay the rate add-on to eligible providers**

DHS will provide information to managed care organizations (MCOs) related to eligible provider settings, including the effective date of eligibility as determined by DHS. MCOs must pay the 50 percent rate add-on for customized living claims that meet the criteria outlined above submitted by an eligible provider delivering services in an identified setting.

Providers must submit attestation forms to DHS. Do not submit attestation forms directly to managed care organizations. MCOs will make payments to eligible providers based on information provided by DHS.

### **Importance of timely claims**

Providers are encouraged to submit claims for customized living services in a timely manner. Neither DHS nor MCOs are able to process rate add-on payments until providers submit customized living claims. Submission delays will result in delays in receiving rate add-on payments.

## **IV. Terms and conditions of payments**

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The rate add-on payments described in this bulletin are to help providers of customized living services meet the health and safety needs of waiver program participants in settings that have one or more confirmed COVID-19 exposure. The add-on payments will help cover the following kinds of costs:

- Additional Personal Protective Equipment (PPE)
- Additional staff time to adjust service delivery to implement recommended or mandated public health practices (e.g. social distancing, screening staff or visitors for health concerns)
- Implementation of infection control procedures, such as additional facility cleaning and disinfecting
- Paid sick leave for staff, replacement staff or overtime pay

## Provider Attestation

To receive the add-on payments, providers must verify on a form provided by DHS (Attachment A), that they understand and agree to certain conditions for receiving the additional payments.

## V. Meeting the needs of individual waiver participants

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The rate add-on payments are not intended to be used to meet increased needs of individual waiver participants. Revisions to customized living service delivery plans and resulting changes to approved customized living rates are accomplished through the typical mechanisms and communication with case managers/care coordinators. See [COVID-19 guidance for EW customized living](#) and the service planning and authorization page of the [Rate Management System \(RMS\) User Manual](#) for information related to waiver participants.

## VI. Additional information

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For additional COVID-19 information and updates, go to:

- [COVID19 Information and Updates - State of Minnesota](#)
- [Latest information about COVID-19 from DHS Aging and Adult Services Division](#)
- [Latest information about COVID-19 from DHS Disability Services Division](#)

## Americans with Disabilities Act (ADA) advisory

This information is available in accessible formats for people with disabilities by calling 651-431-4300 (local) or 866-267-7655 (toll free), or by using your preferred relay service. For other information on disability rights and protections, contact the agency's ADA coordinator.

## Customized Living Rate Add-on Provider Attestation

Providers determined to be eligible by DHS for customized living rate add-on payments use this form to attest to the terms and conditions of the payments. This attestation must be completed by an eligible provider and approved by DHS before add-on payments can be made. See [Bulletin 20-25-02](#) for information about eligible providers. Questions about this form or completed forms should be sent to [DHS.AASD.HCBS@state.mn.us](mailto:DHS.AASD.HCBS@state.mn.us).

### Provider Information

Home Care License#: \_\_\_\_\_ HFID#: \_\_\_\_\_

NPI/UMPI#: \_\_\_\_\_ NPI/UMPI#: \_\_\_\_\_ NPI/UMPI#: \_\_\_\_\_

Name of Setting/Site: \_\_\_\_\_

Street Address, City, State and Zip Code of Setting/Site:  
\_\_\_\_\_

Payment Start-date: \_\_\_\_\_ Payment End-date: \_\_\_\_\_

### Attestation

\_\_\_\_ I agree to receive the customized living rate add-on payments and agree to the following:

1. I understand that the rate add-on payments are to be used to cover costs related to COVID-19, such as: (a) additional Personal Protective Equipment; (b) additional staff time to adjust service delivery to implement recommended or mandated public health practices (e.g. social distancing, screening staff or visitors for health concerns); (c) implementation of infection control procedures such as additional facility cleaning and disinfecting; and (d) paid sick leave for staff, replacement staff or overtime pay
2. I understand that the rate add-on payments are to support the COVID-related costs of serving HCBS waiver participants, meaning people who receive customized living services through Elderly Waiver, Brain Injury, or Community Access for Disability Inclusion waivers.
3. I understand that add-on payments will only apply to valid claims for customized living services that occur between the Payment Start-date and Payment End-date on this form.
4. I agree to notify DHS in writing of any other federal, state or local government or private sector COVID-related funding I have applied for within 15 days of submitting applications and any other COVID-related funds I have received within 15 days of the receipt of funding, if the funds will duplicate funding I receive through the customized living rate add-on. Note: Funds are not considered duplicative if the funds cover other costs not covered by the rate add-on, or the funds cover the proportion of costs not related to serving HCBS waiver participants, or the funds cover a time period not covered by the rate add-on.
5. I agree to maintain a record of how add-on payment funds were used to support allowable COVID-19 related costs.

6. I agree, upon request, to provide DHS documentation of COVID-related expenses including payroll records or payment receipts for supplies.
7. I understand that amounts paid by DHS through this rate add-on may be subject to recovery if the add-on payment funds were not used to support allowable COVID-19 related costs and/or other funding received by the provider duplicates the purpose of these payments.

OR

\_\_\_ I decline to receive the customized living rate add-on payments. I must notify DHS in writing prior to September 30, 2020 if I change my mind and wish to receive customized living add-on payments.

I, THE APPLICANT, CERTIFY ALL INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Provider Signature \_\_\_\_\_ Date: \_\_\_\_\_

Full Name: \_\_\_\_\_ Title: \_\_\_\_\_

Organization: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

SAMPLE