Kansas 1915(c) HCBS Waiver Programs

COVID-19 Guidance

Date: Thursday, September 17, 2020
Time: 1:00 PM

Most recent key revisions colored blue

Recent Releases: 3/17/2020;

Person-Centered Service Planning

An exception in the previous guidance waiving waiver participant’s (member) signature requirement in the service planning process is RESCINDED effective immediately. In addition to the exception allowing the Managed Care Organizations (MCOs) to complete person-centered service planning processes using telephonic or televideo visit until physical visit can occur, the state now requires:

1. MCOs may authorize services to start while waiting for the participant’s dated signature (electronic or wet) to be returned.
   a. The service plan must have a signature and date from the MCO care coordinator, pending a dated signature from the participant and or guardian/representative

2. The MCOs shall collect participant dated signature (electronic or wet) following the service planning meeting.
   a. The Managed Care Organization (MCO) and the person-centered service planning team shall be held to the same standards of practice and conduct as in-person service.
   b. Service planning meetings and dated signatures on all service-related documents are still to be held within 365 days of the previous plan.
   c. Participant signature and date may be collected in person when allowed, via mail, or electronic methods.
   d. The MCO shall ensure that where a participant is not accessible due to COVID-19, services may be authorized pending the participant’s signature and date, but dated signature must be obtained within the previous annual date.
   e. This exception does not replace the CDDO choice process.

3. Adopted telecommunications (phone), televideo consultations/telemedicine, or telehealth services methods must meet the following criteria:
   a. Comply with the Health Insurance Portability and Accountability Act (HIPAA);
   b. Such a process must provide interactive audio or video communications, permitting real-time contact between a distant representative of the MCO, who is present and participating in the visit, and the individual waiver participant.
   c. If the MCO chooses to obtain electronic signatures, compliance to KDHE KMAP Provider Bulletin Number 782: Electronic Documentation, must be demonstrated to KDADS HCBS Director, Policy Program Oversight Manager and Quality Assurance Manager.
d. A service plan is still required to be properly signed and dated by the MCO Care Coordinator, participant and/or Guardian/representative, and a copy provided to the individual and/or guardian/representative.

4. The state is requesting immediate implementation to avoid any adverse effect on participants’ health and safety and providers’ capacity to deliver services.

“Exceptions granted in this guidance shall cover service plans completed effective immediately and shall be in place until policy rescinding them is released.”

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