




## MEMORANDUM

**To:** DDA Stakeholders  
**From:** Bernard Simons, Deputy Secretary   
**Re:** DDA Appendix K #5- COVID-19 New Services Authorization Request Process  
**Release Date:** June 1, 2020  
**Effective:** March 13, 2020

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**NOTE: Please inform appropriate staff members of the contents of this memorandum.**

### BACKGROUND

On March 5, 2020, Governor Lawrence J. Hogan, Jr., declared a state of emergency due to disease ("COVID-19") caused by the novel coronavirus. The COVID-19 outbreak was declared a national emergency on March 13, 2020 and was previously declared a nationwide public health emergency on January 31, 2020 (retroactive to January 27, 2020).

The purpose of this guidance is to inform Developmental Disabilities Administration (DDA) stakeholders of temporary changes to the DDA's Home and Community-Based Services (HCBS) Waiver programs (i.e. Community Pathways Waiver, Community Supports Waiver, and Family Supports Waiver) and State funded services and operations in response to health and safety concerns related to the COVID-19 pandemic.

This guidance implements temporary modifications to DDA's Waiver programs in Appendix K, submitted to and approved by the Centers for Medicare and Medicaid Services, and DDA State Funded services to address the state of emergency.

### OVERVIEW

To support the immediate need for new COVID-19 related services and supports, the DDA is issuing a new temporary services authorization request process.

This guidance applies to both the self-directed and traditional service delivery models for services noted below.

Meaningful Day Services		Residential Services		Support Services (CCS and Waiver Supports)		
X	Employment Services	X	Community Living – Group Home		Assistive Tech & Services	Nurse Health Case Management
X	Supported Employment	X	Supported Living		Behavioral Support Services	Nurse CM & Delegation Svs
X	Employment Discovery & Customization	X	Shared Living		Coordination of Community Services	X Participant Ed, Training & Advocacy
X	Career Exploration			X	Environmental Assessment	X Personal Supports
X	Community Development Svs			X	Environmental Modification	Respite Services
X	Day Habilitation			X	Family & Peer Mentoring Supports	X Remote Support Services
				X	Family Caregiver Training & Empowerment	X Support Broker
				X	Housing Support	X Transportation Svs
				X	Ind & Family Directed Goods and Services	X Vehicle Mods
					Nurse Consultation	

**Standards and Requirements:**

1. Requests for immediate COVID-19 health and safety related need for new or additional services shall be:
  - a. Submitted via the DDA Revised Cost Detail Sheet in lieu of the Modified Service Funding Plan process and associated forms, which are not required for the services covered by this guidance; and

- b. Submitted by the participant's Coordinator of Community Services (CCS) or currently authorized provider.
2. Requests for other services that are not COVID-19 related to health and safety shall be requested via the Modified Service Funding Plan process and associated forms.
3. Request for Behavioral Support Services, Nursing Services (including Nurse Consultation, Nurse Health Case Management, and Nurse Case Management and Delegation Services) and Respite Services can be made without pre authorization as per DDA Appendix K #4 - Exceptions to Pre Authorization and Service Requirements. This new service authorization request process is not applicable for these services.
4. Request for additional dedicated support hours for participants currently authorized to receive Community Living-Group Home, Supported Living, or Personal Supports shall be submitted using the DDA COVID-19 Service Authorization Form (DDACOVIDForm#1).
  - a. Prior to requesting participant specific additional direct dedicated support hours, providers should consider current authorized services noted in PCIS2 or LTSSMaryland (i.e., for pilot participants) and additional authorized shared residential hours for the sites (Reference: DDA Appendix K #2- Residential Day Time Shared Service Hours Authorization);
  - b. Providers shall enter:
    - i. Provider information (e.g., Provider name, contact person, email);
    - ii. Participant specific details (e.g., name, LTSSMaryland ID#);
    - iii. Additional direct dedicated support hours needed; and
    - iv. Start and end dates.
    - v. Brief description:
      1. Service need (i.e. What is the need?)
      2. Current risk service would address (i.e. What is the risk?);
      3. Risk mitigation (i.e. How is this requested service mitigating the risk?);
    - vi. Date the participant agreed to the changed/added service(s).
5. Requests for new or additional services noted under 2) or 3) above shall be submitted via the DDA Revised Cost Detail Sheet.
  - a. Providers shall complete as per standard procedure and also enter brief descriptions related to:
    - i. Service need (i.e. What is the need?)
    - ii. Current risk service would address (i.e. What is the risk?);
    - iii. Risk mitigation (i.e. How is this requested service mitigating the risk?);
    - iv. Date the participant agreed to the changed/added service(s).
6. CCS and Providers shall:
  - a. Complete the Revised Cost Detail Sheet or DDA COVID-19 Request and Notification - Service Authorization form (DDACOVIDForm#1)(for providers only) as applicable.

- b. By submitting the request the provider shall:
  - i. Affirm that the participant and legal representative agrees to service request;
  - ii. Maintain documentation of this agreement including date of contact, person(s) who authorized, service to be provided and agreed service start date;
  - iii. Maintain supporting documentation to demonstrate the assessed need for the service request and provide upon request from the DDA;
- c. Send request via a secured email to the DDA Regional Office dedicated email account noted below:

CMRO.COVID@maryland.gov	SMRO.COVID@maryland.gov
ESRO.COVID@maryland.gov	WMRO.COVID@maryland.gov

- d. The email subject line shall read: *(Insert Participant’s LTSSMaryland ID #/Provide Name) - COVID-19 Service Authorization Request - (insert date)* (Revised June 1, 2020)

7. DDA shall:

- a. Acknowledge receipt of email with the following message:  
*“The DDA acknowledges receipt of this email.”;*
- b. Log information into COVID-19 Service Authorization tracking sheet;
- c. Review request and authorize the service on the form and within PCIS2 (if applicable);
- d. Populate COVID-19 PCP Supplemental Authorization form (*DDACOVIDForm#4*) only if request included multiple participants;
- e. Upload Revised Cost Detail Sheet and DDA COVID-19 Request and Notification - Service Authorization form (*DDACOVIDForm#1*) form or COVID-19 PCP Supplemental Authorization form (*DDACOVIDForm#4*) into LTSSMaryland Client Attachments; and
- f. Send the following email to the participant’s CCS:
  - i. The email subject line shall read: *(Insert Person’s LTSS ID#) - COVID-19 Service Authorization - (insert date)*
  - ii. Message: *Please see Client Attachments for new service authorization.*
  - iii. For LTSS Pilot participants only, the DDA will also alert the CCS that “A Revised Person-Centered plan must be completed in LTSSMaryland as per the new service authorization.”
- g. Send email with the Revised Cost Detail Sheet back to the provider that submitted the request. (Revised June 1, 2020)

8. For participants enrolled in the self-directed service delivery model, the DDA will send authorization to the participant’s Fiscal Management Services Provider.

9. Providers shall maintain documentation of service delivery as per the [DDA - Service Authorization and Provider Billing Documentation Guidelines - Revised 12-9-19](#).

## **Applicable Resources**

[DDA Waivers - Appendix K Webpage](#)

[DDA MEMO/GUIDANCE/DIRECTIVES](#)

[DDA Covid-19 Resource Page](#)