

HEALTH HOME GUIDANCE REGARDING COVID-19

DATE: 03.12.2020

TIER 1 EXCEPTIONS

As a temporary precaution, Leads across Washington State may implement an exception process to the face-to-face (FTF) requirement for initial HAP visits (Tier 1). The following items are required to approve a phone call for Tier 1 visits:

- An affirmative answer to any of the prescreening tool questions
- Documentation of the prescreening tool results in the Lead platform
- Documentation of the Tier 1 visit in the Lead platform.

Tier 1 visits should continue to occur FTF when the answers to the prescreening tool are negative.

Please always comply with guidelines the facility has in place to protect their residents and staff. Inform the facility you are providing a Medicaid covered service to a resident.

Until further CMS guidance is provided to the state, a verbal consent to participate in the Health Home program must be documented in the Lead platform.

DATE: 03.06.2020

TIER 2 EXCEPTIONS

We have received many questions regarding Tier 2 billing, and whether HCA would consider exceptions to the face-to-face (FTF) meeting requirement in order to bill. Since there is already a process in place with each Lead to allow exceptions, we ask you follow that same process to approve or deny Tier 2 exceptions. We recommend Care Coordinators screen via phone prior to a FTF visit using the pre-visit questionnaire attached (Previsit Information 3.4.20.docx). Dependent on the client's responses, the Care Coordinator may discuss the situation with their supervisor to determine if the scheduled FTF visit should be provided over the phone. If it is determined the visit should be provided over the phone, the Care Coordination Organization (CCO) will follow the Tier 2 exception process with the Lead. If an exception is granted, it will be expected the CCO document the pre-visit screening and visit regardless of mode of delivery.

The pre-visit screening tool can also be used for residential or nursing facility visits; however, please always comply with the guidelines the facility has in place to protect their residents and staff.

Lastly, there is no change to care transitions as the current Health Home contract allows transitions to be completed FTF while the person is in the hospital, or follow-up can be done via phone or at the next FTF visit.



Previsit Information
3.4.20.docx



COVID-19 HH
Letter.pdf

HCS Pre-Visit Questions:

In-Home

1. Has the client or anyone in the household traveled outside the country in the last 30-days and experienced recent shortness of breath or a noticeable difference in shortness of breath, new or recent cough, or fever?
2. Has the client or anyone in the household had in-person contact with someone that has returned from travel outside the country in the last 30-days that has presented with recent shortness of breath or a noticeable difference in shortness of breath, new or recent cough, or fever?
3. Within the last 30-days has the client or anyone else in the household reported or presented with recent shortness of breath or a noticeable difference in shortness of breath, new or recent cough, or fever?

If client answers yes to questions 1 or 2, or reports as positive for symptoms listed in question 3:

- Consult with supervisor before making visit.
- Direct client to contact their primary care provider (PCP). If client is unable to make this call, offer to assist them.

Residential

1. Has the client traveled outside the country in the last 30-days and experienced recent shortness of breath or a noticeable difference in shortness of breath, new or recent cough, or fever?
2. Has the client been in contact with someone that has returned from travel outside of the country in the last 30-days that has presented with recent shortness of breath or a noticeable difference in shortness of breath, new or recent cough, or fever?
3. Within the last 30-days has the client reported or presented with recent shortness of breath or a noticeable difference in shortness of breath, new or recent cough, or fever?

If client answers yes to questions 1 or 2, or reports as positive for symptoms listed in question 3:

- Consult with supervisor before making visit.
- Direct client to contact their primary care provider (PCP).
- Inform residential provider so they are aware and able to follow-up with client and the client's primary care provider.

Skilled Nursing Facilities

1. Has the client traveled outside the country in the last 30-days and experienced recent shortness of breath or a noticeable difference in shortness of breath, new or recent cough, or fever?

2. Has the client been in contact with someone that has returned from travel outside of the country in the last 30-days and experienced recent shortness of breath or a noticeable difference in shortness of breath, new or recent cough, or fever?
3. Within the last 30-days has the client reported or presented with recent shortness of breath or a noticeable difference in shortness of breath, new or recent cough, or fever?

If client answers yes to questions 1 or 2, or reports as positive for symptoms listed in question 3:

- Consult with supervisor before making visit.
- Direct client to contact their primary care provider (PCP).
- Inform residential provider so they are aware and able to follow-up with client and the client's primary care provider.

In Addition:

When interacting with clients or providers:

- Express that you are not shaking their hand and will keep distance to ensure the health and safety of you and them (precaution).
- If anyone you come in contact with is exhibiting symptoms, keeping a 6 foot distance is recommended.
- Whenever possible wash your hands with soap and water for at least 20 seconds before entering and leaving a home or facility; if unable to wash hands use hand sanitizer.
- If there are any questions regarding next steps, consult with your supervisor.

When visiting a facility:

- If there is notice posted of quarantine, do not enter the facility. Consult with your supervisor.
- When checking into the facility, if the resident you are there to see is in isolation, postpone visit and consult with your supervisor.

March 5, 2020

TO: Health Home Leads
FROM: Todd Slettvet, ^{JS}Section Manager, Medicaid Program Operations and Integrity
SUBJECT: Information concerning COVID-19 or the 2019 novel coronavirus

The Washington State Department of Health announced several new cases of COVID-19, also known as novel coronavirus in Washington State. You will likely hear developments in the days and weeks ahead. There is no need to panic. We are providing this information to you as a reminder of how to protect yourself and others.

Human coronaviruses are most commonly spread from an infected person to others through:

- Uncovered coughing and sneezing
- Close personal contact, such as touching or shaking hands
- Touching an object or surface with the virus on it, then touching your mouth, nose, or eyes before washing your hands
- Rarely, fecal contamination with coronavirus present

As a direct care provider, you can help protect yourself, your clients, and others by taking a few simple steps to help prevent the spread of the disease at home and at work:

- Wash your hands often with soap and water. Use alcohol-based sanitizers (at least 60% alcohol) when you cannot wash your hands.
- Avoid touching your eyes, nose, or mouth with your hands.
- Stay home when you're sick.
- Cover your coughs and sneezes with a tissue and dispose of the tissue right away.
- Clean frequently touched surfaces and objects.
- Get plenty of rest, drink fluids, eat healthy foods, and manage your stress.

If you suspect a possible COVID-19 case, please report it to your [local health jurisdiction and assist the client in notifying their health care provider](#).

Like the flu, COVID-19 is spread from person to person through droplets in the air. Someone can become infected by touching an infected surface and then touching their mouth, nose, or eyes. The Centers for Disease Control and Prevention (CDC) currently estimate that the incubation period for COVID-19 ranges from 2-14 days. Symptoms may include fever, cough, and shortness of breath, although some people may not have any symptoms. Seniors and people with underlying medical conditions such as heart disease, lung disease, or diabetes are at a higher risk of developing severe complications.

The Department of Health has established a call center to address questions from the general public about COVID-19. If you have questions, please call 1-800-525-0127 and press #.