

Provider & Stakeholder Questions and Answers (Q&A)

Updated: 2020-04-03 | SUBJECT TO CHANGE

<p>Administrative and Contract Guidance by Division &amp; Office</p>	<p>Regarding TBRA programs, will annual recertification dates/paperwork be relaxed?</p>	<p>We will seek guidance on your question. Thank you for your patience. <b>RESPONSE UPDATED 4/1/20</b> Tenant Based Rental Assistance (TBRA) is a program funded through the U.S. Department of Housing and Urban Development. HUD is working on a series of waivers to allow programs to relax requirements for a variety of programs. Please stay in contact with your HUD Field Office and also monitor the HUD Exchange for regular updates related to TBRA and other HUD funded programs. For more information about waivers recently granted for HUD programs, please view the following link:  <a href="https://files.hudexchange.info/resources/documents/Availability-of-Waivers-of-CPD-Grant-Program-and-Consolidated-Plan-Requirements-to-Prevent-the-Spread-of-COVID-19-and-Mitigate-Economic-Impacts-Caused-by-COVID-19.pdf">https://files.hudexchange.info/resources/documents/Availability-of-Waivers-of-CPD-Grant-Program-and-Consolidated-Plan-Requirements-to-Prevent-the-Spread-of-COVID-19-and-Mitigate-Economic-Impacts-Caused-by-COVID-19.pdf</a></p>
<p>Care Delivery during the COVID-19 Outbreak</p>	<p>Will there be a facility (similar to Kaaahi) for youth? I understand that inpatient facilities/Community Based Residential programs need to have isolation and quarantine measures in place - but is this being explored?</p>	<p>We are developing guidance on facilities for referral for confirmed cases. Please also refer to guidance on the website: <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a></p>
<p>Care Delivery during the COVID-19 Outbreak</p>	<p>Can you provide guidance on doing the safety assessment for families referred to the Voluntary Case Management and Family Strengthening program?</p>	<p>Guidance to both staff and VCM/FSS providers are being finalized and will be distributed accordingly.</p>

<p>Care Delivery during the COVID-19 Outbreak</p>	<p>Does anyone have guidance on best practices for having face-to-face meetings with clients (how to have a case management meeting while also practicing social distancing).</p>	<p>Please refer to the guidance document on <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a> as well as guidance from the CDC.</p>
<p>Care Delivery during the COVID-19 Outbreak</p>	<p>So many of the COVID-19 instructions relate to hygiene and social interaction, which may be more of a challenge for our loved ones suffering from mental illness. I'm also not sure if anosognosia, the lack of insight regarding recognition of one's own mental illness, can also pertain to an inability to recognize symptoms of physical illnesses, such as COVID-19. What is being done for the mentally ill that don't recognize that they have a mental illness?</p>	<p>This is exactly why we support the notion that all behavioral health and homelessness services are essential during this crisis. We will continue to explore ways that we can support individuals on this level and request the support of all providers and stakeholders to indicate individual cases of concern to the appropriate funder/oversight entity – or to submit information in a communication form on the website: <a href="https://BHHSURG.Hawaii.gov">BHHSURG.Hawaii.gov</a></p>
<p>Care Delivery during the COVID-19 Outbreak</p>	<p>I understand that the Crisis Line is screening for COVID concerns before sending CMO and if a person is screened as high risk and CMO is not dispatched the recommendation is that the person go to the ED. Most of these individuals do not require hospitalization, but they may require rapid and intensive support. Is there any consideration to develop an alternative site for these folks to go for triage and follow-up, especially given the current demand on the EDs?</p>	<p>For people that require crisis stabilization who do not have symptoms after being screened, the Crisis Mobile Outreach staff are continuing to provide rapid response and crisis intervention. If people are screened at high risk, and do not require hospitalization, during the COVID-19 emergency, Crisis Mobile Outreach can also be provided via telehealth to provide stabilization and supports for a person or family experiencing a crisis. At this time, there needs to be a heightened focus on supporting people who might experience crises in ways that will prevent and intervene early. This requires surveillance and support for people from all levels of behavioral health services, inclusive of providers, health plans, families and the community. Department of Health is advising all staff providing Crisis Line services and Crisis Mobile Outreach to explain to customers that if they are experiencing symptoms, how they can follow the CDC and Department of Health Guidelines. <a href="https://health.hawaii.gov/coronavirusdisease2019/what-you-can-do/if-you-">https://health.hawaii.gov/coronavirusdisease2019/what-you-can-do/if-you-</a></p>

		become-sick/ The Department of Health continues to work with all stakeholder to develop options for supporting people during the COVID-19 crisis, and is currently working to address the populations most at risk, or are at risk of contributing to community spread. DOH suggest that any group resources and the ability to support people who may experience a mental health crisis, or can provide alternative settings and strategies, to contact the Behavioral Health Administratio.
Care Delivery during the COVID-19 Outbreak	Currently the LCRS's are in full operation. Is there a plan in place for alternatives to this if someone at the LCRS should test positive for COVID?	BHH is currently looking at the states bed space capacity and planning alternative resources.
Care Delivery during the COVID-19 Outbreak	How to transport clients in our staff's personal vehicles while maintaining safety.	See #14 on the <a href="https://bhhsurg.hawaii.gov">Https://bhhsurg.hawaii.gov</a> page. If your client meets the criteria for testing, case managers should not provide transport to clients to prevent possible exposure and spread of COVID-19. Case managers should arrange for transportation through emergency medical services.
Care Delivery during the COVID-19 Outbreak	Question is about the delivery of Community Learning Services Individual (CLS/I) to the I/DD clients especially those with Behavioral problems. Currently the standard is to be delivered in the community, but during this time can the worker go to the home or Licensed home to deliver the service to avoid going out.	CLS-Ind is still available when appropriate, see "Attachment A: Choosing Services Decision Tree" of the Operational Guidelines for Appendix K on <a href="https://health.hawaii.gov/ddd/">https://health.hawaii.gov/ddd/</a> website. CLS-Ind is a service that is community-based, not intended to be provided in the home. There are other in-home services that are available, in private homes and in licensed or certified homes, see "Attachment A: Choosing Services Decision Tree" on: <a href="https://health.hawaii.gov/ddd/">https://health.hawaii.gov/ddd/</a> website.

<p>Care Delivery during the COVID-19 Outbreak</p>	<p>Can we expect that a similar shelter would be set up on each of the neighbor islands?</p>	<p>The State is working vigorously with HIEMA to identify and support similar shelters on the Neighbor Islands. We are also very mindful of the role of the Counties and helping to set those up. So while there will be similarities, and while we support similar shelters on each of the Neighbor Islands, we are also deferring to the specific needs in each of those counties.</p>
<p>Care Delivery during the COVID-19 Outbreak</p>	<p>How many beds for Kaaahi?</p>	<p>up to 52 units but generally 26 to start with. BHH can't maximize the use of the space and will need to keep the numbers low. In the meantime, BHH is looking for alternative sites to expand capacity.</p>
<p>Care Delivery during the COVID-19 Outbreak</p>	<p>Initial benefits require a face to face psych eval. That's still happening today and this week. Any idea if this will continue face to face? Dr is flying in from outer isle bc Oahu drs big doing this.</p>	<p>BHH is in communication with MedQuest. Awaiting additional guidance from CMS any day now. Please try to continue to manage as best as can</p>
<p>Continuity of Coverage</p>	<p>Would unaccompanied minors be admitted to Kaaahi?</p>	<p>At this time – no. The situation is ever changing, and these options are being explored to the fullest extent. BHH is exploring alternate sites for minors</p>
<p>Continuity of Coverage</p>	<p>Will shelters continue to take in new move in off their CES list?</p>	<p>We need to ensure a balance of continuity of service while meeting safety for staff and clients. Further guidance may be issued later. HPO/GCH: We are currently reviewing strategies to maximize social distancing based on the CDC guidelines and will be addressing programs on a shelter by shelter basis. If you have specific questions, please follow up directly with your assigned Program Specialist or submit a new query through the BHHSURG website if you have further questions.</p>

Continuity of Coverage	Regarding medical CLS-I services, would this be considered essential? i.e. dialysis support	Healthcare workers providing services to the general community and our most vulnerable populations are considered essential workers and should continue to provide medical support. Please refer to Governor Ige's <b>Third Supplementary Proclamation A. Work in essential businesses or operations #17. Home-based care and services.</b> Home-based care for adults, seniors, children, and/or people with developmental disabilities, intellectual disabilities, substance use disorders, and/or mental illness, including caregivers such as nannies who may travel to the child's home to provide care, and other in-home services including meal delivery.
Continuity of Coverage	Any special directives for OP treatment?	If your client has connectivity, you may offer them a telehealth service. If not, you may ask them to come in if they are asymptomatic and ask them to maintain social distancing guidelines. Refer to this guidance document: <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a>
Continuity of Coverage	If patients needs residential services, from outer islands are they able to fly?	Currently, our guidance is that all travel should be generally avoided unless for medical emergency. Interisland travel for purposes like residential services is on a case by case basis at this time with your payor.
Continuity of Coverage	For CLS clients who live in a foster setting - if the foster family does not want them going out, do we just provide services at the residence? If the foster family refuses that?	Offer telehealth services if they have connectivity. If they do not have connectivity Please refer to the face to face guidance on the website. If the family refuses any services document the file and report this to the appropriate funder. For more guidance: <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a>
Continuity of Coverage	Re: Policy. Will enforcements be stopped and park bathrooms be kept open?	DLNR opened all bathrooms 24/7 at state small boat harbors and boat launches effective 3/25/20 and include this link to news release: <a href="https://dlnr.hawaii.gov/blog/2020/03/25/nr20-039/">https://dlnr.hawaii.gov/blog/2020/03/25/nr20-039/</a> . DLNR state parks reopened bathrooms at Sand Island State Recreational Area, Aiea Bay State Recreation Area and Kealahou Bay State Historical Park on 3/27/20.

Continuity of Coverage	Will the Honolulu Mayor accept/follow the guidance about stopping sweeps?	We want to support all counties and provide input where necessary. With the new CDC guidance on encampments, stakeholders are encouraged to communicate with this guidance and partner with the city and state to find the most appropriate balance and solutions applicable. We want to support all counties as best as they can in making decisions.
Continuity of Coverage	Do you know anything about the sweep in Waimanalo that's supposed to happen?	Waimanalo enforcement/sweep that had been scheduled for April 2nd has been suspended
Continuity of Coverage	Some guidance about when we should stop doing street outreach and/or close the Drop-In center.	Outreach is an essential service that should continue operations during the pandemic. HPO will allow the option of providing homeless outreach and case management for applicable services telephonically for regularly scheduled appointments, check ins, and follow up services. For households without access to a phone, homeless outreach providers are to set up drop-in centers near identified encampments, and partner with other government agencies to assist with administering services. For more specific questions, please contact your assigned Program Specialist.
Continuity of Coverage	Are outpatient providers who are working via telehealth, conducting urinalysis? If so, is there a protocol?	All BH services are considered essential services. Providers have been asked to submit their Contingency of Operation Plans that is written in details how services are currently being provided. Please see CDC guidelines for face to face services on website: <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a>
Medication Access	Homeless people with Behavioral health issues may be needing medication assisted treatment. Are there protocols in place to assist them with accessing treatment?	Contact Hawaii CARES (808) 832-3100 for screening and referral coordination to medication assisted treatment.

Other Topics	Can the website have an active list of available food banks (hours and address) from non-profit sector? Unless anyone on here know where I can find an active comprehensive list.	Thank you for your suggestion. In the meantime, you may consider this resource which may be useful to you. However, please note that this resource is crowd sourced and has not been vetted by DOH so we are not liable for the accuracy of this document: <a href="https://docs.google.com/document/d/109TuM6aemnurZg9112vjMVzTW2Ax3dkdNO3PacSnrD4/edit">https://docs.google.com/document/d/109TuM6aemnurZg9112vjMVzTW2Ax3dkdNO3PacSnrD4/edit</a>
Other Topics	Approvals for 6 month evals are related to the snap benefits not quest. Just FYI. Cyrca approves or disapproves this. Any idea when cyrca will be on board?	SNAP certification periods for recipients requiring six-month review or eligibility reviews during March, April, and May will be extended an additional six months to ensure no lapse in benefits due to the pandemic. A notice will be sent to the client at the last known address on file va U.S. Postal mail providing more details. During the pandemic, the U.S. Department of Agriculture has waived Able Bodied Adults Without Dependents (ABAWD) work / Education and Training requirements. This is in response to the decline in available work and closure of training courses due to the pandemic. During this time, applicants will no longer need to re-file SNAP applicabtions. Cyrca is not involved in the process for SNAP benefits. For further information regarding benefits programs through the Department of Human Services please visit <a href="https://humanservices.hawaii.gov/bessd/">https://humanservices.hawaii.gov/bessd/</a>
Other Topics	How much is weather a factor in the spread of the virus?	It is is too early to have firm data on how cases will change with the seasons. However some studies of other coronaviruses suggest marked winter seasonality (i.e., Dec - April).
PPE	If we need to modify what we submitted? how can we do that. The #'s on the order were large #'s and not individual items	Please resubmit PPE request form through website: <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a>
PPE	For Other Provider providing home health care, is there any vendor that can provide supplies to the agency like face mask, gloves, alcohol, sanitizer because a lot of store is all gone. ?	BHHSURG will soon put out a Support and Supply Request Form. Please be on the lookout.

PPE	How do we get access to PPE? Also, how do we continue to serve the homeless population at the same time trying to keep ourselves safe from being infected from the coronavirus and then spreading it to our family at home?	Please complete support and supply request form for PPE and CDC guidelines on website: <a href="https://bhhsurg.hawaii.gov">Https://bhhsurg.hawaii.gov</a>
Resiliency and Emotional Wellness	Where is the best place to get information regarding employee supports at this time since many of them are losing hours- especially the fee for service providers.	First- if employees are losing hours-please encourage them to work with the state unemployment office. Second, any providers who are providing services under BHA contracts, are encouraged to do them via telehealth as much as possible and bill them as if they were face to face. Additional and more detailed guidance can be found at <a href="https://bhhsurg.hawaii.gov">bhhsurg.hawaii.gov</a> for specific divisions and payors. We will continue to work on clarification and updating guidance on the site. Thank you for your patience.
Serving Individuals At Risk of or Suspected of Having Covid-19	If the Kaaahi facility is meant to be for confirmed COVID cases, what about those people who are awaiting test results or very vulnerable because of their chronic illnesses?	The Kaaahi facility is meant for isolation and quarantine for individuals who meet a specific criteria. 1) Symptomatic 2) Unsheltered 3) Medically fragile 4) Has been tested and awaiting results; or 5) Has been tested and is positive. Please refer to guidance on the website: <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a>
Serving Individuals At Risk of or Suspected of Having Covid-19	Medical training for staff be available in the event that a participant is infected by COVID19? Will client be quarantined in the hospital?	In the event that a participant is infected with COVID medical care should be sought. It is expected that the medical care provider will make recommendations regarding the individuals. The state and partners have identified a location for homeless individuals requiring quarantine or isolation which will be available for services April 1, 2020 through Hawaii Cares.
Serving Individuals At Risk of or Suspected of Having Covid-19	How do we protect ourselves and still provide service for someone who may have contracted covid-19.	please refer to CDC guidelines on website: <a href="https://bhhsurg.hawaii.gov">Https://bhhsurg.hawaii.gov</a>
Serving Individuals At Risk of or Suspected of Having Covid-19	How we could assist a youth that comes into the shelter with a fever, but no where to go.	We are developing guidance on facilities for youth referral for isolation and/or quarantine. Please also refer to guidance on the website: <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a>



Serving Individuals At Risk of or Suspected of Having Covid-19	Where can clients/staff go for COVID-19 testing if they have been exposed (or might be exposed)?	See guidance on screening here: <a href="https://hawaiiicovid19.com/screening/">https://hawaiiicovid19.com/screening/</a>
Serving Individuals At Risk of or Suspected of Having Covid-19	If an individual has symptoms, or is awaiting test results, or needs to be quarantined, what would be the referral process for a doctor to refer a homeless individual to the Iwilei Testing and Quarantine Center? Are there eligibility requirements and could a VA doctor directly refer?	Hospitals or Community Providers can directly call Hawaii CARES (808)832-3100 to coordinate services for Kaaahi Quarantine and Isolation Center. Referrals are only going to be taken during the day. For the first week of operation up till 4/10/2020 we will be primarily taking referrals from emergency rooms.
Telehealth Guidance	But if only audio is available, that can be also billed as face to face? Will the state be contacting federal agencies and insurance providers to recommend exceptions to the video requirement for telehealth services for those currently experiencing homelessness?	This question depends on the payer. For example, Medicaid still requires both video and audio. See most updated 1135 waiver <a href="https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54064">https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54064</a> For BHA providers – performance requirements are waived for the duration of the governor's proclamation unless related to critical care or access. For HPO/GCH: HPO will allow the option of providing homeless outreach and case management for applicable services telephonically for regularly scheduled appointments, check ins, and follow up services. For households without access to a phone, homeless outreach providers are to set up drop-in centers near identified encampments and partner with other government agencies to assist with administering services.
Telehealth Guidance	Are telephonic sessions are considered HIPAA compliant? I thought we need visual/audio for telehealth purposes :)	(a) Please refer to the interim guidance on privacy waivers during the emergency period: <a href="https://health.hawaii.gov/camhd/bhhsurg-covid19-guidance/">https://health.hawaii.gov/camhd/bhhsurg-covid19-guidance/</a> (b) MedQUEST requires both visual/audio for reimbursable telehealth purposes. For services paid directly by other state agencies, interim guidance is being developed on telehealth service reimbursability.
Telehealth Guidance	How can we handle the clients who have no access to IT, phone, etc.?	Please continue to see them in person, if asymptomatic using all recommended distancing guidance as outlined on the website. We encourage all safety precautions to be taken and will work on increasing telehealth options for our most vulnerable populations. Thank you for your patience as agencies develop

		their interim guidance on purchasing for telehealth services.
Telehealth Guidance	What are the approved platforms for telehealth?	Please visit the Pacific Basin Telehealth Resource Center for advice on telehealth services: <a href="http://www.pbtrc.org/telehealth-resources-for-covid-19/">http://www.pbtrc.org/telehealth-resources-for-covid-19/</a>
Telehealth Guidance	For adolescent service providers will skype, facetime, or social media outlets that youth have access to be accepted as appropriate telehealth options as long as we abide by HIPAA and 42CFR regulations.	Although privacy regulations have been temporarily waived under certain circumstances, providers should take all precautions to ensure confidentiality. At the current time, there are no restrictions on technology, although you should advise your client that the security of the call may not be ensured. Please see guidance document: <a href="https://health.hawaii.gov/camhd/bhhsurg-covid19-guidance/">https://health.hawaii.gov/camhd/bhhsurg-covid19-guidance/</a>
Telehealth Guidance	Do you know if MedQUEST will be paying for any telehealth services?	Yes, please see the interim guidance for MedQUEST including audio and visual requirements. <a href="https://health.hawaii.gov/camhd/files/2020/03/BHHSURG-INTERIM-GUIDANCE-2020-03-23-v2.pdf">https://health.hawaii.gov/camhd/files/2020/03/BHHSURG-INTERIM-GUIDANCE-2020-03-23-v2.pdf</a>
Telehealth Guidance	telehealth - still need zoom where we see/hear patient - correct?	Our objective is to continue to engage our clients and ensure continuity of care. All individual agencies as payers are developing temporary flexibilities at this time to allow for this coverage (although MedQUEST at this time remains restricted to requiring both audio and video). Please refer to telehealth guidance on website: <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a>
Telehealth Guidance	Will state agencies be able to provide additional funding to provide telecommunication devices to the homeless that meet telehealth requirements?	All state agencies are exploring all possibilities to best support this situation. We are assessing the overall need to develop lines of supply and support in this area and to make bulk requests to HiEMA/FEMA for behavioral health and homeless service providers. Also, BHHSURG has put out a Support and Supply Request Form please use this form for requests. The best way to stay up to date on this issue is to monitor the BHHSURG website.

<p>Telehealth Guidance</p>	<p>Is there equipment/devices available to providers or clients to assist with community based psychiatric telehealth appointments?</p>	<p>All state agencies are exploring all possibilities to best support this situation. We are assessing the overall need to develop lines of supply and support in this area and to make bulk requests to HiEMA/FEMA for behavioral health and homeless service providers. Also, BHHSURG has put out a Support and Supply Request Form please use this form for requests. The best way to stay up to date on this issue is to monitor the BHHSURG website.</p>
<p>Telehealth Guidance</p>	<p>Please define what is considered to be telehealth. Read on BHHSURG website that MedQuest definition of telehealth is video and audio and that audio alone is not considered telehealth. Is this how all non-MedQuest telehealth services are also defined? We are not clear on whether we can bill ADAD for telephone treatment encounters with participants that are audio only.</p>	<p>Our objective is to continue to engage our clients and ensure continuity of care. All individual agencies as payers are developing temporary flexibilities at this time to allow for this coverage (although MedQUEST at this time remains restricted to requiring both audio and video). Please refer to telehealth guidance on website: <a href="https://bhhsurg.hawaii.gov">https://bhhsurg.hawaii.gov</a></p>
<p>Telehealth Guidance</p>	<p>We have been informed that some Medicaid companies are still requiring us to conduct telehealth via both audio and video. Considering that much of the state has implemented a medical emergency, will medicaid be relaxing their requirements? This will help with capacity issues for providers and resource issues for clients.</p>	<p>guidance is changing every day. Currently on the <a href="https://bhhsurg.hawaii.gov">bhhsurg.hawaii.gov</a> website we posted the older MQD documents obtained from PBTRC, but that this is changing day by day. MQD's 1135 recently approved (see website) states it will align with Medicare. For short "Virtual Check-Ins" for Medicare, these seem to be allowable by Medicare although the amount of reimbursement is low and for very short visits. In general Medicare requires both audio/video for most telehealth visits. We are monitoring the situation every day.</p>