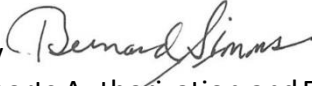




## MEMORANDUM

**To:** DDA Stakeholders  
**From:** Bernard Simons, Deputy Secretary   
**Re:** DDA Appendix K #3-Personal Supports Authorization and Expectations  
**Release Date:** December 12, 2022  
**Release Date:** January 29, 2021 (original)  
**Effective:** March 13, 2020

*\*All text in red indicates added/revised language since the prior release date*

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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). On July 1, 2021, Governor Hogan announced the end of the COVID-19 state of emergency in the State of Maryland.

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.

This guidance was updated to reflect the unwinding of the temporary modifications to the DDA’s operated programs with the goal of reopening and best supporting people in their communities.

### OVERVIEW

Per [Governor Hogan’s orders](#) including program closures and [Stay at Home Executive Order](#), the DDA may authorize additional hours for participants who are currently authorized to receive

Personal Supports to support their health and safety. In addition, the DDA is making exceptions to specific service requirements to address needs and staffing challenges.

Additional authorizations to address a participant's specific needs may be requested based on the participant's needs using the service authorization request form and process.

This guidance applies to both the self-directed and traditional service delivery models.

## **Unwinding Appendix K and Executive Orders Flexibilities**

### **Standards and Requirements:**

- 1) Appendix K related Personal Supports Authorization and Expectations shall end as noted below under each flexibility.
- 2) LTSS *Maryland* Person-Centered Plan (PCP) updates to remove Appendix K related Personal Supports Authorization, shall be made during the next Revised PCP or Annual PCP whichever occurs first.
- 3) Personal Support Service Needs
  - a) Participants with assessed Personal Support service needs can request services through the person centered planning process.
  - b) As per current practice, urgent service needs should be reported directly to the DDA Regional Office.
  - c) Changes set forth in Amendment #3 2020 of the DDA Waiver program applications permits provision of 2:1 support, virtual support, and support during an acute care hospital stay. Reference:
    - i) [Memo #5 - DDA Amendment #3 - Personal Supports - February 16, 2021](#)
    - ii) [Memo #3 - DDA Amendment #3 - Virtual Supports - February 16, 2021](#)
    - iii) [Memo #4 - DDA Amendment #3 - Acute Care Hospital Supports - February 16, 2021](#)
- 4) Service Utilization and Audits
  - a) The State may conduct:
    - i) Service utilization reviews; and
    - ii) Audits.
  - b) CMS stated its intent to audit Appendix K expenditures.

## **Appendix K and Executive Orders Flexibilities**

### **Standards and Requirements:**

1. Services can be provided in a variety of settings, instead of the community, including but not limited to the participant's home, family and friend's homes, acute care hospital or short term institution stay, other community settings, or in neighboring states as per DDA's Appendix K.
  - a. Appendix K flexibility to provide services in a short term institutional stay, neighboring states, alternative facility-based settings, staff or direct care worker home, schools, churches, and other excluded settings **ended on August 15, 2021.**

- b. Ability to provide services during an acute care hospital stay is permitted as per [Memo #4 - DDA Amendment #3 - Acute Care Hospital Supports - February 16, 2021](#)
2. Personal care assistance can comprise the entirety of the service, as appropriate will **end on September 30, 2022**.
  3. Service may be provided over the phone, or via video teleconferencing (e.g. Skype, Zoom, Facetime, etc.), to allow services to continue to be provided remotely in the home and community settings as permitted in Amendment #3 2020 of the DDA Waiver program applications. Reference: [Memo #3 - DDA Amendment #3 - Virtual Supports - February 16, 2021](#).
  4. To maintain and support expansion of the current workforce, staffing qualification and onboarding requirement flexibilities are available as outlined in the [DDA Appendix K #6 - Staff Training and On-boarding Flexibility Guidance](#)
    - a. Training requirements: waived for family members willing to provide services to participants will **end on September 30, 2022**.
    - b. Training requirements: Annual training requirement extension for DSP who have previously completed all training requirements will **end on June 30, 2023**.
      - i) **Effective September 30, 2022, training flexibilities do not apply:**
        - If the previous training exceeds 18 months from prior date/certification; and
        - If the Office of Health Care Quality (OHCQ) has a finding that mandates a training requirement for a staff involved in an incident that resulted in a statement of deficiency or plan of correction
    - c. Training requirements: CPR and First Aid will **end on June 30, 2023**.
    - d. Training requirements: MTTP/Medication Technician Training will **end on September 30, 2022**.
    - e. Training requirements: Training in MANDT will **end on June 30, 2023**.
    - f. Training requirements: waive all but essential training will **end on June 30, 2023**.
    - g. Training requirements: PORII training provided in an expedited format will **end on June 30, 2023**.
    - h. Training requirements: sharing staff among providers will **end on June 30, 2023**.
    - i. Waiver of high school or GED requirement will **end on September 30, 2022**.
    - j. Individuals 16 years or older can be direct support will **end on September 30, 2022**.
  5. Retainer payments may be authorized for providers who normally provide services but are currently unable as provided in [DDA Appendix K #1 - Retainer Payments Guidance](#) will **end on June 30, 2023**.
  6. Under the self-directed services delivery model, Paid Time Off (PTO) may be authorized by the participant for staff who normally provide services but are currently unable due to the pandemic. (New June 1, 2020)
  7. Increased rate for supporting people who have determined positive for COVID-19 is available as per [DDA Appendix K - Increased Rate for Supporting Person with COVID-19 Virus](#) will **end on June 30, 2023**.
  8. Participant currently authorized Personal Supports may:
    - a. Exceed the 82 hours per week within their authorized budget without DDA's prior authorization will **end on September 30, 2022**; and
    - b. Exceed current DDA authorization within a person's overall authorized funding budget (i.e. move funds within budget) without DDA's prior authorization will **end on September 30,**

**2022.**

9. Participants and providers may hire legal guardians and relatives for the delivery of services, as provided in the [DDA Appendix K #6 - Staff Training and On-boarding Flexibility Guidance](#), for greater than 40-hours per week without DDA's prior authorization, will **end on June 30, 2023**.
10. Beginning March 13, 2020, the DDA may authorize additional service hours when the participant was receiving Meaningful Day services prior to the State of Emergency as follows:
  - a. Participants that currently receive **28 hours** or more of Personal Supports per week may be authorized for **six (6) additional hours** per day, Monday through Friday for a total of **30 hours** per week will **end on September 30, 2022**.
  - b. From March 13, 2020 until the Personal Support services was transitioned to LTSSMaryland, for participants currently authorized to receive Personal Supports using the Traditional Service Delivery Model, the DDA will authorize additional service hours via a data patch in PCIS2 will **end on September 30, 2022**.
  - c. After the service transitions to LTSSMaryland, these additional COVID-19 Personal Support hours shall be requested with a Revised or Annual PCP using the [Detail Service Authorization Tool](#) and noted under the "Personal Supports – Appendix K Add-on—COVID-19" title will **end on September 30, 2022**.
  - d. Under the Self-Directed Service Delivery Model:
    - i) Participants have the ability to (1) move funding to different services to meet needs including moving funds from meaningful day services or other services that can be used for increased personal supports.; and (2) access additional \$2000 funds added to budgets for personal supports. This flexibility will **end on September 30, 2022**;
    - ii) Personal supports and meaningful day services can vary weekly, therefore the DDA will consider request for increases to personal supports to meet needs; and
    - iii) To request an increase in Personal Supports for immediate COVID-19 health and safety related need, the Revised Person Centered Plan (PCP) is used; and **(Revised January 29, 2021)**
  - e. Appendix K related additional Personal Support service hours authorization will **end on September 30, 2022**.
    - i) Providers authorized for Appendix K Personal Support service hours shall discontinue billing as of December 31, 2021.
    - ii) LTSSMaryland Person-Centered Plan (PCP) updates, to remove Appendix K related Personal Support service hours, shall be made during the next Revised PCP or Annual PCP whichever occurs first.
11. For all participants, Annual and Revised Person-Centered Plans *are required* to request these additional COVID-19 related hours. **(Revised January 29, 2021)**
12. LTSSMaryland Person-Centered Plan (PCP) updates prior to implementation of the Electronic Visit Verification (EVV) and the DSAT: **(Revised January 29, 2021)**
  - a. For Non-Pilot participants, the DDA RO will upload the service authorization into the LTSSMaryland Client Attachment.
  - b. For Pilot participants, the DDA will coordinate with Coordinators of Community Services to create Revised PCPs.
13. Since the implementation of EVV and the DSAT, a Revised PCP is needed for any changes in service need. **(New January 29, 2021)**
14. Providers shall maintain documentation of service delivery as per the [DDA - Service](#)

[Authorization and Provider Billing Documentation Guidelines.](#)

**PCIS2 Billing Process: (Revised January 29, 2021)**

For Personal Supports services, there are two calendars in the legacy PCIS2 process. Providers shall:

- Enter regularly authorized services into the Base Calendar;
- Enter 15-minute units for retainer payment on the new “COVID-19 Retainer Calendar”

**LTSS Billing Process: (Revised January 29, 2021)**

No change to the billing process. Personal Supports should be billed through the existing process in *LTSSMaryland*.

**Billing Process - Self-Directed Services:**

There is no change to the billing process. Invoices should be sent to the Fiscal Management Services provider.

**Applicable Resources:**

[DDA Waivers - Appendix K Webpage](#)

[DDA MEMO/GUIDANCE/DIRECTIVES](#)

[DDA Covid-19 Resource Page Memo—](#)

[Appendix K Flexibilities Update – August 13, 2021](#)