



Program of All Inclusive Care for the Elderly (PACE) Guidance Relative to the 2019-Novel Coronavirus (COVID-19)

July 1, 2020 (*supercedes prior notice May 5, 2020*)

The purpose of this guidance is to provide direction of temporary operational flexibilities to PACE Organizations (PO) during the COVID-19 public health emergency and to ensure that PACE participants are able to access, without delay, medically necessary essential services. As the Department of Health Care Services (DHCS) continues to respond to concerns and changing circumstances resulting from the pandemic, DHCS will provide updated guidance to POs. *Revised text is found in italics.*

BACKGROUND

In light of both the federal Health and Human Services (HHS) Secretary's January 31, 2020, public health emergency declaration, as well as the President's March 13, 2020, national emergency declaration, the Department of Health Care Services (DHCS) has issued policy guidance pertaining to provision of Medi-Cal covered benefits and services during the public health emergency. These policy letters are posted on the [DHCS website](#). As DHCS continues to closely monitor the emerging COVID-19 situation, DHCS will provide updated guidance to POs.

GUIDANCE

Telehealth

Medically necessary services can be delivered by the POs via an in-person visit or via telehealth, as deemed appropriate by the PO. POs should seek to implement telehealth methods that would provide remote consultation as an alternate means of providing critical, medically necessary services. DHCS has issued guidance regarding the use of [telehealth](#) as an alternate means of providing critical, medically necessary services. For more information regarding Medi-Cal's telehealth policy, please see the Medi-Cal Provider Manual (Medicine: Telehealth).

POs that see clients face-to-face during the state of emergency must follow all necessary infection control protocols established by the [Centers for Disease Control and Prevention \(CDC\)](#) and their county health department, including having all necessary preventative supplies. PACE staff must follow current social distancing

guidelines. For more information, the [California Department of Public Health's COVID-19](#) website has detailed guidance for protecting yourself and others from the risk of contracting and transmitting COVID-19. CMS and DHCS has also issued [guidance to postponing/canceling elective, non-urgent/non-essential medical procedures](#).

PACE Enrollment Agreements

During the COVID-19 public health emergency, POs are approved to collect and document verbal agreement of enrollment in lieu of the participant signature normally required to complete the PACE Enrollment Agreement. POs will need to document the conversation and collect the signed PACE Enrollment Agreement upon conclusion of the public health emergency period.

Adult Day Health Care (ADHC) Services Provided in the Home

California Department of Public Health has released the [All-Facility Letter 20-27](#), which stipulates that ADHCs shall not be required to provide all services at the center and will have flexibility in how they provide basic services to participants. Basic services include: occupational therapy, physical therapy, speech therapy, medical services, nursing services, nutrition services, psychiatric or psychological services, social services, and recreation or planned social activities. Services may be provided via telehealth or other remote methods. This will allow for, but is not limited to, check-in calls, health screening calls, video conferencing, and meal delivery.

There is no need to formally notify CDPH that a PO has chosen to utilize flexibility. However, DHCS does request that POs send notification to the PACE Policy Unit, as the department is tracking the types of flexibilities being utilized.

Involuntary Disenrollments – Out of Service Area

During the COVID-19 public health emergency, POs are not required to submit Involuntary disenrollment requests for participants that have moved out of service area during the emergency period due to COVID-19 concerns. For as long as the moves are considered to be temporary, PACE participants should not update their address with the county Medi-Cal office to ensure their continued enrollment in the PO. POs will retain responsibility for coordination of care and services and full financial risk.

Upon conclusion of the emergency period, POs will adhere to normal regulatory requirements and initiate the involuntary disenrollment process for any participant that remains out of the PO service area for more than 30 days.

Facility Beds

During the COVID-19 public health emergency, POs have the flexibility to place participants in facilities that are out of their approved service area if there is a lack of

available beds in the PO service area. POs will retain responsibility for coordination of care and services and full financial risk.

Upon conclusion of the emergency period, POs are responsible to work with the participant and the facility to determine if it is feasible to transfer the participant to an available facility bed or community home in the PO service area. If not feasible or the participant chooses not to transfer, the PO will initiate the disenrollment process as described in the PACE contract.

Marketing

DHCS confirms that POs have the flexibility to use brokers for marketing purposes as provided by the PACE Final Rule. POs are allowed to use individual and entities to market on their behalf, as long as the individuals or entities have been appropriately trained on PACE program requirements, and specifically, Participant Rights and Participant Enrollment and Disenrollment requirements.

Marketing Exams

DHCS will not require marketing staff to take the DHCS PACE marketing exam during the COVID-19 emergency period in order to market on behalf of the PO.

However, DHCS expects all POs to continue complying with all marketing standards outlined in PL 00-03 which includes DHCS approved orientation and training programs for marketing representatives. A minimum of 12 hours of program training must be completed before marketing representatives conduct marketing activities on behalf of PO. During the COVID-19 emergency period, DHCS will require PO submission of verification of all marketing staff who complete the required training.

CMS Guidance

POs are also encouraged to review the CMS covid-19 guidelines:

<https://www.cms.gov/files/document/covid-pace-faqs.pdf>

Additionally, CMS released new guidance to POs on April 21, 2020, communicating the extension of PACE Quality Data Reporting Submission Due Dates for Quarter 1 and Quarter 2 of Calendar Year 2020. The guidance instructs POs to consult with their State Administering Agencies (DHCS in California) to verify whether the State will grant the same extension.

DHCS agrees with the guidance issued by CMS and will provide the same extension on due dates for 2020 due dates for quarters 1 and 2. Please note that as stipulated in the CMS guidance, beginning Quarter 3, DHCS anticipates that PACE organizations will resume the normal quarterly schedule for reporting PACE Quality Data to CMS and DHCS.

ADDITIONAL FLEXIBILITIES

Discretion in Enforcement of Compliance with Health Insurance Portability and Accountability Act (HIPAA) Regulations during the COVID-19 Response

During the COVID-19 public health emergency, covered health care providers, subject to the HIPAA Rules, may seek to communicate with patients and provide telehealth services, through remote communications technologies. Some of these technologies, and the manner in which they are used by HIPAA covered health care providers, may not fully comply with the requirements of the HIPAA Rules.

The Office of Civil Rights (OCR) will exercise its enforcement discretion and will not impose penalties for noncompliance with the regulatory requirements under the HIPAA Rules against covered health care providers in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency. This notification is effective immediately.

A covered health care provider that wants to use audio or video communication technology to provide telehealth to patients during the COVID-19 nationwide public health emergency can use any non-public facing remote communication product that is available to communicate with patients. Additional information is available at the link: [U.S. Department of Health & Human Services Health Information Privacy](#).

State Fair Hearing Request Extension

CMS approved a temporary extension of the state hearing request timeframe, allowing beneficiaries to have more than 90 days, up to an additional 120 days, to request a State Fair Hearing. Specifically, individuals for whom the 90-day deadline would have occurred between March 1, 2020, through the end of the COVID-19 public health emergency, are now allowed up to an additional 120 days to request a State Fair Hearing. All other existing State Fair Hearing processes remain unchanged. DHCS has issued [guidance](#) on Medi-Cal Fee-For-Service (FFS) State Fair Hearings Section 1135 Waiver Flexibilities Relative to COVID-19. A Notice of Action (NOA) [template](#) specific to the COVID-19 timeframe extension is available.

Medi-Cal Annual Redeterminations

Annual re-determinations have been put on hold, refer to Medi-Cal Eligibility Division (MCED) instructional letters to counties regarding flexibilities and delaying renewals, 20-06, 20-07, and 20-08 at this link: [ACWDLs & MEDILs](#)

Support for At-Risk Individuals Staying at Home

DHCS has also issued [guidance](#) on Preventing Isolation of and Supporting Older and Other At-Risk Individuals to Stay Home and Stay Healthy During COVID-19 Efforts. This information includes resources for older/at-risk individuals who may need assistance

with basic needs like groceries and prescriptions, and much-needed social interaction and connection while stay-at-home orders are in effect.

The HCBA Waiver Agencies will also provide resources to HCBA participants and family members as more information becomes available. Additional information about approved operational flexibilities for HCBS waivers can be found on DHCS' COVID-19 [webpage](#).

ADDITIONAL DHCS RESOURCES

For additional COVID-19 information and resources, we encourage you to review the following resources:

[Latest news from California Department of Public Health \(CDPH\) about COVID-29](#) | [En Español](#)

[CDPH COVID-19 guidance](#)

[Centers for Disease Control and Prevention \(CDC\) COVID-19 response](#) | [En Español](#)

[Follow CDPH Twitter for the latest COVID-19 information](#)

Should you have any questions about the content of this letter, please contact the PACE Policy Unit at PACE@dhcs.ca.gov.