



**SCLARC VENDOR ADVISORY COMMITTEE  
September 9, 2020 MEETING MINUTES—DRAFT**

**ZOOM MEETING**

**I. Call to order**

Meeting was called to order at 10:03 am by Illona Hendrick

**II. Welcome & Introductions**

Illona Hendrick, Chair, welcomed everyone to the zoom meeting. Ms. Hendrick thanked Mr. Henderson and the leadership team for being available for the VAC.

**III. Minutes**

No prior minutes

**IV. CENSUS 2020—LET’S GET COUNTED**

Ms. Kiara Lopez announced the raffle that is being hosted for vendors. You can enter the raffle by emailing Ms. Lopez at [kiaral@sclarc.org](mailto:kiaral@sclarc.org) your proof of completing (confirmation email) for the census. The SCLARC census team is raffling 4 gift cards. The deadline to enter is Friday September 25<sup>th</sup> and the raffle will take place on Monday September 28<sup>th</sup>. Winners will be announced on the 28<sup>th</sup>. Ms. Lopez mentioned that the deadline to complete the census is the end of September. There has been talk of extending the deadline however that hasn’t happened so the deadline is still end of September. You may complete the census at [2020census.gov](http://2020census.gov) if you haven’t done so yet.

**V. Updates from SCLARC Leadership**

Mr. Henderson introduced Dr. Kim Bowie to take the lead on this portion of the meeting.

**Insurance**

Dr. Bowie started the updates by reviewing the insurance requirements. Many vendors have communicated with SCLARC’s insurance broker and that has been working well. After our last meeting, where the broker attended, it was discovered that professional liability insurance applies to all vendors not just clinicians and individuals. The only exception is for attorneys who have malpractice insurance. Many of the policies turned in do not have the professional liability insurance on them. SCLARC does need all vendors to add the professional liability insurance added and have those certificates sent to SCLARC.

When you email the policies to SCLARC, please also let SCLARC know what other regional centers you work with so that SCLARC can forward copies of the policies to those regional centers. This will help you save time for when those regional centers request your updated insurance policies.

**Non-residential services and billing**

Dr. Bowie reiterated that consumer absence/retainer billing for non-residential programs ended on August 31, 2020. There is no extension. Vendors can no longer bill for absences. During the DDS

townhall, DDS went through a presentation with the various service models which were broken up into 4 types:

- A. Traditional services; providing services the same was as before the state of emergency (SOE).
- B. Services are the same but provided remotely or in different locations
- C. Alternative services, services have changed due to SOE
- D. If you are doing same service you did before SOE and are doing it remotely but for less hours than you would have traditionally, then there are some alternative services happening. This is a combination of traditional via remote and alternative services

Billing:

- A. For traditional services you bill exactly like you billed before SOE/Covid-19
- B. For traditional services being done remotely you bill exactly like you billed before SOE/Covid-19; day programs billing by the day will continue to bill by the day; day programs billing by the hour will bill only for the number of hours of service that you provide
- C. Alternative service model providers need to follow guidelines for alternative services model
- D. If you are proving a combination of traditional, remote and alternative then you need to follow the guidelines set for alternative service model provided in the directive. If any part of the service is alternative, you must bill under the alternative service model

### **Timeline for alternative service model**

For the alternative service model there are some timelines that you need to meet:

1. The certification for alternative services needs to be submitted through the SCLARC portal. If you submitted the draft/sample, you will need to submit the newest version of the certification document that you will get through the seamless system. You will receive a link to turn in the certification via seamless. You do not need to email it in. The certification is due to SCLARC by October 5<sup>th</sup> but you are being asked to submit sooner than that so that SCLARC can have a sense of how many non-residential vendors will be providing alternative services.
2. The regional center is also asking you to provide an engagement log that is being used by regional centers across the state. You will need to contact the consumers to make sure they are interested in receiving alternative services. Log when you spoke to the client and the client information. This log will be forwarded to the service coordinator so they are aware of your engagement with that client and your intent to provide them alternative services. If you have been providing alternative services prior to September 1, still proceed with reconfirming with consumer that they want to continue the alternative services and complete the log. SCLARC will provide you with the excel log in the portal so that you update and send by clicking to submit so that SCLARC receives it. Please allow SCLARC a few days to create the fillable forms that will be provided to you via the portal.
3. By October 31<sup>st</sup>, complete a service plan for the consumer with the alternative services in it that you will be provided. There has to be an individual service plan with the exception—probably—of transportation vendors. We can provide you with the format for an individual service plan, it can be formatted simply, what is the objective and how you will meet that objective, add the number of hours of service or any other type of unit. Create the plans with a six-month range to cover alternative services if things do not change in the near future. Document that you have engaged the client in this process to confirm that the objectives you have are in agreement with

what the consumer wants. You may engage the family in the conversation if the client lives with family.

4. DDS will provide what the monthly report will look like that you will have to turn in. Do not fill out any of the draft documents you have seen/received in the recent past because DDS will provide the format for the monthly report. The monthly report for September and October 2020 will be due on November 5<sup>th</sup>. Start keeping your documentation so that you can transfer it to the report once DDS provides the format. After November 5<sup>th</sup>, the report will be due monthly on the 5<sup>th</sup> day of the following month. For the November service, it is due on December 5<sup>th</sup>. The reports will be maintained in your vendor file.

### **Rates**

For September and October: if you do not provide a service to an individual you have an open POS for, you cannot bill for that individual. Vendors can only bill for consumers who receive services. Absence/retainer billing ended on August 31<sup>st</sup>.

For September and October: for those individuals for whom you actually provide services using the alternative service model, you can bill using the same calculation used in the preceding months when absence billing was in effect.

For November 2020 forward: DDS will calculate and provide a monthly unit rate so that if you serve an individual with alternative service model, you will be paid a monthly rate based on a formula that DDS will establish. Rates will be monthly even if you have had daily or hourly rates prior to November. Even if you provide a mixture of traditional, remote and alternative service, you will be billing under the monthly unit rate model. If you are providing traditional services, nothing has changed, you would bill just as you did prior to the SOE. You are providing traditional services remotely (with no alternative service) you would bill as you did prior to SOE.

### **Covid-19 Protection Plans**

1. At this time, DDS is not requiring the plans to be turned in to the regional centers. When the sample of the plan first came out in June, it was before the covid-19 surge and there was some thought that in-center services would restart at some level. In Mid-July, a state surge happened so that was abandoned. If you submitted plan, back in June or July, those plans do not apply anymore because we are not going back to center based services with minimal modifications. We are still waiting to see when in-center services can happen with strong modifications. At this time, DDS is not having you submit that model. Please do not turn in it.
2. Having said that, you do need to have a plan even if you are providing remote or alternative services. You need to have a plan for your staff that goes in to the office and if you are doing any type of in-person service such as going into a consumer home or individual supports going to a job.

### **Directives—new termination dates**

For absentee billing, it ended August 31<sup>st</sup>.

For residential providers, for having staff during day program hours, the new termination date on that is October 8, 2020. The directive does not include overtime it is only for supplemental staffing hours.

Be mindful of that. You cannot bill for the overtime, only for the cost of the supplement at the regular rate. The deadline now is October 8, 2020.

For additional participant directed services (supported employment, personal services, independent living skills) new termination date is October 26, 2020.

Supplemental staffing during hours when consumers would be at a day service, the new termination date is October 14, 2020. Funding for surge facilities also has termination date of October 14, 2020.

We have to wait for directive extensions, if any. We do not know if DDS will extend these dates.

### **C-19 Subcodes (by Kyla Lee, CFO)**

As Dr. Bowie indicated, absence billing ended on August 31. There are c19 codes on e-billing. Guidance will be provided in the next couple of days. Most of you will not be on c19 going forward starting September 1, 2020. You will bill on the original billing. There will be a couple of select vendors (i.e. respite) that will bill on c19 a portion of their hours so we can track these hours. We will let vendors know if they need to do this. Guidance will be coming in the next couple of days confirming what authorization you can bill on.

### **DDS Website**

Mr. Henderson stated it is a good idea to visit the DDS website. Directives are posted on the website almost immediately after the regional centers receive them. It is a good idea to be aware of this information and study the documents. SCLARC is open to questions and to the zoom format to talk to as many vendors as possible. The VAC meets 2-3 times in preparation for each meeting. There is a lot of behind the scene work the VAC does and it is appreciated. We will all continue to work through this together.

### **Question provided by VAC ahead of the meeting**

1. Does the covid protection plan need to be completed and if so, by when and sent to whom?  
No, do not complete nor turn it in to the regional center. Have your own and maintain it and make sure staff is trained on it
2. Clarification on what constitutes a remote service versus an alternative service. We had a lengthy discussion and were not clear as to how to know if the current service is remote or alternative. Many day programs believe they are doing remote services and don't need to certify for alternative services.  
Remote services can be traditional just provided remotely. If you are providing alternative services, these can be provided remotely. Traditional remote services are billed as you did before covid19 for the hours served. If you provide alternative services, for sept-oct you bill the way you billed based on the average absences and come November 2020, DDS will assign a monthly rate.
3. Do Transp Companies/Add component need to complete the alternative services certification?  
Yes, if you are not providing traditional transportation services. If you are not able to support a day service or non-residential program you can come up with an alternative service that you can provide to consumer
4. Are transp companies/add component able to bill for delivering supplies as of 9/1/2020  
Yes, under the alternative service model.

5. Do activity packets sent to consumer homes need to be picked up/collected by the program when completed by consumer?  
That depends on the model of service you are providing. There are some programs that have consumer doing activities then follow up with consumer through electronic means to answer their questions and that same program will pick up the packets on Friday and give a new set on Monday. Other programs, the consumer keeps the packets and returns them if they want. It depends on your service model.
6. Billing
  - a. Will new authorizations be generated for alternative services **we don't believe so but will confirm**
  - b. How will the e-billing process differ from Sept/Oct to November 2020-forward **traditional will bill how you were billing prior to covid.**
  - c. How will non-residential vendors bill if they have a combination of remote services plus alternative services **you will bill under the alternative service model**
  - d. How will non-residential vendors bill if they have only remote services (no traditional and no alternative services) **will bill under the alternative service model if you have remote services that are not traditional. Only traditional remote services are billed under the pre-covid model**
7. Vendors want confirmation that billing for OT/extra staff in residential homes during program hours ended on August 15. DDS will not extend additional staff billing for Residential?  
**New end date is October 8, 2020 but no OT billing.**
8. What are the regulations regarding spend down shoppers for residential clients? Are consumers involved in deciding who is their shopper? Is this an RC policy or a state regulation?  
**Jesse Rocha: individual can choose what needs to be purchased. For the shopper, SCLARC has a policy in response to an audit done earlier this year. As part of the audit, we got recommendations and we developed a policy as a result of the recommendations. In order to reduce the possibility of not being an SSI payee, the regional center created this policy.**

### **Concern over no reply from SCLARC about re-opening plan**

When we received reopening plan, there was no surge. The surge happened right after that. The plans are on hold. The modifications may be more extensive than before. Right now, we are not going to review those plans and we have said that before because things have changed. Things change even after you submit something and we ask you to change things again. We are sorry you did the work and that it will not be reviewed but based on what is happening right now, the plan will not be current. We have to remain fluid, things change quickly. Unfortunately, it's the way things are right now.

### **Other Items**

1. We are asking you to provide certificate of insurance with professional liability included
2. The audit exemption document is being submitted by vendors that don't meet the minimum threshold to submit. These are for vendors that are required to do independent audits and reviews. You must be current to make that request. Those audits have to be at SCLARC before they are approved. If you have audits you have not submitted, please get those to us because you have to be current up to 2017 for us to grant a waiver for 2018, 2019, 2020.

3. The certification for alternative services will be submitted through the portal. Do not submit it to us any other way. If you turned in the draft certification prior to the final version, we are asking you to submit the final version when we email you the request. Do not submit until you get the instructions on how to submit through the portal.

## Q&A

1. I have a question about the liability insurance. if we do not come in contact with the clients, do we have to have the abuse and molestation insurance?

We'll have you email Tony for the answer to that, it will depend on what kind of service you are providing.

2. For residential care homes, are we allowed to submit cost of additional staff for the entire month of August?

Yes, will provide more info on this later in the meeting

3. are we going back to 1/2-day billing for traditional services?

You can only bill for the hours served. If you are doing traditional services, bill as you bill prior to covid-19 so if you served 4 hrs. or less you can only bill for half day.

4. where can we find the alternative services model?

This is for you to develop. There are no set models. If the question is about the alternative services list, that is on the certification document. It lists items that are considered alternative services. \*Dr. Bowie read the list found on <https://www.dds.ca.gov/wp-content/uploads/2020/09/Enclosure-CertificationAlternateNonresidentialServices.pdf>

5. If we are vendored by another regional center, do we have to submit certification to SCLARC also? Or to just the vendoring regional center?

Submit it to the user center also, but submit the same document.

6. where do we submit the service plan?

You are submitting the certification. Then you are submitting the engagement log into the portal.

7. for the ISP's: the effective date for the 6-mo projection would be 9/1/2020 correct?

There must be an open POS. have the engagement done with client as soon as possible. If you have been serving with alternative model, the effective date is 9/1 for the ISP.

8. If we want to open our site-based program in October with modifications such as limited clients, PPE, and social distancing are we allowed to?

Should wait until we get further feedback. There are people talking with licensing, DDS, public health, we should hold off for a couple more weeks. Agencies are discussing this, communicating with each other so hold off until there is more information and it comes in writing

9. our day program has 34 of our clients who live in a large ICF, and we have not been allowed to provide remote services due to the way through are set up (nursing home style). who can really decide if these clients can receive remote services and how would we get this large ICF to cooperate?

If the large ICF is in our catchment area, you are not providing service right now. It is not an appropriate time to do services for that ICF. You can contact myself or Robert Johnson.

10. For the alt non-residential services in-person in a community setting, can we start making arrangements with transportation companies to pick up clients? Not in same qty at a time as before, but on an agreed upon headcount & schedule with transportation? The headcount referred to the limit of covid-transportation guidelines.

Yes, you can contact transp company but we are concerned about congregate services.

11. initially POS' for Employment were time limited to 12 months. regardless if they finish their 10,400 or not. due to Covid is the 12-month POS being extended in order to begin Employment services again. (the POS in referring to is for PIP)

the POS has not changed. If the consumer has chosen to stop the service, and the POS has been canceled, that is a different situation. If there is no active POS, you don't have a client anymore. If the client was in a paid internship and they haven't spent the hours/money because of covid-19 it doesn't matter because they have 12 months to spend it. At the end of the 12 months, they get another 10,400 and that has not changed. Every 12 months the pot is repopulated with another 10,400. If you are doing alternative service, follow the alternative service directive.

12. where do we get the engagement log?

SCLARC will send it to you with instructions.

13. Do we have clearance to begin in-person alt services as listed in cert. form? Do we need signed "consent" of any type to begin in-person day program services as listed in cert. form? Is the engagement log sufficient as "consent"?

No center-based day program services are to take place. Wait on licensing and state dept of health guidance/permission to do in-center services. No on the center-based services.

14. Regarding PIPs, we have been informed by the payroll agency 24hr Homecare that anyone that is not doing office/clerical work will be out of the internship on 9/30. Our participants are concerned about this. Is there any more info we can have regarding this change?

Not today. What is happening is that we are trying to find an alternative to 24hr homecare. We need another week or so to see if we can secure another service provider but that is the reason why you have not heard from us. We are trying to secure an alternative to secure consumer payroll. Other than that, we have no more information.

15. good morning to my understanding the RC directed the day programs to communicate / collaborate with the transportation's companies. I have not seen that being implemented.

some day programs have told us that they don't need the transportation and they will provide the transportation service themselves. Can we get clarity on this please thank you?

We cannot direct/order programs to do anything but can ask for their cooperation and that they work in partnership with you. If a day service has said no to you, you need to consider a different type of alternative service. We have had a call from day service asking if they can work in partnership with transportation companies that are not servicing consumers and as long as there is no open POS from a different transportation program you can contact that service coordinator. You (transportation program) would not be able to provide a service that another transportation company has an open POS for.

This system has been devised by DDS in conjunction with regional centers to help keep service providers in business. The alternative services option is so that vendors can stay in business in absence of the absence/retainer billing. We are encouraging service providers to cooperate with one another. We are trying to preserve the basic revenue that you had.

16. when you say no alternative day services can be implemented does that mean no speech, occupational or physical therapy services can be provided in clinics at this time. Please provide clarity and state if we are just to provide remote services at this time. Thank you providing 1:1 service in your clinic is different than bringing a group of people into the day services. You can continue what you were doing before on an individual basis.
17. As a community-based day program, are we able to participate in the alternative service option to provide services at the consumer's home (like their back yard), or community setting (i.e. family members would like to take them to a park to meet us there)?  
If it is an individual and there is no congregate gathering, yes. If you are taking family members and meet at the park that is a congregate gathering and not allowed. If you can figure out how to do it individual and are in compliance with all the health and safety requirement then yes but you cannot do congregate. It puts everyone at risk.
18. on our last call it was stated that residential providers could not support alternative services (face-to-face) on our premises as we are under county orders to not allow non-essential staff...so to clarify the two options available for day support services are remote services and alternative services in the community? is this correct? are we allowed to request a copy of the day support's COVID-19 safety protocols to know how they will keep our residents protected in the community?  
You are allowed to request it but its their protocol if they provide. Service can be done at facility as long as all the precautions are met, the problem is that the county's ordinance still says that only essential staff can come in to the congregate living situation. Residential facilities are under an ordinance where individuals not essential cannot come in. So, unfortunately no. they can not come in to the facility. Licensing has suggested individual activities outside of the building but it is individualized. Residential providers decide if they allow someone to go into patio/yard. We will side with residential facility if they decide not to.

Residential providers have done a really good job at serving and keeping the people that we serve protected from this challenge that we face. When the people we serve go to the

community to visit family, friends that is when they get exposed or when folks from the community come in. Numbers show when this happens, the infection rate increases.

19. On the DDS Townhall on Friday it seemed that if you provide 1 alternative service you cannot bill under traditional pos service billing? Can you please clarify

Yes, that's true. If you provide alternative services exclusively, you cannot bill under traditional. If you provide a mixture of remote and alternative services you must bill under alternative services.

20. We still have not received our COVID-19 supplies, who do we contact regarding this? I meant we have not received our reimbursement.

Email Isaac Curtis or Robert Campbell. They can meet with me to review. Some people have asked for thousands of dollars of equipment in a handwritten receipt. This cannot be reimbursed. We are not able to accept this. There are some items we are not able to reimburse for. But you can email these two gentlemen for us to review if the item is reimbursable.

21. As residential providers, in supporting remote services (such as Zoom/virtual access) can you please clarify who is responsible for providing the hardware (i.e. tablets, etc) to facilitate these services? There seems to be some confusion regarding this.

There is no designated person/vendor for providing this. Regional center is not allowed to fund this nor reimburse the vendor for these purchases. There is no hard rule as to who needs to provide electronics to consumers.

22. Can we provide both Traditional And alternative services for the same consumer?

Yes.

23. Based on our assessments of Consumer needs and expressed choice there is need for tablets, WIFI, internet. Can we request POS for tablets for the few that require it?

No. We are not allowed to reimburse for computers or tablets. We do have a request for a grant along with other RC's to create a loan/lending type of system.

24. has the deadline for submitting insurance documents been extended due to the additions? or is still 9/10/20?

We will give people some short amount of time to add the professional liability insurance.

25. are all insurance in place by 9/10/2020 is firm date or if vendors still have more time?

It is a firm date, with the exception of those that still need to get the professional insurance. We will give people some short amount of time to add the professional liability insurance.

26. can we have a list of those day programs that are asking for transportation services to partner with and provide alternative services such as deliveries

this was only one program that specifically asked regarding a specific transportation company. Other than that one program, we have not had other requests. You would need to contact the program who you transport to.

27. can you go over the annual "SPEND DOWN" for SSI and how it works

Jesse Rocha: normally that is an over payment that is done so it does not affect SSI benefits. Service coordinator will reach out to consumer and look at items that individual may want or need. We may involve administrators of facility if consumer cannot express needs. The regional center will hire a vendor that is designated to go out and make the purchases. They will provide all the receipts and documentation required.

28. I have a consumer attending an in-person, Center-based work program. Have these programs been instructed to hold off on providing services in a congregate setting?

If they are at a work site and are receiving pay and meeting all covid19 safety guidelines, then the answer is no. consumers are allowed to continue with their jobs. Safety precautions have to be provided at work.

#### **VI. New/Old Business**

Public Comments:

#### **VII. VAC Executive & Committee reports**

Membership Committee: no report

Compliance Committee: no report

Legislative Committee: no report

Strategic Committee: no report

#### **VIII. Adjournment**

SIGN IN SHEET

September 9, 2020

Roll call/Sign in sheet not available. Up to 300 attendees were present at parts of the zoom meeting.