Appendix K applies to all Utah 1915(c) HCBS waivers, including DSPD operated waivers during the Covid-19 emergency:

- Acquired Brain Injury Waiver
- Community Supports Waiver
- Physical Disabilities Waiver

Approved amendments to DSPD practices:

**Retainer Payments**

Retainer payments may be provided for circumstances in which day support or supported employment providers have experienced a significant decline in service utilization due to COVID-19 containment efforts. Retainer payments will:

- Be made up to 100% of average monthly pre-COVID-19 costs after the provider gives expense and revenue details for the billing period.
- Not exceed 25 days per quarter. The quarters are January through March and April through June.
  - It was necessary to modify our initial request to meet CMS requirements and move forward with implementation. We are currently working with the Utah Department of Health towards greater flexibility.
- Be available to affected provider-based programs between 3/16/2020 and 6/30/2020.
- Be paid to eligible providers who will receive information for billing purposes.

**Person Centered Planning and Assessments**

Allows an extension of person-centered support planning documentation, evaluations, and assessments up to twelve months past their original end date. See [Assessments and Person-Centered Support Plans on the DHS Provider COVID-19 FAQ](#).
Telehealth

- Expanded options for virtual/remote evaluations, assessments, and person-centered service planning meetings, supported living, companion services, supported employment, personal assistance, and day programs instead of face-to-face meetings, when these can meet the needs of the person. See Telehealth Guidance on the DHS Provider COVID-19 FAQ.

- An allowance for purchasing assistive technology and other small items which allow telehealth activities to be conducted in the person’s home.

Caregiver Compensation

Allows parents, spouses, and guardians to be reimbursed for providing support to the individual. See Caregiver Compensation Guidance on the DSPD COVID-19 Information and Resources webpage.

Provider Rate Increase

A temporary 13.3% rate increase to reimburse providers for additional costs due to the purchase of personal protective equipment (PPE), sanitation supplies, staffing shortages, overtime costs incurred, recognition pay, and other COVID-19 affected provider-related costs.

- The rate increase will be applied between 4/1/2020 and 6/30/2020 through a rollover in USTEPS occurring April 30, 2020. Specific details of the rollover have been provided in emails on April 10 to USTEPS users and April 15 to UPI users. It is imperative to have all billing submitted for March prior to April 27 and approved prior to April 29.

Equipment Purchases

- Allowance of PPE purchases and supplies used to sanitize settings for the individual and staff.

- Allows for approval of assistive technology for telehealth without a prescription from a licensed physician in accordance with the Division’s COVID-19 Purchase Guidance. See Purchase Guidance on the DSPD COVID-19 Information and Resources webpage.
Support Coordination

- Under some circumstances, exceptions to conflict of interest requirements may be made to allow Support Coordinators to support the person and receive reimbursement as their direct care staff through a provider.

- The State will not require Notices of Agency Action to be sent when amending services in an individual’s PCSP to accommodate changes as a direct result of COVID-19. Notices of Agency Action remain required in all other instances of services being suspended, terminated or denied.

Services

- Extends overnight respite beyond the 13 consecutive day maximum to 30 days per episode.

- Allows for grocery shopping and other errands to be completed by the staff on behalf of the person without the person being present for supported living, personal care, and personal attendant services.

- Temporarily expands settings where services can be provided.
  - When appropriate, day supports may be provided in the individual’s home.
  - When an individual is displaced due to quarantine, hospitalization, or a provider is unavailable they can be served in a hotel, shelter, church, alternative facility based setting or a direct care worker’s home to receive direct care services, respite, day supports, and supported employment.

- Allows for social and emotional support through supported living and personal assistance services for supported living, personal care, and personal attendant services.

- Habilitation, supported living and personal care/attendant care services may be provided in an acute setting or other short-term institutional setting, when the service is not able to be provided by the acute/institutional setting provider. The Department will ensure no duplication of services through documentation of tasks provided and a waiver form completed by the institutional setting staff attesting that specific tasks needed in the acute care hospital or short-term institutional stay cannot be done by the facility staff due to system capacity or other critical service interruption and that the participant may have a trained attendant complete the specific tasks.
Licensing

Temporarily modifies provider qualifications and licensing requirements to:

- Allows in-person training to be completed online, by telephone, or other electronic means.
- Provides a 90-day window post-expiration for CPR, First Aid, and Crisis Management recertifications.
- Allows for provider enrollment or re-enrollment with modified employee risk screening elements such as onsite visits or fingerprint checks, or modification of training requirements.
- Suspends licensing and certification requirements, when approved.
- Modifies the maximum number of individuals allowed at certain sites to accommodate the use of quarantine sites (following CDC guidance), when approved.

See Licensing and Background Screening guidance in the DHS Provider COVID-19 FAQ.

The Settings Rule

- Delay of Heightened Scrutiny submissions to CMS for sites which have not received sufficient technical assistance by the State.
- May limit visitors in order to minimize the spread of infection.

DHS Contracts

Any contracting issue that may arise when using the flexibilities approved in Appendix K will be handled through the contract process.