

## Frequently Asked Questions for COVID-19 Event

### **Meals:**

Policy states that a client may receive home delivered meals (up to 20 meals) if a client is temporarily unable to attend a senior center. If a client is uncomfortable attending the center or if the center must close, the AAA can provide either a shelf stable or frozen meal in place of the hot congregate meal. The meal must still meet the nutrition targets. DAS requests notifications of change, but approval is not required for up to 20 meals (MAN 5300, Section 304.29, Page 11).

AAAs in Georgia have pre-approval to shift up to 30% of the combined Title III C1 and Title III C2 and to shift up to 20% between parts B and C. Any shift between fund sources should be communicated to DAS in the Area Plans and with a Budget Amendment (Man 5600, Section 2003, Page 7).

### **Case management assessment/reassessments:**

For existing clients, providers should have the ability to identify those clients who are at high risk and triage contact with clients (both type and frequency).

For assessments/reassessments:

- If face-to-face assessments or reassessments are not possible or feasible, staff may complete these activities by telephone or other technological method, considering the client's capacity to engage in a meaningful way in a manner other than face-to-face. Staff should inform clients that
  - This is a temporary measure, and
  - That once the risks of the virus are remediated, staff will schedule a face-to-face assessment, and
  - That the quantity and/or types of services may be adjusted based on that assessment.

During such an assessment, staff should carefully document the following:

- The client's stability at home considering possible interruptions in service or alternative service delivery methods
- The availability of appropriate caregivers
- The impact of any social isolation on the client's well-being
- The ability of clients to access other necessary resources in the community
- The extent to which the client and other household members have access to appropriate, recommended personal protective equipment (gloves and facemasks) and are capable of adhering to precautions recommended as part of home care or isolation
- The extent to which there are household members who are at increased risk of complications from COVID-19 infection (people > 65 years old, young children, pregnant women, people who are immunocompromised or who have chronic heart, lung, or kidney complications)

Following such period in which the threat of impact from the COVID-19 virus is mitigated, staff should follow-up with clients within 30 days to schedule/complete any face-to-face activities needed.

It is critical that case managers verify accurate information for as many contacts, especially emergency contacts, in each client's case record.

**Community Transitions options counseling and transition coordination:**

We will most likely mirror the NHT response after the MFP response as soon as we see it. We are within 4 transitions of meeting our MFP numbers for the fiscal year. We are only at 73% for NHT (which is on track for success, assuming no negative impact from coronavirus). Will provide more detailed NHT guidance once we see the MFP guidance.

**No Wrong Door:**

DHS/DAS will temporarily forego the requirement for in-person initial visit for reimbursement. However, visits not done in-person will require extensive documentation in DDS as to who participated in the call and the various care needs discussed. Videoconferencing is preferred in lieu of in-person visit, but teleconferencing is acceptable. An action plan will still be required, along with documentation in DDS as to how/when it was delivered to the participant/circle of support. Follow-ups are required as usual. We can make this effective immediately through the end of April as requested (revisit at that time).

**High Risk Clients:**

In a quarantine situation the AAA may need to advocate for those providing lifesaving treatment in the home. The AAA should update their at-risk client list with priority given to those receiving life-saving services (Manual 5600, Policy 3017)

The Older Americans Act directly states that frail clients who receive in-home services have the "right to be fully informed in advance" ... "about any change in such service that may affect the well-being of such individual." Older Americans Act 42 U.C.S. § 3030c-1. With the foresight that there may be workforce shortage issues in the short term, providers must make every effort to make safety plans early with clients and to provide notice at the earliest possible moment.

**For Provider:**

If a business has a negative impact due to Coronavirus, then they may be able to get a low interest loan from the Small Business Administration. Both for-profit and non-profit organizations may apply for a loan. <https://www.sba.gov/>