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Webinar Tips



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Agenda

- I. Welcome
- II. COVID-19 and Flu Reminders
- III. Data Tells a Story
- IV. Look Back: Successes and Challenges
- V. Look Back: Stories from the Field
- VI. CEIF and Discharge Reminders and Tips VII. What CAADS is Doing to Help You

VIII.Resources



Presenters

- Brett Hendrickson, CDA CBAS Team
- Jennifer Jaeger, CDA CBAS Team
- Denise Peach, CDA CBAS Team
- Lena Haroutunian, Program Director, New Sunrise ADHC, Los Angeles County
- Tatyana Kheyfets, Program Director, Golden Castle, Santa Clara County
- Richard Lee, Program Director, Beverly ADHC, Los Angeles County
- Renee Nashtut, CEO, TurboTar, San Diego County
- Lois Sones, Program Director, Elderday, Santa Cruz County



Vision Team – Thank you!!

- 1. Shawntel Bush, CDA
- 2. Lin Benjamin, CDA
- 3. Jennifer Jaeger, CDA
- 4. Denise Peach, CDA
- 5. Leigh Witzke, CDA
- 6. Dan Gallagher
- 7. Lena Haroutunian
- 8. Nancy Keegan
- 9. Tatyana Kheyfets
- 10. Kristina Lugo

10. Dawn E. Myers 11. Kawon Lee 12. Richard Lee 13. Renee Nashtut 14. Diane Puckett 15. Celine A. Regalia 16. Amanda G. Sillars 17. Lois Sones



COVID-19 & FLU





COVID-19 Booster

- Updated (bivalent) Booster helps prevent severe disease & death
- Older adults and people with chronic conditions remain at high risk for bad outcomes
- Help participants get boosted! CA Toolkit <u>https://covid19.ca.gov/vaccines/</u>
 - Vaccinated people: Updated booster strongly recommended
 - Unvaccinated people: need full series, ie , 2 primary shots spaced out + updated booster

Cumulative COVID-19-Associated Hospitalizations per 100,000 Population by Age Group, COVID-NET, January 2, 2002 - January 14, 2023 (Omicron Variant Period)

Age group	Cumulative Rate
<6 months	902.0
6 - 23 months	260.9
2 - 4 years	88.4
5 - 11 years	40.1
12 - 17 years	66.4
18 - 49 years	245.1
50 - 64 years	488.2
65 - 74 years	977.9
75+ years	1803.0

Source: COVID-NET; https://gis.cdc.gov/grasp/COVIDNet/COVID19_3.htmlAccessed Jan 20, 2022.



Not too late to get a flu shot

- Flu usually peaks between December and February, but flu can spread as late as May
- Flu activity is considered "low" throughout CA at the moment
- HOWEVER, This year's FLU strains are more severe, spread earlier than usual, and more quickly
- GOOD NEWS IS: CDC says vaccine <u>well-matched</u> this year to the circulating strains.

Its not too late to get a flu shot!

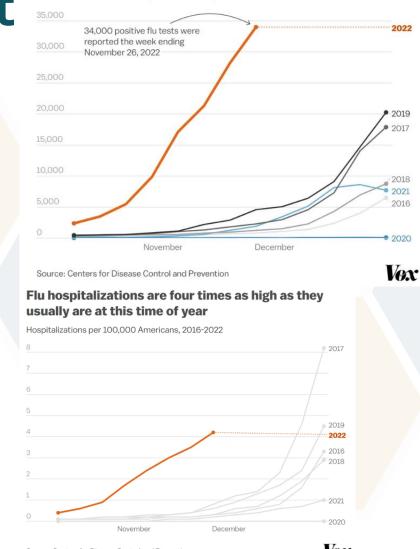
• Do encourage staff and participants to protect themselves from flu to reduce severity and risk of death

Resources:

https://www.cdph.ca.gov/Programs/OPA/Pages/Communications-Toolkits/myturn-flu.aspx

The flu spread early and quickly this year

Positive influenza tests reported to CDC, 2016-2022



Source: Centers for Disease Control and Prevention



NEW! All Facilities Letter 21-34.5 (1/23/2023) (RE: Healthcare Personnel)

All Facilities Letter (AFL) Summary

- This AFL notifies all facilities of the Public Health Order Health Care Worker Vaccine Requirement and State Public Health Order – Adult Care Facilities and Direct Care Worker Vaccine Requirement issued September 13, 2022. The routine diagnostic screening COVID-19 testing requirements for all unvaccinated exempt HCP and booster-eligible HCP who have not yet received their booster are rescinded.
- This revision clarifies that all HCP who provide services or work in health care facilities must be fully vaccinated and boosted for COVID-19, unless exempt.
- This revision also updates the vaccine booster dose requirements in the California Immunization Requirements for Covered HCP Table.

https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-34.aspx



Revised: AFL 21-34.5 Immunization Requirements

CALIFORNIA IMMUNIZATION REQUIREMENTS FOR COVERED HCP

COVID-19 Vaccine	Primary vaccination series	Vaccine booster dose
Moderna Pfizer-BionTech or Novavax or vaccines authorized by the World Health Organization	1 st and 2nd doses	Booster dose at least 2 months and no more than 6 months after 2nd dose
Johnson and Johnson [J&J]/Janssen	1st dose	Booster dose at least 2 months and no more than 6 months after 1st dose
World Health Organization (WHO) emergency use listing COVID-19 vaccine	All recommended doses	Booster dose at least 2 months and no more than 6 months after getting all recommended doses
A mix and match series composed of any combination of FDA-approved, FDA-authorized, or WHO-EUL COVID- 19 vaccines	All recommended doses	Booster dose at least 2 months and no more than 6 months after getting all recommended doses



The Data Tells a Story

Jennifer Jaeger and Brett Hendrickson



CBAS ERS Data*



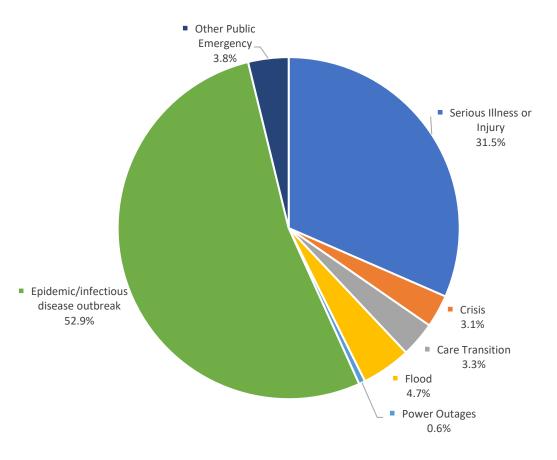
Current ERS Events

(Data snapshot for the week of January 26, 2023)

	, , ,	
	Current Events	Current Events %
# of ERS Events	4,756	N/A
# of Centers Utilizing ERS	147/280	53%
# of CBAS Participants**	4,756	13.2%
Total Personal Emergencies	2,558	53.8%
Serious Illness or Injury	2,085	43.8%
Crisis	200	4.2%
Care Transition	273	5.7%
Total Public Emergencies	2,198	46.2%
Flood	526	11.1%
Power Outages	3	0.1%
Epidemic/infectious disease outbreak	1,499	31.5%
Other Public Emergency	170	3.6%

Total ERS Categories

(Data represents October 1, 2022 – January 26, 2023)



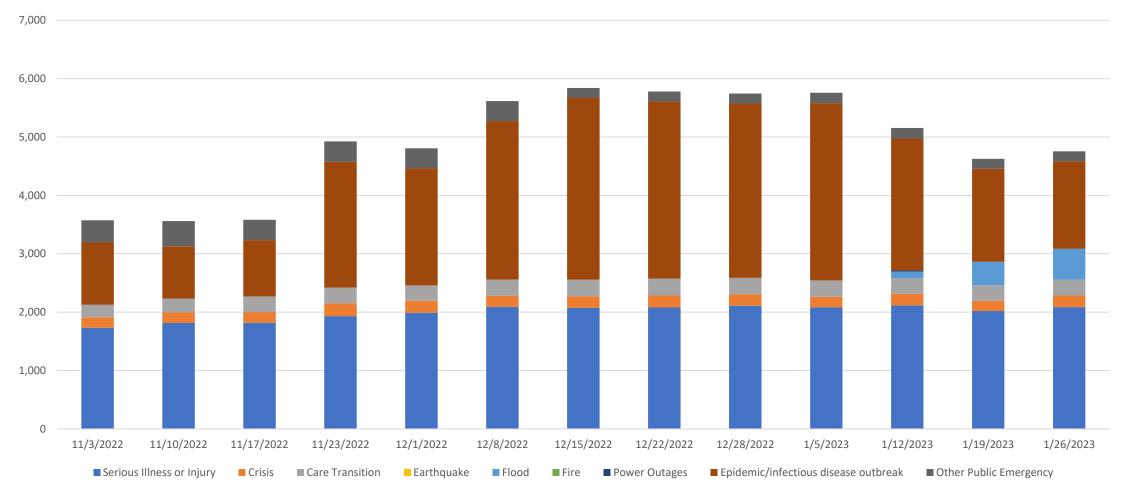
*Current data as of January 26, 2023

**% of CBAS Participants Calculates by the # of active ERS events/most recent available MSSR data

CBAS ERS Data*



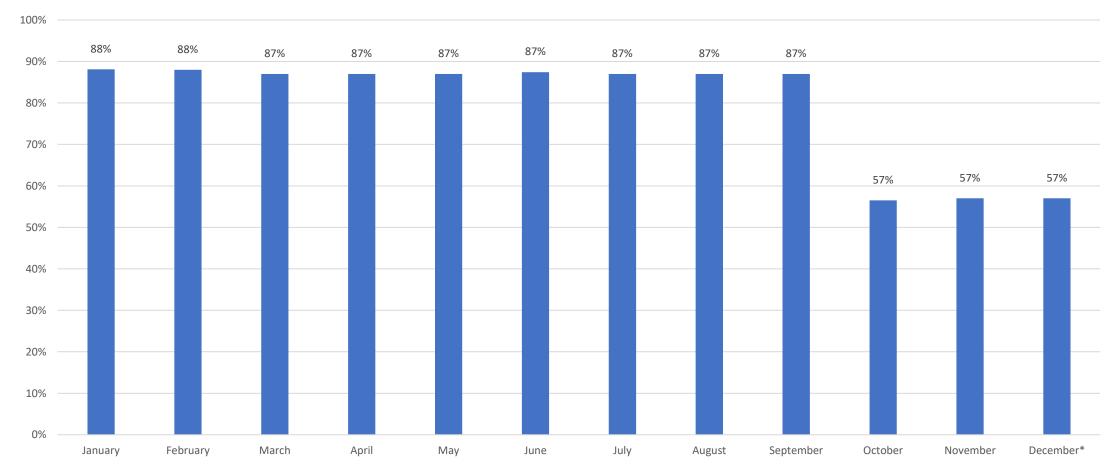
Active ERS Events Over Time



CBAS ERS Data*



2022 Statewide Utilization Rate*



*Current data as of January 26, 2023. December Utilization Rate is preliminary – CDA is missing MSSR data from 5 providers as of 1/26/23.

A LOOK BACK October – December, 2022

CDATEAM



A Look Back - Successes

Rapid implementation and transition from TAS	Most participants have returned to center-based service	Avoided more discharges than anticipated	Used, but not overused
Effective in dealing with public emergencies (floods, rains, viruses)	Personal emergencies: person-centered; responsive	Collaboration, learning and quality improvement process	New data capture process at CDA



A Look Back - Challenges



Steep learning curve for all – providers, CDA, DHCS, and managed care plans



Complexity of a new service added within CBAS



Variations in implementation



Underuse by some providers



New needs for communication and coordination



Administrative burden higher than expected for all (paperwork & related delays)



A Look Back: Stories from the Field

Provider and Participant Experiences Public Emergencies: Outbreaks and Disasters Personal Emergencies



Public Health Emergency - Outbreaks

Lena

"This is not TAS" Richard "It is a huge challenge to stop and start" Tatyana

"I waited too long to pause"

Lois

"It's a judgment call as to how long to pause to be safe"



Outbreaks Lessons Learned

- Use ACL 22-08 and apply your best judgment to assess how cases are spreading.
- Take appropriate action to protect health and safety
- You know your participants best. Be thoughtful and confident in your decisions.
- When you feel stressed, remind yourself, everything will be fine practice gratitude each day



Natural Disaster Stories









Disasters: Lessons Learned

Natural disasters A

Anticipate – Plan ahead – have an emergency plan and update it regularly This is required for ADPs and ADHCs!

For more details and requirements about disaster planning see CDA ACL 19-01

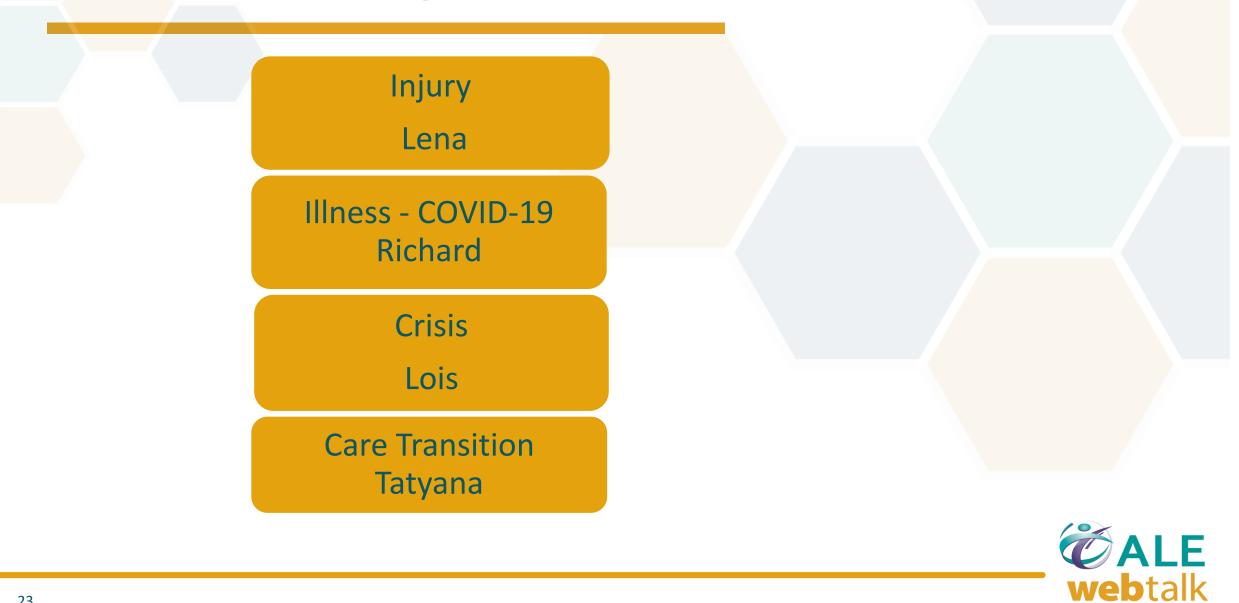
Each County in California has an alerting program that you can sign up for to receive alerts if an emergency situation were to arise. If you work in one county, but or participants live in another, you can sign up for both <u>here</u>:

Additional resources:

- <u>https://www.listoscalifornia.org/</u>
- https://www.listoscalifornia.org/resources/



Personal Emergencies: Stories



Personal Emergencies: Lessons Learned

- Participants need these services! Especially while the pandemic disproportionally continues to impact older and disabled population
- Participants should not be expected to understand Medi-Cal policies so great care is needed to transition people back to center services.
- Don't let admin burden scare you away from using ERS when it is appropriate
- Many times we have had to provide services that are not compensated because that is what we do to meet needs
- ERS acknowledges that CBAS provides valuable services, are in the best position to step in during emergencies, and offer continuity care



CBAS Emergency Initiation Form + Discharges



Pro Tip: CEIFs & Reporting

When you have a participant that needs ERS here are steps to take:

1) Begin by adding a new CEIF in the Peach provider Portal – you can add them and not submit the CEIF, it will just be 'in progress' until you are ready to submit

- a. Go to the peach provider portal website: <u>https://peach.aging.ca.gov</u>
- b. If you don't know how to use the portal or login: <u>Peach Provider Portal Login</u> Instructions
- c. Once you get to the portal there are many tasks, here is a link on how to complete them: <u>ERS Portal Instructions</u>



Pro Tips: CEIFs & Reporting Tips (cont.)

2) If you aren't ready to enter information into the portal, it doesn't mean you can't start gathering it using the <u>ERS Portal Tool</u>

3) Remember, once you finish entering the CEIF in the Peach Portal, you must send a copy of the completed CEIF to the participant's Managed care Plan to notify them that you have initiated ERS. You can print the form directly from the Peach portal.

4) Remember, at the end of the month, when you submit your MSSR, you need to go to the Peach Portal and mark ERS attendance days for each participant. This is very important, as CDA gets statistics on ERS use from this data. It gets reported to CMS and DHCS because ERS is part of a demonstration project.



Pro Tip: CEIF Shared Access

Download and complete <u>Account Action</u> <u>Request</u> form for any users you would like to add to Peach Portal.

https://aging.ca.gov/Providers_and_Partners/Community-Based_Adult_Services/Peach_Provider_Portal/



Send completed form to cbascda@aging.ca.gov



Pro Tips: Discharge Summary Reports

- DHCS requires MCP's to report on discharged participants
- The only way that Plans can get this data is if you help them out!
- There are many simple ways to get this data to your MCPs:
 - 1. If you have an updated CDA Discharge Summary Report, you should already have a listing of all discharged participants make sure to update it!
 - 2. You can filter this report by payor, so that way you can provide each payor a list of participants with their health plan who have been discharged.
 - If you use TurboADHC and you discharge participants in the system regularly, you can run the CDA discharge summary report. If you don't know how or need instructions, please contact: support@turbotar.com



Pro Tips - CEIFs

- Tag Team: RNs or SWs can fill out CEIFs with PD and/or administrator for final review & approval. CEIF is "in progress" until submitted
 - You can add users to the PEACH portal with CDA notification. Important esp. when staff are out ill. Be prepared! Do this in advance.
- Talk to MCPs before initiating CEIFS. This reduces calls and emails
- Have a template at the ready for recording progress notes, ie, mode of contact, reason for contact, outcome
- For short-term center wide pauses, it is okay to expect there will be a similar text for each person. Staff focus and priority must be on securing all participants' health and safety.



What CAADS is Doing to Help You

- Webinars and personal help to navigating ERS; COVID; Medi-Cal Appeals; and more to be announced
- Monthly meetings with the major Managed Care Plans
- Vision Team working with CDA to refine ERS implementation
- Working with CDA to implement Master Plan for Aging Initiative to improve access to CBAS
- Legislative advocacy ongoing relationship building + grassroots campaigns
- CAADS Learning Community for CalAIM to encourage and support opportunities to contact for new lines of services
- Implementation of Bridge to Recovery Grant Funds (\$61.4 Million)
- Pushing for "Care Economy" payments for staff
- New modern "members-only" CAADS Connect Portal to engage and facilitate networking
- Facilitated Listening Sessions



Questions?



COVID-19 Resources

California Department of Aging (CDA) COVID-19 Information and Resources

California Department of Developmental Services (DDS) Coronavirus Information and Resources

California Department of Health Care Services (DHCS) DHCS COVID-19 Response

California Department of Industrial Relations Cal/OSHA COVID-19 Emergency Temporary Standards– What Employers Need To Know

California Department of Public Health (CDPH) CDPH All Facilities Letters (AFLs) CDPH COVID-19 Home CDPH Find All Guidance California Department of Social Services (DSS) COVID-19 Information and Resources Provider Information Notices (PINs) for Adult and Senior Care (ASC) Programs

Centers for Disease Control and Prevention (CDC) COVID-19 Stay Up To Date with Your COVID-19 Vaccines People with Certain Medical Conditions COVID-19 Treatments and Medications

State of California California COVID-19 Website



CA Dept of Public Health COVID & FLU Resources

Influenza (Flu), RSV, and Other Respiratory Diseases

Influenza Public Awareness Toolkit (various languages)

Get the Facts on COVID-19 Vaccines, Boosters, and Additional Doses (12/12/22)

COVID-19 Booster Doses (Issued 12/12/22)

COVID-19 Vaccine Booster Questions & Answers (Issued 12/12/22)

Guidance for the Use of Face Masks (Issued 9/20/22)

Updated Testing Guidance (Issued 9/15/22)

Health Care Worker Vaccine Requirement (Issued 9/13/22)

Guidance for Local Health Jurisdictions on Isolation and Quarantine of the General Public (9/9/22) Includes guidance specific to High-Risk Settings/Healthcare Facilities

Isolation and Quarantine Q&A (Issued 9/9/22)

COVID19.CA.GOV

Find All Guidance

All Facilities Letters (AFLs)



Additional CDPH Resources

General Resources

For questions about infection prevention and control of COVID-19, please contact the CDPH Healthcare-Associated Infections Program via email at HAIProgram@cdph.ca.gov or novelvirus@cdph.ca.gov.

Anyone can <u>submit an inquiry</u> to CDPH requesting clarification of information in CDPH Guidance and Policy documents.

Sign up to receive alerts for updates to California State Public Health Officer Orders and public health mandates related to COVID-19 in 14 languages.

Local Resources

CDPH Licensing and Certification Program Information – Field Operations Branch (District Offices) https://www.cdph.ca.gov/Programs/CHC Q/LCP/Pages/DistrictOffices.aspx

Listing of California Local Health Services Departments (County or City) <u>https://www.cdph.ca.gov/Pages/LocalHe</u> <u>althServicesAndOffices.aspx#</u>



CBAS All Center Letters

CDA CBAS Webpage

https://aging.ca.gov/Providers and Partners/Community-Based Adult Services/

CBAS All Center Letters

https://aging.ca.gov/Providers and Partners/Community-Based Adult Services/All Center Letters/

ACL 22-04 Launch of New CBAS Emergency Remote Resources (ERS) https://aging.ca.gov/download.ashx?IE0rcNUV0zat4VbuY0SwBw%3d%3d

ACL 22-06 Initiation of CBAS Emergency Remote Services (ERS) Completion of the CBAS ERS Initiation Form (CEIF) (CDA 4000) https://aging.ca.gov/download.ashx?IE0rcNUV0za6yCDrNxnsew%3d%3d

ACL 22-07 ERS Frequently Asked Questions #1 https://aging.ca.gov/download.ashx?IE0rcNUV0zYrSGbnBmyNWg%3d%3d

ACL 22-08 CBAS ERS Public Emergency Requirements https://aging.ca.gov/download.ashx?IE0rcNUV0zax4f%2fJkXlqZQ%3d%3d

ACL 22-09 CBAS Monthly ERS Reporting Requirements https://aging.ca.gov/download.ashx?IE0rcNUV0zZ0W89aMHHZ8g%3d%3d

ACL 22-11 ERS Frequently Asked Questions #2 https://aging.ca.gov/download.ashx?IE0rcNUV0zYTAXTMKOCUSg%3d%3d



ERS Policy Resources & CEIF Tools

CBAS Emergency Remote Services https://aging.ca.gov/Providers_and_Partners/Community-Based_Adult_Services/Emergency_Remote_Services/

CBAS ERS Policy Summary https://aging.ca.gov/Providers_and_Partners/Community-Based_Adult_Services/Emergency_Remote_Services/

CBAS ERS Forms & Instructions https://aging.ca.gov/Providers_and_Partners/Community-Based_Adult_Services/Forms_and_Instructions/Emergency_Remote_Services/

CBAS ERS Initiation Form (CEIF) Instructions https://aging.ca.gov/download.ashx?IE0rcNUV0zab%2bfznw4pP9g%3d%3d

CBAS ERS Portal Instructions

https://aging.ca.gov/download.ashx?IE0rcNUV0zZsiEaAPZ7Saw%3d%3d

CBAS ERS Portal Tool

https://aging.ca.gov/download.ashx?IE0rcNUV0zb7%2fDuvem3nEg%3d%3d



CBAS Required Reporting Resources

CBAS Reporting Requirements

https://aging.ca.gov/Providers_and_Partners/Community-Based_Adult_Services/Forms_and_Instructions/Reporting_Requirements/

ADHC/CBAS Incident Report Form (CDA 4009) https://aging.ca.gov/download.ashx?IE0rcNUV0zaqMET2XrTCdw%3d%3d

ADHC/CBAS Incident Report Instructions (CDA 4009i) https://aging.ca.gov/download.ashx?IE0rcNUV0zZ9LQamuTIR3Q%3d%3d

DHCS All Plan Letter (APL) 22-020 Community-Based Adult Services Emergency Remote Services https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-

020.pdf

DHCS APL 22-020 - CBAS ERS Reporting Template & Instructions https://www.dhcs.ca.gov/Documents/MCQMD/CBAS-ERS-Reporting-Template-Final-Nov-2022.xlsx



Public Comments



SUBMIT COMMENTS TO DHCS: CBAS@DHCS.CA.GOV

