Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2020-50

Applicable to the 2018-2023 SMMC contract benefits for:

- [ ] Managed Medical Assistance (MMA) and MMA Specialty
- [x] Long-Term Care (LTC)
- [ ] Dental

Re: COVID-19 State of Emergency: Adult Community Support Services

On March 9, 2020, Governor Ron DeSantis issued Executive Order Number 20-51 related to the 2019 novel coronavirus (COVID-19). The purpose of this policy transmittal is to provide direction to the managed care plan regarding community support services for adults who are unable to receive adult day health care services due to the COVID-19 pandemic.

Adult Day Health Care services, as authorized in the enrollee’s plan of care, provide social and health-related therapeutic services and activities, self-care training, and nutritional services to LTC enrollees. In order to reduce the potential spread of COVID-19, ADHC providers have been unable to render facility-based services. The adult day health care service has an essential role in assisting LTC enrollees to overcome physical decline, anxiety, loneliness, lack of interest in eating or activities, and more. To remedy the temporary loss of this service, the Agency has created a new service, which can be delivered in-the-home. The new service is called “adult community support services” and can only be furnished by providers that meet the qualifications of an adult day care center.

Service Description: The adult community support service differs from services on the home health services spectrum in that adult community support service include social and health-related therapeutic services and activities, self-care training, nutritional services, and more. Adult community support services encourage enrollee independence and engagement through participation in meaningful activities that include but are not limited to: arts and crafts; stretching or other gentle group exercises; music therapy/sing-a-longs; sewing/knitting; physical stimulation activities such as coloring and handwriting exercises; mental stimulation games such as bingo; discussion groups; current events, such as holidays and birthday; educational programs; health and nutrition awareness activities; and pet therapy. The adult community support service does not include delivery of respite services or meals. The primary mode of delivery of this service is in the enrollee’s residence.

Service Requirements: The managed care plan must ensure the following:

- The service must be documented on the enrollee’s plan of care.
- The provider must furnish enrollees with the materials and supplies necessary to complete activities at no cost to the enrollee, when appropriate.
- The provider must furnish a daily participant activity schedule to the enrollee/caregiver and managed care plan.
The service must be delivered face-to-face and comply with the Centers for Disease Control and Florida Department of Health’s COVID-19 prevention/safety protocols.
Service delivery must be documented in accordance with current requirements in the Statewide Medicaid Managed Care Long-Term Care Services Coverage Policy and the provider contract/agreement with the managed care plan.

**Care Planning:** Within thirty (30) days from the effective date of this Policy Transmittal, the managed care plan must:

- Contact all enrollees who were previously authorized to receive ADHC services and who are currently unable to receive those services because the center is closed or because of safety concerns;
- Provide the enrollee with information about adult community support services;
- Confirm whether the enrollee wishes to receive adult community support services and document the enrollee’s choice in the enrollee record; and
- Ensure services are initiated/in place for enrollees wishing to receive adult community support services.

**Service Authorization:** The provider must obtain approval from the enrollee’s LTC case manager prior to the delivery of services.

**Contracting/Reimbursement:** The managed care plan may negotiate mutually agreed upon rates with providers for delivery of adult community support services.

The managed care plan must utilize the procedure code S5100 in combination with modifier CG to bill for adult community support services.

**Effective Date:** The requirements in this policy transmittal are effective immediately and will remain in place until it is determined enrollees can safely resume services at adult day care centers at pre-COVID levels.

If you have questions or concerns, please contact your contract manager at (850) 412-4004.

Sincerely,

Shevaun Harris
Assistant Deputy Secretary for Medicaid Policy and Quality

SH/dvp