



State of Connecticut
Department of Developmental Services

DDS

Ned Lamont
Governor

Jordan A. Scheff
Commissioner

Peter Mason
Deputy Commissioner

To: DDS Providers

From: Jordan A. Scheff, Commissioner

Cc: Peter Mason, Deputy Commissioner; Katie Rock-Burns, Chief of Staff; David David, Director of Service Development and Support; Ken Cabral, Director of Family Services Strategy; Amber Burke, Director of Employment and Day Services

Date: April 15, 2020

RE: COVID-19 Guidance for Employment and Day Programs

Attachments: Guidance for the Deployment of Employment and Day staff, and Innovative Employment and Day Virtual Practices, Wellness Form

The purpose of this memo is to communicate further guidance for all Department of Developmental Services' (DDS) qualified employment and day providers regarding statewide preparedness efforts and responding to the COVID-19 health crisis.

Based on the extension of the social distancing guidelines and restrictions on gatherings from Governor Lamont, the department is issuing the following guidance effective, Monday, May 4, 2020:

Employment and Day Programs

Congregate Settings

- DDS is requiring that all congregate supports for employment and day settings continue to cease operation until further notice except for individuals identified in the [March 27th memo](#) to Qualified DDS Providers.

Individual Supported Employment (ISE) and Day supports

- DDS continues to support individual and group supported employment (ISE/GSE) settings for those community employment sites that are considered essential or those settings in which the individual's employment would be in jeopardy if they did not report to work. The same requirements as in the [March 27th memo](#) still apply.

Deploying Staff

- Employment and Day Providers are to utilize their staff whenever they can to provide in-home/alternate individualized supports to individuals who live in their own home or with a caregiver or a Community Companion Home (CCH) provider who provides essential services.

- Employment and Day Providers should continue to complete contracts whenever individuals funded by the department are unable to complete the work at the sites.
- Staff qualified under any of the three DDS Waiver services may be used for the provision of any non-professional services under the definitions of another waiver service. Professional services exempt from this include: Clinical Behavioral Supports, Healthcare Coordination, Nursing, Dietician, Therapists, etc.
- All staff must receive training on any participant's individual plan for any individual they are supporting.
- Employment and Day Providers should deploy their staff to provide supports and services in individual, family, and residential settings, as needed and as possible.
- DDS strongly encourages providers that only offer employment and day services to contact other residential providers and develop cooperative arrangements to supply staff to support participants in residential service areas.

Billing Attendance

- Providers will continue to be paid for the full month of an individual's support for the month of May 2020, as long as staff stay connected to the individuals they support. DDS expects providers will prioritize families and individuals who live alone. Payment is applied when one of the following is delivered:
 - At a minimum, 30 minutes of virtual supports has been provided daily to no less than 50% of the individuals with a day authorization and the provider continues to attempt to connect with every individual.
 - A virtual program is available to the individual that has continued interactive programming offered throughout the entire day and the individual participates at least three times a week. (See attached memo on Innovative Employment Day Virtual Practices)
 - At least 50% of staff have been (see attached Guidance on the Deployment of Employment and day staff):
 - deployed to a residential or family setting to provide day supports or
 - allowed to work for another agency or employer of record in residential or family settings to provide day supports or
 - reassigned to residential settings to provide residential supports
 - If an individual/family chooses to not participate in services or is only in agreement of weekly contact, the Provider needs to document the conversation, the rationale for not participating and the frequency of contact moving forward. This documentation should also be shared with the Case Manager.
- Provider should continue to bill for the service they have been authorized to provide. All services should continue to document in accordance with the documentation guidelines.
- Attendance for the month of May will not be the basis for the July payments, but must still be reported.

- Per diems should be billed as a per diem no matter how many units of services have been provided. Hourly billing should be billed for each unit of support.
- Providers are to bill the per diem when, at a minimum, each day the individuals receive at least 15 minutes of day supports.
- Providers are to bill for hourly supports for each unit of day supports provided to the individual received in 15-minute intervals.
- The provider is required to make contact with all individuals at least one time per week and performs a wellness check. Attached is a Wellness Check form to be used for each time the individual is contacted.
- Contact with individuals should be based on the individual circumstance of the person and may require more than weekly contact. Providers are expected to assess each unique situation and determine if more than weekly is needed.

DDS will continue to provide any updates and information and guidance regarding COVID-19 with individuals, families and providers. To review all DDS communications please visit the DDS homepage at <https://portal.ct.gov/DDS>. For questions please email DDS.COVID19@ct.gov. Thank you.