Question	Office	Answer
For OLTL Should HCBS providers expect additional guidance on the use of the Act 24/HB 2510 funds? For example, eligible expenses and how funds can be used for certain payroll expenses? [Janel Gleeson] [janel@debrunner.us]	OLTL	DHS is working on additional guidance on Cares Act funding use.  OLTL issued emails to its listserv identifying the method for the funding distribution based on the provider type. The listserv messages also include information for eligible expenses.  Act 24 of 2020 requires these funds to be expended by November 30, 2020 or returned to the commonwealth.  Additionally, these funds must be used for COVID-19 related expenses incurred between March 1, 2020 and November 30, 2020. Providers must keep documentation to prove that these funds were used for their response to the COVID-19 pandemic in case of an audit. Any person or entity accepting a COVID-19 payment agrees to provide documentation to the Department, upon request, for purposes of determining compliance with Act 24 requirements. Instructions on expenditure reporting will be provided in the future.  Providers are advised to review guidance for eligible expenses and FAQs on the U.S. Department of Treasury website.
I am commenting in hope that there is further work being done to assess the lack of uptake of BH services by enrollees in the CHC Program, as this seems to lag significantly behind even the lowest estimates that were expected. Thank you. Lloyd Wertz [Lloyd Wertz] [Iwertz@pmhcc.org]	OMHSAS/OLTL	OLTL and OMHSAS continue to meet regularly to coordinate the delivery of behavioral health services in Community Health Choices and to align data practices. At this time the Medicare parts A and B data is not available for analysis. In the interim, OLTL and OMHSAS are working to determine services provided for Medicaid-Only services on a pre-CHC individual in a nursing facility as compared to an individual in the LTC Population Group in CHC. Once that analysis is completed and confirmed accurate, OLTL and OMHSAS will update

		the data to have 2018 and 2019 data on the use of Medicaid-Only services with specific pre/post comparisons for individuals in the aging waiver and individuals in a nursing facility. In February, OMHSAS and OLTL presented data at the MAAC (MA services only that Medicare does not reimburse for) and that data demonstrated individuals were receiving care.
Once the guidance is issued will face to face visits resume immediately or 30 days from a county moving to green phase? [Theresa Hartman] [thartman@patientcarecoordination.org]	OMHSAS	Community providers should continue to follow the recommendations put forth by the Department of Health and the Department of Human Services.  Face to face service should always be available for individuals for whom telehealth does not work, is not wanted or accessible, or for whom care is most appropriate to provide in person.
		We have been working diligently to ensure that the flexibility provided by telehealth can remain in place as much as possible and can be utilized based on an individual's preference and needs. For instance, someone who lives with anxiety may not be OK going out in public or using public transportation to get to their BH appointment. COVID may have exacerbated their symptoms and experiences, and that will not go away simply because the county is green. But they still need BH care. We want them to get it.
		Ultimately, the methods for service delivery should be determined and assessed in an ongoing basis to provide individualized approaches, true to our mission, not by external determinants such as a county's designation.
Is there an update on the HealthChoices procurement? [Norris Benns] Norris.E.Benns@PAHealthWellness.com]	OMAP	Please see the <u>press release</u> released by the Department on July 8, 2020 for details.
ODP the governor stated that meeting should continue using technology did	ODP	The dates/times for ISAC meetings for 2020 are contained in the ISAC hub on

the ODD planning council meet and		MyODD (unus myoda ara) Tha ICAC
the ODP planning council meet and		MyODP. (www.myodp.org) The ISAC
where was the public notified? P. Hunter		hubs contains meeting materials, past
[Paula Hunt] [paulahunte55@gmail.com]		meeting materials, and now that the
		meetings are virtual, we are posting the
		link to register along with the date/time
		of the meeting and the agenda. In order
		to access the ISAC hub, one has to have
		an "account" on MyODP with their email
		which is very easy to do. With that
		account one has access to all of ODP's
		announcements, trainings, resources,
		online news, etc. The ISAC hub is found
		under the "Resources" tab at the top of
		·
Do we know if telehealth services are being	OMHSAS	the MyODP homepage.  Per the COVID Telehealth Expansion memo all
offered in Spanish?	UIVINSAS	program requirements not specifically waived
onered in Spanish:		by the memo were still required, "It should
		be noted that these temporary measures
		still require adherence to other
		requirements that apply to the service
		being delivered as they would when
		delivered in-person." That would include
		meeting Federal Limited English Proficiency
		requirements ( <u>Title VI of the Civil Rights Act</u>
		of 1964 and Federal Executive Order No.
		13166) to provide translation services in any
		program receiving federal funding
		(including Medicaid, Medicare, CMHSBG
		grant funds, etc.).
What is the impact that telehealth had or	OMHSAS	The impact is to be determined as there is a
will have on the ICP?	UIVIHSAS	lag time in data (note that the ICP measures
will have on the icr :		are calculated based on the previous year's
		data and the payout occurs the following
		year). For example, the payout that occurs in
		2020 is based on 2018 data that is collected
		and analyzed in 2019. We will begin to assess
		the impact once the 2020 data is available,
		which will be in 2021.
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Will there be quality metrics in place with	OMHSAS	Yes. One of the roles of the Telehealth
the expansion of telehealth?		Steering Committee/focus groups will be to
		identify quality metrics.