



KDADS STANDARD POLICY

Policy Name:	Virtual Delivery of Services	Policy Number:	TBD
Commission:	Long Term Services & Supports (LTSS)	Date Established:	TBD
Applicability:	TBD	Date Last Revised:	TBD
Contact:	TBD	Date Effective:	TBD
Policy Location:	TBD	Date Posted:	TBD
Status/Date:	TBD	Number of Pages:	1 of 5
<i>Revision History</i>			

Purpose

This policy establishes a virtual delivery of a service is to maintain or improve a participant’s functional abilities, enhance interactions, support meaningful relationships, and meaningfully participate in their community.

Summary

Virtual delivery of a service shall mean the provision of supports through equipment and a HIPAA compliant platform with the capability for live real-time audio-visual connection that allows the staff member to both see and hear the participant. Text messaging and e-mailing do not constitute virtual supports and, therefore, will not be considered provision of direct supports under this Waiver program service.

Entities/Individuals Impacted

- Individuals on waiver services.
- Providers of waiver services
- Managed Care Organizations (MCO)

I. Policy

- A. Virtual delivery of the service shall ensure the participant's rights of privacy, dignity and respect, and freedom from coercion and restraint. Virtual delivery of the service does not isolate the participant from the community or interacting with people without disabilities.
- B. Virtual delivery of the service must be agreed to by the participant and their team and outlined in the Person-Centered Service Plan (PCSP);
 - a. The participant must have an informed choice between in-person or the virtual delivery of the service.
 - b. The virtual delivery of a service cannot be the only service delivery provision offered for a participant seeking the given service; and
 - c. The participant must request the scope of the virtual delivery of the service within -PCSP.
- C. Virtual delivery of a service is not, and will not be, used for the provider's convenience. The virtual delivery of the service must be used to support a participant to reach identified outcomes in their Person-Centered Plan.

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- D. Virtual delivery of a service must be documented within the claim as the place of service feature as any other service being delivered, including start and end times.
- E. The virtual delivery of a service must comply with the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended by the Health Information Technology for Economic and Clinical Health (HITECH) Act, and their applicable regulations to protect the privacy and security of the participant’s protected health information.
 - a. . Informed consent must be provided to participants prior to use of virtual delivery.
 - b. Providers will develop informed consent and assessment of device to provide virtual delivery.
 - c. This includes completion of informed consent specific to virtual delivery of services and participants understanding of risks and liabilities. Consent will include assessing the participant’s technology and/or device to ensure privacy (*i.e.* secure connection).
 - d. The Managed Care Organization (MCO) will monitor provider policies and ensure participant's choice in virtual delivery of service.
- F. Virtual delivery of a service, including using phones, cannot be used to assess a participant for a medical emergency. The provider must develop and maintain written policies, train direct support professionals on those policies, and advise participants and their person-centered planning team regarding those policies that address:
 - a) Identifying individuals to intervene (*i.e.* natural supports, other provider staff), and ensuring there is a written plan in case the participant experiences an emergency; and processes for requesting such intervention if the participant experiences an emergency during provision of virtual supports, including contacting 911 if necessary.
- G. The virtual supports must meet all federal and State requirements, policies, guidance, and regulations and complies with 42 CFR 442.301 (c)(4)(vi)(A) through (D) related to privacy, control of schedule, activities, and access to visitors.
- H. Providers offering waiver program service via virtual delivery of service must include virtual delivery of a service in their policies, procedures and service agreements.
 - a. Choice of virtual delivery of service must be documented within the participant's PCSP.
 - b. Policies must include training on informed consent.
- I. Providers offering waiver program service via virtual delivery of service must develop, maintain, and enforce written policies, approved by the state, which address:
 - a. Identifying whether the participant’s needs, including health and safety, can be addressed safely via virtual delivery of the service. How the provider will ensure the participant’s rights of privacy, dignity and respect, and freedom from coercion and restraint during virtual delivery of the service. How the provider will ensure the virtual delivery of the service meets applicable information security standards; and
 - c. How the provider will ensure the provision of virtual delivery of the service complies with applicable laws governing individuals’ right to privacy.
 - d. The provision of service in person if the participant decides they no longer want virtual delivery of services, or the participant’s needs change.
 - e. Use of evidence-based practices/best practices related to virtual delivery of services.

II. Procedures

- A. Instructions and Limitations
 - a. The program participant’s PCSP must indicate the use of the virtual delivery of the service.

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- i. Services that can be delivered virtual include adult residential services, agency-directed PCS, Day Supports, and Supported Employment.
 - b. Providers will document the use of frequency of VDS through Electronic Visit Verification (EVV).
 - c. MCO's will monitor the frequency of the use of VDS utilizing claims data. When virtual delivery of the service is provided, the provider shall only render the service as outlined in the participant's PCSP.
 - d. The participant's MCO Care Coordinator will monitor health, safety, and wellness, ensuring that virtual supports meet the participant's needs.
 - e. Virtual delivery of service shall be provided in real-time, not via a recording.
 - f. The service provider shall be responsible for providing the device or technology required to support the virtual delivery of service. The waiver program will not fund any costs associated with the provider's virtual delivery of service such as obtaining, installing, and implementing equipment, internet, software applications, and other related expenses. These costs, in the virtual delivery of the service are part of the provider's operating costs.
 - g. The service provider is responsible for ensuring that the participant is interacting and actively participating in the delivery of service.
- B. Technology and Devices
 - a. Virtual delivery of a service may leverage the existing technologies or devices belonging to the waiver participant.
 - b. HCBS waiver funding shall NOT be used to purchase technologies or devices or internet connectivity for the purpose of virtual delivery of a service.
 - c. The provider shall be responsible for the maintenance, upkeep and assurance that the device is in working order.
- C. Community Integration and Participant's Choice
 - a. When virtual delivery of service is requested by the participant and authorized by the MCO, the following requirements shall be met to ensure the delivery method does not lead to isolating or regimenting the participant from the greater community.
 - i. virtual delivery of service shall be provided in the participant's preferred setting.
 - b. The participant's choice for virtual delivery of a service shall be documented and included in their PCSP.
 - c. The participant shall be able to rescind their choice of virtual delivery of a service at any time. When this occurs, the provider shall ensure service continuity via a non-virtual delivery method and confirm that the participant's service plan reflects the participant's choice change.
 - d. The MCO shall be responsible for ensuring that the provider is educating and informing the participant on the scope of the virtual delivery of the service prior to documenting the choice of the individual.
 - e. The MCO is responsible for ensuring that the provider educates and informs the participant about the scope of virtual delivery of service before documenting their choice.
- D. Training Requirement
 - a. Where virtual delivery of a service is requested by the participant and authorized by the MCO, the provider shall train the participant to use the solution or application and device (where a new device is provided).
 - i. The training must assist the participant in attaining the knowledge required to operate technologies that facilitate successful virtual delivery of the service.

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- b. Residential providers are responsible for actively supporting each participant in making informed choices about virtual support usage and understanding their rights.
- E. Units and Delivery
- a. One unit of a service delivered virtually, shall be equivalent to one unit of in person service delivery (the same) when provided through virtual delivery of a service and shall be reimbursed equivalently.
 - b. The MCO shall require providers delivering virtual services to have backup plans in the event of failure of the virtual delivery of service solution. These plans must outline how services will be delivered in person, either due to participant choice to discontinue using VDS or due to technological failures.
 - i. The state may require the MCOs to present a sample of their provider backup plans for virtual delivery of a service.
 - c. If a technology or device is provided to the participant for the primary purpose of virtual delivery of a service, placement of such devices/equipment/technology shall be solely determined by the participant.
 - d. The participant shall have total control of the device, including turning it off or on.
 - e. It shall be documented in the service plan what happens if and when a participant decides to turn off the equipment.
 - f. Virtual supports may only be permitted in bedrooms and bathrooms when an evaluation shows that the technology increases independence and facilitates each participant’s right to privacy of person and possession.
 - g. Virtual Services in bedrooms and bathrooms can only be provided with an additional signed consent of the consumer/guardian, the person’s support team and the MCO.
 - h. Virtual delivery of service in bedrooms and bathrooms must be approved in the PCSP with a plan to fade the service as appropriate
 - i.

III. Documentation/Quality Assurance

- A. The physical location where virtual services are provided, and the activities involved are monitored through KDADS licensing and oversight by the MCO to ensure compliance with relevant regulations and standards

IV. Definitions

Person-Centered Service Plan - a written service plan developed jointly with an individual (and/or the individual’s authorized representative) that reflects the services and supports that are important for the individual to meet the needs identified through a needs assessment, what is important to the individual regarding preferences for the delivery of such services and supports and the providers of the services and supports. (42 CFR § 441.725(a) and (b)).

Self-Direction- participants or their representatives have decision-making authority over certain services and take direct responsibility to manage their services with the assistance of a system of available supports.

Participant- person determined to be eligible for Medicaid-funded home and community-based waiver services.

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Authority

Federal Authorities

42 CFR 442.301 (c)(4)(vi)(A) through (D)

42 CFR § 441.725(a) and (b)

State Authorities

State of Kansas Home & Community-Based Services 1915(c) | Medicaid Waiver Programs

KSA

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Related Information

PUBLIC COMMENT PERIOD: DD/MM/YY – DD/MM/YY

RELATED CONTENT:

Policy:

- Policy Name – location on the website

Manuals:

- Manual Name – Location online

ADDITIONAL LINKS:

Additional Links

Anything additional goes here.