



REVISED Guidance for Home Care Agencies, Home Health Care Agencies and Hospices During COVID-19 Pandemic

May 20, 2020

The Department of Health (Department) has received questions regarding the operation and management of home care, home health care, and hospice agencies in relation to the COVID-19 health emergency. This additional information is provided to help you understand and operationalize the guidance provided by the Governor and the Secretary of Health as well as the Centers for Medicare and Medicaid Services (CMS) and the Centers for Disease Control and Prevention (CDC). The Department provides the following guidance, which supercedes the information issued on March 21, 2020:

1. Life-Sustaining Business

Under the PA Health Care Facilities Act Chapter 8 Section 802.1 a home care agency/registry is identified as a 'health care facility' as the agency provides clinically related health care services. Home care agencies/registries are life-sustaining services under the Governor's and Secretary of Health's business closure orders issued on on March 19, 2020.

2. Access to Nursing Homes for Hospice Workers

Federal guidance issued on March 13, 2020 included hospice workers among those caregivers allowed access to nursing homes while restricting other visitation. Hospice workers must adhere to the [CDC guidelines for infection control for health care workers](#).

3. Personal Protective Equipment (PPE)

Refer to [HAN 492, Universal Masking of Healthcare Workers and Staff in Congregate Care Settings](#), for guidance on PPE, as well as the [Department's Fact Sheet](#).

4. Service Plan Changes, Timing, Utilization Due to Changes

The Pennsylvania Department of Human Services (DHS) has incorporated significant flexibility into the Community HealthChoices (CHC) managed care program and in the home and community-based OBRA waiver within fee-for-service. DHS issued guidance to advise the managed care organizations and OBRA fee-for-service providers of these new



flexibilities. The guidance can be found here: [CHC Waiver](#) and [OBRA Waiver](#).

Services may not be reduced in service plans, unless requested by the participant or their representative. Additionally, because not all services can be provided during the COVID-19 pandemic and certain services may need to be prioritized, additional flexibility was added to prior authorization requirements and service plan additions or changes.

Providers should work with their managed care organizations and the Office of Long-Term Living's Participant Services Review Unit to request this flexibility and have service plans and service configuration altered to support participant needs.

5. Missed Visit Reporting for Home Care Agencies When the Direct Care Worker (DCW) Is Ill or Is Turned Away from the Consumer's Home

The home care agency should evaluate capacity to meet participant's service needs in the event staffing is impacted by the COVID-19 pandemic. If sick, the DCW should not be working and the home care agency is responsible to find a replacement for the DCW. If the agency is unable to find a replacement they should notify the CHC managed care organization or OBRA waiver service coordinator and assist in implementing the participant's emergency back-up plan.

If a DCW is turned away from a consumer's home, the DCW should document that in the consumer's medical record and report the refusal of service to the CHC managed care organization or service coordinator. Per the Department of Human Services, managed care organizations have been given instructions on special reporting during this period for missed shifts. Please consult with the managed care organizations for specific instructions.

6. Ensuring Critical Needs Are Met During Periods of Staff Shortages

The Department expects that each agency's Emergency Preparedness Plan includes provisions related to staff shortages that may include contracts/agreements with other home care/home health care/hospices or staffing agencies. Agencies should review, assess and prioritize their patients/consumers based on the complexity and frequency of their care needs. Modifications of assignments based on care needs and frequency should be made from most complex to simpler personal care tasks. Notifications and explanations related to changes need to be made with patient/consumer/responsible party.

Additionally, agencies need to ensure that participant/consumer files include emergency back-up supports that are identified and are current. For those patients/consumers utilizing services in Community HealthChoices or the OBRA Waiver program, agencies must



collaborate with the designated managed care organization or Service Coordinator and ensure back-up supports are identified.

For participants enrolled in Community HealthChoices or the OBRA Waiver program, agencies should work with managed care organizations and Service Coordinators on service prioritization of participants and to support agency efforts to identify appropriate resource allocation.

7. Extension of Service Areas for Home Care Agencies

- An agency may extend its geographic service areas beyond adjoining, surrounding counties.
- An agency that extends its service delivery areas must ensure that it provides adequate supervision and monitoring of care to its consumers.

8. Interviewing of Applicants for Direct Care Workers for Home Care Agencies

Face-to-face interviews with applicants for employment are temporarily suspended. Agencies may conduct telephonic or virtual interviews with applicants.

9. Pre-employment Health Screening

- The requirement for an initial baseline 2 step Mantoux skin test for tuberculin skin testing is temporarily suspended.
- All applicants must complete an individual [risk assessment](#) and [symptom evaluation](#) prior to hire.
- Any new employee who does not provide evidence of a Mantoux skin test within the previous 12 months must, as a condition of employment, receive the tuberculin skin test as soon as possible following termination of the Governor's COVID-19 Disaster Declaration.

10. Supervisory Registered Nurse (RN) Visits in Home Health Care Agencies

RN onsite supervisory visits to the patient's residence at least every two weeks are temporarily suspended. Telephonic or virtual visits will be permitted to meet the intent of the regulation.



11. Use of Certified Registered Nurse Practitioners (CRNP) and Physician Assistants (PA) in Home Health Care Agencies

CRNPs and PAs may order services for home health care agencies based on their professional licensure under the applicable State Boards in the Bureau of Professional and Occupational Boards.

With the Governor's authorization as conferred in the Proclamation of Disaster Emergency issued on March 6, 2020, certain regulatory provisions have been waived or suspended that would have imposed an impediment to implementing this guidance. Those suspensions can be found on the Department of State's (DOS) [website](#) and will remain in place while the proclamation of disaster emergency remains in effect.

RESOURCES

CMS:

<https://www.cms.gov/files/document/qso-20-18-hha.pdf>

CDC:

<https://www.cdc.gov/infectioncontrol/guidelines/healthcare-personnel/index.html>

Department:

<https://www.health.pa.gov/topics/disease/Pages/Coronavirus.aspx>

DOS Waived and Suspended Licensing Regulations:

<https://www.dos.pa.gov/Pages/COVID-19-Waivers.aspx>