Veteran Directed Care (VDC) COVID-19 Listening Session Two: Frequently Asked Questions (FAQ)

The following FAQ addresses questions related to COVID-19 raised during the second VDC Provider COVID-19 Listening session. The VDC technical assistance (TA) team continues to monitor COVID-19 related questions from VDC providers as the situation evolves.

Telehealth Discussion with VDC Providers

VDC Provider	Question	Response
AAA of District 7, Inc., Ohio *Speaker: Vicky Abdella* *VDC Program Information:* • *VDC program began in 2012* • *Partnering VA Medical Center: Chillicothe VA Medical Center* • *Covers 9-10 counties* If you have any questions or would like to see the resources we developed, please email: vabdella@aaa7.org	**How have you planned for a process in place to implement telehealth to support Veterans through the enrollment process?**	We created a step-by-step document for staff to use and follow, which includes guidance on using telehealth, email, and standard mail. First, we confirmed with the U.S Department of Veterans Affairs (VA) and the payroll company to ensure the new methods would work. Then, we decided what platform would be best to use in terms of security and availability to staff and Veterans in our area. Staff practiced using the new methods before teaching Veterans and other staff. Our Information Technology (IT) Department reassured us that it's not as complicated as we think – and it's really not!
	What kinds of resources have you created to assist Veterans with using the technology? What kinds of resources have you provided staff who are completing assessments with the Veteran using telehealth?	We created telehealth resources for Veterans. While there are free YouTube videos on how to use Skype, we created written guides on how to set up and use Skype. We completed one written guide for iPhone users, but still need to develop one for Android users. We decided to go with both Skype and FaceTime since most individuals are already familiar with the them, and they are user friendly. Case managers are offering to do assessments during flexible hours for Veterans, in case the Veteran needs family assistance to use the technology. Our Fiscal Management Service (FMS) provider also developed cheat sheets for completing the employee and employer forms, which is especially useful right now.
	Have you encountered any challenges?	Not all Veterans want to use the technology. While Veterans at the Chillicothe VA Medical Center are already used to telehealth, others don't want to use it. It is completely voluntary. Another big challenge is around enrollment. Many locations that do background checks are closed, and the ones that are still open require appointments at certain times. Everything takes a bit longer and requires more planning, and we often need to do things in more than one session. Sometimes we run into technology issues,

VDC Provider	Question	Response
		but overall it is easy to use once everything is set up. We tried to use technologies approved through our state (via The Centers for Medicaid and Medicare Services (CMS) and Ohio Department of Medicaid guidelines). There is an ADvancing States document on the Administration for Community Living (ACL) website (acl.gov) containing a link to the National Council on Aging's "Tools for Reaching a Remote Audience," which provides various communication options, including pros/cons: https://www.ncoa.org/resources/tools-for-reaching-a-remote-audience-webinar-tips/
Bay Aging, VA *Speakers:* • *Kathy Vesley – President of Bay Aging* • *Jennifer Beck – Directs Community Living Programs and oversees Options Counselors* • *Melissa Blake – FMS Program Administrator* *VDC Program Information:* • *VDC program began in 2008, does both Options Counseling and FMS* • *Servicing VA statewide, and to Veterans in NC, SC, and MD (over 250 Veterans)*	**How have you planned for a process in place to implement telehealth to support Veterans through the enrollment process?**	We've used telehealth in the past for various check-ins, but really started utilizing it now for virtual enrollment. Our first step was to contact our VA Medical Center to make sure they were fully supportive of conducting virtual enrollment. Once we received their confirmation, we got HIPAA compliant business licenses for Zoom through our ongoing relationship with the telehealth consortium. Once we received the licenses, we scheduled 1:1 training with all Options Counselors through our IT department. We wanted them to have a high level of understanding and comfort using the new platform. We provided tablets to all Options Counselors. We also set up an account with FedEx to expedite paperwork to Veterans, including return labels to quickly receive completed paperwork.
	You've successfully enrolled six Veterans remotely, how did the process work in practice?	Upon receiving a new referral, we assign an Options Counselor who reaches out to the Veteran to discuss the VDC program, enrollment options, and the Veteran's technology capabilities. Of all the new referrals we received during this time, all Veterans elected to participate in remote enrollment using telehealth technology. Once we receive the Veteran's information and who they will be hiring, we send paperwork to the Veteran via FedEx. Once the Veteran receives the paperwork, they contact the Options Counselor to schedule time to complete the enrollment process. Options Counselors review every page of the paperwork to ensure the Veteran understands what they are signing. We definitely experienced a learning curve, but the process has been relatively seamless. Veterans expressed

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		gratitude that enrollment can still be completed through telehealth technology.
	Did you encounter any challenges? Do you have any best practices/lessons learned that you can share from your experience?	A few Veterans live in rural areas where they may not have access to Wi-Fi or own smart device; others are simply not tech-savvy. To address this. We requested approval to purchase technology using Veteran's Emergency and Planned Savings fund (as long as the Veteran is interested in doing so). VA has been very responsive in approving these requests. For Veterans receiving technology through their Emergency and Planned Savings fund, Options Counselors are providing training on how to use the new technology platforms. A best practice we discovered is completing telephonic client satisfaction surveys to identify areas for improvement. We want to make it as simplified and user friendly as possible for Veterans. Additionally, if you have the appropriate infrastructure in place, it is worth implementing telehealth technology.

Question and Answer

Topic	Question	Response
Families First Coronavirus Response Act (FFCRA)	**Can the Emergency Paid Sick Leave Act (EPSLA) benefit be paid retroactively for a Veteran's worker who was previously quarantined? Should we be concerned if a Veteran has chosen to provide this coverage AND the employee also receives state unemployment benefits?**	If an employee is using EPSLA benefits, they are employed by the Veteran. There will not be an opportunity to take advantage of state unemployment benefits in addition to EPSLA benefits. The FFCRA's paid leave provisions are effective on April 1, 2020, and apply to leave taken between April 1, 2020, and December 31, 2020. These benefits are **NOT** retroactive. Source: https://www.dol.gov/agencies/whd/pandemic/ffcra-questions.
Families First Coronavirus Response Act (FFCRA)	**Does coverage (payment) for the Emergency Paid Sick Leave Act come out of the Veteran's budget?**	No, if a Veteran chooses to pay for an employee benefit under FFCRA, it will not impact their VA VDC budget. The VDC Provider's FMS entity will pay the benefits and will be reimbursed through tax credits.
Families First Coronavirus Response Act (FFCRA	**If Veterans choose to use the benefits, will payment still be reimbursed by the VA?**	The VDC provider's FMS entity will pay the benefits and will be reimbursed through tax credits.

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Telehealth	What is the average turn-around time on sending and receiving signed papers with FedEx? [to Bay Aging]	**Bay Aging:** Using FedEx, paperwork is received by the Veteran within two days (using two-day delivery). Once the enrollment visit is completed, the paperwork is returned to the office within two days (using two-day delivery). It is completely up to the Veteran when they want to complete the enrollment by phone. The entire process can be completed within a week.
Telehealth	For those of you using Skype or Zoom or other platforms, how do you include a caregiver who may not be in the same location as the Veteran?	**AAA of District 7, Inc.:** We haven't used Skype, but have used Zoom. I think it is possible to include remote caregivers using Zoom. **Bay Aging:** Yes, it is possible to include remote caregivers using Zoom. We send out the Zoom invitation and any remote participant can join. WebEx has this feature as well. **Other promising practices:** • Dee Jennings, Salt Lake County Aging Services: We completed referral forms through email. We will be using WebEx as the application for virtual chats. • Patricia Richardson, Connecticut State Unit on Aging: It is helpful to guide people on using scanning features to send materials back through secure email.
Telehealth	Is FaceTime HIPAA compliant?	FaceTime is not HIPAA compliant.
Telehealth	Should we use telehealth for quarterly or semi-annual home assessments? Or would a conference call suffice?	VDC providers can use their discretion to conduct quarterly or semi-annual Veteran assessments. Telehealth technology or conference calls are both acceptable means of communication.

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Referrals	Can the local VA Medical Center "suspend" new intakes even though the CARES Act states Veterans can still enroll?	Per Public Law 116-136 (CARES Act), "During a public health emergency, the Secretary shall not suspend or dis-enroll a Veteran or caregiver of a Veteran from the Program unless— (1) requested to do so by the veteran or a representative of the Veteran; or (2) a mutual decision is made between the Veteran and a health care provider of the Veteran to suspend or dis-enroll the Veteran or caregiver from the Program." Any suspensions or dis-enrollments in VDC during this public health emergency will have to involve the Veteran or representative's approval. This does not speak to new enrollments. If a Veteran is having issues in VDC, VA will work with the Veteran to resolve the issues or help furnish alternative services to meet the Veteran's personal care needs. VA is encouraging VAMCs use VDC as an enhanced program to deliver in-home services during the COVID-19 pandemic. In particular, VA is doing everything possible to make sure Veterans are able to remain at home and receive care that would reduce the risk of hospital, emergency room, or nursing home use.
Billing and Invoicing	Is the Emergency and Planned Savings fund part of the Veteran's fund? How is this used before enrollment?	Yes, the emergency and planned savings fund is a key feature of the Veteran's spending plan. This allows the Veteran to save funds in order to purchase goods and/or use in situations where the Veteran may require emergency supports (i.e. short-term change in needs or to hire/use a worker temporarily to replace an unpaid caregiver that goes on vacation).

VDC providers document an amount of savings Veterans will have available over the course of their VA authorization that is included in their budget. This amount cannot exceed a value of $100 less than their monthly case-mix rate, which includes the Veteran's monthly spending amount and monthly administrative fee. |
| Billing and Invoicing | Is there a state program to help send UB-04s electronically if our state is not set up to do so already? | VDC providers can purchase available software packages to assist in completing and electronically submitting the UB-04, which generally cost $100-$200 per month. Several VDC providers have purchased software packages from Change Healthcare and Office Ally to submit their invoices electronically. Prior to purchasing software, VDC providers should confirm that the software is compatible to upload to Change Healthcare to assist in electronic billing. |