Emergency Management Protocols

Effective July 1, 2009

Informational Packet #012-09

PURPOSE: This Office of Developmental Programs (ODP) Informational Packet is intended to announce and distribute the two new Emergency Management Protocols and the accompanying Draft Unanticipated Emergency Funding Request and Approval Form and Draft Unanticipated Emergency Screening Tool.

AUDIENCE: Administrative Entities (AEs) and ODP Staff

Please reference the attached documents for detailed information related to:

- External ODP Emergency Management On-Call Protocol (Attachment #1)
- Unanticipated Emergency Process/Protocol (Attachment #2)
- Draft Unanticipated Emergency Screening Tool (Attachment #3)
- Draft Unanticipated Emergency Funding Request and Approval Form (Attachment #4)

The External ODP Emergency Management On-Call Protocol and the Unanticipated Emergency Process/Protocol are the processes to be followed in case of an unanticipated emergency.

The External ODP Emergency Management On-Call Protocol contains information for when unanticipated emergencies occur after hours, on weekends, or on holidays.

The Unanticipated Emergency Process/Protocol includes the steps to follow prior to contacting the Waiver Capacity Manager for assistance.

For additional guidance related to the new Emergency Management Protocols, please contact your Regional ODP Program Office.

ODP thanks you for your continued cooperation and efforts.
External ODP Emergency Management On-Call Protocol

Purpose:
In order to ensure that there is a Waiver Capacity Manager (WCM) available to the Administrative Entities (AEs) at all times, ODP has implemented an on-call system for the WCMs. One ODP WCM will be on-call at all times to ensure that there is someone available if an unanticipated emergency occurs. AEs should contact the appropriate Regional Waiver Capacity Manager (RWCM) to discuss questions, concerns or needs related to the management of Unanticipated Emergencies. Only the AE Waiver Capacity Point Person and back-up person should contact the RWCMs.

Procedures:
During business hours, the WCMs can be reached by office phone. After business hours, a WCM can be reached through a pager. The pager system should only be initiated if an AE needs to immediately address an unanticipated emergency and does not have capacity or non-waiver resources to do so. All other concerns or issues should be addressed with the appropriate RWCM through a phone call during normal business hours.

The phone numbers for the WCMs are:
- Bill Bruaw, Central Region – 717-705-8286
- Mary Citko, Southeast Region – 215-560-6294
- Marie Craven, Northeast Region – 570-963-3165
- Dan Gociano, Western Region – 412-565-5042

The pager number for all WCMs is: 1-866-825-0555

Please note that only one WCM will be on-call at any given time. The on-call WCM will not necessarily be the one from your region. If paging a WCM becomes necessary, the AE will use the pager number listed above, and whoever is on call will respond. **This on-call system is using an alphanumeric pager. You will not be able to leave a voice message. When instructed, please be prepared to enter the phone number at which you can be reached, including the area code. After entering the phone number, hit the pound (#) key to end the call.**

The pager system will be operational daily Monday through Friday from 4:00pm to 8:30am. The pager will also be operational from Friday at 4:00pm through Monday at 8:30am. On state holidays, the on-call system will be available during business hours.

The on-call system should only be utilized for Unanticipated Emergencies as defined by the following criteria:
An unanticipated emergency occurs when:

- An individual is at immediate risk to his/her health and welfare due to illness or death of a caretaker;
- An individual living independently experiences a sudden loss of their home (for example, due to fire or natural disaster); or
- An individual loses the care of a relative or caregiver, without advance warning or planning.

An unanticipated emergency must meet one of the criteria listed above and must create the imminent risk within the next 24 hours of institutionalization, substantial self-harm or substantial harm to others, if the individual does not immediately receive services. To be considered for support by ODP of an unanticipated emergency, the AE must have no other resources available.

It is anticipated that AEs will receive a call back from the WCM on-call within a ½ hour after calling the pager number. If the AE does not receive a response from the WCM on-call within a ½ hour, the AE would call the pager number (1-866-825-0555) for a second time.
Unanticipated Emergency Process/Protocol

Purpose: To provide a process that ensures and monitors that unanticipated emergencies meet one of the criteria listed below and ensures that the Administrative Entity (AE) reviews available resources and the individual’s waiver enrollment status before taking action. If capacity exists, ensure that the AE uses this capacity to meet the needs of the individual.

Criteria for Unanticipated Emergency:
1. An individual is at immediate risk to his/her health and welfare due to illness or death of a caretaker;
2. An individual living independently experiences a sudden loss of their home (for example, due to fire or natural disaster); or
3. An individual loses the care of a relative or caregiver, without advance warning or planning.

The emergency must create the imminent risk within the next 24 hours of institutionalization, substantial self-harm or substantial harm to others, if the individual does not immediately receive services. The AE must have no other resources available to address this situation.

Process:

- If an individual is currently enrolled in the Consolidated Waiver, AE should plan for the individuals’ need, make the necessary changes to the Individual Support Plan, and authorize additional services to meet assessed needs.
- If an individual is currently enrolled in the P/FDFS Waiver, AEs should authorize additional services to meet the assessed needs up to the P/FDS cap. If the individual’s needs cannot be met through the P/FDS cap and/or non-waiver resources, the AE should examine the current status of its Consolidated Waiver capacity to determine if capacity exists. If capacity exists, the AE should use this capacity to meet the needs of the individual. If capacity does not exist and the AE is in need of additional waiver capacity to address an unanticipated emergency, the AE should contact the Waiver Capacity Manager (WCM).
- The AE has determined that there are no natural or local resources to address the emergency and that the situation meets the definition of an unanticipated emergency.
- AE will contact the WCM and review the situation; the Waiver Capacity Manager will determine if the situation meets the definition of an unanticipated emergency.
- The AE will review information on the completed Unanticipated Emergency Screening Tool with the WCM.
- The WCM will ensure that the AE has no available resources or capacity and works with the AE to determine whether the individual’s needs are short or long-term.
- If the individual’s needs are determined by the WCM and AE to be short-term and a determination has been made that the individual is eligible or likely to be eligible for MR services, the WCM can approve up to 15 days of state-only funding to provide for the individual’s assessed needs. This funding is approved by ODP only if the AE does
not have ability to address the individual’s short-term needs within the AE’s current resources.

- The AE will identify those services that the individual will be utilizing during this timeframe and complete and submit Unanticipated Emergency Funding Request and Approval Form that identifies the procedure codes and units of services to be utilized for the services identified; the AE will submit this form to the WCM for approval.
- When Request for Unanticipated Funds form has been received at the regional office, the WCM will verify that the procedures codes and units identified are those that the WCM and AE agreed upon. At this point Verification for Unanticipated Emergency Funds will be sent to the AE.
- The AE needs to instruct the provider to utilize the ET Modifier for each procedure code identified on the Unanticipated Emergency Funding Request and Approval Form to ensure that the authorization is processed.
- The AE and the WCM will track the information related to unanticipated emergencies discussed and be in regular contact regarding the updates and eligibility determination.
- The AE needs to ensure that the PUNS and the ISP for the individual is addressed.
- If it is determined that the individual does not met the eligibility for MR Services under Bulletin 00-08-04 “Individual Eligibility for Medicaid Waiver Services.” The AE should stop planning for waiver services and look at other services and resources.
- If the individual’s needs extend beyond the 15 days of approved funding, the WCM would work with the AE to determine if an additional 15 days of state-only funding will be necessary.
- If the WCM has determine that ODP is able to increase the AE’s waiver capacity to address the emergency; the AE must immediately enter the individual into pending enrollment/QUEUE status in HCSIS.
- The WCM will increase an AE’s waiver capacity and assist the AE in identifying potential services in another geographical area if warranted.
Unanticipated Emergency Screening Tool

When additional capacity may be needed by an AE to address an unanticipated emergency, the following information will be discussed between the Waiver Capacity Manager and the AE point person for capacity management.

1. Identifying information of the individual experiencing an emergency:
   a. Name
   b. MCI#
   c. Age
   d. Current residential status/living situation

2. Identifying information of caller:
   a. Name
   b. AE
   c. Role within AE
   d. Contact information

3. What is the nature of the emergency? (Brief Summary)

4. Does the individual meet the unanticipated emergency criteria?
   An unanticipated emergency is:
   1. An individual is at immediate risk to his/her health and welfare due to illness or death of a caregiver;
   2. An individual living independently experiences a sudden loss of their home (for example, due to fire or natural disaster); or
   3. An individual loses the care of a relative or caregiver, without advance warning or planning.
   ___ Yes
   ___ No

5. Is this individual registered in HCSIS with the County for MR services
   ___ Yes (if yes indicate active or inactive)
   ___ No

6. Is this individual eligible for MR services?
   ___ Yes
   ___ No

7. Is this individual currently enrolled in the waiver? Which waiver?
   ___ Consolidated Waiver
   ___ PFDS/W
8. Is this individual involved with any other county or state agencies? (If unknown, AE is expected to verify this with CAO and other county agencies before additional capacity can be approved.)
   ______ Aging
   ______ CYF
   ______ Mental Health
   ______ Other

9. Would other agency’s services be appropriate to support the individual? (Y/N, if yes please check the appropriate agency)
   ______ Aging
   ______ CYF
   ______ Mental Health
   ______ Other

10. Are alternative residential settings available or more appropriate? (Y/N, if yes check appropriate setting
    ______ LTSR
    ______ Private ICF/MR,
    ______ Domiciliary Care,
    ______ Individual care home
    ______ CRR

11. What natural supports are available? { Brief Summary}

12. What supports does the individual need
    ______ In-home supports
    ______ Residential supports
    ______ Other
    Special Accommodations:
    ______ Sign Language
    ______ Wheelchair Accessibility
    ______ Others, 

13. Does the AE have resources available to support the individual?
    ______ Yes
    ______ No

14. Is the AE able to support the individual within its current waiver capacity?
    ______ Yes
    ______ No

15. Is this individual likely to be eligible for the waiver?
    ______ Yes
    ______ No
16. Is the need for support expected to be short-term (90 days or fewer) or long-term?
   
   ____ Short-term
   ____ Long-term

Explanation:

17. Has a potential providers been identified to address the individual's needs?

   ____ Yes, Provider Name ________________________________

   ____ No
Office of Developmental Programs
Unanticipated Emergency Funding Request and Approval Form

The ______________ County/AE has determined that the situation regarding ______________ meets one of the criteria listed below for an Unanticipated Emergency:

1. An individual is at immediate risk to his/her health and welfare due to illness or death of a caretaker;
2. An individual living independently experiences a sudden loss of their home (for example, due to fire or natural disaster); or
3. An individual loses the care of a relative or caregiver, without advance warning or planning.

In addition, the ______________ County/AE has determined that the individual is eligible or likely to be eligible for MR Services under Bulletin 00-08-04 “Individual Eligibility for Medicaid Waiver Services.”

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<tr>
<th>Individual’s Name</th>
<th>MCI #</th>
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Date of Request
The Administrative Entity Signature

ODP REGIONAL OFFICE DECISION: ☐ APPROVED ☐ DISAPPROVED

Authorization period

The services below have been approved for Unanticipated Emergency Funds for up to 15 days. Immediately upon receipt, the Supports Coordination Organization must complete or revise the Individual Support Plan to include these services. The Administrative Entity needs to instruct the provider(s) to utilize the ET Modifier for each procedure code identified below to ensure that the authorization is processed.

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(Name) ______________________________ (Title) ______________________________