

Veteran Directed Care (VDC): COVID-19 Related Frequently Asked Questions (FAQ)

The following FAQ addresses questions related to COVID-19 pertaining to VDC providers. The VDC technical assistance (TA) team is monitoring COVID-19 related questions as the situation continues to evolve.

Торіс	Question	Response
Travel	Can Veterans enrolled in VDC that are currently out of state continue to receive VDC where they are currently located?	There is an unofficial but standard traveling policy for Veterans taking their worker(s) with them. When a Veteran is on holiday or out of state for whatever reason, as long as contact is maintained between the ADNA and the Veteran as scheduled, the Veteran can continue to receive VDC services.
Telehealth	Can VDC providers use telehealth technologies like FaceTime, Zoom, Skype, WebEx, telephone calls, etc. to conduct assessments and monthly visits?	The Department of Health and Human Services (HHS) Office for Civil Rights (OCR) has ruled telehealth technology systems can be used in home care. VDC follows Federal/State self-directed rules or, by default, home care rules. An FAQ, issued by HHS OCR, regarding telehealth during the COVID-19 emergency can be found through the following link: https://www.hhs.gov/sites/default/files/telehealth-faqs- 508.pdf <i>Tip from Area Agency on Aging District 7, Inc.: We are</i> <i>planning to use FaceTime and Skype with those Veterans</i> <i>as able for quarterly home visits and assessments. We</i> <i>have already reviewed backup plans with every Veteran</i> <i>for paid and non-paid workers in case paid workforce</i> <i>becomes scarce.</i>



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Telehealth	For initial visits conducted through telehealth, are there suggestions for signing forms and other necessary paper work components?	It is suggested that VDC providers allow for verbal approval of key forms with the understanding signatures will be required later, particularly for enrollment forms. At this time, all federal employer enrollment tax forms with the exception of IRS Form 2678, Employer Appointment of Agent and if needed, IRS forms 8821 and 2848 are able to be signed electronically so that remote enrollments can occur. Efforts are being made to encourage IRS to allow for electronic signatures of IRS Form 2678.
		VDC providers, in partnership with their FMS providers, should use judgment with determining if they would allow Veterans to electronically sign IRS form 2678 with the understanding it can be physically signed later.
		Other strategies shared by VDC providers during the listening session are included below:
		Area Agency on Aging District 7, Inc.: We are doing mailing for FMS forms that need hard signatures and obtaining verbal consent on our program forms until a visit can be made. Because we are considered essential employees in Ohio (although we are working from home), our offices have limited staff and are open, so infrequent trips can be made to do mailings.
		Bexar Area Agency on Aging: We have discussed emailing forms to our Veterans and mailing it back/snapping pictures and sending it to secure work cells/emailing it back.



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Telehealth	What are the legal parameters about teleworking, especially because we are working with PHI? Can I print or scan documents to VA, FMS, or local agencies?	VDC providers should continue to follow HIPAA guidelines as it pertains to receiving, viewing, and sharing sensitive information. Compliance with HIPPA guidelines are still required to protect patient information. For more information on COVID-19 and health data privacy, the Network for Public Health Law released an FAQ that can be accessed through the following link: <u>https://www.networkforphl.org/resources/faqs-covid-19-</u> <u>and-health-data-privacy/</u> . Additionally, the Network for Public Health Law is hosting a webinar to answer questions regarding HIPAA compliance during the COVID- 19 pandemic, which can be accessed through the following link: <u>https://www.networkforphl.org/resources/covid-19-</u> <u>data-sharing-for-public-health-surveillance-investigation-</u> and intervortion (
Telehealth	How user friendly is the	and-intervention/ VA has invested considerable efforts with developing and
	VA store/app for seniors to navigate for telehealth?	 improving telehealth and mobile technology, particularly for older individuals and those not accustomed to using technology. Please work with your VAMC to understand opportunities to use VA telehealth capabilities for Veterans enrolled in VDC. In addition, please see the HHS Office for Civil Rights (OCR) guidance on telehealth: https://www.hhs.gov/about/news/2020/03/20/ocr-issues-guidance-on-telehealth-remote-communications-following-its-notification-of-enforcement-discretion.html
Telehealth	What do you do if the Veteran doesn't have access to telehealth technology?	We suspect a number of Veterans do not have access to telehealth technology. We suggest using available methods like telephone calls. This may be the best we can do during this time.
Home Visits	Has VA made a statement regarding Support Brokers not being allowed to visit face to face any longer given the increased risk to Veterans in VDC?	No, there has not been a statement issued by VA to prevent Support Brokers from visiting Veterans in person. In general, both at the Federal level and State level, if a telehealth visit can be arranged, VA encourages the use of alternate technologies to provide the service during this period.
Home Visits	MDHHS and AASA have approved assessments by Supports Coordinators to be conducted telephonically at this time; does VA also approve this?	At this time, VA encourages VDC programs to follow State practices for conducting assessments during the COVID- 19 pandemic. Generally speaking, VA will follow State and Federal requirements to include conducting normally in- person visits telephonically or using another form of telehealth.



Question	Response
Has anyone else experienced Veterans not wanting their providers to come to the home due to the virus, and how is that being addressed in areas that are hit harder than what San Antonio is currently experiencing?	VA has not received many reports of this in VDC or the HM/HHA program. If this occurs, it is important to keep in touch with the Veteran to see how they are doing, and how their personal care needs are being addressed if the worker is no longer coming into the home. VDC providers should be open to the possibility that a Veteran could change their mind after a week or so. We recommend alerting the VA VDC Coordinator to these instances as well. VA is keeping close track of this. We want to know about these situations. It is imperative that Veterans don't fall through the cracks.
Will there be support from other programs within the VA if a Veteran's worker is unable or uncomfortable coming into the home? For example, can community cares program be put in place to at least have a visiting nurse and aide come in during this time if the client is not getting assistance from employee?	If a Veteran's worker is unable or uncomfortable with coming into a Veteran's home, and an alternative worker (or traditional agency care) cannot be identified by the Veteran and VDC provider, the VDC provider should immediately contact the VAMC to discuss options to address gaps in care for the Veteran.
Does the "Families First	At this time, VA is closely following implementation of
Coronavirus Response Act-	H.R. 6201. VDC providers should continue to follow
	Federal and State rules as it applies to self-direction and
vuc program?	the direct care workforce. VA will issue further guidance to VDC programs in the near future.
Have VAMCs been	
Have VAMCs been directed to stop issuing referrals due to social distancing with no alternatives for the in- home assessment?	No, there has been no guidance from VA to stop issuing referrals. Note from Coos County ServiceLink: VA has stopped all referrals here in NH and VT. In fact, I am waiting on the VA VDC coordinator to get back to me if we can still push through an "emergency" VDC referral.
	Has anyone else experienced Veterans not wanting their providers to come to the home due to the virus, and how is that being addressed in areas that are hit harder than what San Antonio is currently experiencing? Will there be support from other programs within the VA if a Veteran's worker is unable or uncomfortable coming into the home? For example, can community cares program be put in place to at least have a visiting nurse and aide come in during this time if the client is not getting assistance from employee? Does the "Families First Coronavirus Response Act- H.R. 6201" apply to the VDC program?



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Paid Sick Leave	When a caregiver comes down with COVID-19, we are requesting sick time be paid (up to four days) through our FMS. This amount will come out of the Veteran's budget. Will the Federal Government increase the Veteran's budget to make up for that additional time or is this something that is handled individually by states?	At this time, VDC providers should follow national and State laws and regulations regarding the use of paid sick leave. VA is currently following interpretations of the "Families First Coronavirus Response Act- H.R. 6201"and the impact on the VDC Program, enrolled Veterans, and employees of Veterans.
Veteran Spending Plan	If a Veteran underutilizes their budget because of COVID-19, rehab, hospitalization, etc., do they lose any of their budget once they reach the "one-month case-mix, minus \$100" mark, even though they have an annual authorization amount?	Veterans have the ability to use their full budget over the course of the authorization period. If a Veteran underutilizes their budget as a result of COVID-19, the VDC provider may need to work with the Veteran to update the Veteran's VDC spending plan if changes are necessary as a result of the underspending. Unless there's a big shift, that money is good for the year. Additionally, VDC providers should work closely with Veterans during this time. In particular, under-utilization of VDC budgets may be a sign of a Veteran in distress or isolation that the VDC provider should identify and address using the Veteran's flexible budget.



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Shelter-in- Place Procedures & Permission to Work Letters	What procedure should workers follow if there is a mandated shelter-in-place or lockdown? What should Veterans do about a "permission to work" document and whose letterhead should the "permission to work" document be under?	VDC providers should work with the Veteran's employees to provide "permission to work" letters on official letterhead to verify that the worker is part of the "essential workforce" if needed. VA recommends that the ADNA would provide the official letterhead to the Veteran's workers. Below are Applied Self Direction templates that VDC providers can use to issue letters to workers, indicating that the individual is an essential worker that is traveling to provide health care to individuals in states that have lockdowns or "shelter-in-place." Essential Worker ID Essential Worker ID Essential Worker ID Templatedocx Comment from The Independence Center, Colorado Springs Center for Independent Living: Military installations are not accepting letters on ADNA letterhead; they have requested letter on VA letterhead. San Antonio VAMC: I passed along the template to our AAA here and they are taking it from there to disseminate to the Veteran's employees.
Temporarily	If a Veteran wants to	No, it does not. It will affect the Veteran's spending, but
Suspending VDC	temporarily suspend their attendant coming in	VA would not dis-enroll the Veteran unless at the end of the COVID-19 crises, the Veteran opts out of the VDC
Services	during COVID-19, does this potentially impact their enrollment in the	program and seeks alternative ways to have their needs met.
	VDC program?	Employees should follow federal and state practices as it pertains to filing for unemployment. We are not aware of
	Is there specific language that the Veteran needs to prepare to document this in such a way that the attendant can still get unemployment?	any action required on the employer as it pertains to filing for unemployment.



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State Policy	Are local VAMCs deferring to State-level executive orders and guidance? For example, in Michigan, current guidance is to limit services that are only life-sustaining and to maintain a one-to-one caregiver ratio to the extent possible.	VA's strategy has been trending towards providing more services because we believe that by doing so, we will keep people from ending up at the emergency room or in a nursing home queue. We want to avoid institutional care at all costs. We can see where certain services may be delayed (i.e., physical therapy), but hands-on physical care (i.e., ADL assistance) still needs to get done. VA is interested in seeing the statement from Michigan: <u>https://www.michigan.gov/documents/coronavirus/Act</u> ions for Caregivers of Older Adults 684619 7.pdf
Personal Protective	Are there PPE resources available from VAMCs for	No, there are no PPE resources available from VAMCs for VDC caregivers.
Equipment (PPE)	VDC caregivers?	If you are in need of PPE, you should report it to the FEMA regional offices and Governor's offices. As we get more information, we will share it through the VDC mailbox. Link to FEMA regional offices: <u>https://www.fema.gov/regional-contact-information</u> <i>Tip from Southeast Alaska Independent Living:</i> Here are some community resources to donate/access PPE: <u>https://getusppe.org/</u> <u>https://www.donateppe.org/</u> <u>https://www.mask-match.com/</u>
Personal	If PPE is available at a	If a Veteran has the ability to purchase a PPE, a
Protective	consumer source, can	justification and amendment of the Veteran's VDC
Equipment (PPE)	purchases be covered by VDC?	Spending Plan should be submitted to the VAMC for review.
Personal Protective Equipment (PPE)	How are people helping the Veterans that need caregivers who have ran out of hand sanitizer and face masks to go into the home to help with Activities of Daily Living (ADLs)? These are essential as the caregivers have to go out in the community to get supplies.	Efforts to identify best practices will be shared with the group. It is encouraged that VDC providers monitor the situation and consider innovative approaches such as the suggestion below to follow online recipes to make hand sanitizer. Regardless, VDC providers should continue to provide guidance to Veterans, their caregivers, and workers to practice safe hygiene practices including, but not limited to, social distancing (to the greatest extent possible), monitoring for flu-like symptoms, and hand washing.



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Personal Protective Equipment (PPE)	In NH, we are currently working remotely from home as well. I have been hearing from a lot of Veteran's that they cannot find masks, gloves, or hand sanitizer anywhere and looking for guidance. Any ideas out there?	VA has not put anything out about this, but will confirm with colleagues and associations. <i>Tip from Egyptian Area Agency on Aging: It's not ideal,</i> <i>but it may help some. I recently talked with a Veteran</i> <i>spouse and she stated that she was working on sewing</i> <i>masks and perhaps looking into having friends or family</i> <i>assist with making "hand sanitizer" using the recipe is</i> <i>online. Again, not ideal but perhaps will help.</i>
Personal Protective Equipment (PPE)	We are on lockdown in Puerto Rico. We are working from our homes. We are calling the Veterans to know about them and if they are having troubles with their caregivers' attendance. We did not give them an ID. We are guiding the employers to provide them with a document, maintain their hygiene, and provide with protective materials such as gloves, etc. Are these measurements considered appropriate?	Tip from Area Agency on Aging District 7, Inc.: We are also providing education for Veterans and workers regarding keeping their home safe and considerations to make when allowing workers in the home, like the questions the VA is currently using, and taking temperatures. PPE is a big issue as it is just not widely available, but taking measures before the worker enters the home is the best we can do right now.
Billing and Invoicing	Will the VA extend filing times for payments due to COVID-19 and its limitations on personnel	Veteran Care Agreements (VA Form 10-10171) require community providers to submit invoices within 180 days. If VDC providers are concerned with their ability to meet this timeframe requirement, please email veterandirected@acl.hhs.gov.
Billing and Invoicing	Can the Emergency and Planned Savings fund timeline be extended due to recent circumstances?	VA will continue to allow Veterans to spend up to their total authorized budget for the period of the authorization. Any budget not spent during the authorization period will not carry over to the next. VDC providers should communicate with VAMCs for any instances when it is known Veteran spending deviates from the approved VDC spending plan. This could include under-spending as well as additional care needs that cannot be met within the existing budget.



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Billing and Invoicing	I've been having trouble with the new VA national office getting claims approved because of no authorizations on file when there are clearly authorizations on file. I've been on hold with the national office probably two hours every other day and no one can help. I will be continuing my efforts to get paid, but will this affect the hours of operation for the national call center that handles payment inquiries?	VA's Office of Geriatrics and Extended Care has been working to improve the payment process with VA's payment operations management over the past few months, and we hope that the new payment system, eCAMS, improves this process.
Billing and Invoicing	Will there be delays in VA's payments due to the emergency? Do you see a decrease or lapse for Case workers to turn in their hours to get a paycheck due to the Coronavirus?	VA's payments will not be slower due to Coronavirus. As long as bills are submitted properly, COVID-19 should not affect VA's payment of claims for community care services.