



IRIS COVID-19 Frequently Asked Questions

Note: Any exceptions to IRIS policy and practice will only be allowed during the Wisconsin COVID-19 Public Health Emergency. For more information regarding COVID-19, use the following link:

<https://www.dhs.wisconsin.gov/disease/coronavirus.htm>.

Number	Question/Topic	Answer
General		
1	**UPDATED** Notification of DHS regarding infected Participants and/or Contractor Staff	Contractors should notify DHS (Kathryn.Kelnhofer@dhs.wisconsin.gov) by close of business each Friday of any instances of participants infected with the coronavirus (per medical testing). Contractors are no longer expected to complete and upload a critical incident report (CIR) in SharePoint solely for positive test results.
2	**UPDATED** Face-to-Face Contacts	Please refer to the COVID-19 IRIS Consultant Agency guidance document.
3	**UPDATED** Signature Requirements for Program Documents	Please refer to the COVID-19 IRIS Consultant Agency guidance document.
Eligibility & Enrollment		
4	Medicaid Certifications/Renewals	With the extension of the public health emergency, DHS is developing a new plan for Medicaid reviews. DHS will send a communication to providers when a plan is formalized. In addition, please watch the following site for more information: https://www.dhs.wisconsin.gov/dms/policycalls/covid-19.htm
37	Patient Liability and Cost Share	Refer to the GovD message issued on 12/28/20 for information on Patient Liability and Cost Share Change .
5	IRIS Enrollment: Referrals and Transfers	IRIS enrollments should have no delays and agencies should follow contract requirements and timelines.
29	**UPDATED** IRIS Enrollment: Involuntary Disenrollments	Effective 11/16/2020, ICAs shall proceed with disenrollment of participants that have resided in an ineligible living setting (i.e., nursing home, IMD, etc.) for more than 90 days or in jail/prison for 30 days or more. MA eligibility should be maintained. DHS has directed ICAs to continue holding all other involuntary (program-requested) disenrollments after 3/1/20. As of the date of this update, the public health emergency has been extended until 4/16/22. HHS will provide states with 60 days' notice prior to termination. All voluntary (participant-requested) disenrollments

Number	Question/Topic	Answer
		should continue according to current process. This includes moves out of state.
Long-Term Care Functional Screen (LTCFS)		
6	LTCFS	Please refer to the COVID-19 IRIS Consultant Agency guidance document .
Individualized Support & Service Plan (ISSP)		
33	Service Authorizations	Follow contract requirements.
Services		
11	Telehealth	For further details, please refer to the Temporary Remote Waiver Services Guidance .
38	Remote Waiver Services	Follow information outlined in the Temporary Remote Waiver Services Guidance .
13	Accessibility Assessments	Follow current accessibility assessment policy. DHS acknowledges that delays for assessments may be encountered at this time.
14	Unused Transportation Pass Purchases	Follow current transportation policy.
34	Supportive Home Care (SHC) Services Provided in a Hospital Setting	<p>As authorized by the IRIS 1915(c) Waiver Appendix K, supportive home care services that are necessary for communication and intensive personal care or supervision, including behavioral supports, may be provided while a participant is temporarily in a hospital or in an institutional setting. Supportive home care services are only allowable when otherwise not provided by those settings.</p> <p>Requests for supportive home care services must be submitted to and approved by DHS (send to DHSIRISQuality@dhs.wisconsin.gov).</p> <p>The supportive home care service:</p> <ul style="list-style-type: none"> • Requires a statement of acknowledgement from the hospital, indicating the necessity of additional support staff. • Must fit within the participant’s budget and meet a need in the Individual Support and Service Plan. • Should be directly tied to a clear and identifiable need in the participant’s functional screen. <p>When a participant utilizes SHC services through this flexibility, IRIS consultants should not suspend the participant’s enrollment in WISITS. Instead, IRIS Consultants must identify that the participant is temporarily in a health care facility or institution by updating the participant’s living situation in WISITS. This includes documenting this change in a COVID-19 case note. Additionally, IRIS Consultants must inform the participant that no other services can be provided or paid for during this time.</p>

Number	Question/Topic	Answer
Service Providers		
15	Annual Reviews of Provider Licensure & Certification Standards	The expectation is this process continues as required in the contract.
16	1-2 Bed Adult Family Home Certifications	Return to normal practice.
17	**UPDATED** Participant-Hired Worker (PHW) Four-Year Caregiver & Criminal History Background Requirement	This flexibility is no longer in place. Background checks must occur according to program policy. If a PHW's background check expires, they must be terminated as a worker and they cannot be paid for any services rendered after the expiration date. The PHW must complete and pass the background check in order to be re-hired and provide services to the participant.
18	**UPDATED** Participant-Hired Worker (PHW) Overtime Payments and Time-Limited Budget Amendments	Overtime payments may only be made to a PHW if they have a current and valid overtime authorization. Overtime should be discussed with the consultant and efforts should be made to limit or avoid overtime hours. Increases in unit cost must go through the budget amendment process. There are no exceptions. Approved time-limited budget amendments must adhere to current budget amendment work instructions and cannot be extended using the Budget Amendment Annual Verification (BAAV) process. Overtime may not be expensed for Self-Directed Personal Care (SDPC).
30	**UPDATED** Participant-Hired Worker (PHW) Timesheets	FEAs may elect to receive timesheets electronically, by fax, or by mail. If a participant is unable to sign a PHW timesheet due to a hospitalization, FEAs may accept unsigned timesheets at the request of the participant. All signed documents must follow via mail. FEAs are also expected to document and track all timesheets accepted outside of the standard processes.
31	Hazard Pay for Supportive Home Care Participant-Hired Workers (PHW)	Effective August 5, 2020, an IRIS participant that currently employs and utilizes PHWs to provide supportive home care (SHC) services and tests positive for COVID-19 during the period of employment of those PHWs is eligible to pay those PHWs at a higher hourly rate (hazard pay) than the current hourly rate. The hazard pay rate cannot exceed \$20 per hour. The hazard pay rate may only be paid for the duration that the participant is required to quarantine as directed by a medical professional. If the

Number	Question/Topic	Answer
		<p>quarantine is required beyond 30 days, requests must be submitted to and approved by DHS (send to DHSIRISQuality@dhs.wisconsin.gov).</p> <p>ICs must upload documentation to support COVID positive diagnosis into the WISITS participant document console and note it in the COVID case notes prior to adjusting the pay rate. When uploaded to WISITS, ICs should adjust the service authorization.</p>
35	Prevocational Reporting	DHS temporarily waived the requirement for participants who have not returned to programming. The Prevocational Services Six-Month Progress Report should be completed for participants who have returned to programming. The beginning of the 6-month report starts the date a participant returns.
Appeals, Grievances, and Notices of Adverse Actions		
20	Appeals and Grievances	Continue current practice.
21	Notice of Action (NOA) Requirements	Follow contract requirements.
22	Notice of Action (NOA)	Follow contract requirements.
Administration		
24	**UPDATED** Critical Incident Reporting & High Profile Incidents	<p>DHS expects no changes in the high profile incidents reporting process. This affects participant health and safety and should be a priority. Additionally, the critical incident reporting will remain the same.</p> <p>COVID-19 Related Critical Incident Reporting: Incidents related to COVID-19 should continue to be reported using the established reporting guidelines. Reportable incidents directly related to COVID-19 include:</p> <ul style="list-style-type: none"> • Any deaths that occur • Any hospitalizations <p>ICAs no longer need to complete critical incident reports for participants who are advised by their doctor to self-quarantine or those who test positive. Participants that test positive must still be reported on the weekly spreadsheet of COVID-incidents.</p>
25	Restrictive Measures	Follow contract requirements.
Other		
27	Participant Telephone Service Options	The Lifeline program offers discounts on phone service, including no-cost cell phone plans. PSC administers the program in Wisconsin. Information about Lifeline is available at: https://psc.wi.gov/Pages/Programs/LifeLineLinkup.aspx .

Number	Question/Topic	Answer
40	Where can I find resources for reduced cost internet?	<p>The Wisconsin Public Service Commission (PSC) maintains a list of internet resources, including information about the Emergency Broadband Benefit Program.</p> <p>This information may be found on the PSC website: https://psc.wi.gov/Pages/Programs/BroadbandEmergencyInternetResources.aspx</p>
39	**UPDATED** Information and guidance regarding the COVID-19 vaccine	<p>IRIS contractors can find information at the DHS COVID-19: Vaccine webpage. This webpage includes COVID-19 vaccination data and information on vaccine eligibility.</p> <p>IRIS contractors should also review available information about the COVID-19 vaccine from their local and tribal health departments.</p>

Adjustment Content Removed in Full:

- Item #7 - Required Documentation if Unable to Complete LTCFS
- Item #8 – LTCFS Screener Certification
- Item #9 – ISSP Extensions
- Item #10 – Backdating Service Authorizations
- Item #12 – Day Service
- Item #19 – 40-Hour Health and Safety Exception Request
- Item #23 – Notices of Action for Temporarily Unavailable Services
- Item #26 – Letters Authorizing Travel During Emergency
- Item #28 – Boarding Expense for Service Animals
- Item #32 – Provider Relief Fund
- Item #36 – Retainer Payments and Hazard Pay for Supportive Home Care Participant-Hired Workers

Additional resources for ICAs:

Category	Phone #, Email, or Website
FAQs from the general public	<p>Call 2-1-1; text COVID 19 to 211-211; www.211Wisconsin.org and/or https://www.dhs.wisconsin.gov/covid-19/index.htm</p>
To report non-compliant social distancing, contact local police.	Call local police department or 2-1-1
Communicable disease questions (e.g., clinical, testing, case follow-up and contact tracing, etc.)	DHSDPHBCD@dhs.wisconsin.gov
Workplace safety concerns, essential business questions, PPE procurement questions	DHSPHPQuestions@dhs.wisconsin.gov

Category	Phone #, Email, or Website
General questions/requests from local and tribal HDs	DHSLTHDResponse@dhs.wisconsin.gov
Questions from or about nursing homes and assisted living facilities not related to an outbreak investigation or BCD guidance	DHSDQAOUTBRK@dhs.wisconsin.gov
Medicaid questions related to the outbreak	DHSDMSCOVID19@dhs.wisconsin.gov
Resource offers (PPE, equipment, etc.) from vendors	DMAOPS3@wisconsin.gov