



Date: July 30, 2020

To: Home and Community-based Services Program Providers Local
Intellectual Developmental Disability Authorities Texas Home Living
Program Providers

Subject: Information Letter No. 20-11
Extensions of Eligibility and Individual Plan of Care Revisions
For Individuals in HCS and TxHmL Due to COVID-19
(REVISED July 30, 2020)

This information letter (IL) revises IL 20-11, Extensions of Eligibility and Individual Plan of Care Revisions for Individuals in HCS and TxHmL Due to COVID-19, previously issued on June 30, 2020, to extend the temporary guidance in this information letter, including any suspensions from procedures currently required by rules, regulations, or policies, until HHSC notifies providers otherwise.

To ensure individuals do not experience a gap in services due to the temporary suspension of face-to-face service coordination visits for COVID-19, the Texas Health and Human Services Commission will continue to extend Intellectual Disability/Related Condition (ID/RC) assessments and individual plans of care (IPC) for individuals who are enrolled in the Home and Community-based Services Program (HCS) or the Texas Home Living (TxHmL) Program.

In addition, for an IPC being revised during the time this temporary guidance is in place, HHSC is not requiring a service coordinator or program provider to conduct a face-to-face visit to obtain signatures on the IPC before the revision is effective.

Extensions of ID/RC Assessments and IPCs

If an individual's ID/RC assessment or IPC expires during the time this temporary guidance is in place, HHSC will continue to automatically renew the ID/RC assessment or IPC for one year from the expiration date in the Client Assignment and Registration data system (CARE).

Service coordinators and program providers must outreach to all members with an extended IPC as soon as possible and ensure the services are meeting the individual's needs. The IPC should be updated accordingly.

REVISED July 30, 2020

Page 2

The LIDDA service coordinator and the program provider must ensure a service planning team meeting occurs and revisions to the person directed plan and IPC are made as soon as possible. The program provider or LIDDA service coordinator, as appropriate depending on the program and service delivery type, must enter any IPC revisions into CARE.

IPCs must be within established program cost limits and service limits to be renewed.

IPC Revisions

For an IPC that is revised during March, April, May, June, July, or August 2020, HHSC is not requiring a service coordinator or program provider to complete a face-to-face visit or obtain signatures on the revised IPC. Service coordinators and program providers may contact individuals by phone to assess a change in status that requires a service plan revision.

The program provider or LIDDA service coordinator, as appropriate depending on the program and service delivery type, must enter additional hours or new service into CARE and document justification for the revision. The program provider or LIDDA service coordinator must obtain signatures on a revised IPC within 90 days after the date of the revision. An IPC revised in accordance with this process is subject to utilization review by HHSC to determine if appropriate justification was documented.

If you have any questions about this information letter regarding an ID/RC assessment, please call the IDD Program Enrollment Support message line at (512) 438-2484.

If you have any questions about this information letter regarding an IPC extension or revision, please call the IDD Utilization Review message line at (512) 438-5055.

Sincerely,

[signature on file]

Emily Zalkovsky
Deputy Associate Commissioner Policy and Program
Medicaid and CHIP Services