Date: September 23, 2020

To: Local Management Entities-Managed Care Organizations (LME-MCOs)

From: Renee Rader Assistant Director for Policy and Programs, DMH/DD/SAS
Deb Goda, Behavioral Health Unit Manager, NC Medicaid

Subject: Session Law 2020-80 Coronavirus Relief Funding for Group Homes

The purpose of this communication is to inform stakeholders of processes related to Session Law 2020-80 group home funding. Session Law 2020-80, Section 3.3 (67) states the following:

$5,000,000 to the Department of Health and Human Services, Division of Mental Health, Developmental Disabilities, and Substance Abuse Services, to be allocated to group homes for individuals with intellectual or developmental disabilities, or both, to support the implementation of recommended Centers for Disease Control and Prevention guidance for preventive measures to address the introduction and spread of COVID-19 among residents and staff of these facilities. As used in this subdivision, "group home" means any facility that (i) is licensed under Chapter 122C of the General Statutes,(ii) meets one of the definitions of a supervised living facility under 10A NCAC 27G .5601(c)(1) through 10A NCAC 27G .5601(c)(3), and 10A NCAC 27G .5601(c)(6), and (iii) serves minors or adults whose primary diagnosis is mental illness or a developmental disability but may also have other diagnoses.

Group homes fall under 10A NCAC 27G .5601, which states “[s]upervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence.”

Each group home is eligible to receive a payment of $791.98 per bed the home is licensed. There
must be at least one active consumer residing in the home to receive this funding. For example, if the home is licensed to serve 3 individuals (i.e. 3 beds), regardless of the current number of individuals currently served, the group home would receive $2,375.94 as long as at least one individual is actively served.

Facilities with more than twelve (>12 beds) that are licensed under Chapter 122C of the General Statute and do not operate as a private residence/home environment are eligible to receive $250 in funding per facility.

Funding shall be utilized to support the implementation of recommended CDC guidance for preventative measures to address the introduction and spread of COVID-19 among residents and staff of these facilities. Examples include, but are not limited to:

- Purchase of Personal Protective Equipment (PPE), hand sanitizer and/or approved Environmental Protection Agency (EPA) registered disinfectants related to increased group home demands related to COVID-19
- Expenses related to increased or emergency staffing
- Purchase of thermometers
- Expenses related to higher costs of essential travel for the resident (i.e. going to and from work, grocery shopping, accessing public transportation, in-person medical/dental/behavioral health appointments)
- Preparation related to visitation for family members, close relatives or friends
- Purchase of equipment to support digital platforms to engage with family and friends in the community
- Purchase of equipment or supplies needed to coincide with the facility’s policy (or Infection Control Plan, where applicable) on visitation, communal dining, and group/outside activities
- Expenses related to COVID-19 related training for provider agency staff

The following requirements are also applicable in order to receive this funding:

- The provider agency must have an active mental health licensure (applicable licensures defined above),
- The provider agency plans to provide services throughout the remainder of the state fiscal year, and
- Allowable use of this funding is limited to expenses for the preventative measures outlined above during the time period of July 1, 2020, to Dec. 30, 2020.

Sites Not Eligible for this funding:

- Intermediate Care Facilities (ICFs)
- Unlicensed AFL (Alternative Family Living) homes
- Providers with a “Summary Suspension”
Licensed facilities that are not currently serving individuals in the group home.

Group Home providers contracted with an LME-MCO should contact their respective LME-MCO regarding their processes. Provider agencies should initiate contact with the LME-MCO in the catchment area where the group home is located. If the provider is not contracted with that specific LME-MCO, providers should contact the LME-MCO with which the provider site contracts for further direction.

Group homes that do not contract with an LME-MCO will have payments processed through DMH/DD/SAS and should adhere to the following process:

- Submit a W-9 (Attachment 1) and Provider Attestation/Invoice (Attachment 2) to COVIDghFunding@dhhs.nc.gov.
  - If a W-9 is not on file, the Provider Attestation/Invoice is unable to be processed. It could take up to 30 days to process the W-9 prior to being able to process the Provider Attestation/Invoice; therefore, the entire process could take up to 60 days.

If you have questions, contact LaToya Chancey at 984-236-5044 or LaToya.Chancey@dhhs.nc.gov.

Previous bulletins can be accessed at: http://www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins

Attachments: State of NC Substitute W-9 Form - Request for Taxpayer Identification Number and Certification (Attachment 1)

Provider Attestation/Invoice (Attachment 2)

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