**CDS Part B/619 Contracted Provider Q & A: 4/27/20**

**Are there ideas, strategies and resources available to support programming for children with significant cognitive and developmental impairments through telehealth?**

There are numerous resources available online which address programming for children with disabilities. MDOE’s Office of Special Services has gathered many valuable resources for administrators, Covid-19 website, <https://www.maine.gov/doe/learning/specialed/covid19> , has very helpful information. Specific to young children with disabilities, the IDEA Early Childhood Technical Assistance Center (ectacenter.org) also has some great resources.

**Is there a sense of what ESY might look like?**

At this point, given the fluidity of the situation, it’s unclear what ESY and other summer services might look like.

**What efforts are underway to think through and support children and their families with their transition to Kindergarten? How can we be creative with support and funding to address what these children will need, given the lack of services these children are receiving and their readiness?**

CDS and SAUs will need to work collaboratively to support transition to kindergarten. We hope that there will be summer services offered, but in the event that it can’t, SAUs will be planning on supporting ALL students as they enter school in fall of 2020.

**Could you please clarify the process for providers to be reimbursed for prep time for children with MaineCare and Private Insurance.**

Service logs must be entered into CINC regardless of identified pay source and include the amount of associated prep time and sufficient detail. The provider must email Bettie Fuller at the CDS State Office w/ the child’s CINC ID and service log numbers. Explanation of benefits and remittance are not necessary for reimbursement of time spent in preparation.

**What technical assistance is CDS providing to preschools who are less familiar with telehealth?**

CDS is not providing direct technical assistance to preschools. A significant amount of resources are available on the MDOE website and the websites of national technical assistance centers, such as the IDEA Early Childhood Technical Assistance Center.

**Can you please clarify that the 5% increase in rates applies to all services billed (CDS, MaineCare and Private Insurance) in the two weeks mentioned.**

**AND**

**It was mentioned that this 5% would apply to two weeks only and would only be available while those funds lasted.  Presumably there would be funds available given the limited amount of CDS hours billed and seed needing to be paid. Could you please share why the 5% could not be extended beyond the two weeks.**

CDS understands that questions remain regarding the additional 5% reimbursement. Those who still have questions can contact Roy Fowler at roy.fowler@maine.gov .

**It is taking providers double the amount of time to bill for a fraction of the hours they were previously billing for. Providers still have all overhead costs and are at risk of closing. Preschools will struggle to retain staff after this pandemic. Could you please share what advocacy efforts are currently underway by CDS to support special purpose preschools to remain viable now and long term.**

CDS is having ongoing discussions with MDOE and MaineCare about possible additional financial support to providers. It’s important to understand that CDS is continuing to pay all of its employees throughout the current situation, has seen a significant reduction in its third-party revenue, is paying for services that would have previously been billed to third parties, and is paying additional funds to cover preparation time associated with tele-education. In addition, CDS’ obligation to provide services between the end of the academic year and ESY is not yet determined.

**Is there any funding coming in to the State for Early Intervention services, relief and recovery, and how will that get to providers? How can providers help you with that advocacy?**

There is advocacy from both CDS and MDOE. If funding becomes available, a method for distribution would need to be determined. Providers can advocate to their elected officials. Given that most providers are enrolled MC providers, advocating w/ MC may also be beneficial.

**Could you please check your email distribution list and confirm that the list is as exhaustive as possible. Many providers are not getting the list or the staff that are receiving them are not the best persons to get them. Could everyone on this call be added to your email list?**

The email distribution list is based on the contacts identified in the CDS contract. Please contact CDS Contracts to have your name added to the list.

cdscontracts.doe@maine.gov .

**What will be the expectation around June 1 progress notes?**

Progress notes for students who have been receiving services should include the progress demonstrated through remote services. The progress of those students not currently receiving services should be based on the data prior to March 18th.

**What plans are CDS/DOE making to provide direct service-providers (therapists and teachers) with PPE (personal protective equipment) once in-person visits resume at preschools? In particular, who will decide what is required to protect therapists/teachers and the children they are seeing in the preschool setting? How will we get this equipment? Who will pay for the necessary PPE so we can meet the frequency of services provided in the preschool setting indicated in the IEP?**

As this point, the State has requested PPE for State and government employees. Funding for the provision of PPE beyond that will be determined as the resumption of in-person services nears.

Providers are encouraged to pursue clear face masks to ensure access for Deaf and Hard of Hearing individuals.

**Is there a particular starting date for the reimbursement of prep time for MaineCare pay students through CINC or does this go back to the start of telethealth services if those haven't yet been submitted?**

Generally, it would be based on the date of the implementation of tele-education services. Requests for further clarification should be sent to Roy Fowler.

**Are there any links or funding for or available information for parents who want to do eLearning but don't have a tablet/computer/smart phone?**

MDOE is currently exploring what options are available. CDS and MDOE will ensure that children under the age of 5 are included in the considerations.

Hot spots and other devices were considered in a survey to the regional site. Please give your regional site the information of technology needs.

**Has DOE considered funding zoom pro for community providers or a discount for special education of preschool children similar to what the schools have? We have purchased a teletherapy platform but not all families have been able to access it. Zoom seems to have broader bandwidth. Free version is limited to 40 min and not HIPAA compliant. Zoom pro is cost prohibited ($200 per user/per month).**

Given that CDS has not yet processed invoices for the first two weeks of the remote provision of supports and services, it has yet to determine the impact of this unprecedented situation on its fiscal status. Once that is determined, it and MDOE will have a better sense of whether or not additional fiscal support to contracted providers is possible.

**Is there any way that the CDS sites could put providers on their Zoom platform?**

CDS has purchased additional Zoom licenses which are currently being used to capacity. As indicated above, a clear understanding of CDS’ fiscal situation moving forward will determine if additional support to providers is possible.

**The CDS guidance stated we can bill for mileage, but can we bill for the time it takes us to deliver?**

Please include the travel time associated with delivering materials in the service log with sufficient detail. Approval of reimbursement for travel time will be determined on a case by case basis. As with preparation time, the amount of reimbursement should be adjusted when invoicing the service log.

**Can CDS and MDOE provide guidance on the supervision of ed techs?**

Ed techs can work independently, so it isn’t necessary that the supervising teacher be actively involved in the actual tele-education session. Providers should be aware of requirements for the supervision of ed techs included in MUSER and ensure that adequate supervision be provided based on the level of ed tech certification and the skill level of individual personnel.

**Can CDS/MDOE clarify if any ed tech can deliver SDI and if a BHP is necessary for teletherapy?**

Currently, MDOE has expanded the scope of allowable duties performed by ed techs to ensure that children and families remain connected. As mentioned above, the level of supervision should be determined by the individual’s level of ed tech certification and the skill level of individual ed techs.

Providers should ensure that appropriately credentialled staff are used when billing MaineCare.

**Several providers shared innovative ways in which they were meeting the needs of children and families:**

**UCP: We're doing an abbreviated school day schedule with circle time and curriculum projects. Some sessions are longer than others, for sure.**

**Takes lots of planning but can be done.**

**Promise Head Start: We're doing a combination of recorded videos for children, coaching videos for parents, live Zoom classes for parent and child to attend together and sending home materials (visual timers, sensory materials, visual supports) as needed based on the family's needs.**

**MECDHH: We are doing daily circle time, that’s going great, with follow up 1:1 sessions with families and also using Flip Grip which has been fun as it encourages family engagement and a great way to assess skills.**

**Shooting Stars: We’re doing classroom Zoom, parent coaching, individual and small group sessions. Most children have SDI contact 5 times a week, but we are also finding that children are getting easily overwhelmed with SDI, OT, SLP and PT going on all week.**

**SMCC: We are finding one of the limiting factors with the lower cognitive kiddos is that they are so burnt out from SDI and Speech and OT etc that they can’t focus as well. Before SDI was up and running and we were the only teletherapy the kids had each week, they were better able to focus. But now that SDI and other RS providers are up and running, we’re finding the kids are struggling to focus. Co-treat might be a consideration. Parent coaching might may be helpful to support these children.**

Parent-Coaching is an excellent and effective way to minimize the burden on parents and to accommodate situations in which the child’s ability to engage in teletherapy is limited. It’s used almost exclusively in CDS’ Part C program and with great success.

Another beneficial approach would be determining how IEP goals can be addressed through embedding intervention strategies into daily routines and activities (i.e. meal time, bath time). By integrating strategies into daily life, the additional burden on parents to do ‘homework’ with their children is minimized. The matrix which CDS uses in Part C may be beneficial. A copy of the matrix can be found on the CDS website.