

LTC Ombudsman Technical Assistance for Hurricane Harvey

The following information provides guidance to ombudsman as they advocate for those affected by Hurricane Harvey. Not all of the information is specific to nursing home or assisted living facility residents, but may be helpful as ombudsmen field questions in the community. The Office of the State Long-term Care Ombudsman (Office) is available to assist you as needed.

State and Federal Benefits

1. How can people affected by Harvey get short-term nursing home care if they wish to?

CMS has waived the 3-day hospital stay for entering a SNF and extended the Medicare SNF benefits (typically up to 100 days) for some whose benefits recently expired. Interested residents can go directly to a SNF for admission.

2. Can people affected by Hurricane Harvey get expedited nursing home Medicaid or waived Medicaid asset or income limits?

Nursing home eligibility requirements are not changed by the hurricane. People who were displaced and interested in moving to a nursing home on Medicaid will need to follow normal application procedures. Ombudsmen can refer the person to a AAA Benefits Counselor **1-800-252-9240** or to the Your Texas Benefits page <https://www.yourtexasbenefits.com>.

3. How long can evacuated residents stay at a family home without losing Medicaid?

If a resident's home visit extends past three day, HHSC will stop payment to the nursing home but will not deny Medicaid. Typically, living 30 days outside of a nursing facility will make a person ineligible for Medicaid, but we are awaiting guidance from CMS on whether this time frame can be extended under the circumstances. If a displaced person asks for your help related to losing benefits, call the HHSC Ombudsman or the Office for assistance.

If the facility where a resident lived was damaged and the resident is planning on staying in the community until the facility is repaired, advise them to contact the facility for a timeline of repair and communicate the resident's wish to return.

4. What extensions have been made for Medicaid re-enrollment?

HHSC received federal approval to provide a six-month extension of medical benefits for people enrolled in Medicaid, CHIP and Healthy Texas Women whose permanent residence is in one of the FEMA-declared disaster counties. Anyone whose benefits were up for renewal in August, September, October or November will have their certification periods automatically extended for six months. Clients do not need to take any action for this extension to be effective.

5. What should a person who lost services in the community do?

MCOs are required to promote continuity of care for people affected by the disaster. If they get Medicaid or other insurance, people should contact their MCO service coordinator or insurance provider. If a person does not have the MCO's number available, they can call HHSC at **1-800-964-2777**. If a person cannot get adequate services and is at risk of having to move into a facility, direct the person to call Disability Rights Texas.

6. Can a resident of a damaged facility get community Medicaid instead of moving to another nursing facility?

These individuals can be assisted through Money Follows the Person if they have at least 90 days in an institutional setting and have qualified for nursing facility Medicaid. Direct the person to contact their MCO service coordinator to start the process.

Resident Services and Care

7. How can people get replacements for lost or damaged medical supplies or DME?

Residents should request a replacement from their insurance provider and register with FEMA indicating they have lost or damaged DME. If the insurance declines to replace, then the resident can submit a copy of the insurance denial to FEMA so FEMA can look at whether its Other Needs Assistance program can provide assistance.

8. What help is there for people who need prescriptions?

Pharmacists can fill prescriptions early for those affected by Hurricane Harvey. Direct the person to go to their retail pharmacy chain, if applicable, that should be able to look up the resident's prescription history. Pharmacists can also refill prescriptions for a 30-day supply if the person affected by the hurricane has a bottle with the prescription label. If the prescription bottles with labels are not available, the person may need to see a physician and get a new prescription.

9. What if someone is in need of dialysis?

If a Texas resident is on dialysis and needs assistance finding a dialysis provider, they may call **1-866-407-3773** for help.

10. How can someone apply for FEMA or other federal assistance?

People affected by Harvey can visit DisasterAssistance.gov or call **1-800-621-3362** (TTY **1-800-462-7585**). FEMA provides funds for a variety of recovery needs, such as personal property, moving and storage, childcare, rental assistance and vehicle repair.

11. Are fair hearings being rescheduled as a result of the hurricane?

HHS will automatically reschedule fair hearings for residents that live in an area affected by Hurricane Harvey. This includes instances where a resident may have missed their fair hearing or was unable to participate due to Hurricane Harvey.

Residents getting Medicaid services pending an appeal will continue to receive those services. For any questions related to fair hearings, please call Fair and Fraud Hearings Section at 512-231-5701, or fax 512-231-5743.

12. What if a resident's representative payee can't get their Social Security payment?

For people who cannot receive their regularly scheduled Social Security payment as a result of Hurricane Harvey, in most cases they can go to any open Social Security office and request an immediate payment. A list of offices that are currently closed, as well as additional information for the public, is available at www.socialsecurity.gov/emergency. To find the nearest open

Social Security office outside of the affected areas, call **1-800-772-1213** (TTY **1-800-325-0778**) or go to www.socialsecurity.gov/locator.

Ombudsman Responsibilities and Policies

13. What are ombudsman responsibilities related to facility evacuations?

As possible, ombudsmen should visit residents at their receiving facilities or as they return to evacuated facilities. See pages 4-6 of this document for a list of questions to ask during visits as well as the responsibilities of sending facilities, receiving facilities, and MCOs. In the short-term, ombudsmen should focus on concerns related to immediate health and safety and not press facilities returning from an evacuation about concerns not related to health and safety.

14. What should ombudsman do with donations?

Ombudsmen do not need to gather and distribute donations. Connect those wanting to give to facilities to a corporate or administrative contact with a facility. You can find a list of organizations taking donations at: <https://www.nytimes.com/2017/08/28/us/donate-harvey-charities-scams.html?mcubz=0>.

15. How should ombudsman field calls looking for residents?

Do not give the location of a resident or a group of residents to a caller without the permission of the resident.

FEMA is encouraging family and friends of individuals in affected areas to check social network sites like Facebook or Twitter for information about their loved ones, or to use the American Red Cross's Safe and Well program <https://safeandwell.communityos.org/cms/index.php>, to let family members know they are safe, or looking for loved ones. Long-term care providers may not post information regarding an individual without the individual's consent.

16. How should an ombudsman coordinate with other agencies?

Follow ombudsman policies and procedures related to confidentiality and coordination. Do not share confidential or identifying information without the permission of the resident or authorized representative in the case the resident is not able to consent. If the resident is not able to consent and has no representative, contact the Office. See the MOU with Regulatory Services and the MOU with APS for more information.

17. Can our local program request funding?

It is unknown whether ACL funding will be provided for the purpose of recovery. Speak with your AAA director about any needs you have identified related to disaster recovery that would benefit from funding. The Office can provide technical assistance to you upon request.

General Health and Safety

18. What should an ombudsman do if residents are returning to damaged facilities?

Facilities should self-report damage and repatriation. In some situations, facility damage may not pose danger to residents. In others, the damage could be of great concern to the health and safety of residents. Evaluate the situation, in person when possible, and inform the facility of their responsibility to self-report. Follow ombudsman policies and procedures for reporting a

complaint involving multiple residents to Regulatory Services and provide as much detail as possible when filing a complaint.

19. What if an ombudsman's assigned facility is inaccessible or closed?

An ombudsman is never expected to put his or her safety in jeopardy. Exercise caution when visiting facilities in affected areas. Facility visits are not required if there are no residents in the facility or it is unsafe to travel to the location. Call the facility and residents, where possible, to communicate and be available while the situation is unsafe.

20. What about mosquitos, mold, and infectious diseases?

More information can be found at the Center for Disease Control's hurricane information page. <https://www.cdc.gov/disasters/hurricanes/index.html>.

Ombudsmen should ask facilities about their infection control policies, including mosquito and mold treatment, and determine whether the facility is following adequate procedures. Direct questions by the facility to the Life Safety division of your regional Regulatory Services office.

21. What is the fire policy for facilities without running water?

Facilities should be aware that lack of water will render the facility's emergency fire suppression system inoperable. As such, long-term care facilities facing water outages must comply with sprinkler impairment procedures as outlined in National Fire Protection Association (NFPA) 101, Life Safety Code, and the NFPA Standard for the Inspection, Testing and Maintenance of Water-Based Fire Protection Systems. Each long-term care facility experiencing a water outage must provide and implement a fire watch to ensure the health and safety of all residents until the sprinkler system has been returned to service. Advise the facility that this condition should be self-reported to Regulatory Services. See https://www.myescambia.com/sites/myescambia.com/files/FIRE_FireWatch_0.pdf for more information on fire watch requirements from NFPA.

Evacuated and Receiving Facilities

Please continue to inform the Office of facilities that are evacuating or repatriating. The Office will share this information with the appropriate ombudsman program and Regulatory Services. As possible, check in at these facilities using the questions and information below.

Questions to Consider

For Facilities Impacted by the Hurricane

- Does the facility have power? If not, do the residents have a source of light (e.g., lamps on a generator or handheld flashlights)?
- Did the facility suffer any significant structural damage?
- Did the facility receive evacuees from other facilities? If so, how long are the displaced residents scheduled to stay at the new facility?

For Evacuated and Returning Residents

- Is there an adequate source of food, ice, and water available to meet basic needs?

- Are vital medications available and administered per residents' medical condition? If the medication is not available, are the residents' conditions being monitored and documented?
- According to the residents, is there sufficient staff to provide adequate care and services to meet their needs?
- Are high traffic areas, such as hallways, common areas, and doorways, clear of debris so residents may move freely throughout the facility?
- Do they have their personal belongings (e.g., clothing, toiletries, mementos, etc.)?
- Is the resident's family able to visit or call them? If not, what arrangements can be made to accommodate them?

If an Impacted Facility is Closed for an Extended Period of Time

- Have residents and their representatives been consulted regarding their wishes for return or transfer to a different facility?
- Have plans been made to return or transfer residents elsewhere, according to the wishes of the displaced residents and their representatives?
- According to the displaced residents, is the facility geographically accessible to their family and friends? If not, what arrangements can be made to accommodate them?

22. What are the evacuating facilities' responsibilities?

- 1) During an evacuation, the evacuating facility retains responsibility for the care of their evacuated residents. As with past disasters, the evacuating facility will be responsible for payment to the accepting facility [or facilities] for the care of their residents. HHS recommends evacuating facilities establish an agreement with the accepting facilities as soon as feasible regarding housing and care of evacuees, and for reimbursement of services.
- 2) Monitor the care of their residents for the duration of the event, including the potential re-evacuation of a resident.
- 3) After residents have returned to the evacuating facility or have been discharged, the evacuating facility must complete all assessments in accordance with federal guidance.
- 4) Bill the appropriate Medicaid managed care plan.
- 5) After payment by the managed care plan, the evacuating facility must pay the accepting facility for their resident's care for the duration of his or her residency at the accepting facility, per the payment agreement.
- 6) Be responsive to the member's managed care plan.

23. What are the accepting facilities' responsibilities?

- 1) Communicate regularly with the evacuating facility on the status of the evacuated residents.
- 2) Maintain records, as required, about each resident to be sent when the resident returns to the evacuating facility.

- 3) Work with the evacuating facility on an informal payment agreement.
- 4) Support service delivery to residents as though they are your own and in accordance with their indicated care plans that were provided by the evacuating facility. If no care plan is available, develop a temporary plan with the interdisciplinary team.
- 5) Be responsive to requests from the member's MCO.

24. What are the managed care plan's responsibilities?

- 1) Track and monitor members that have been evacuated.
- 2) Provide support to evacuating and accepting facilities, proactively and as needed.
- 3) The managed care plan service coordinator must work with the evacuating and receiving facility to continue to meet all responsibilities outlined in contract including: addressing identified needs, assisting the member in locating providers of add-on services and referring for any necessary services.
- 4) Pay the evacuating facility for the services rendered by the accepting facility, even if the accepting facility is out-of-network or a non-Medicaid provider. Be flexible and cooperative with providers so they receive prompt and proper payment for the care delivered by both facilities.
- 5) Promptly reply to inquiries and complaints from facilities and members or their representatives. Offer dedicated contact information or an e-mail box, if necessary, to facilitate disaster-related communications, even outside of normal business hours.

Contact Information

The Office Staff: Patty Ducayet, State Long-term Care Ombudsman
512-438-4356, Patty.Ducayet@hhsc.state.tx.us

Julie Porter, Assisted Living Facilities
512-438-4280, Julie.Porter@hhsc.state.tx.us

Alexa Schoeman, Nursing Homes
512-483-4281, Alexa.Schoeman@hhsc.state.tx.us

HHSC Harvey Inbox: MCS_Harvey@hhsc.state.tx.us

HHSC Ombudsman: 1-877-787-8999

Disability Rights Texas: 1-800-252-9108

FEMA Survivors Hotline: 1-800-621-3362, (TTY 1-800-462-7585)

Texas Legal Services: 1-800-622-2520

Disaster Distress Mental Health Helpline: 1-800-985-5990

MCO Contact Information:

Superior: 1-866-516-4501

Molina: 1-866-449-6849

Amerigroup: 1-800-600-4441

United Health Care: 1-800-349-0550

Cigna-Health Spring: 1-877-653-0327

Other Resources

List of available shelters: <https://gov.texas.gov/hurricane>

Texas 211 for disaster-related information and resources: <http://www.211texas.org/>

FAQ from HHSC: <https://hhs.texas.gov/services/health/medicaid-chip/provider-information/hurricane-harvey-information-providers>

City of Houston Harvey information and resources: <https://houstonrecovers.org/>

FEMA information: <https://www.fema.gov/disaster/4332>

Federal disaster assistance: <https://www.disasterassistance.gov/>

Harvey relief map to find resources, aid, shelter, and volunteer opportunities:
<http://harveyrelief.handiworks.co/relief-map>

Red Cross Hurricane Harvey Assistance:
https://www.redcross.org/ns/apology/disaster_homepage.html

Disaster planning information from the federal government: <https://www.ready.gov/>

After the Storm: United Way recovery guide:
<https://www.unitedwayhouston.org/assets/uploads/documents/news-publications/Greater-Houston-after-the-storm.pdf>

Austin Disaster Relief (statewide): <https://adrn.org/>