Service Providers and COVID-19
Frequently Asked Questions

Updated 3/14/2020

1. Question: Who is the primary SARC contact for issues related to COVID-19 and the State of Emergency?
Answer: Please submit any questions or notices to soe@sarc.org.

2. Question: What happens if individuals do not attend program because of COVID-19?
Answer: DDS has provided a directive for programs with individuals who are absent from a regular nonresidential program in relation to COVID-19. SARC’s fiscal team has developed a notice dated March 13, 2020 with guidelines and instructions which can be found here.

3. Question: Does the DDS directive about COVID-19 related absences apply if individuals are staying home from program but do not have symptoms or a diagnosis?
Answer: The intent of this directive is to include absences due to precautions taken by individuals or family members who choose to keep their at-risk loved ones at home.

4. Question: How should service providers track absences?
Answer: Service providers must maintain a daily log of all clients absent due to COVID-19. This may be requested by SARC fiscal department upon billing.

5. Question: Are individuals required to stay home from day program?
Answer: Per DDS Directive, consumers with compromised immune systems or who are more susceptible to respiratory illness and/or who reside in the following home types must remain home rather than attend day services outside the home: ARFPSHN, ICF/DD-N, and ICF/DD-CN. Please see DDS directive dated March 12, 2020 here. Please see SARC’s notice to Service Providers here.

Other individuals with health concerns who may be more susceptible to infection may choose to stay home. Please contact your service coordinator if you decide to stay home.

6. Question: If a program closes voluntarily, will it be able to bill for services?
Answer: If a program closes following the recommendations of the state or county department of public health, SARC will adhere to DDS’s State of Emergency declaration.

If a program decides to close voluntarily without the instructions or recommendations of Public Health, then SARC will not be able to apply the Emergency declaration issued by DDS.

Any program that closes must notify SARC via email at soe@sarc.org and provide a copy of the letter shared with families, a list of the individuals impacted by the closure, and a plan for deep cleaning their facility.

7. Question: What does a service provider do if an individual is showing symptoms or is diagnosed with COVID-19?
Answer: It is the responsibility of the service provider to meet the needs of the individual, including when they are sick. This is especially critical if the individual relies on staff to help them live in the community successfully. Staff should follow universal precautions and instructions from Center for Disease Control and Prevention. Please review the SARC Service Provider Checklist for Exposure and Infection of COVID-19 here.

8. Question: Can service providers receive higher rates to serve individuals?
Answer: Per DDS directive, SARC may be able to grant temporary rate adjustments for residential services and/or supplemental services in residential settings to protect an individual’s health or safety as a result of the outbreak of COVID-19. The service provider must express the need for a Health and Safety waiver request to the SARC Service Coordinator in order for this to be explored. Please see DDS directive dated March 12, 2020 here.

9. Question: Can service providers request additional service support during this time?  
Answer: Service providers should contact the individual’s SARC Service Coordinator to request an increase in existing services or for additional services. Services exceeding the standards may require review by a Director or Director’s designee.

10. Question: Will SARC continue to have in person meetings with individuals served and their families?  
Answer: Per DDS directive, all in-person meetings for Early Start and Lanterman individuals have the option of being held remotely as requested by the individual, parent, guardian, or authorized representative. Please see DDS directive dated March 12, 2020 here.

11. Question: Can programs restrict visitors?  
Answer: Visitor policies can be modified to limit visitors who have recently traveled and those who are demonstrating symptoms of respiratory illness. Programs can encourage alternate means of visits, such as Skype, Facetime, or phone calls. Individuals continue to have a right to visitors at their home and day program.

12. Question: Can programs limit their community outings?  
Answer: The frequency of community outings may be modified to best meet the health and safety needs of the individuals at the program. A licensed program may request a waiver from community care licensing.

13. Question: Can programs offer services to individuals remotely?  
Answer: At this time, DDS has not approved remote delivery of services with the exception of Early Start services. Please see DDS directive dated March 12, 2020 here.

14. Question: Where can programs obtain facemasks and other resources?  
Answer: Community Care Licensing (CCL) reports supplies are available to licensed settings by reaching out to their Medical Health Operational Area Coordinator (MHOAC). Emails are recommended to log the request if phone lines are impacted. More information can be found in CCL’s Provider Information Notice (PIN) 20-07-ASC here. San Andreas has a limited supply of face masks. Please contact soe@sarc.org if masks are required.

15. Question: When will SARC provide more information?  
Answer: SARC will update this FAQ regularly and continue to post information on our COVID-19 webpage here: SARC COVID-19. Please also refer to the websites for California Department of Public Health, Centers for Disease Control and Prevention, Department of Developmental Services, and Community Care Licensing.