



COVID-19 Policy

Governor Waltz has ended the Health Emergency. Staff are still to be diligent not to spread communicable disease.

The current public health emergency declared by Governor Walz necessitates the temporary modifications listed in this policy manual section. Unless expressly listed, all other Cherish Policies and requirements continue to apply. All provisions shown here are time limited.

All employees who have come in close contact with someone who tests positive for COVID-19 **MUST** complete the questionnaire at the link below

<https://mn.gov/covid19/for-minnesotans/if-sick/get-tested/index.jsp>

Typically, the Minnesota Department of Health will require you to get tested immediately.

Covered Services Changes

Telemedicine

Until further notice, Minnesota Health Care Programs (MHCP) is temporarily expanding coverage of telemedicine visits.

These changes are effective April 1, 2020:

Cherish can provide services virtually via telephone when our staff determine it is safe and effective to do so. This coverage change applies to MHCP members in fee-for-service programs.

In delivering telemedicine, Cherish telemedicine services may be delivered from Cherish Staff's home or from the office. Cherish telemedicine can be delivered to program participants while they are in their home.

Cherish has written policies and procedures specific to telephonic telemedicine services that I (we) review and update regularly.

Cherish has procedures that adequately address patient safety before, during and after the telemedicine service is rendered.

Cherish will continue the COVID-19 protocols and telephonic telemedicine services until the COVID-19 pandemic emergency has been declared over by the Governor of Minnesota

Cherish will document of each occurrence of a health care service provided by telephone that includes all of the following:

- The type of service provided



- The time the service began and the time the service ended, with a.m. and p.m. designations
- A description of the provider's basis for determining that telemedicine is an appropriate and effective means for delivering service to the recipient
- The mode of transmission of the telemedicine service
- The location of the originating and the distant site
- Cherish will adequately address patient safety before, during and after the telemedicine service is rendered.

Background Studies

Temporary modification of DHS background study requirements – Emergency background studies

The Department of Human Service is temporarily modifying certain statutory background study requirements. Completing studies that meet current requirements has become increasingly difficult due to closures of public fingerprinting sites and lack of responses to requests for records from other states.

The temporary modifications will assist health and human service providers to quickly respond to changing workforce needs related the COVID-19 pandemic and are permitted under the Governor's Executive Order 20-12 and the authority granted to the human services commissioner. The modifications temporarily suspend the fingerprint and photograph background study requirement and waive the requirement to supervise individuals who provide direct contact services while the background study is in process. DHS retains the authority to order supervision when required based on case-by-case decisions.

Effective date and instructions

The changes are effective April 6, 2020. The emergency studies will be valid during the pandemic only. Emergency studies do not include all background study requirements that were in place prior to April 6, 2020. Instructions will be provided about transitioning back to fully compliant background studies in the future. It is expected that entities will submit new applications and study subjects who had an emergency study will need to be fingerprinted and photographed when the transition occurs. This is because the FBI requires fingerprints to be submitted to conduct federal record checks

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