Dear ADS Professional,

NADSA has been working for the past several weeks with Veterans Administration (VA) officials to gain guidance and clarity on reimbursement for services during the COVID-19 pandemic. The VA published the following guidance on April 13 and was disseminated to all VAMCs. NADSA is continuing to work with the VA to further clarify some aspects of this guidance. As more information becomes available, NADSA will be sharing that information with Members and posting it on the Coronavirus page of the website (Coronavirus Important Information).

VA Community Adult Day Health Care Amended Service Delivery

Services to replace adult day health care (ADHC) services with consent of the Veteran as allowed by state plan:

- Personal care services provided in the home, and comparable to the amount of personal care services previously delivered in the adult day health care center.
- Skilled services by appropriately credentialed professionals provided in the home, telephonically, or via live virtual video conferencing.
- Meals and supplies delivered to a Veteran’s home at the level established by their care plan.
- Outreach over telephone to assess wellness and detect developing needs on days when a Veteran would normally attend the ADHC center.

Services can be provided concurrently, on the same day, on different days than the Veteran would normally attend the ADHC center, or on more days than the Veteran would normally attend the ADHC center.

Billing: ADHC centers can continue to submit claims according to the active authorization under the following HCPCS code options:

- S5101 (Half Day): services listed in 1a and 1c
- S5102 or S5105 (Full Day): services listed in any three of the lettered items in 1a through 1d
- Each half or full day billing requirement can be met across multiple days. For example, if an ADHC center and Veteran decide to have the 2 days per week of authorized services provided over more than 2 days per week, the ADHC center...
would submit a claim for 2 days per week.

Approved by DUSHOM memorandum 13 April 2020
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