

## <u>OMHSAS – COVID-19 Public Health Emergency Suspended Regulations List</u>

Published: 10/22/2020

\*The regulatory suspensions included in this chart are valid from March 6, 2020, and will remain in place while the Disaster Proclamation related to COVID-19 remains in effect or such other time as DHS/OMHSAS directs.

Regulation Suspended	Regulation's Purpose	Scope of Suspension
	Inpatient Psychiatric Se	rvices
55 Pa. Code 1151.65. Plan of Care.	(a) Before authorization for payment for care provided to a recipient 21 years of age or older, the attending or staff physician shall establish, and include in the recipient's medical record, an individual written plan of care.	<b>Limited Suspension:</b> A certified registered nurse practitioner or a physician assistant may substitute for the physician to perform this function, provided it is within their scope of practice.
	Outpatient Psychiatric Se	ervices
55 Pa. Code 1153.14 Non-covered Services	Payment will not be made for the following types of services regardless of where or to whom they are provided:  (1) A covered psychiatric outpatient clinic, MMHT or partial hospitalization outpatient service conducted over the telephone.	<b>Limited Suspension:</b> Services may be delivered via telehealth if clinically appropriate to do so. Telephone may be used if video technology is not available.



55 Pa. Code 1153.52. Payment conditions for various services. (a) (1) A psychiatrist shall be present in the psychiatric outpatient clinic and partial hospitalization outpatient facility as required by the Office of Mental Health and Substance Abuse Services licensing regulations.

- (a) (7)...... a mental health professional or mental health worker under the supervision of a mental health professional, shall:
  - (iii) Date and sign the initial treatment plan.
- (iv) Request the individual to sign and date the treatment plan...
- (a) (8) The initial treatment plan shall be reviewed and approved in accordance with the following:
- (i) If the individual is receiving psychotherapy and other clinic services, the psychiatrist or advanced practice professional shall.... sign and date the initial treatment plan.
- (ii) If the individual is receiving medication management services only, the psychiatrist, physician, certified registered nurse practitioner or physician assistant responsible for prescribing and monitoring the use of the medications shall sign and date the initial treatment plan.
  - (iii) The initial treatment plan shall be....... and signed...
- (a) (9) The treatment plan shall be reviewed and updated at least every 180 days....
- (ii) The treatment plan update shall be signed and dated by the mental health professional, mental health worker under the supervision of the mental health professional, certified

**Limited Suspension:** Services may be delivered via telehealth/telephone if clinically appropriate to do so, consistent with the waiver of 55 Pa. Code 5200.22 (a)(3).

**Limited Suspension**: Signature requirements, including signatures for treatment plans and written consent have been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.

**Limited Suspension:** Treatment plans that are created during this disaster emergency declaration period will have 90 additional days after the currently required 180 days, to update treatment plans.



ABUSE SERVICES	
registered nurse practitioner or physician assistant providing treatment services to the individual.	
(iii) The mental health professional or the mental health worker shall request the individual to sign and date the treatment plan update	
<ul> <li>(b) (1) Individuals receiving partial hospitalization outpatient services shall meet the following criteria:</li> <li>(iii) prescribed services for a period of at least 3 hours but less than 24 hours in any 1 day to prevent hospitalization or to support the transition from inpatient treatment to outpatient services.</li> </ul>	Limited Suspension: Less than 3 hours may be provided in a day.
Intensive Behavioral Health Services (Med	ical Assistance Payment)
Payment will be made to an IBHS agency that complies with Chapter 5240 (relating to intensive behavioral health services) and holds an outpatient psychiatric clinic, a psychiatric partial hospitalization program or a family-based mental health license issued by the Department as of October 19, 2019, until the agency's license expires.	<b>Limited Suspension:</b> Delay of enforcement. Payment will be made to an IBHS agency that complies with Chapter 5240 (relating to intensive behavioral health services) and holds an outpatient psychiatric clinic, a psychiatric partial hospitalization program or a family-based mental health license issued by the Department as of October 19, 2019, until 1/17/2021.
Payment will be made to an unlicensed IBHS agency that complies with Chapter 5240 and is approved to provide BHRS as of 10/19/19 for 1 year after promulgation of this chapter.	<b>Limited Suspension:</b> 90-day delay of enforcement. Payment will be made to an unlicensed IBHS agency that complies with Chapter 5240 and is approved to provide BHRS as of 10/19/19 until 1/17/2021.
	registered nurse practitioner or physician assistant providing treatment services to the individual.  (iii) The mental health professional or the mental health worker shall request the individual to sign and date the treatment plan update  (b) (1) Individuals receiving partial hospitalization outpatient services shall meet the following criteria:  (iii) prescribed services for a period of at least 3 hours but less than 24 hours in any 1 day to prevent hospitalization or to support the transition from inpatient treatment to outpatient services.  Intensive Behavioral Health Services (Med Payment will be made to an IBHS agency that complies with Chapter 5240 (relating to intensive behavioral health services) and holds an outpatient psychiatric clinic, a psychiatric partial hospitalization program or a family-based mental health license issued by the Department as of October 19, 2019, until the agency's license expires.  Payment will be made to an unlicensed IBHS agency that complies with Chapter 5240 and is approved to provide BHRS as



55 Pa. Code 1155.31(d)	Payment will be made to an unlicensed IBHS agency that compiles with Chapter 5240 and is approved to provide ABA services as of 10/19/19 for 180 days after promulgation of this chapter.	<b>Limited Suspension:</b> 180-day delay of enforcement. Payment will be made to an unlicensed IBHS agency that complies with Chapter 5240 and is approved to provide ABA services as of 10/19/19 until 10/15/2020.
55 Pa. Code 1155.32 (a)(1) Payment conditions for individual services	There is a written order for services based on a face-to face interaction with the child, youth or young adult.	Limited Suspension: Method of contact for obtaining a written order may include telehealth.
55 Pa. Code 1155.32 (a)(2) Payment conditions for individual services	A face-to-face assessment has been completed by an individual qualified to provide behavior consultation services or mobile therapy services within 15 days of the initiation of individual services and prior to completing the ITP in accordance with 5240.21 (relating to assessment) or a face-to-face assessment has been reviewed and updated within 12 months of the previous face-to-face assessment.	Limited Suspension: Method of contact for assessment may include telehealth. Staff Qualifications are not waived.  Limited suspension to completing the initial assessment within 15 days. It may be completed within 30 days during the emergency declaration period.
55 Pa. Code 1155.32(a)(5) Payment conditions for individual services	The ITP and all updates have been reviewed and signed by the youth, young adult, or parent or legal guardian of the child or youth, the staff person who completed the ITP and an individual who meets the qualifications of a clinical director in 5240.12 (relating to staff qualifications).	Limited Suspension: Signature requirements, including signatures for service plans/treatment plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.



55 Pa. Code 1155.33 (a)(1) Payment conditions for ABA services	There is a written order for services based on a face-to face interaction with the child, youth or young adult.	<b>Limited Suspension:</b> Method of contact for obtaining a written order may include telehealth.
55 Pa. Code 1155.33 (a)(2) Payment conditions for ABA services	A face-to-face assessment has been completed by an individual qualified to provide behavior analytic or behavior consultation-ABA services within 30 days of the initiation of ABA services and prior to completing the ITP in accordance with 5240.85 (relating to assessment) or a face-to-face assessment has been reviewed and updated within 12 months of the previous face-to-face assessment.	Limited Suspension: Method of contact for assessment may include telehealth.  Limited suspension to completing the initial assessment within 30 days. It may be completed within 60 days during the emergency declaration period.
55 Pa. Code 1155.33(a)(5) Payment conditions for ABA services	The ITP and all updates have been reviewed and signed by the youth, young adult, or parent or legal guardian of the child or youth, the staff person who completed the ITP and an individual who meets the qualifications of a clinical director in 5240.81 (relating to staff qualifications).	Limited Suspension: Signature requirements, including signatures for service plans/treatment plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
55 Pa. Code 1155.34 (a)(1) Payment conditions for Group services	There is a written order for services based on a face-to face interaction with the child, youth or young adult	<b>Limited Suspension:</b> A written order continues to be required but the interaction with the child, youth or young adult may occur via telehealth during the emergency declaration period.



SUBSTAINCE /	ABUSE SERVICES	
55 Pa. Code	A face-to-face assessment has been completed by a graduate	<b>Limited Suspension:</b> Method of contact for assessment may
1155.34 (a)(2)	level professional within 15 days of the initiation of group	include telehealth. Staff Qualifications are not waived.
Payment	services and prior to completing the ITP in accordance with	
conditions for	5240.95 (relating to assessment) or a face-to-face assessment	<b>Limited suspension</b> to completing the assessment within 15
Group services	has been reviewed and updated within 12 months of the previous face-to-face assessment.	days. It may be completed within 30 days during the emergency declaration period.
55 Pa. Code	The ITP and all updates have been reviewed and signed by the	Limited Suspension: Signature requirements, including
1155.34(a)(5)	youth, young adult, or parent or legal guardian of the child or	signatures for service plans/treatment plans and written
Payment	youth, the staff person who completed the ITP and an individual	consent, have also been suspended. Verbal consent must be
conditions for	who meets the qualifications of a clinical director in 5240.12	documented in the medical record at the time of service and
group services	(relating to staff qualifications).	providers are strongly encouraged to obtain signatures
		electronically when possible.
TT Do Codo	Thous is a sumittee and or for CDT that we get the requirements of	Limited Companions Associates and a continuous to be accorded
55 Pa. Code	There is a written order for EBT that meets the requirements of 1155.32(a)(1), 1155.33(a)(1) or 1155.34(a)(1) (relating to	<b>Limited Suspension:</b> A written order continues to be required, but the interaction with the child, youth or young adult may
1155.35 (a)(1) Payment	payment conditions for individual services; payment conditions	occur via telehealth during the emergency declaration period.
conditions for EBT	for ABA services; and payment conditions for group services).	occur via teleficatiff during the efficigency declaration period.
delivered through	To ABA services, and payment conditions for group services).	
individual services,		
ABA services or		
group services		
55 Pa. Code	A face-to-face assessment has been completed by an individual	Limited Suspension: Method of contact for assessment may
1155.35 (a)(2)	with the qualifications required by the EBT within 15 days of the	include telehealth.
Payment	initiation of services and prior to completing the ITP in	moduce telenousium
conditions for EBT	accordance with 5240.102 (relating to assessment and	<b>Limited suspension</b> to completing the assessment within 15
delivered through	individual treatment plan) or a face-to-face assessment has	days. It may be completed within 30 days during the
individual services,	been reviewed and updated within 12 months of the previous	emergency declaration period.
ABA services or	face-to-face assessment.	0,
group services		
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SUBSTAINCE A	ABUSE SERVICES	
55 Pa. Code 1155.35 (a)(5)	The ITP and all updates have been reviewed and signed by the youth, young adult, or parent or legal guardian of the child or youth, the staff person who completed the ITP and an individual who meets the qualifications of a clinical director in § 5240.12 (relating to staff qualifications).	Limited Suspension: Signature requirements, including signatures for service plans/treatment plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
	Outpatient Drug and Alcohol C	linic Services
55 Pa. Code 1223.14 (2)	Payment will not be made for the following types of services regardless of where or to whom they are provided:  (2) Clinic visits, psychotherapy, diagnostic psychological evaluations, psychiatric evaluations and comprehensive medical evaluations conducted over the telephone, that is, any clinic service conducted over the telephone.	<b>Full Suspension:</b> Services may be delivered via telehealth if clinically appropriate to do so. Telephone may be used if video technology is not available.
55 Pa. Code 1223.52. Payment conditions for various services	(a)(6)(i) Within 15 days following intake, the clinic's supervisory physician shall review and verify each patient's level of care assessment, psychosocial evaluation and initial treatment plan prior to the provision of any treatment beyond the 15th day following intake	<b>Limited Suspension:</b> Initial Treatment plans can be completed within 60 days of intake during this emergency.
	Mental Health Proced	ures
55 Pa. Code 5100.54 Manual of rights for persons in treatment	Article I: 4. Right to Have Visitors.  (a) Every patient has the right to receive visitors of his own choice daily  (b) Established visiting hours shall attempt to meet the needs of individual patients and visitors	<b>Limited Suspension:</b> Suspend the right of individuals to have visitors in-person. Provider <b>must</b> facilitate other means of visitation including Skype/WebEx/teleconference.
	Psychiatric Outpatient (	Clinics

The psychiatrist must provide 50% of the required psychiatric time at the psychiatric outpatient clinic.	<b>Limited Suspension:</b> Suspension of % limit for telehealth, 100% of psych services may be delivered via telehealth if
The remaining 50% of the psychiatric time may be provided by:	clinically appropriate to do so.
(i) An advanced practice professional.	
(ii) A psychiatrist off-site by the use of tele-behavioral health.	
(iii) A combination of subparagraphs (i) and (ii).	
(b) For each individual receiving services	Limited Suspension: Signature requirements, including
(1) The mental health professional sign and date the initial treatment plan.	signatures for treatment plans and written consent have beer suspended. Verbal consent must be documented in the medical record at the time of service and providers are
(2) If the individual is receiving psychotherapy and other clinical servicessign and date the initial treatment plan.	strongly encouraged to obtain signatures electronically when possible.
(3) If the individual is receiving medication management services only sign and date the initial treatment plan.	
(4) For individuals under an involuntary outpatient commitmentsign and date the initial treatment plan	
(c) The treatment plan must be based upon the assessment and shall:	
(4) For children and adolescents under 14 years of age,with the consent of parents or guardians	
(d) The treatment plan shall be reviewed and updated throughout the duration of treatment as follows:	
	time at the psychiatric outpatient clinic.  The remaining 50% of the psychiatric time may be provided by:  (i) An advanced practice professional.  (ii) A psychiatrist off-site by the use of tele-behavioral health.  (iii) A combination of subparagraphs (i) and (ii).  (b) For each individual receiving services  (1) The mental health professional sign and date the initial treatment plan.  (2) If the individual is receiving psychotherapy and other clinical servicessign and date the initial treatment plan.  (3) If the individual is receiving medication management services only sign and date the initial treatment plan.  (4) For individuals under an involuntary outpatient commitmentsign and date the initial treatment plan  (c) The treatment plan must be based upon the assessment and shall:  (4) For children and adolescents under 14 years of age,with the consent of parents or guardians

BUSE SERVICES	
(1) For individuals under an involuntary outpatient commitment signed by the psychiatrist as part of the oversight of treatment services provided.	
(3) The treatment plan update shall be signed and dated by	
(4) The mental health professional or mental health worker shall request the individual to sign and date the treatment plan update.	
<ul><li>(a) The record must include the following:</li><li></li><li>(4) Appropriately signed consent forms.</li></ul>	
(c) Treatment plans shall be updated at a minimum every 180 days.	Limited Suspension: Treatment plans that are created during this disaster emergency declaration period will have 90 additional days after the currently required 180 days, to update treatment plans.
Partial Hospitalization	on
(b) General description.	<b>Full suspension</b> of the requirement to provide education.
(2) When adolescents are treated in the adult program, a specialized program appropriate to their needs shall be developed including arrangements for education	
	(1) For individuals under an involuntary outpatient commitment signed by the psychiatrist as part of the oversight of treatment services provided.  (3) The treatment plan update shall be signed and dated by  (4) The mental health professional or mental health worker shall request the individual to sign and date the treatment plan update.  (a) The record must include the following:

55 Pa. Code 5210.21 (b)	Staff/patient ratio. Adult partial hospitalization programs shall have a minimum of one full-time equivalent (FTE) clinical staff member to every six patients.	<b>Full suspension</b> of the requirement for staffing ratios.
55 Pa. Code 5210.31 (b)	Staff/patient ratio. Children and youth partial hospitalization programs require a minimum of one FTE clinical staff member for every five patients.	Full suspension of the requirement for staffing ratios.
55 Pa. Code 5210.25 Contents and review of a comprehensive treatment plan.	5210.25. Contents and review of a comprehensive treatment plan. The treatment plan shall include the following: (4) Be maintained and updated with signed daily notes, and be kept in the patient's medical record or a form developed by the facility; (5) Be developed within the first 5 days of service and reviewed by the treatment team a minimum of once every 20 days of service to the individual patient and modified as appropriate.	Limited suspension for both 5210.25 and 5210.35: Signature requirements, including signed daily notes, signatures for service plans/treatment plans and written consent, are suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
55 Pa. Code 5210.35 Contents and review of a comprehensive treatment plan	5210.35. Contents and review of a comprehensive treatment plan – (4) Be maintained and updated with signed daily notes, and be kept in the patient's medical record on a form developed by the facility; (b) Treatment plans for children and youth partial hospitalization programs shall be developed within the first 5 days of service and reviewed by the treatment team and psychiatrist a minimum of once every 20 days of service and modified as appropriate.	
55 Pa. Code 5210.28. Size of program.	5210.28. Size of program. Adult partial programs shall operate a minimum of 3 full days a week and shall have a minimum program capacity of 15 patients.	<b>Full suspension</b> of the requirement for size of program and days/hours of operation.
55 Pa. Code 5210.38. Size of program.	5210.38. Size of program. Children and youth partial hospitalization programs shall operate a minimum of 3½ days a week and shall have a minimum program capacity of 10 patients.	

55 Pa. Code 5210.37 Linkages with educational programs.	Basic education and, in particular, special education are an essential and required part of service for emotionally disturbed children and youth	<b>Full Suspension:</b> The requirement to provide education is suspended, but providers are encouraged to use best efforts to satisfy this education requirement through remote learning means.
55 Pa. Code 5210.39	Patients in partial hospitalization programs shall receive a minimum of 3 hours of planned treatment programs per hospitalization day	Full Suspension: Minimum number of hours of planned treatment programming per hospitalization day is suspended, but providers are encouraged to achieve this 3-hour planned treatment requirement to the extent feasible while still complying with the current social distancing guidelines.
	Mental Health Intensive Case	Management
55 Pa. Code 5221.23 Staffing patterns and limits.	<ul> <li>(b) The number of cases in a caseload shall be based on the intensity of the need for service but may not exceed 30.</li> <li>(d) A supervisor may supervise no more than seven intensive case managers. A supervisor shall maintain a minimum of three contacts one mosting per week with intensive case managers.</li> </ul>	(b) Full Suspension  (d) Limited Suspension: Suspension of this regulation applies only to the requirement for a supervisor to maintain a minimum of three contacts one meeting per week depending
	contacts one meeting per week with intensive case managers with additional supervision depending upon the performance of the case manager, the activity of the caseload and administrative judgment.	minimum of three contacts one meeting per week depending upon the performance of the case manager, the activity of the caseload and administrative judgment. The meetings that do occur may be conducted through telehealth or telephone during the emergency declaration period.
	(e) If there are less than seven intensive case managers providing intensive case management, supervisory staff time shall be at least proportionate to the ratio of one full-time supervisor to seven intensive case managers.	(e) Full Suspension

55 Pa. Code 5221.31. Mental Health Intensive Case Management -Responsibilities of providers.	(6) Providing intensive case management services as needed in the place where the consumer resides or needs the service.	Limited Suspension: Services may be provided via telehealth/telephone as needed.
55 Pa. Code 5221.33. Intensive case management records - statement of policy.	<ul> <li>(3) Written service plan. The initial plan shall: (i)Be developed within 1 month of registration and reviewed at least every 6 months. (iv)Be signed by the consumer, the family if the consumer is a child, the intensive case manager</li> <li>(4) Documentation of Services</li> <li>(i) (E) Case notes. The case notes shall: Be dated and signed by the individual providing the service</li> <li>(iii) Encounter Forms</li> </ul>	Limited Suspension: During the emergency declaration period, the written service plan shall be-reviewed as needed, but at least annually. Telehealth may be utilized to develop the initial plan and for the subsequent reviews during this emergency.  Limited Suspension: The requirements for signatures of consumers and case managers in case notes, encounter forms and service plans have been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
	Psychiatric Rehabilitation	Services
55 Pa Code 5230.23. Access to individual record.	An individual may review, provide written comments and sign daily entries in the individual record.	<b>Full Suspension:</b> Individual's signature requirements are suspended; providers are however strongly encouraged to obtain electronic signatures when possible.
55 Pa. Code 5230.51 Staff Qualifications	<ul> <li>(b) A psychiatric rehabilitation specialist shall have one of the following:</li> <li>(1) A bachelor's degree and 2 years work experience in mental health direct service, 1 year of which must be work experience in PRS. CPRP certification shall be attained within 2 years from the date of hire as a psychiatric rehabilitation specialist.</li> </ul>	<b>Full suspension</b> of the requirement that individuals receive CPRP certification within 2 years from the date of hire as a psychiatric rehabilitation specialist. CPRP testing and exam has been suspended by the Psychiatric Rehabilitation Association.

ABUSE SERVICES	
<ul> <li>(a) A PRS agency shall staff the service according to the following: <ul> <li>(1) The location of services is consistent with the agency service description.</li> <li>(2) The service may range from individual service to group service.</li> <li>(3) The service and the choice of service locations shall be determined by the IRP of the individual.</li> </ul> </li> </ul>	<b>Full suspension</b> of locations of service in service description. Services may be provided through telehealth.
(g) When a PRS agency operates more than one PRS facility, the PRS director shall be present at each licensed PRS facility an average of 7.5 hours per week in a calendar month.	<b>Limited suspension</b> of the PRS Director being present. PRS director may be present via audio video technology.
(h) A minimum of 25% of the FTE staff complement shall meet the qualifications of a psychiatric rehabilitation specialist provided under § 5230.51(b) (relating to staff qualifications) within 1 year of initial licensing.	<b>Full suspension</b> of the requirement that 25% of the FTE staff complement meet qualifications of a psychiatric rehabilitation specialist within 1 year of initial licensing. CPRP testing and exam has been suspended by the Psychiatric Rehabilitation Association which would not allow a psychiatric rehabilitation specialist to obtain certification.
(i) A minimum of 25% of the FTE staff complement shall have CPRP certification within 2 years of initial licensing.	<b>Full suspension</b> of the requirement that 25% of the FTE staff complement shall have a CPRP certification within 2 years of initial licensing. CPRP testing and exam has been suspended by the Psychiatric Rehabilitation Association which would not allow a psychiatric rehabilitation specialist to obtain certification.
A PRS agency shall provide individual services in a PRS facility or in the community on a one staff to one individual (1:1) ratio.	<b>Full suspension</b> of the provision of service in facility or in the community. Services can be provided via telehealth.
A PRS agency shall provide group services in a PRS facility or in the community.	<b>Full suspension</b> of Group Services. Services can be provided via telehealth.
	<ul> <li>(a) A PRS agency shall staff the service according to the following: <ol> <li>The location of services is consistent with the agency service description.</li> <li>The service may range from individual service to group service.</li> <li>The service and the choice of service locations shall be determined by the IRP of the individual.</li> <li>When a PRS agency operates more than one PRS facility, the PRS director shall be present at each licensed PRS facility an average of 7.5 hours per week in a calendar month.</li> </ol> </li> <li>A minimum of 25% of the FTE staff complement shall meet the qualifications of a psychiatric rehabilitation specialist provided under § 5230.51(b) (relating to staff qualifications) within 1 year of initial licensing.</li> <li>A minimum of 25% of the FTE staff complement shall have CPRP certification within 2 years of initial licensing.</li> </ul> <li>A PRS agency shall provide individual services in a PRS facility or in the community on a one staff to one individual (1:1) ratio.</li>

55 Pa Code	(c) A PRS director or psychiatric rehabilitation specialist	Full suspension of the face to face requirement and group
5230.55.	designated as a supervisor shall meet with staff individually,	supervision. Supervision can be provided via Telehealth.
Supervision	face-to-face, no less than two times per calendar month.	
	(d) A PRS director or psychiatric rehabilitation specialist	
	designated as a supervisor shall provide group supervision	
	utilizing the following methods:	
	(1) Monitoring active PRS delivery.	
	(2) Discussing approaches to assist individuals in goal	
	attainment.	
	(3) Conducting staff meetings.	
55 Pa Code	(1) Staff providing services in a PRS agency shall complete a	<b>Full suspension</b> of the requirement that staff shall complete a
5230.56. Staff	Department-approved 12-hour psychiatric rehabilitation	12-hour psychiatric rehabilitation orientation course no later
Training	orientation course no later than 1 year after hire. This course	than 1 year after hire.
Requirements	shall be credited to the annual training requirement listed	
	under paragraph (2) for the calendar year in which it is	
	completed.	
55 Pa Code	(b) The assessment shall be completed in collaboration with the	<b>Full suspension</b> of individuals' signature requirement.
5230.61.	individual and must:	Providers are however strongly encouraged to obtain
Assessment		electronic signatures when possible.
	(6) Be signed by the individual and staff.	<b>Full suspension</b> of any assessment updates that are due within the time frame of this emergency.
	(7) Be updated annually and when one of the following occurs.	
	i. The individual requests an update.	
	ii. The individual completes a goal.	
	iii. The individual is not progressing on stated goals.	
55 Pa Code	(a) A PRS staff and an individual shall jointly develop an IRP that	Limited Suspension: Signature requirements, including
5230.62. Individual	(a) A PRS staff and an individual shall jointly develop an IRP that is consistent with the assessment and includes the following:	signatures for rehabilitation plans and written consent, have
	is consistent with the assessment and includes the following:	signatures for rehabilitation plans and written consent, have been suspended. However, verbal consent must be
5230.62. Individual	is consistent with the assessment and includes the following: (7) Dated signatures of the individual, the staff working with	signatures for rehabilitation plans and written consent, have been suspended. However, verbal consent must be documented in the medical record at the time of service and
5230.62. Individual	is consistent with the assessment and includes the following:	signatures for rehabilitation plans and written consent, have been suspended. However, verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures
5230.62. Individual	is consistent with the assessment and includes the following: (7) Dated signatures of the individual, the staff working with	signatures for rehabilitation plans and written consent, have been suspended. However, verbal consent must be documented in the medical record at the time of service and



Psychiatric Rehabilitation 55 Pa. Code 5230.62 (b), (c), (1), (2),(3)	<ul> <li>b. A PRS agency shall complete an IRP by day 20 of admittance, but no more than 60 days after initial contact.</li> <li>c. A PRS agency and an Individual shall update IRP at least 90 days and when</li> <li>1. A goal is complete.</li> <li>2. No significant progress is made.</li> <li>3. An individual requests a change.</li> </ul>	<b>Full suspension</b> of the requirement for completion or updates to the IRP within the timeframes required by the regulation, but providers should use best efforts to comply with the regulatory time frames.
55 Pa Code § 5230.62 (d). Individual rehabilitation plan.	<ul> <li>(d) An IRP update must include a comprehensive summary of the individual's progress that includes the following:</li> <li></li> <li>(5) The dated signature of the individual.</li> <li>(6) Documentation of the reason if the individual does not sign.</li> </ul>	Limited Suspension: Limited Suspension: Signature requirements, including signatures for rehabilitation plans and written consent, have been suspended. However, verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
55 Pa Code § 5230.63. Daily entry	A PRS agency shall include an entry for the day service that was provided in the record of an individual as follows: (4) Includes the signature of the individual, or if the individual does not sign, documents the reason.	<b>Full suspension</b> of individuals' signature requirement although providers are strongly encouraged to obtain electronic signatures when possible.
	Community Residential Rehabilitation Ser	vices for the Mentally III
55 Pa. Code 5310.14(e)	<ul> <li>(e) Each staff member is required to have a physical examination within 6 months prior to employment and every 2 years thereafter.</li> <li>(1) The examination report must include screening for tuberculosis and other communicable diseases, a statement from the physician that the staff member has no contagious diseases, and information on any medical problems, which might interfere with the health of the clients.</li> </ul>	<b>Limited suspension</b> of the requirement that each staff member obtain a statement from a physician that the staff member has no contagious disease. A certified registered nurse practitioner (CRNP) or physician assistant (PA), rather than a physician, may certify that a staff member does not have any contagious disease and sign the health appraisal for the client.

55 Pa. Code 5310.32(c)(2)	(c) The CRRS staff shall obtain the following information about each client prior to the client's enrollment in the CRRS.  (2) A health appraisal signed by a licensed physician, which includes:  (i) A review of health history.	<b>Limited suspension</b> of the requirement that each client must receive a health appraisal signed by a licensed physician prior to the client's enrollment to the CRR.  If a client is unable to see a physician, the client may receive a
	(ii) A complete physical examination dated not more than 6 months prior to client's enrollment.  (iii) Drug or alcohol history.  (iv) Recommendations pertaining to medication and limitations of the client's activities or diet.	health appraisal from a licensed medical professional, such as a CRNP or PA. If a client is unable to obtain a health appraisal prior to their enrollment to the CRR, the client may obtain a health appraisal up to 15 days after enrollment.  Documentation of attempts to see a physician must be kept.
55 Pa. Code 5310.33 (a)	(a) The community residential rehabilitation service (CRRS) staff shall develop with each client an individualized written client residential service plan upon the client's enrollment in the CRRS.	Limited suspension of the requirement that staff shall develop with each client an individualized written client residential service plan upon the client's enrollment in the CRRS.  This will allow providers to continue to serve all clients
		appropriately in the event of staffing shortages and not spend valuable staff time completing documentation.  During the emergency declaration period, providers will have seven (7) calendar days to complete the psychosocial evaluation and initial residential service plan. The provider
		must document the reasons why the individual residential service plan was not completed upon enrollment.
55 Pa. Code 5310.33 (d)	(d) The CRRS staff shall evaluate the client's adjustment to the program within 30 days of enrollment and modify the service plan as needed. The residential service plan must be reviewed and updated every 60 days thereafter	<b>Limited suspension</b> of the requirement that CRRS staff shall evaluate the client's adjustment to the program within 30 days of enrollment and modify the service plan as needed and the residential service plan must be reviewed and updated every 60 days thereafter, during the emergency declaration period. Instead, OMHSAS would allow 35 and 65 days, respectively. The program <b>must</b> document the reason(s) why the updates were not completed within the timeframes listed

55 Pa. Code 5310.33 (e)	(e) Each client in a CRRS must spend a major portion of his time out of the residence. The goal of such involvement outside the residence is to increase the client's use of community resources and participation in community activities which the client can continue to use upon program termination. The method for achieving this goal must be reflected in each client's residential	<b>Full suspension</b> of the requirement that each client in a CRRS must spend a major portion of his time out of the residence.
55 Pa. Code 5310.41 Staffing and training. (a)	services plan.  (a) The community residential rehabilitation service (CRRS) must have staff sufficient in number and qualifications to carry out the functions of CRRS which include supervision, personal assistance, and psychosocial rehabilitation services as indicated in the CRRS program description.	Limited suspension, provided due diligence is taken to maintain direct-care staffing requirements as outlined in the provider's program description. A conditional plan must be reviewed and approved by OMHSAS if the provider anticipates they will not be in compliance with this regulation.
55 Pa. Code 5310.41(f)	(f) A mental health professional shall supervise the client service plan process and shall sign each individual residential service plan and service plan review.	Limited suspension of the requirement that a mental health professional shall sign each individual residential service plan and service plan review. Providers are however strongly encouraged to have the mental health professional sign the service plan electronically when possible.
55 Pa. Code 5310.51. Case record. (b) (4) (ii) (iv)	<ul> <li>(b) Each case record must include the following information:</li> <li>(4) The following program information must be in the case record:</li> <li>(ii) Individual's residential service plan, dated and signed.</li> <li>(iv) Service plan reviews and other reports of performance and progress which must be dated and signed.</li> </ul>	Limited Suspension: Client signature requirements, including those for residential plans, have been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.



SUBSTAINCE	ABUSE SERVICES	
55 Pa. Code 5310.72 (a). Safety procedures.	(a) The community residential rehabilitation service (CRRS) staff shall arrange for the local fire department or another outside safety consultant to inspect and approve each physical site for fire safety and to determine the number, location and type of fire extinguishers and smoke detectors. This fire safety inspection shall be done for initial occupancy and then at least every 2 years thereafter. All inspections must be documented.	<b>Limited suspension,</b> provided due diligence is taken to obtain fire safety inspection within the timeframe required by the regulation and documentation is kept regarding inability to obtain required services timely. A conditional plan must be reviewed and approved by OMHSAS if the provider anticipates they will not meet compliance with this regulation.
55 Pa. Code 5310.72(d) Safety procedures	<ul> <li>(d) Fire drills at each CRRS site must be:</li> <li>(1) Held every 2 months.</li> <li>(2) Held during the night at least semiannually.</li> <li>(3) Recorded, including date, time, time required for evacuation, and number of persons taking part.</li> </ul>	<b>Limited suspension,</b> provided due diligence is taken to hold fire drills within the required timeframes and documentation is kept regarding inability to hold required fire drills. A conditional plan must be reviewed and approved by OMHSAS if the provider anticipates they will not meet compliance with this regulation.
55 Pa Code 5310.73(d)(2)	(e) Each CRRS site shall meet the following requirements for client residential living areas or spaces:  (2) Bedrooms shall be either single or double occupancy. A single occupancy room shall have 80 square feet or more of floor space. A double occupancy room shall have 60 square feet or more of floor space for each client.	Limited suspension of the requirement that a single occupancy room shall have 80 square feet or more of floor space and that a double occupancy room shall have 60 square feet or more of floor space for each client in the event that a client must be moved or isolated/self-quarantined while participating in the program due to the program's adherence to CDC guidelines to COVID-19-related symptoms.  This will allow programs to maintain compliance with room space requirements, if the need to isolate any resident arises, but the building layout does not support the CDC
55 Pa. Code 5310.81(b)(3)(iii) Medication	(b) CRRS programs shall establish and implement written policies and procedures regarding medications which meet legal restrictions regarding administration of medication. Medication policies and procedures shall include:	recommended space.  Limited Suspension: All prescribed medications for the week may be put into a weekly pill container for the beneficiary. Medications should still be stored and locked in a locked room. Visual monitoring of resident self-administration should continue. Signatures confirming resident self-administration should continue to be obtained by staff and residents.

SUBSTAINCE	ABUSE SERVICES	
	(3) The circumstances under which the CRRS stores medications for clients. Storing medications is subject to the following limitations:	
	(iii) Medications shall be kept in their original prescription containers.	
55 Pa. Code 5310.82(c)(1) 5310.82 (c)(5)	c) In the unusual circumstance where CRRS staff rather than clients purchase and prepare the food, the following additional requirements apply:  (1) Each client shall be involved in the meal planning, shopping, food preparation, service and kitchen chores as evidenced in task schedules and in the client's individual service plan.	<b>Full suspension</b> of the requirement that (1) each client shall be involved in the meal planning, shopping, food preparation, service and kitchen chores as evidenced in task schedules and in the client's individual service plan, and (5) menus shall be prepared for 1 week in advance.
	(5) Menus shall be prepared for 1 week in advance and must be retained on file for at least 8 weeks.	
	Requirements for Long-Term Structured	d Residence Licensure
55 Pa. Code § 5320.41.	The provider shall require and document preemployment and biennial physical examinations for direct-care and support staff to include screening for:  (1) Tuberculosis  (2) Hepatitis	Limited Suspension: If CRNP or PA signs off that they examined the staff member and feels comfortable to verify that the staff member is free of communicable diseases, without ordering the extra tests to verify, that is sufficient prior to hire; the staff member has a 90-day grace period to complete the screening requirements. Staff already working for a program may also have a 90-day grace period for their biennial physical exams and screenings.
55 Pa. Code § 5320.42. (3)(4)(5) (8)	The provider of LTSR services shall:  (3) Have a minimum of two direct-care staff persons awake and on duty within the LTSR whenever 10 to 16 residents inclusive are on the premises. A third direct-care staff person shall be either onsite or available to respond onsite within 30 minutes.	<b>Limited suspension</b> for (3) and (4). A conditional plan <b>must</b> be reviewed and approved by OMHSAS if the provider anticipates they will not meet compliance with these regulatory provisions.

SUBSTANC	CE ABUSE SERVICES	·
	(4) Have a minimum of two direct-care staff, awake and on duty within the LTSR whenever fewer than 10 residents are on	
	the premises.	
	(E) Have sufficient novel intrinctions available to me at the	
	(5) Have sufficient psychiatric time available to meet the psychiatric needs of the resident. At least 1/2 hour of	<b>Limited suspension</b> of the requirement that the psychiatrist is
	psychiatric fleeds of the resident. At least 1/2 hour of psychiatric time per resident per week is required.	available to meet with each resident a minimum of ½ hour per week. It can be 15 minutes per week instead
	(8) Employ substitute staff with equivalent qualifications when	,
	staff are absent so that minimum direct-care staffing	<b>Limited suspension</b> of the requirement that substitute staff
	requirements are always met.	have equivalent qualifications to absent staff. Please see
		regulation 5320.43(c) below regarding direct-care staff
		qualifications. However, the substitute staff must receive
55 Pa Code	(c) A mental health worker shall be a person who has	adequate training to provide service to program residents.  Full suspension of the requirement that a mental health
5320.43(c)	completed 12 semester hours of college training in a mental	worker shall have completed 12 semester hours of college
3320.43(0)	health related field or has at least a high school diploma or	training in a mental health related field. The staff member
	equivalency and 6 months of formal training in mental health or	may be working on fulfilling that requirement at the time of
	a related field.	hire. Staff may also have at least a high school diploma <b>OR</b>
	a related melal	equivalency with 4 months of formal training in mental health.
		Staff members with these qualifications will have an extra 24
		hours of "shadowing" a seasoned staff member, which will be
		documented as a part of their orientation and completed prior
		to working independently on the floor.
55 Pa Code	The program director shall oversee orientation and training of	Full suspension of the requirement that staff are retrained on
5320.45(4)	the staff, including:	all policies and procedures along with all topics listed under
	4) Written documentation that ongoing training	orientation requirements (5320.45.3) annually. Training
	includes review and update of all policies and	should focus on CDC recommendations and service provision,
	procedures including those listed under topics for	along with any new policies and procedures. Regular training
	orientation.	of standard topics may commence after emergency
		declaration is lifted. All onboarding staff <b>must</b> still review all
		topics required under 5320.45(3).

) Complete an initial assessment on admission by the terdisciplinary team of the resident's mental, physical and initial needs including a mobility assessment.  ) Develop an initial treatment plan, within 72 hours, based on e initial assessment by the interdisciplinary team.  ) Develop a comprehensive treatment plan within 10 days of limission.	assessment be completed on admission (1), an initial treatment plan be developed within 72 hours (2), and that a comprehensive treatment plan be developed within 10 days of admission (4) by the interdisciplinary treatment team. Programs will be given a 7 calendar-day grace period to complete the initial assessment and the initial treatment plan. Programs will be given a 10 calendar-day grace period to complete the comprehensive treatment plan. The due dates will be as follows:  Initial assessment: by day 7 with all required treatment team signatures.
cial needs including a mobility assessment.  ) Develop an initial treatment plan, within 72 hours, based on e initial assessment by the interdisciplinary team.  ) Develop a comprehensive treatment plan within 10 days of	comprehensive treatment plan be developed within 10 days of admission (4) by the interdisciplinary treatment team.  Programs will be given a 7 calendar-day grace period to complete the initial assessment and the initial treatment plan.  Programs will be given a 10 calendar-day grace period to complete the comprehensive treatment plan. The due dates will be as follows:  Initial assessment: by day 7 with all required treatment
<ul> <li>Develop an initial treatment plan, within 72 hours, based on e initial assessment by the interdisciplinary team.</li> <li>Develop a comprehensive treatment plan within 10 days of</li> </ul>	admission (4) by the interdisciplinary treatment team.  Programs will be given a 7 calendar-day grace period to complete the initial assessment and the initial treatment plan.  Programs will be given a 10 calendar-day grace period to complete the comprehensive treatment plan. The due dates will be as follows:  Initial assessment: by day 7 with all required treatment
e initial assessment by the interdisciplinary team.  Develop a comprehensive treatment plan within 10 days of	Programs will be given a 7 calendar-day grace period to complete the initial assessment and the initial treatment plan. Programs will be given a 10 calendar-day grace period to complete the comprehensive treatment plan. The due dates will be as follows:  • Initial assessment: by day 7 with all required treatment
) Develop a comprehensive treatment plan within 10 days of	complete the initial assessment and the initial treatment plan. Programs will be given a 10 calendar-day grace period to complete the comprehensive treatment plan. The due dates will be as follows:  Initial assessment: by day 7 with all required treatment
	Programs will be given a 10 calendar-day grace period to complete the comprehensive treatment plan. The due dates will be as follows:  Initial assessment: by day 7 with all required treatment
	complete the comprehensive treatment plan. The due dates will be as follows:  Initial assessment: by day 7 with all required treatment
Imission.	<ul><li>will be as follows:</li><li>Initial assessment: by day 7 with all required treatment</li></ul>
	team signatures.
	Initial treatment plan: by day 10 with all required
	treatment team signatures.
	Comprehensive treatment plan: by day 20 with all required
	treatment team signatures.
ne interdisciplinary treatment team shall review treatment	Limited suspension of the requirement that the
ans at least every 30 days or more frequently as the resident's	interdisciplinary treatment team review treatment plans at
ndition changes. A report of the review and findings and the	least every 30 days and that a reassessment of each resident's
sident's progress toward meeting program goals and	mental, physical, and social needs be completed annually (4).
pjectives shall be documented by the interdisciplinary team in	Programs will be given a 10 calendar-day grace period to
e resident's record.	complete 30 calendar-day updates and the annual
4) Reassessment of each resident's mental, physical and	reassessment. The due dates will be as follows:
cial needs, including a mobility assessment as follows:  i) Annually	30-day updates: at least every 40 days with all required treatment team signatures.
	Annual reassessment: 30 calendar-day grace period from
	the date it is due. (assessments due 4/1/20 will not be due until 5/1/20).
)(5) Recording of physicians' orders in each resident's clinical	Full suspension, of requirement that the recording of the
cord that is reviewed, renewed and signed by the physician	physician's orders in each client's clinical record is signed by
very 30 days.	the physician every 30 days, although the providers are
	strongly encouraged to obtain the signature electronically when possible.
( ) (	e resident's record.  Reassessment of each resident's mental, physical and cial needs, including a mobility assessment as follows:  Annually  Seconding of physicians' orders in each resident's clinical cord that is reviewed, renewed and signed by the physician

(c) Pharmaceutical services shall include:	Full suspension of the requirement for a written quarterly
(1) A written quarterly review of the drug regimen of each	review of the drug regimen of each resident by a licensed
resident by a licensed pharmacist and the findings submitted to	pharmacist and the findings submitted to the program director
the program director and prescribing physicians	and prescribing physicians.
(a) The use of seclusion is prohibited in LTSRs.	<b>Full suspension</b> of the requirement that the use of seclusion is prohibited in the LTSR <b>only if</b> there is a documented reason to believe the resident has a communicable disease or COVID-19 related symptoms.
	Self-isolation for the health, safety, and well-being of other residents and staff (within reason and ability) is not seclusion. LTSR programs should follow CDC guidelines if they believe a resident has COVID-19-related symptoms.
	The LTSR <b>must</b> document attempts for the resident to see a physician to be tested within 24 hours of the first documented symptoms.
The LTSR provider shall:  (1) Develop written arrangements for providing routine and	<b>Limited suspension</b> of the requirement for annual and routine exams and medical and dental care for residents.
emergency medical and dental care for residents.	Documentation of the appointment scheduling in the resident's record will illustrate the closest date available to the due date that the medical or dental provider was able to serve the resident.
(3) Have first aid supplies available and adhere to current	<b>Limited suspension</b> of the requirement that LTSR programs
·	strictly adhere to current Centers for Disease Control and the
·	Department of Health's recommendations for universal
administration of first aid and CPR.	precautions, related to the care of residents who have
	displayed symptoms of COVID-19. All attempts to attain PPE's and facemasks, along with any other supply requirement, will be documented.
	(1) A written quarterly review of the drug regimen of each resident by a licensed pharmacist and the findings submitted to the program director and prescribing physicians  (a) The use of seclusion is prohibited in LTSRs.  The LTSR provider shall:  (1) Develop written arrangements for providing routine and emergency medical and dental care for residents.



SUBSTAINCE	ABUSE SERVICES	
55 Pa. Code 5320.82. Fire protection and safety.	<ul> <li>(a) The program director shall arrange for the local fire department or another outside safety consultant to inspect and approve each LTSR site for fire safety and to determine the number, location and type of fire extinguishers and smoke detectors required. This fire safety inspection shall be done before initial occupancy and repeated at least every 2 years thereafter. Inspections shall be documented.</li> <li>(e) Fire drills at each LTSR site shall be documented and held at least every 2 months; nighttime drills shall be conducted semiannually</li> </ul>	<ul> <li>(a) Limited suspension of the annual requirement of fire safety inspections provided due diligence is taken to obtain fire safety inspection within the timeframe required by the regulation and documentation is kept regarding inability to obtain required services timely. A conditional plan must be reviewed and approved by OMHSAS if the provider anticipates they will not meet compliance with this regulation.</li> <li>(e) Limited suspension, provided due diligence is taken to hold fire drills within the required timeframes and documentation is kept regarding inability to hold required fire drills. A conditional plan must be reviewed and approved by OMHSAS if the provider anticipates they will not meet compliance with this regulation.</li> </ul>
55 Pa Code 5320.83(b)	(b) A single occupancy room shall have at least 80 square feet of floor space. Bedrooms for two persons shall have at least 60 square feet of floor space per person and have sufficient floor space to accommodate the items required in §5320.84 (relating to furnishings and equipment).	Limited suspension of the requirement that a single occupancy room shall have 80 square feet or more of floor space and that a double occupancy room shall have 60 square feet or more of floor space for each client in the event that a client must be moved or isolated/self-quarantined while participating in the program due to the program's adherence to CDC guidelines to COVID-19-related symptoms. This will allow programs to maintain compliance with room space requirements, if the need to isolate any resident arises, but the building layout does not support the CDC recommended space.



SUBSTAINCE	Intensive Behavioral Health Services (Licensing)		
55 Pa. Code 5240.3 (c) Provider eligibility	An IBHS agency that holds an outpatient psychiatric clinic, a psychiatric partial hospitalization program or a family-based mental health license issued by the Department as of October 19, 2019, shall obtain a license under this chapter when the license expires.	<b>Limited Suspension:</b> Delay of enforcement. An IBHS agency that holds an outpatient psychiatric clinic, a psychiatric partial hospitalization program or a family-based mental health license issued by the Department as of October 19, 2019, shall obtain a license by 1/17/2021.	
55 Pa Code 5240.3(d) Provider eligibility	An IBHS agency that is approved to provide ABA services shall obtain a license under this chapter within 180 days of October 19, 2019.	<b>Limited Suspension:</b> 180-day delay of enforcement. An IBHS agency that is approved to provide ABA services shall obtain a license by 10/15/2020.	
55 Pa. Code 5240.3(e) Provider eligibility	An unlicensed IBHS agency that is currently approved to provide BHRS shall obtain a license under this chapter within 1 year of October 19, 2019.	<b>Limited Suspension:</b> 90-day delay of enforcement. An unlicensed IBHS agency that is currently approved to provide BHRS shall obtain a license by January 17, 2021.	
55 Pa. Code 5240.21(a) Assessment	Within 15 days of the initiation of services and prior to completing an ITP, a face-to-face assessment shall be completed for the child, youth or young adult by an individual qualified to provide behavior consultation services or mobile therapy services.	Limited Suspension: Method of contact for assessment may include telehealth during the emergency declaration period.  Limited suspension to completing the assessment within 15 days. It may be completed within 30 days during the emergency declaration period.	
55 Pa. Code 5240.22 (a) Individual Treatment Plan	A written ITP shall be completed within 30 days after the initiation of a service and be based on the assessment completed in accordance with 5240.21 (relating to the assessment).	<b>Limited suspension</b> to completing the ITP within 30 days. It may be completed within 45 days during the emergency declaration period.	



55 Pa. Code 5240.22 (h) Individual Treatment Plan	The ITP and all updates shall be reviewed, signed and dated by the youth, young adult or parent of legal guardian of the child or youth, and the staff person who completed the ITP.	Limited Suspension: Signature requirements, including signatures for treatment plans/service plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
55 Pa. Code 5240.22 (i) Individual Treatment Plan	The ITP and all updates shall be reviewed, signed and dated by an individual who meets the qualifications of a clinical director in 5240.12 (relating to staff qualifications).	Limited Suspension: Signature requirements, including signatures for treatment plans/service plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
55 Pa. Code 5240.72(b)(2) 5240.72(b)(3) Supervision of staff who provide individual services	Onsite supervision and direct observation requirements for individuals providing BHT services.	<b>Limited Suspension:</b> Onsite supervision and direct observation requirements are suspended during the emergency declaration period. The provision of supervision via video technology is acceptable to meet the regulation during the emergency declaration.
55 Pa. Code 5240.72 (e) Supervision of staff who provide individual services	two-way audio and video transmission must meet HIPAA standards per public law No 104-191.	Limited Suspension: Providers that deliver services through telehealth must comply with federal Department of Health and Human Services' Office of Civil Rights (OCR) guidance regarding compliance with Health Insurance Portability and Accountability Act (HIPAA) as outlined in <a href="https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html">https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html</a> .

55 Pa. Code 5240.82(b)(2) 5240.82 (c)(2) 5240.82 (c)(3) Supervision of staff who provide ABA services	Onsite supervision and direct observation requirements for individuals providing BHT-ABA services	Limited Suspension: Onsite supervision and direct observation requirements are suspended during the emergency declaration period. The provision of supervision via video technology is acceptable to meet the regulation during the emergency declaration.
55 Pa. Code 5240.82 (g) Supervision of staff who provide ABA services	two-way audio and video transmission must meet HIPAA standards per public law No 104-191.	Limited Suspension: Providers that deliver services through telehealth must comply with federal Department of Health and Human Services' Office of Civil Rights (OCR) guidance regarding compliance with Health Insurance Portability and Accountability Act (HIPAA) as outlined in <a href="https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html">https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html</a> .
55 Pa. Code 5240.85(a) Assessment	Within 30 days of the initiation of services and prior to completing an ITP, a face-to-face assessment shall be completed for the child, youth or young adult by an individual qualified to provide behavior consultation services or mobile therapy services.	Limited Suspension: Method of contact for assessment may include telehealth during the emergency declaration period.  Limited suspension to completing the assessment within 30 days. It may be completed within 60 days during the emergency declaration period.
55 Pa. Code 5240.86 (a) Individual Treatment Plan	A written ITP shall be completed by an individual qualified to provide behavior analytic services or behavior consultation-ABA services within 45 days after the initiation of a service and be based on the assessment completed in accordance with 5240.85 (relating to the assessment).	<b>Limited suspension</b> to completing the ITP within 45 days. It may be completed within 75 days during the emergency declaration period.

55 Pa. Code 5240.86(h) Individual Treatment Plan	The ITP and all updates shall be reviewed, signed and dated by the youth, young adult or parent of legal guardian of the child or youth, and the staff person who completed the ITP.	Limited Suspension: Signature requirements, including signatures for treatment plans/service plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
55 Pa. Code 5240.86(i) Individual Treatment Plan	The ITP and all updates shall be reviewed, signed and dated by an individual who meets the qualifications of a clinical director in 5240.81 (relating to staff qualifications).	Limited Suspension: Signature requirements, including signatures for treatment plans/service plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
55 Pa. Code 5240.92(f) Supervision of staff who provide group services	two-way audio and video transmission must meet HIPPA standards per public law No 104-191.	Limited Suspension: Providers that deliver services through telehealth must comply with federal Department of Health and Human Services' Office of Civil Rights (OCR) guidance regarding compliance with Health Insurance Portability and Accountability Act (HIPAA) as outlined in <a href="https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html">https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html</a> .
55 Pa. Code 5240.96(h) Individual Treatment Plan	The ITP and all updates shall be reviewed, signed and dated by the youth, young adult or parent or legal guardian of the child or youth, and the staff person who completed the ITP.	Limited Suspension: Signature requirements, including signatures for treatment plans/service plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.

55 Pa. Code 5240.96(i) Individual Treatment Plan	The ITP and all updates shall be reviewed, signed and dated by an individual who meets the qualifications of a clinical director in § 5240.12 (relating to staff qualifications).	Limited Suspension: Signature requirements, including signatures for treatment plans/service plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
55 Pa. Code 5240.97(d)	Requirement for Group Services to be provided in school, community settings, and community like settings.	<b>Limited Suspension:</b> Subject to OMHSAS's approval, group services can be delivered via telehealth.
55 Pa. Code 5240.101(b) EBT initiation requirements	Prior to the initiation of EBT, the IBHS agency shall obtain written consent to receive the EBT identified in the written order from the youth, young adult or parent or legal guardian of a child or youth.	Limited Suspension: Signature requirements, including signatures for treatment plans/service plans and written consent, have also been suspended. Verbal consent must be documented in the medical record at the time of service and providers are strongly encouraged to obtain signatures electronically when possible.
55 Pa. Code 5240.96(a) Individual Treatment Plan	A written ITP shall be completed within 30 days after the initiation of group services and be based on the assessment completed in accordance with 5240.95 (relating to assessment).	<b>Limited suspension</b> to completing the ITP within 30 days. It may be completed within 45 days during the emergency declaration period.
55 Pa. Code 5240.95(a) Assessment	Within 15 days of the initiation of services and prior to completing an ITP, a face-to-face assessment shall be completed for the child, youth or young adult by a graduate level professional.	Limited Suspension: Method of contact for assessment may include telehealth during the emergency declaration period.  Limited suspension to completing the assessment within 15 days. It may be completed within 30 days during the emergency declaration period.

55 Pa. Code	Timelines for assessment, and ITPs in individual, ABA and Group	Refer to responses to the following provisions:
5240.102(a)(b)(c) Assessment and	sections.	• 1155.32 (a)(2) Payment conditions for individual services (assessment)
individual treatment plan		• 1155.32(a)(5) Payment conditions for individual services (ITP)
		• 1155.33 (a)(2) Payment conditions for ABA services (assessment)
		• 1155.33(a)(5) Payment conditions for ABA services (ITP)
		• 1155.34 (a)(2) Payment conditions for Group services (assessment)
		• 5240.21(a) Assessment (Individual Services)
		• 5240.22 (a) Individual Treatment Plan (Individual Services)
		• 5240.22 (h) Individual Treatment Plan (Individual Services)
		• 5240.22 (i) Individual Treatment Plan (Individual Services)
		• 5240.85 (a) Assessment (ABA)
		• 5240.86 (a) Individual Treatment Plan (ABA)
		• 5240.86(h) Individual Treatment Plan
		5240.86(i) Individual Treatment Plan (ABA)