



Weekly Team Huddle: Coronavirus Affiliate Call
COVID-19 Response – Summary Panel Discussion
March 17, 2020

Panel re: business continuity planning

Pam Green
Donna Davidson
Chris McMahon

Looking out on next 30 days what are biggest concerns

Pam – biggest is cash flow related to closure of day programs. Serve a lot through HCBS waiver and if programs are closed without revenue will impact cash flow. In Ohio the governor has been aggressive in shutting things down and will likely be mandated to close day programs within the week. In discussion to see if instead of lay-off staff, if they could sub contract to a residential provider. And state may be willing to relax some rules to allow.

Donna – as far as day to day they are a direct delegate for federal programs. Have been receiving guidance that even though programs are not operational they will still be able to pay staff. 200 contractors that they are trying to get the OK from the state to move forward with telehealth to be able to keep them working and providing services, but the state has been slow to respond. Also, fundraising is what provides the revenue that fills the holes, have an event next month as well as individual income the is being impacted by the crisis.

Chris – looking at short- and long-term liquidity issues such as legislation focused on people with 500 or less employees which focuses. The exposure of 2 weeks paid vacation for larger companies is also insurmountable. What will this do on liquidity. Also focusing on the ways to extend billing, can variously types of billing be converted to telehealth, etc. The is no one straight arrow for these issues. The scenario planning must take us out beyond the immediate time frame – when this turns around the economy will be different, which will likely affect us in new ways going forward in the long term.

Long term economic impact, what is the long-term situational planning to deal with this.

Some programs also can take a long time to recover depending on what is going on with the economy, any scenario planning in that area as well?

Chris – assuming this is at least a 6-month recovery period once the shift does happen. Many will be evaluating investment portfolios; government spending may also become a problem. Such as delays on payments to providers over the next 6-8 months. How can we be positioned once we've reached the other side?



MCOs are having trouble meeting their spends because it must be spent on clients, what are the opportunities in each state to talk to MCOs and see if they are meeting these guidelines and if there is some resource there for affiliates? May be able to launch something around that.

In Cincinnati there are some social enterprise programs that are excelling right now, so they can bring some folks in to these programs who are not being served by other facilities that have closed. Also have been able to move staff into some different services areas as well.

In Georgia, there is the ability to provide food through some services and potentially some children services as well.

How have boards, community partners, and networks been activated?

Chris – this has been at the forefront of our response. This is an opportunity to essentially shore up what protocols there might be, including continuity planning. Communication has been at the forefront of their response. It has been very important to reach out to various supply chains and make sure they are prepared. The board and donors have an opportunity to start dialogue with vendors, like banks and insurance companies.

Pam – have made the board aware. Community foundation and local united way have set up emergency assistant funds for local nonprofits facing payroll challenges. The plan for this year was to make a business continuity plan anyway and are now learning the things that they had not considered, specifically for a pandemic situation.

Gaps included: transportation, families who don't have other options, families who find it irresponsible for them to stay open. Pandemics are so different from other disasters on how business is conducted.

Patient COVID-19 questionnaires used at Northern Georgia, still operating EI, prior to going into a visit provider are calling parents to collect information prior to providing services. Goal is to protect the health of providers and families.