













Special Tribal Consultation Meeting: COVID-19 Federal Emergency Authorities Request

March 19, 2020



AZ Governor's Emergency Declaration

- On March 11, Governor Doug Ducey issued a Declaration of Emergency and an Executive Order regarding the COVID-19 outbreak in Arizona.
- This action provides health officials and administrators with tools and guidance necessary to combat the continued spread of COVID-19 and to reduce financial burdens on Arizonans by lowering healthcare costs associated with the virus.



COVID-19 Federal Emergency Authorities Request

- On March 17, 2020, AHCCCS submitted a formal request to CMS to waive certain Medicaid and KidsCare requirements to support Arizona's Response to COVID-19.
- AHCCCS is seeking a broad range of emergency authorities to:
 - Strengthen the provider workforce and remove barriers to care for AHCCCS members
 - Enhance Medicaid services and supports for vulnerable members for the duration of the emergency period
 - Remove cost sharing and other administrative requirements to support continued access to services



AHCCCS Website - COVID 19 Emergency Authorities Request Letter







Strengthening the Provider Workforce & Removing Barriers to Care

AHCCCS has requested authority to implement the following flexibilities, for the duration of the emergency period, under an 1135 Waiver:

- Permit providers located out of state to offer both emergency and non-emergency care to Arizona Medicaid and CHIP enrollees
- Streamline provider enrollment requirements
- Cease revalidation of providers who are located in state or otherwise directly impacted by the disaster event
- Waive the requirement that physicians and other healthcare professionals be licensed in Arizona, to the extent consistent with state law
- Waive payment of the provider enrollment application fee
- Waive requirements for site visits to enroll a provider



Strengthening the Provider Workforce & Removing Barriers to Care (Cont.)

- Suspend Medicaid fee-for-service prior authorization requirements
- Require fee-for-service providers to extend existing prior authorizations through the termination of the emergency declaration
- Suspend pre-admission screening and annual resident review (PASRR)
 Level I and Level II assessments
- Excuse the State from the requirement to reduce payments to ICF-IIDs and nursing facilities by the patient's cost of care due to the post-eligibility treatment of income



Enhancing Medicaid Services & Supports to Combat COVID-19

AHCCCS has requested expenditure authority under an 1115 Waiver to implement the following Medicaid services and supports for AHCCCS members for the duration of the emergency period:

- Expand the current limit for respite hours to 720 hours per benefit year (current limit: 600 hours per benefit year)
- Permit payment for home and community based services (HCBS) rendered by family caregivers or legally responsible individuals
- Expand the provision of home delivered meals to all eligible populations
- Provide temporary housing, not to exceed six months, if a beneficiary is homeless or is at imminent risk of homelessness and has tested positive for COVID-19



Removing Cost Sharing & Other Requirements to Support Continued Access to Services

AHCCCS has requested to implement the following changes under its existing State Plans for the duration of the emergency period:

- Suspend existing cost sharing requirements for all AHCCCS members
- Suspend the application of premiums (and/or waive premium balances) for children enrolled in KidsCare
- Allow children enrolled in KidsCare to receive services beyond their certification period by extending CHIP renewal deadlines
- Delay action on certain changes in circumstances affecting KidsCare eligibility



Using Existing Federal Authority to Implement Other Administrative Flexibilities

AHCCCS is seeking CMS concurrence on the State's intent to:

- Extended application processing times
- Delayed renewal processing for AHCCCS members
- Delayed action on certain changes in circumstances affecting Medicaid eligibility
- Temporarily suspend premiums for all AHCCCS members for the duration of the emergency period
- Revise current managed care contracts to add a reconciliation to reimburse managed care organizations for expenses related to COVID-19 and the emergency declaration



Using Existing Federal Authority to Implement Other Administrative Flexibilities (Cont.)

- Implement SAMHSA's guidelines for opioid treatment program (OTP)
 providers to allow for 28 days of take home medication for beneficiaries
 that have been determined by their treating medical provider to be
 stable
- Direct OTP providers to utilize telehealth options for those in need without requiring an in person medical evaluation in cases where the person is compliant with dosing or in cases where the medication of choice is Bupenorphine
- Seek expedited approval for supplemental payments, if warranted



Updates From CMS As Of March 18, 2020

- CMS indicated that it will expeditiously review and approve Arizona's 1135 Waiver request
- CMS indicated that it will approve Arizona's request to suspend cost sharing requirements for all AHCCCS members and to modify certain eligibility requirements for KidsCare, for the duration of the emergency period, under a broad based "disaster relief" State Plan Amendment



Updates From CMS As Of March 18, 2020 (Cont.)

CMS indicated that it will consider granting the state expenditure authority for the following under our 1115 waiver:

- Expand the current limit for respite hours to 720 hours per benefit year (current limit: 600 hours per benefit year)
- Permit payment for home and community based services (HCBS) rendered by family caregivers or legally responsible individuals (this would allow parents to be paid
- Expand the provision of home delivered meals to all eligible populations
- Provide temporary housing, not to exceed six months, if a beneficiary is homeless or is at imminent risk of homelessness and has tested positive for COVID-19.
- Excuse the State from the requirement to reduce payments to ICF-IIDs and nursing facilities by the patient's cost of care due to the post-eligibility treatment of income.



Updates From CMS As Of March 18, 2020 (Cont.)

CMS encouraged Arizona to move forward with:

- Implementation of the Substance Abuse and Mental Health Services
 Administration's guidance for opioid treatment program (OTP) providers
 to allow for 28 days of take home medication for beneficiaries
- Directing OTP providers to utilize telehealth options for those in need without requiring an in-person medical evaluation in cases where the person is compliant with dosing or in cases where the medication of choice is Bupenorphine



Federal Legislation

- On March 18, 2020, the President signed into law the the Families First Coronavirus Response Act (H.R. 6201)
- This bill includes several Medicaid provisions, to help states response to COVID-19, including:
 - Prohibition of cost sharing on COVID-19 testing
 - An option to use Medicaid to provide testing for uninsured individuals at 100% FMAP
 - 6.2 percentage point increase to the state's normal FMAP for each quarter in which the national emergency remains in effect



Questions?



Points of Contact

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AHCCCS COVID-19 and Tribal Consultation Information

- AHCCCS COVID-19 Information: https://azahcccs.gov/AHCCCS/AboutUs/covid19.html
- AHCCCS FAQs Regarding COVID-19: https://azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.ht
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- AHCCCS Tribal Consultation Website (for meeting materials and summaries): https://www.azahcccs.gov/AmericanIndians/TribalConsultation/meetings.html



Thank You.

