March 17, 2020

Seema Verma
Administrator
U.S. Department of Health & Human Services
The Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

RE: Request for Emergency Authorities to Support Arizona’s Response to COVID-19

Dear Administrator Verma:

On March 13, 2020, the President of the United States declared the 2019 novel coronavirus (COVID-19) a nationwide emergency pursuant to Section 501(b) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121-5207 (the “Stafford Act”). The President’s declaration gives the Secretary of the U.S. Department of Health and Human Services the authority to enhance states’ ability to respond to the COVID-19 outbreak, including the power to temporarily waive or modify Medicaid and Children’s Health Insurance Program (CHIP) requirements under Section 1135 of the Social Security Act.

Accordingly, the Arizona Health Care Cost Containment System (AHCCCS) is requesting authority to waive certain Medicaid and CHIP requirements to the extent necessary to enable the State to combat the continued spread of COVID-19, including mitigating any disruption in care for AHCCCS members during the course of the emergency declaration.

**Strengthening the Provider Workforce & Removing Barriers to Care**

Arizona respectfully requests 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;
- 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; and
- 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
Arizona respectfully requests 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; and
- 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
Arizona respectfully requests authority to suspend cost sharing requirements for all AHCCCS members and to modify certain eligibility requirements for children enrolled in the KidsCare (CHIP) program under its existing State Plans for the duration of the emergency period:

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

Using Existing Federal Authority to Implement Other Administrative Flexibilities
AHCCCS respectfully seeks CMS concurrence on the State’s intent to:

- Revise current managed care contracts to add a reconciliation to reimburse managed care organizations for expenses related to COVID-19 and the emergency declaration;
- Temporarily suspend premiums for all AHCCCS members for the duration of the emergency period;
- Make changes to the State’s eligibility methodology for the duration of the emergency period, including:
  - Delayed renewal processing for AHCCCS members;
  - Delayed action on certain changes in circumstances affecting Medicaid eligibility; and
  - Extended application processing times.
- Implement 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 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; and
- Seek expedited approval for supplemental payments, if warranted.

We appreciate your commitment to supporting the State’s efforts to protect Arizonans during this public health emergency. We look forward to working with your team on these critical requests.

Sincerely,

Jami Snyder
Director