Welcome!

We are asking that everyone make sure and mute your phones throughout the meeting.

Do not put us on hold.

Once the presentation is completed we will open it for questions and call on anyone that has indicated that they have a comment or question.

To unmute your phone you will need to click on the microphone icon to remove the X or select *6 on your phone.





Behavioral Health Provider Call: COVID-19 Federal Emergency Authorities Request

April 7, 2020



Where do I find the latest information about COVID-19?

- AHCCCS updates the FAQ document daily to reflect the latest guidance for providers, members and plans.
- Please find guidance at: https://azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.html
- These are in English and Spanish.





Sections of the Frequently Asked Questions (FAQs) include:

Billing & Claims Clinical Delivery General COVID-19 Questions Health Plan & AHCCCS Fee-For-Service Programs Guidance Health Plan Requirements and Deliverables **Pharmacy & Supplies Provider Enrollment and Requirements** Rates **Telehealth Delivery and Billing**



Examples from the FAQ:

Question: Will members lose coverage during the COVID-19 emergency? **Answer:** No, per the Families First Coronavirus Response Act, AHCCCS will not disenroll members during the emergency (with the exception of death, those who move out of state, or those who voluntarily withdraw). Members who lost AHCCCS eligibility in March 2020 will be notified of their reinstatement. Question: Does AHCCCS cover testing for COVID-19? **Answer:** Yes, AHCCCS covers COVID-19 testing. HCPCS U0001 and U0002 have an effective date of February 4, 2020. CPT 87635 has an effective date of March 13, 2020. All codes have been entered in the AHCCCS PMMIS system.



Examples from the FAQ:

Question: During the COVID-19 emergency will AHCCCS members be required to pay premiums?

Answer: No. For the duration of the emergency, premium payments will be suspended for members enrolled in KidsCare and Freedom to Work programs. Members who have already paid March 2020 premiums will be credited, and individuals who were disenrolled in March will be reinstated for the duration of the emergency.



COVID-19 Information

AHCCCS is responding to an outbreak of respiratory illness, called COVID-19, caused by a novel (new) coronavirus. Health officials urge good hand washing hygiene, covering coughs, and staying home if you are sick.

On March 11, Governor Doug Ducey issued a Declaration of Emergency 🗹 🃆 and an Executive Order 🗹 📆 regarding the COVID-19 outbreak in Arizona, and subsequent Executive Orders 🖓 with further administrative actions.

On March 17, 2020, AHCCCS submitted a request to the Centers for Medicare and Medicaid Services (CMS) to waive certain Medicaid and KidsCare requirements in order to ensure ongoing access to care over the course of the COVID-19 outbreak. As of March 23, AHCCCS has received federal approval to implement programmatic changes to help ensure access to health care for vulnerable Arizonans.

To address Medicaid-related questions from providers and contractors about COVID-19, AHCCCS has developed a list of Frequently Asked Questions Regarding Coronavirus Disease 2019 (COVID-19), updated regularly is more information becomes available.

COVID-19 FAQs

Learn how to protect yourself and stop the spread of COVID-19. Visit azdhs.gov/COVID19 🗹 and cdc.gov/COVID19 🗹.

If you are an AHCCCS member who is experiencing flu-like symptoms, please call the 24-hour Nurse Line for your health plan (listed below):

24-Hour Nurse Line Numbers by Health Plan

Health Plan

Nurse Line Number



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

- AHCCCS is seeking a broad range of COVID-19 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



Available Authorities For COVID-19

- 1135 Waiver Authority to temporarily waive or modify certain Medicaid & CHIP requirements to ensure that sufficient health care items and services are available to meet the needs of enrollees during the emergency period
- **Disaster Relief State Plan Amendment (SPA)** Revise policies in Medicaid & CHIP state plans related to eligibility, enrollment, benefits, cost sharing, and/or payments

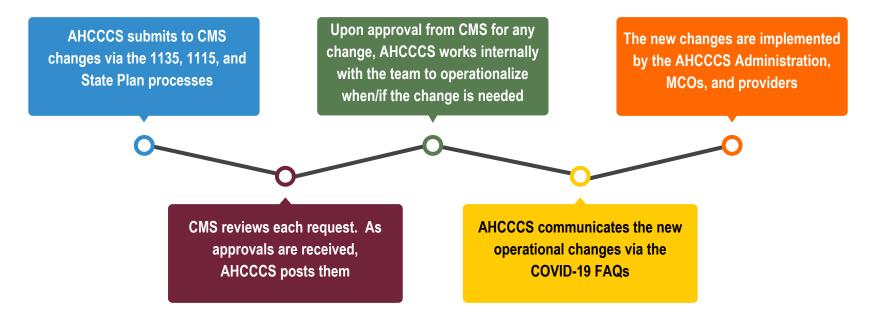


Available Authorities For COVID-19

- 1115 Waiver: Broad authority to approve a state's request to waive compliance with certain provisions of federal Medicaid law and authorize expenditures not otherwise permitted by law
- **1115 Waiver Appendix K** May be utilized by states during emergency situations to implement changes to home and community based services (HCBS)



How does the state pursue flexibilities to address COVID-19?



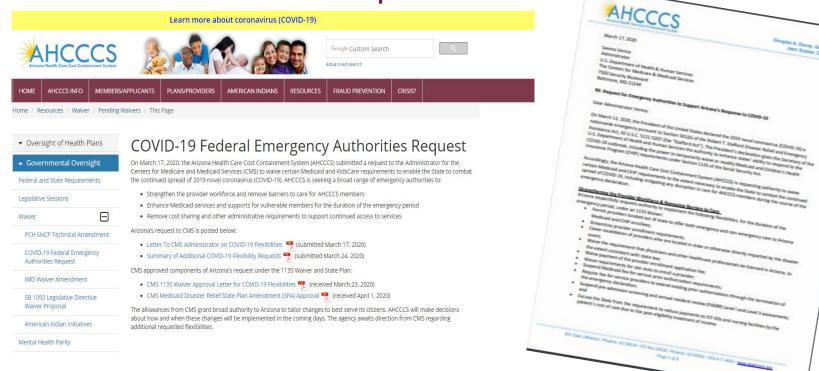


COVID-19 Federal Emergency Authorities Request

- On March 17, 2020, AHCCCS was one of the first states to submit a formal request to CMS to waive certain Medicaid and KidsCare requirements to enable the State to combat the continued spread of COVID-19, including mitigating any disruption in care for AHCCCS members
- A second request for flexibilities was sent to CMS on March 24, 2020, requesting additional authority for the duration of the emergency period



AHCCCS Website - COVID 19 Emergency Authorities Request Letter





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1135 Waiver Authorities Requested

- Permit providers located out of state to offer both emergency & non-emergency care to AHCCCS members
- Streamline provider enrollment requirements
- Waive the provider enrollment fees
- Suspend revalidation of providers who are located in state or otherwise directly impacted by the disaster event
- Waiving the requirement that physicians & other healthcare professionals be licensed in Arizona, to the extent consistent with state law
- Suspending pre-admission screening and annual resident review (PASRR) for individuals being considered for admission to a nursing facility
- Modifying existing prior authorization requirements for AHCCCS' fee-for-service programs



1115 Waiver Authorities Requested

Arizona requested the following new 1115 Waiver Authorities for the duration of the emergency period:

- Authority to make retention payments to all provider types as appropriate
- 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
- Continuous coverage for KidsCare members, regardless of any changes in circumstances or redeterminations at scheduled renewals that otherwise would result in termination
- Expand the current limit for respite hours to 720 hours per benefit year (current limit: 600 hours per benefit year)



Appendix K Authorities Requested

- Remove the current hourly service limitation for the Spouse as Paid Caregiver Program for duration for the emergency period (currently, spouses can render no more than 40 hours of services in a 7-day period)
- Permit retainer payments for ALTCS providers of habilitation and personal care services
- Permit payment for HCBS rendered by legally responsible individuals (parents)
- Authority to provide long-term care services and supports to impacted members regardless of whether or not timely updates are made in the plan of care, or if services are delivered in alternative settings



Appendix K Authorities cont.

- Authority to add an electronic method of service delivery (e.g., telephonic), allowing services to continue to be provided remotely in the home setting for:
 - Case managers
 - Personal care services that only require verbal cueing
 - o In-home habilitation
- Authority to expand the provision of home delivered meals to long term care members enrolled in the Arizona Long Term Care System (ALTCS) Department of Economic Security/Division of Developmental Disabilities (DES/DDD)
- Authority to modify service providers for home-delivered meals to allow for additional providers, including non-traditional providers



Appendix K Authorities cont.

- Allowing case management entities to provide direct services in response to COVID-19
- Extending reassessments and reevaluations of a member's institutional level of need for up to one year past the due date, if needed
- Allowing the option to conduct evaluations, assessments, and person-centered service planning meetings virtually/remotely in lieu of face-to-face meetings
- Adjusting prior approval/authorization criteria approved in the waiver
- Adjusting assessment requirements
- Adding an electronic method of signing off on required documents, such as the person-centered service plans



1115 Waiver Appendix K Authorities cont.

- Authority to waive the State from complying with the HCBS settings requirement that individuals are able to have visitors of their choosing at any time. The state is seeking this authority to minimize the spread of infection during the COVID-19 pandemic
- Temporarily expand setting(s) where services may be provided (e.g. hotels, shelters, schools, churches)
- Temporarily allow for payment for services for the purpose of supporting waiver participants in an acute care hospital or short-term institutional stay when necessary supports (including communication and intensive personal care) are not available in that setting, or when the individual requires those services for communication and behavioral stabilization, and such services are not covered in such settings



Medicaid Disaster Relief SPA Authorities

- Waiver of public notice and Tribal Consultation requirements
- Permit state to cover COVID-19 testing for uninsured individuals at 100% FMAP
- 12 months of continuous eligibility for members under 19 regardless of change in circumstance
- Suspension of all copays, premiums or any cost sharing for all members for the duration of the declared emergency
- Flexibility to makes exceptions to published Preferred Drug List if drug shortages occur
- Flexibility to allow other provider types to order Home Health services throughout the duration of the declared emergency
- Extend payment for reserved bed-hold days to 30 days, for the duration of the emergency period, for Nursing Facilities, Intermediate Care Facilities, "Special hospital" licensed to provide psychiatric services, Behavioral health inpatient facilities, or Behavioral health residential facilities



CHIP Disaster Relief SPA Authorities

- Waiver of public notice and Tribal Consultation requirements.
- Suspension of premiums and waiver of premium balance
- Suspension of the requirement that a child is ineligible for KidsCare for a period of three months from the date of the voluntary discontinuance of employer-sponsored group health insurance or individual insurance coverage
- Waiver from requirements related to timely processing during the disaster
- Waiver from timely processing of renewals and/or deadlines for families to respond to renewal requests



Status of AZ's Federal Emergency Authorities Request as of April 6, 2020

- CMS has approved components of Arizona's request:
 - o 1135 Waiver March 23rd
 - Expansion of ALTCS Respite Hours March 25th
 - o Medicaid Disaster Relief SPA April 1st
 - o 1115 Waiver Appendix K Request April 6th
- Items still pending with CMS:
 - Medicaid Disaster Relief SPA (changes to home health authorization and bed-hold days)
 - o CHIP Disaster Relief SPA
 - o 1115 Waiver Request



Families First Coronavirus Response Act

- The Families First Coronavirus Response Act 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
 - Continuous enrollment of Medicaid members for the duration of the emergency period



CARES Act

Coronavirus Aid, Relief, and Economic Security (CARES) Act contains a vast array of provisions for health care providers, including:

- \$100 billion to the "Public Health and Social Services Emergency Fund" to reimburse "eligible health care providers" for health care related expenses or lost revenues that are attributable to coronavirus.
- \$1.32 billion in supplemental funding to community health centers for detecting, preventing, diagnosing, and treating patients for COVID-19
- Expands existing Medicare accelerated payment program to more hospitals, including critical access hospitals and those in rural and frontier areas
- Permanently aligns substance use disorder disclosure rules at 42 CFR Part 2 with rules governing other protected health information under HIPAA



Next steps:

The allowances from CMS grant broad authority to Arizona to tailor changes to best serve its citizens. AHCCCS will make decisions about how and when these changes will be implemented in the coming days. The agency awaits direction from CMS regarding additional requested flexibilities.



Questions?



AHCCCS COVID-19

- AHCCCS COVID-19 Information: https://azahcccs.gov/AHCCCS/AboutUs/covid19.html
- AHCCCS FAQs Regarding COVID-19: <u>https://azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.ht</u> <u>ml</u>
- AHCCCS Federal Authorities Request: <u>https://www.azahcccs.gov/Resources/Federal/PendingWaivers/1135.html</u>



Thank You.

