



Medicaid's Response to the COVID-19 Pandemic

Medicaid and CHIP Payment and Access Commission

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Overview

- Statutory authorities for emergency declaration
- Responses under Medicaid authorities
- HHS and CMS actions related to COVID-19
- State actions
- Congressional action
- Other COVID-19 related actions

Statutory authorities

- Public Health Service Act (P.L. 115-96, as amended)
- Robert T. Stafford Disaster Relief and Emergency Assistance Act (P.L. 93-288, as amended)
- National Emergencies Act (P.L. 94-412)

Responses under Medicaid authorities

- State plan
- Section 1135 waivers
 - Blanket waivers
 - State-specific waivers
- Section 1115 waivers
- Section 1915(c) waivers: Appendix K
- Managed care contracts

HHS and CMS actions related to COVID-19

- National waivers; e.g., waivers of
 - Certain conditions of participation for individual providers and provider types
 - Requirement for providers to be licensed in state in which they provide services
- Blanket waivers; apply to specified Medicare provider types (e.g., critical access hospitals, skilled nursing facilities)

CMS actions related to COVID-19

State-specific waiver approvals

- COVID-19 waiver request template lists waivable provisions in five categories: Medicaid prior authorizations, long-term services and supports, state fair hearings, provider enrollment, and reporting and oversight
- 34 states have approved Section 1135 waivers (as of March 30)

CMS actions related to COVID-19

Section 1915(c) waivers: Appendix K

- Appendix K template identifies categories for possible waiver amendments (e.g., access and eligibility, services, provider qualifications)
- 10 states have approved Appendix Ks (as of March 30)

CMS actions related to COVID-19

Additional guidance

- Survey and certification
- Fact sheet on Medicaid and CHIP COVID-19 related coverage and benefits
- FAQs on new FMAP increase
- Telehealth

State actions

In addition to waivers, states have taken several other steps such as:

- Expanding use of telehealth
- Prohibiting out-of-pocket costs for COVID-19 related services
- Early prescription refills
- Waiving prior authorization requirements
- Opening special enrollment periods for exchange coverage
- Declaring state emergencies

Congressional actions

- The Families First Coronavirus Response Act (P.L. 116-127)
 - Coverage of COVID-19 testing in Medicaid and CHIP, prohibits cost sharing
 - State option to provide Medicaid coverage to uninsured individuals for COVID-19 testing, 100 percent FMAP
 - 6.2 percentage point increase in FMAP for states meeting maintenance of effort requirements
 - Funding for territories for fiscal years 2020 and 2021

Congressional actions

- Coronavirus Aid, Relief, and Economic Security (CARES) Act (P.L. 116-136)
 - Extends Money Follows the Person demonstration program, spousal impoverishment protections, and Certified Behavioral Health Clinic demonstration through November 30, 2020
 - Delays DSH cuts to December 1, 2020; \$8 billion reductions in FYs 2022 - 2025
 - Clarifies definition of uninsured for purposes of the new state option to provide COVID-19 related coverage

Congressional actions

- Coronavirus Aid, Relief, and Economic Security (CARES) Act (P.L. 116-136) (continued)
 - Allows for non-physician certification of home health services
 - Allows for home and community-based services to be provided in acute care hospitals
 - Aligns 42 CFR Part 2 with Health Insurance Portability and Accountability Act (HIPAA)

Other actions

- Behavioral health related actions
 - Clarification of substance use privacy regulations (42 CFR Part 2) in an emergency
 - Opioid treatment programs
- United States Citizenship and Immigration Services (USCIS) alert on public charge (March 13)
 - COVID-19-related testing, treatment, and preventive services will not negatively affect public charge analysis
 - Encourages affected individuals to seek necessary care



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