Notes on federal COVID-19 health/human services legislation and recent CMS actions (<u>H.R. 6201</u> passed U.S. House on 3/14/20, under consideration in U.S. Senate; <u>H.R.6074</u> - Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020, Div. B, enacted into law on 3/6/2020; <u>CMS telehealth fact sheet</u> published 3/17/20)

Medicaid

- Temporary FMAP increase –6.2% increase to match for all states, most covered populations (?) for as long as federal public health emergency declaration is in effect (H.R. 6201, Div. F, Sec. 6008)
 - Applies to each calendar quarter occurring during the period beginning on the first day of the emergency period and ending on the last day of the calendar quarter in which the last day of the emergency period occurs
 - Requires states to maintain eligibility standards no less restrictive than the date of enactment
 - States cannot conduct eligibility redeterminations or income checks more often than once every 12 months

COVID-19 testing

- No cost-sharing or prior authorization requirement allowed for COVID-19 testing, evaluation to determine need for test, and administration of test, including visit to doctor's office/urgent care facility/emergency department (H.R. 6201, Div. F, Secs. 6001 (health plans), 6002-6003 (Medicare/Medicare Advantage), 6004 (Medicaid/CHIP), 6006 (TRICARE/veterans/federal employees))
 - Applies to all forms of health coverage, including Medicaid, Medicare, individual and group health insurance plans, self-funded (what some call ERISA) plans, coverage for military, veterans, federal employees
 - o For uninsured individuals, allows state Medicaid programs to cover testing and associated services for uninsured and federal government will cover 100% of state costs incurred (H.R. 6201, Div. F, Sec. 6004)
 - Feds will also cover testing/associated services directly for uninsured in states that don't choose to use Medicaid to cover (H.R. 6201, Division A, Title V)

Telehealth

- Under new federal 1135 waiver, Medicare will pay for office, hospital, and other visits delivered through telehealth health across the U.S. and including in patient's home starting March 6, 2020 through duration of COVID-19 public health emergency (H.R. 6074 and CMS fact sheet)
 - Waives geographic restrictions/rurality requirements and health-care-facility-asoriginating-site requirement
 - o Telehealth visits usually for established patients only, but HHS will not audit
 - Also allows providers to be reimbursed virtual check-ins by telemedicine, telephone, telemedicine, secure text, e-mail, or secure patient portal for patients with established relationship if not related to office visit within previous 7 days and does not lead to visit within next 24 hours/next available appointment

Food security

- Emergency EBT food assistance to households with children who would otherwise get free/reduced price meals, applies if schools closed for 5 consecutive days or more (H.R. 6201, Div. A, Title I)
- Suspends SNAP work/work training requirements (H.R. 6201, Div. B, Title III, Sec. 2301)
- Upon request of a state, Secretary may approve emergency allotments to SNAP families to address temporary food needs (H.R. 6201, Div. B, Title III, Sec. 2302)
- Provides additional WIC funding for low-income pregnant women and mothers with young children who lose their jobs/are laid off as a result of the COVID-19 outbreak (H.R. 6201, Div. A, Title I)
- Provides funding to help local food banks buy, store, and distribute nutritious foods (H.R. 6201, Div. A, Title I)
- Allows Secretary of Agriculture to grant waivers to allow child and adult care centers to operate as non-congregate (i.e., allows them to take food to go) (H.R. 6201, Div. B, Title II, Sec. 2202)
- Provides flexibility to Sec. of Agriculture to waive certain administrative and other requirements for school meal programs, WIC, SNAP (H.R. 6201, Div. B, Titles I, II, III); it is okay if waivers increase federal costs
 - States that receive certain waivers must report to Secretary with a summary of how the waiver was used and description of whether it resulted in improved services to the population served by the program (H.R. 6201, Div. B, Title II, Sec. 2202(d) for school meals, Sec. 2203(b) for WIC

Senior nutrition program (H.R. 6201, Div. A, Title V)

- Funding for Senior Nutrition program in Administration for Community Living to provide additional home-delivered and pre-packaged meals to low-income seniors who depend on the program and are:
 - o Home-bound
 - Have disabilities
 - Have multiple chronic illnesses
 - o Are caregivers for seniors who are home-bound