



NEWS ALERT

April 23, 2020

Here is a summary of recent Centers for Medicare & Medicaid Services (CMS) actions taken in response to the 2019 Novel Coronavirus (COVID-19), as part of the ongoing White House Task Force efforts. To keep up with the important work the Task Force is doing in response to COVID-19, click here www.coronavirus.gov. For information specific to CMS, please visit the [CMS News Room](#) and [Current Emergencies Website](#). CMS updates these resources on an ongoing basis throughout the day; the information below is current as of April 23, 2020 at 10:00 a.m.

CMS Issues Guidance Allowing Independent Freestanding Emergency Departments to Provide Care to Medicare and Medicaid Beneficiaries during the COVID-19 Public Health Emergency

CMS issued critical guidance allowing licensed, independent freestanding emergency departments (IFEDs) in Colorado, Delaware, Rhode Island, and Texas to temporarily provide care to Medicare and Medicaid patients to address any surge resulting from COVID-19. This action by the Trump Administration increases hospital capacity to ensure these states can quickly and effectively care for their most vulnerable citizens. Current law does not recognize IFEDs as a certified Medicare provider, meaning they cannot bill Medicare and Medicaid for services. However, during this public health emergency, these entities can be temporarily certified as a hospital to increase healthcare system capacity as part of each state's pandemic plan.

[Press Release](#)

Trump Administration Launches New Toolkit to Help States Navigate COVID-19 Health Workforce Challenges

CMS and the Assistant Secretary of Preparedness and Response (ASPR) released a new toolkit to help state and local healthcare decision makers maximize workforce flexibilities when confronting COVID-19 in their communities. Developed by the Healthcare Resilience Task Force as part of the unified government's response to COVID-19, the toolkit includes a full suite of available resources such as information on funding flexibilities, liability protections, and workforce training, to maximize responsiveness based on state and local needs. For example, state and local communities will be able to see how and where workforce waivers can be applied

based on information from other areas. The resource builds on the Trump Administration's commitment to a COVID-19 response that is locally executed, state managed, and federally supported.

[Press Release](#)

[Toolkit](#)

Compliance Flexibilities Announced for Implementation of Interoperability Final Rules Due to COVID-19

In response to the COVID-19 public health emergency, CMS and the Office of the National Coordinator for Health IT (ONC), in conjunction with the HHS Office of Inspector General (OIG), announced a policy of enforcement discretion to allow compliance flexibilities regarding the implementation of the [interoperability final rules](#) announced on March 9, 2020. ONC, CMS, and OIG will continue to monitor the implementation landscape to determine if further action is needed.

[Press Release](#)

Updated Guidance Available for Plan Issuers on Prior Authorization, CARES Act Implementation

CMS issued guidance to issuers of individual, small group, Medicare Advantage, and Part D plans, addressing the flexibilities available related to utilization management and prior authorization during the COVID-19 public health emergency. New guidance for individual and small group health plans encourages issuers to utilize flexibilities related to utilization management processes, as permitted by state law, to ensure that staff at hospitals, clinics, and pharmacies can focus on care delivery and ensure that patients do not experience care delays.

Updated guidance for Medicare Advantage and Part D plans allows them to implement a number of additional flexibilities to support efforts that can help curb the spread of the virus and to help ensure MA and Part D enrollees do not experience disruptions in care or disruptions in pharmacy and prescription drug access. The guidance also implements important provisions of the Families First Coronavirus Response Act and the Coronavirus Aid, Relief, and Economic Security (CARES) Act regarding coverage for COVID-19 testing and testing related services.

[Individual and Small Group Plan Guidance](#)

[Medicare Advantage and Part D Plan Guidance](#)

CMS Releases Additional Waivers for Long-Term Care Hospitals, Rural Health Clinics, Federally Qualified Health Centers and Intermediate Care Facilities

CMS continues to release waivers for the healthcare community that provide the flexibilities needed to take care of patients during the COVID-19 public health emergency. CMS recently provided additional blanket waivers related to caring for

patients in Long-Term Care Hospitals (LTCHs), temporary expansion locations of Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs), staffing and training modifications in Intermediate Care Facilities for individuals with intellectual disabilities, and the limit for substitute billing arrangements (locum tenens).

[Guidance](#)

CMS Gives States Additional Flexibility to Address Coronavirus Pandemic

CMS approved its first Medicaid COVID-19 emergency demonstration, making the state of Washington the first to receive approval. The approval provides new flexibility and resources so the state of Washington can deliver the most effective care to their Medicaid beneficiaries. In addition to new payment and reimbursement arrangements, the demonstration allows the state to target services based on geography and population needs and to triage access to long-term services and supports (LTSS) based on highest need.

To date, CMS has approved more than 115 requests for state relief in response to the COVID-19 pandemic, including recent approvals for Colorado, New York, Ohio, South Carolina, Washington, Wyoming, and Puerto Rico. These approvals help to ensure that states have the tools they need to combat COVID-19 through a wide variety of waivers, amendments, and Medicaid state plan flexibilities, including for programs that care for the elderly and people with disabilities. CMS developed a [toolkit](#) to expedite the application and review of each request and has approved these requests in record time. These approved flexibilities support President Trump's commitment to a COVID-19 response that is locally executed, state managed, and federally supported.

[Section 1135 Waivers](#)

[Section 1115\(a\) Waivers](#)

[1915\(c\) Waiver Appendix K Amendments](#)

[Medicaid State Plan Amendments](#)

[CHIP State Plan Amendments](#)