

# Update on HUSKY Health Strategies Implemented During the Public Health Emergency

Health Care Cabinet

October 13, 2020

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## **DSS COVID-19 Web Pages**

<https://portal.ct.gov/DSS/Communications/DSS-Response-to-COVID-19>

# Public Health Emergency Declarations and Authorities

- The Secretary of the U.S. Department of Health & Human Services (HHS) has the authority under section 319 of the Public Health Service (PHS) Act to declare a public health emergency (PHE)
  
- A PHE declaration lasts only for the duration of the emergency, or up to 90 days, whichever ends earlier, unless it is renewed
  
- The timing of COVID-19 PHEs is as follows:
  - First declaration effective January 27, 2020
  - Renewed effective April 26, 2020
  - Renewed effective July 23, 2020
  - Renewed effective October 23, 2020

HUSKY Health has used three federal authorities to flexibly respond to needs of members and providers during the PHE.

Authority Type	Details	Status
Medicaid and Children’s Health Insurance Program (CHIP) 1135 waiver	<p><b>Increasing Access-to-Care Flexibilities</b> by removing prior authorization requirements, expanding the ability to serve members in alternate settings such as a shelter or vehicle, waiving or adding flexibilities (settings, signatures, assessments, other) to various requirements for home and community-based 1915(c), 1915(i), and 1915(k) programs, and suspending various provider enrollment requirements to enable enrollment of new providers</p>	<p>CMS has approved many of Connecticut’s requests via letters of 3/27/20, 5/12/20, 6/17/20 and 8/21/20</p> <p>The approved 1135 authorities expire at the end of the PHE</p>

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Authority Type	Details	Status
<p>Medicaid &amp; CHIP Disaster Relief State Plan Amendments (SPAs)</p>	<ul style="list-style-type: none"> <li>• <b>Eligibility</b> (election of the new Medicaid testing group)</li> <li>• <b>Coverage</b> (add flexibility for telehealth, home health, Community First Choice (CFC), and 1915(i)) state plan services)</li> <li>• <b>Reimbursement</b> (specified temporary rate increases, COVID-19 lab fee codes, telehealth audio-only codes, other)</li> <li>• <b>Cost sharing</b> (waiver of HUSKY B copayments for most medical services and prescription drugs)</li> </ul>	<p>Medicaid SPA was submitted on 5/28/20 and approved on 8/13/20; CHIP SPA was submitted on 6/30/20 and approved on 8/27/20</p> <p>The disaster SPAs expire at the end of the PHE</p>

HUSKY Health has used three federal authorities to flexibly respond to needs of members and providers during the PHE.

Authority Type	Details	Status
Appendix K to 1915(c) waivers	<b>Requests for flexibilities</b> around remote assessments and reassessments, additional services, staffing of services, and retainer payments for home and community-based providers	CMS approved Connecticut's Appendix K submissions on 3/27/20  Expire one year from the effective date



# Enrollment and Eligibility

- To help people avoid loss of Medicaid or CHIP coverage, DSS took the following actions:
  - **Extended renewal end dates.**
    - Individuals with renewal closure dates of March 31<sup>st</sup>, April 30<sup>th</sup> or May 31<sup>st</sup> were initially extended three months to June 30<sup>th</sup>, July 31<sup>st</sup>, and August 30<sup>th</sup>
    - Active Medicaid spend-down cases were extended for 6 months
    - All individuals who were enrolled as of 3/18/20 are extended at least through November, 2020
    - DSS will extend monthly as permitted through the end of the PHE
  - **Delayed certain changes.** For the duration of the PHE, DSS is not taking action on changes (e.g. change in family income, aging out of coverage) that would result in reduction or termination of coverage

- **For HUSKY A, B and D:**
  - **Extended the period in which people can submit verification documents from 90 to 180 days**
  - **Increased the “income compatibility threshold”,** which measures how closely reported income matches with data from the federal hub, from **10% to 20%**, allowing more individuals to enroll or auto-renew without needing to submit verifications

## How to apply for HUSKY Health:

- For **HUSKY A, B and D:**
  - On-line at [www.accesshealthct.com](http://www.accesshealthct.com)
  - Phone Access Health CT at 1-855-805-4325
  - Mail application form 'AH3,' available upon request
- For **HUSKY C or other DSS programs:**
  - [www.connect.ct.gov](http://www.connect.ct.gov)
  - Mail application form 'W-1E' (<https://ct.gov/dss>)

**Please note that DSS offices are temporarily closed due to COVID-19 and cannot accommodate in-person visits**

- The Department expanded coverage for COVID-19 testing:
  - **New Medicaid for the Uninsured/COVID-19 optional coverage group.** Uninsured state residents – both citizens and qualified non-citizens - of any income level may be eligible for free coverage of COVID-19 testing and testing-related visits between March 18, 2020, and end of the PHE
  - **Guidance interpreting Emergency Medicaid for Non-Citizens/COVID-19.** State residents - including undocumented people - who meet financial eligibility requirements, but do not qualify for full Medicaid due to their immigration status, are eligible for coverage of an emergency medical condition, including COVID-19 testing and testing-related provider visits

# Member Supports

## To support members during the PHE, HUSKY Health:

- Is covering COVID-19 testing and treatment with no cost share
- Extended coverage to 90-day periods for prescription drugs, medical surgical supplies, hearing aid batteries, parenteral/enteral supplies, respiratory equipment and supplies
- Through CHNCT, is maintaining a 24/7 nurse care line, supporting referrals to providers, and using data to identify and connect people who are at high risk with Intensive Care Management



- Through Beacon Health Options, has implemented a peer staff warm line
- Expanded home and community-based long-term services and supports under the waivers
- Is ordering and distributing Personal Protective Equipment (PPE) to consumer employers who participate in self-directed care under Community First Choice
- Through Veyo, recently implemented a specialized Non-Emergency Medical Transportation (NEMT) service for people who are suspected of having, or have COVID





# Provider Supports

## HUSKY Health has supported providers by . . .

- Implementing coverage for telemedicine at the same rates that are paid for in-person visits
- Providing administrative flexibilities (e.g. removal of prior authorization) in how and where care can be provided
- Continuing to pay 100% of clean claims on a timely, bi-weekly basis
- Making payment advances and provider relief payments
- Advocating at the federal level for further financial relief

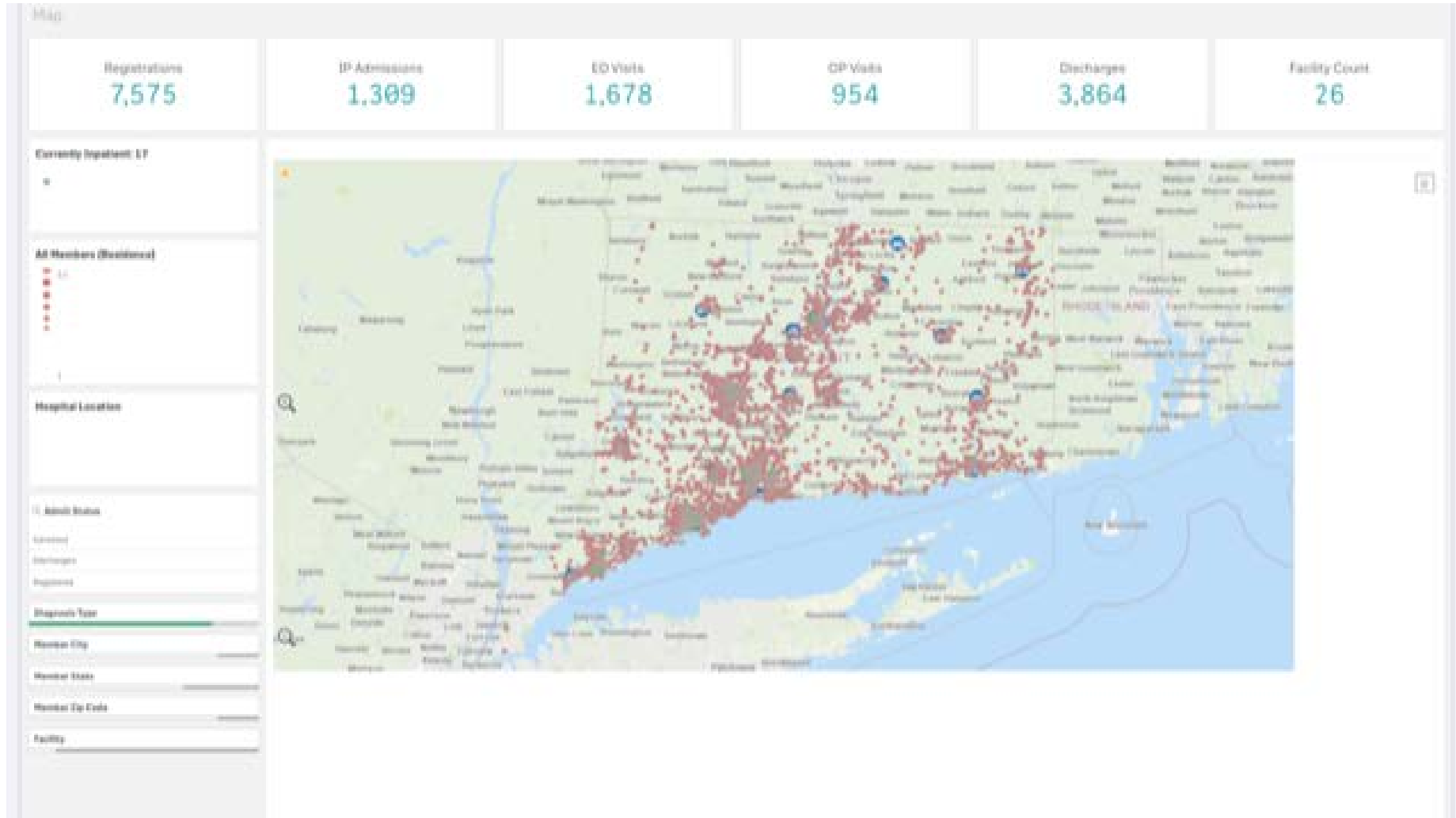
Please see this link for a comprehensive Frequently Asked Questions document that includes links to all of the provider bulletins issued by the Department as well as an inventory of all codes approved for telehealth:

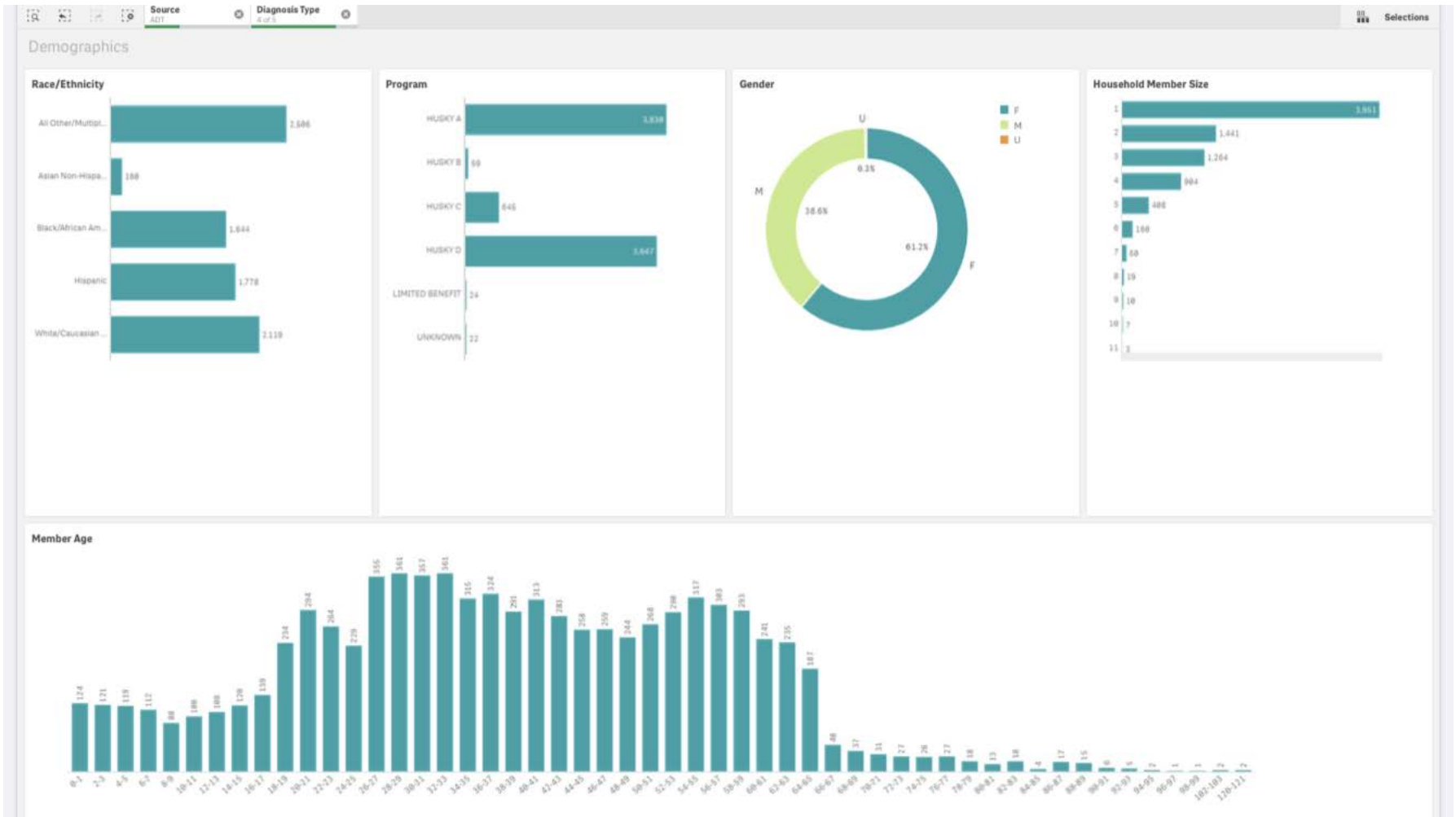
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# Data

- DSS receives data daily from CHNCT that illustrates the impact of COVID-19 on members of HUSKY Health. This includes a “heat” map as well as analysis of “registration events” (COVID-involved admissions, discharges and transfers; ADT) by age, gender, race and ethnicity
- As of October 8, 2020, there have been a total of 7,575 registration events, with 1,309 inpatient admissions, 17 of whom remain hospitalized as of that date
- DSS and the UConn Center on Aging have also maintained a dashboard of indicators for people who receive community-based long-term services and supports





**Questions?**