



STAKEHOLDER INNOVATION GROUP



June 12, 2020



Maryland
Hospital Association

AGENDA

- Welcome and Introductions
- Updates from HSCRC & Medicaid
- Overview of COVID-related Regulatory Changes and Waivers
- COVID Open Discussion
- Adjourn

UPDATES FROM HSCRC & MEDICAID

Chris Peterson, HSCRC
Laura Goodman, Medicaid



COVID-19 FEDERAL AND STATE FLEXIBILITIES

Maansi Raswant
MHA



CMS 1135 WAIVER PROCESS

- CMS has issued waivers of several administrative requirements pursuant to presidential and HHS declaration of state of emergency
- Waivers are for requirements under Medicare and Medicaid authority
- CMS has issued many blanket waivers – automatically in effect once issued (retroactive effective date of March 1)

STATE POLICY WAIVERS TO SUPPORT COVID-19 RESPONSE

- Gov. Hogan declared state of emergency and catastrophic health emergency on March 5
- Numerous Executive Orders and agency directives have been issued, including several impacting
 - Workforce
 - Telehealth
 - Payer practices
 - Clinical operations

WORKFORCE: FEDERAL

- Licensed practitioners practicing within their scope of practices, including nurse practitioners (NP) and physician assistants (PA), can order home health services
- Any rehabilitation professionals may perform initial and/or comprehensive home health assessments, regardless of whether the service establishes eligibility for patient to receive home care
- Physicians may delegate tasks that are otherwise required to be performed by the physician to NPs, CNSs, or PAs in long term care facilities
- Definition of "direct supervision" revised to allow for direct supervision by physicians using real-time interactive audio and video technology
- Medicare patients do not need to be under the care of a physician; hospitals may fully use other NPPs (such as PAs and NPs)

WORKFORCE: STATE

- Expanding scope of practice
- State orders establish interstate reciprocity
- State and federal flexibilities authorize providers with inactive/expired licenses to practice
- State and federal requirements loosen physician supervision requirements

TELEHEALTH: FEDERAL

- Elimination of originating site requirements during public health emergency
- Limitations on how frequently telehealth may be used for subsequent hospital care services in inpatient (once every three days) and nursing facilities (once every 30 days) settings removed
- Payment for audio-only services

TELEHEALTH: STATE

- Authorize audio-only telehealth services
- Allow originating site to include participant's home
- Expansion of remote patient monitoring

PAYER PRACTICES

- Adjust provider panels to account for access to COVID-19 treatment
- Waive cost-sharing requirements (federal and state levels for testing; by carrier for treatment)
- Relax utilization review requirements (across Medicare, Medicaid, and commercial payers)

CLINICAL OPERATIONS: FEDERAL

- Temporary emergency coverage of SNF services without a qualifying hospital stay (i.e., waiver of three-day prior hospitalization requirement) permitted
- Expanded list of permissible ambulance destinations to include all destinations from any point of origin equipped to treat the conditions of the patient (including home)
- Hospitals not required to provide list of available post-acute care (PAC) facilities or inform patient of ability to choose PAC provider, but providers must focus on finding the appropriate setting for the patient
- Long term care facilities may transfer or discharge residents with waiver of discharge and transfer requirements to another facility solely for patient cohorting

CLINICAL OPERATIONS: STATE

- Add hospital capacity and establish alternative care sites
- Require Office of Health Care Quality to support return of resident to nursing home of origin
- Establish medical assist teams to deploy to congregate living facilities

DISCUSSION

- Critical lessons learned from your field/industry's response to the crisis
- Key areas that stakeholders- including providers, payers and state agencies- should focus on strengthening as we prepare for a potential next wave and as we build a better system
- The regulatory flexibilities introduced during the crisis that should be retained post pandemic

UPCOMING MEETING DATES

September 16, 2020

9 AM- 11 AM

December 11, 2020

9 AM- 11 AM