

HOUSE SELECT COMMITTEE ON COVID-19

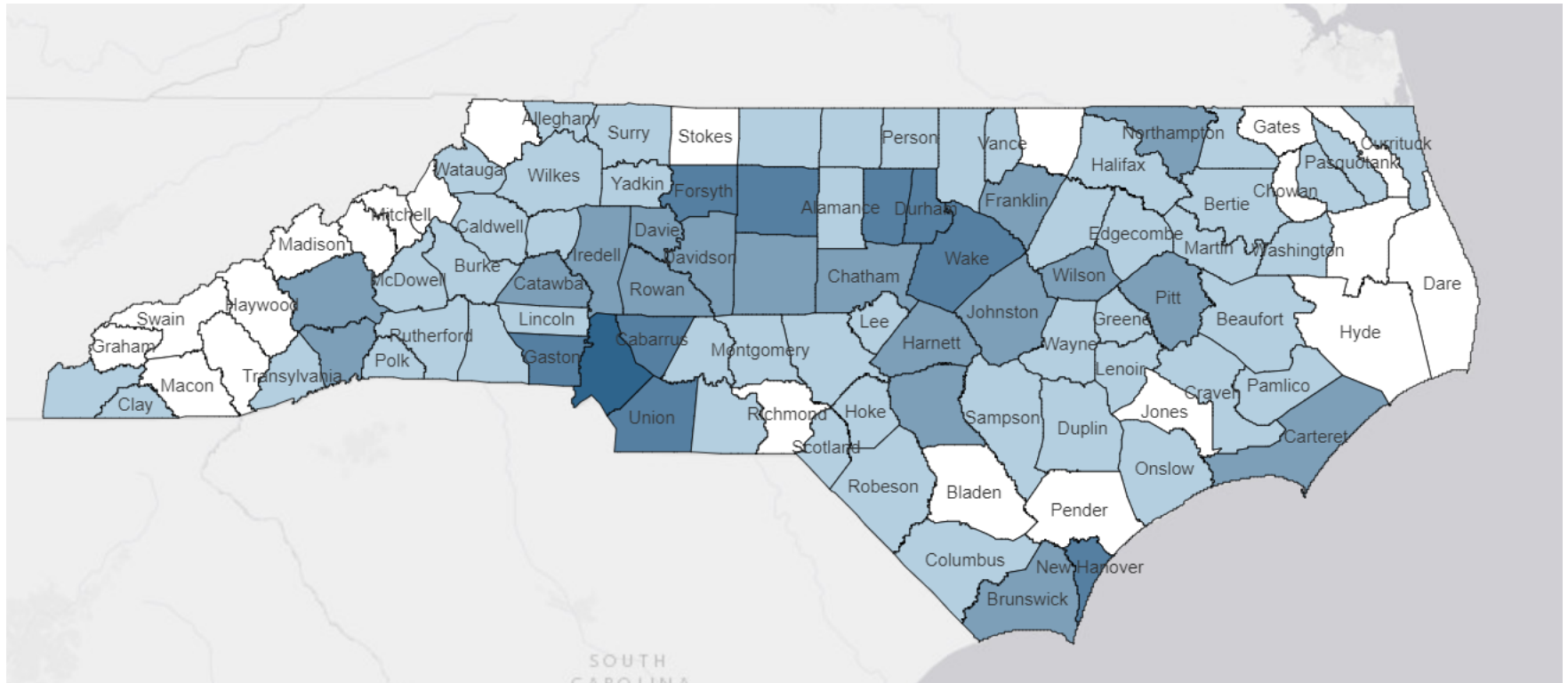
COVID-19

Secretary Mandy Cohen, M.D.
Department of Health and Human Services
April 2, 2020

Current Status

NC Cases	Hospitalized	NC Deaths	Counties with Cases	US Cases	US Deaths
1,584	204	9	79	186,101	3,603

Data as of April 1, 2020 – 10:00am



Current Response

- State of Emergency declared March 10
- Statewide Stay at Home Order issued through 4/29
- Order also limits gatherings to 10 people
- Public K-12 school closures until to May 15
- Entertainment facilities and personal care businesses closed
- Sit-down service at restaurants/bars not permitted – take-out, drive through only
- Restrictions on long-term care facilities visitation
- Expanded access to unemployment benefits
- Order prohibiting utilities from disconnecting customers
- Established critical worker emergency child care subsidy program and hotline for parents to find child care services

Medical Surge Capacity

Regional Coordination:

- Leverage 8 healthcare coalitions for resources and reporting
- Coordinate receiving and distribution of medical commodities

Equipment:

- Evaluate availability of federal resources
- Aggressive sourcing and procurement for critical items, such as personal protective equipment (PPE) and ventilators

Personnel:

- Stand up centralized personnel management system
- Over 1000 volunteers registered
- Leveraging educational institutions, retired providers, or inactive providers

Space:

- Guidance for cancelation of elective procedures
- Bed surge planning
- Implementation of facility decompression strategies
- Implement alternate care facility planning

Food and Nutrition Programs

- **Approved waivers to increase access to food and decrease administrative burdens during social distancing and stay at home order:**
 - Waived on-site and congregate meal site requirements to allow delivery or pick up options and enable parents to pick up for children
 - Increase in Emergency Food and Nutrition Services (FNS) to bring all households up to the maximum benefit
 - Extension of certification periods to reduce in-person contact
 - Flexibility in conducting in-person activities (applications, interviews)
- **Waivers pending approval:**
 - Pandemic EBT program for families with school-aged children who receive free or reduced school meals
 - FNS Hot Foods Waiver, multiple WIC waivers

Social Services

- **Child Welfare:**
 - NC has implemented the following program flexibilities:
 - Relaxing program requirements for some face-to-face interactions
 - Allowing young adults (18-21), participating in extended foster care, flexibility in where they live while still receiving benefits and services
- **TANF: (pending)**
 - DHHS has submitted a request for plan changes including:
 - Suspending work requirements and sanctions for families who cannot work because of the COVID-19 pandemic
 - Providing one-time or other emergency payments to eligible program participants at 200% of FPL
 - Increasing hardship exemptions to prevent a family's Work First case from terminating

Protecting High Risk Populations and Access to Care

- **Supporting providers and beneficiaries:**
 - Increasing Medicaid rates by 5% for long-term care providers
 - Increase of 1.5% in Medicaid rates for LME/MCOs
 - Released \$87 million of one time dollars for use by LME/MCO's to support provider response to COVID-19
- **Improve Patient Access and Reduce Administrative Burden:**
 - Expanding Virtual and Telehealth Medicaid Services, including Telepsychiatry and Counseling Services
 - Modifications to Medicaid Pharmacy, Durable Medical Equipment, Out-patient Therapy, and Home Service Clinical Coverage Policies
- **Hospital Capacity:**
 - Hospitals may request a 60-day waiver of the rule limiting their number of licensed beds

Waivers Received: Access to Health Care

- **Approval to temporarily waive Medicaid program requirements for home and community-based services** (Innovations, CAP-DA, CAP-C, and Traumatic Brain Injury Waivers)
 - Removed certain dollar and stay limits, expanded the type of service delivery locations and eased requirements for reviews of personalized care plans and in-person meetings.
- **Medicaid 1135:**
 - Critical Access Hospital (CAH) limit of beds and length of stay
 - Certain provider screening and enrollment requirements
 - Certain hospital regulatory requirements
 - Time limit for enrollees to request a state fair hearing (extended to 120 days)
 - Medicaid prior authorization requirements

Waivers Submitted: Access to Health Care

- **1115 Medicaid Waiver to support providers and beneficiaries:**
 - Would provide limited services for individuals with incomes up to 200% of the federal poverty level (FPL), subject to legislative approval.
 - Request for a limited COVID-19 Disaster Relief Fund to provide targeted Medicaid-funded support including: covering uncompensated care costs and preserving access to care in light of dramatic shifts in utilization.
- **Children's Health Insurance Program (CHIP) Disaster State Plan Amendment:**
 - Request to waive the required annual enrollment fee, co-payments, and unpaid enrollment fee balances; extend time period for processing applications and redetermination; and waive the prior authorization requirements.

State Operated Facilities

- **DHHS has already implemented a variety of changes to programming for purposes of social distancing:**
 - Psychiatric hospitals have closed areas where patients typically congregate across units.
 - Instead individual unit programming is provided, ensuring that each unit gets time outside and physical activity.
 - Wright School has suspended in-person classes and some staff have been reassigned to support other facilities.
- **In-person visitation was restricted on March 10 and facilities have expanded use of telecommunication technologies.**
- **CMS announced extensive regulatory flexibilities on March 30**
 - DHHS is analyzing guidance to determine the scope of the requirements that have been waived and what additional state or federal flexibilities might be necessary as the situation develops.

Budget Needs for COVID-19 Response

Guiding Principles: Maximize federal dollars, build on existing infrastructure, leverage partnerships.

- **Testing and Treatment for Individuals**
- **Critical Health Care Infrastructure Support**
- **Mental Health and Crisis Services**
- **Food and Shelter Security**
- **Planning and Support for Recovery**