Continuity of Care Initiative: Proposal to Help Keep Patients, Healthcare Workers, and the Public Safe; and Keep Critical Providers Open for Business

FAQ’s

This Continuity of Care Initiative is designed to help keep patients connected to their providers in order for Medicaid to continue to pay for needed services during the COVID-19 outbreak.

Q1. What is the purpose of the waiver DHS submitted to the federal government?

1115 Waiver - This is entirely new Medicaid Section 1115 Demonstration Project ("waiver") that is time limited only to address this period of emergency. It was submitted yesterday and as of the date of this document has not yet been approved by the Centers for Medicare and Medicaid Services (CMS). The purpose of the waiver, if approved, is to pay different types of providers (hospitals, physicians, nursing facilities, etc.) for the additional costs of making changes to engage their patients safely. These are items that Medicaid typically would not pay for.

The 1115 waiver is only one part of what the State and the federal government are doing to keep critical providers open for business and delivering services to Arkansans. Most funding increases to providers will be paid through regular Medicare and Medicaid and private insurance payments.

Q2. How can we spend more money on Medicaid when we have been told the Medicaid budget is so tight?

The federal government has increased its share of the cost of Medicaid and the CHIP program so the new match rates which are retroactive to January 1, 2020. The increase in federal funds will ease the pressure on state funds, making funds available to meet the state share of the waiver. The total cost is estimated to be $116.3 million; $90.6 million federal share; and $25.7 million state share.

We will be providing a revised forecast that includes federal increases in the federal match rate that will then decrease the amount of state dollars needed. It is because of that funding from the federal government that we will then be able to use for the 1115 waiver funding.

Q3-A. There is confusion about the initiative to pay direct care providers, such as nurses. Which providers are eligible to receive these payments?

We targeted this to the LTSS employees because they were not covered in the federal legislation. Our waiver will cover CNAs, LPNs, RNs, home health, respiratory therapists, and personal care aides working in institutional and non-institutional settings.

This payment does not apply to a hospital or hospital staff because of federal legislation that will significantly increase payments to hospitals that can use that funding for hospital staff.

Providers include: ARChoices Providers, Personal Care Providers, AAA’s, Independent Choices providers who are not family members, Assisted Living Facilities, Hospice, and Home Health agencies,

Q4. What type of facility would be eligible to receive a COVID-19 Cluster Payment?

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These additional payments (on top of direct care worker payments) would go to nursing facilities that care for a disproportionate number of patients with COVID-19. We will work with the Health Care Association to further define what facilities would be eligible.

Q5. What is the homeless provision about?

To reduce the number of homeless who are in congregate settings and therefore more vulnerable to COVID-19, we have proposed to partner with local governments to provide alternative shelter for the homeless population. A city would do an MOU with DHS where the city puts up the money and DHS will match the funds only during this interim period. This is a short-term program to get people out of congregate settings. A city can work with non-profits to accomplish this.

Q6. Is there a way to connect patients to who cannot leave home to ensure they will have their prescriptions filled?

Through the 1115 Waiver authority and DHS’s general State Plan authority, DHS is taking a number of steps to ensure continuity of care. One of these steps is to use a variety of existing Medicaid providers to deliver medication. We know there will be concerns over chain of custody documentation and environmental controls (such as temperature requirements). DHS will work with providers to ensure the safe delivery of medications.

Q7. What can the foster care payment be used for?

This is an additional payment to help offset some of the additional costs our foster parents will occur due to the emergency. The payment will be administered by the Division of Child and Family Services (DCFS) and may used for a variety of needs to protect the health of the foster care child and the family caring for him/her.

Q8. What is the 1135 Waiver about?

This is an entirely new waiver that is time limited only to address this period of emergency. This waiver will provide regulatory relief in many areas to allow beneficiaries to access needed services faster. It also will not be in effect until CMS approves.

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