

COVID-19 Emergency Response

Medicaid Fact Sheet

On March 10, 2020 Governor Gretchen Whitmer, declared a state of emergency in response to the 2019 Novel Coronavirus Disease (COVID-19). Following this declaration, the Michigan Department of Health and Human Services (MDHHS) has been taking action to leverage available regulatory authorities to support Michigan’s healthcare infrastructure and maintain the commitment to high quality services and safety to Medicaid beneficiaries. As a result, the following policies and guidance have been released.

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HIGHLIGHTS FROM SEPTEMBER 28 – OCTOBER 5, 2020

- **Federal Updates**
 - [CMS: Updates to COVID-19 testing methodology for nursing homes](#) (Sep. 29)
 - [CMS: Enrollment trends for Medicaid & CHIP; Press release](#) (Sep. 30)
 - [CDC: Update for Week 39](#) (Oct. 2)
 - [CDC: Cases & Deaths by County](#) (Oct. 4)
- **Michigan Updates/News**
 - [Gov. Whitmer Announces Healthy Michigan Plan tops 800,000 enrollees for first time](#) (Sep. 29)
 - [Gov. Whitmer Signs 2021 budget](#) (Sep. 30)
 - [UIA: Michigan Activates Federal Extended Unemployment Benefits](#) (Oct. 1)
- **Executive/Epidemic Orders**
 - [EO 2020-184](#): Safeguards to protect Michigan’s workers from COVID-19 Rescission of Executive Order 2020-175 (Sep. 30)
 - [EO 2020-186](#): Declaration of state of emergency and state of disaster related to the COVID-19 pandemic - Rescission of Executive Order 2020-177 (Sep. 30)
 - [EO 2020-187](#): Encouraging the use of electronic signatures and remote notarization, witnessing, and visitation during the COVID-19 pandemic - Rescission of Executive Order 2020-173 (Sep. 30)
 - [EO 2020-188](#): Temporary restrictions on entry into health care facilities, residential care facilities, congregate care facilities, and juvenile justice facilities - Rescission of Executive Order 2020-174 (Sep. 30)
 - [EO 2020-191](#): Enhanced protections for residents and staff of long-term care facilities during the COVID-19 pandemic - Rescission of Executive Order 2020-179 (Sep. 30)
 - [EO 2020-192](#): Moving Region 8 to Phase 4 of the MI Safe Start Plan (Oct. 2)
- **MSA Policy Bulletins & L-Letters**
 - [MSA 20-61](#): Rescission of Portions of Bulletin MSA 20-41 (Sep. 30)
 - [MSA 20-66](#): Policy for Care and Recovery Centers (CRCs) to Treat COVID-19 Patients and Residents Requiring Nursing Facility Care (Sep. 30)
- **Other Updates**
 - [Kaiser Family Foundation: Medicaid Emergency Authority Tracker of approved state actions to address COVID-19](#) (Oct. 1)
 - [National Association of Medicaid Directors FY 2020 Annual Report](#) (Oct. 2)

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EXECUTIVE ORDERS & DIRECTIVES

New/Updated

- **Safeguards to protect Michigan’s workers from COVID-19 Rescission of Executive Order 2020-175**
[EO 2020-175](#) | [EO 2020-184](#) | [Frequently Asked Questions](#)
Continues workplace safeguards businesses. Rescinds EOs 2020-175; *Effective as of September 25, and no end date provided*
- **Declaration of states of emergency and disaster related to COVID-19 pandemic**
[EO 2020-177](#) | [EO 2020-186](#)
Orders that the COVID-19 pandemic constitutes a disaster and emergency throughout the state. Rescinds EO 2020-177; *active through October 27, 2020.*
- **Encouraging the use of electronic signatures and remote notarization, witnessing, and visitation during the COVID-19 pandemic**
[EO 2020-173](#) | [EO 2020-187](#)
Permits use of electronic signature for transactions whenever possible. This includes state departments sending and accepting electronic signatures without approval of DTMB, in situations requiring notary services, signatures by parents or legal guardians, and other circumstances. Rescinds EO 2020-158; *Active through October 31, 2020.*
- **Entry into care facilities**
[EO 2020-174](#) | [EO 2020-188](#)
Order prohibits any unnecessary visitors into healthcare facilities, residential facilities, and congregate care facilities. All impacted facilities must perform health evaluation of all individuals not under care of facility prior to entrance into facility following prescribed criteria. Mandates criteria for wearing of face masks and use of visitations by phone or other electronic communication platforms to fullest extent possible. Rescinds EO2020-174; *Active September 30, 2020 with no end date.*
- **Enhanced protections for residents and staff of Long-term care facilities**
[EO 2020-179](#) | [EO 2020-191](#)
This order extends the procedures in long-term care facilities to protect the health and safety of both employees and residents. The order includes protections for residents and employees of long-term care facilities, as well as procedures related to transfers and discharges of COVID-19 affected residents. Rescinds EO 2020-179. *Active September 30, 2020 with no end date*
- **Moving Region 8 to Phase 4 of the MI Safe Start Plan**
[EO 2020-192](#)

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Moves Region 8 (Upper Peninsula) to Phase 4 (Improving) of the [MI Safe Start Plan](#). *Effective Oct 9 with no end date.*

- As of October 5, no Executive Orders or Directives are set to expire this week.

Ongoing

- **Amended Safe Start Order**

[EO 2020-183](#) | [Frequently Asked Questions](#)

Continues requirements that most regions continue remote work, requires individuals leaving home to wear masks & socially distance, closes certain establishments, establishes rules for gatherings, and provides some exemptions (including health care facilities, residential care facilities, congregate care facilities, and juvenile justice facilities). Rescinds EOs 2020-176, 2020-180, and 2020-181; *Effective as of October 9, and no end date provided*

- **Addressing Racism as a Public Health Crisis**

[EO 2020-09](#)

DHHS is directed to combat racism as a public health crisis using the following strategies: data and analysis; policy and planning; engagement, communication, and advocacy; training for all state employees.

- **Temporary and limited relief from certain licensing and certification requirements applicable to COVID-19 response**

[EO 2020-30](#) | ~~[EO 2020-61](#)~~ | [EO 2020-150](#)

This Executive Order temporarily suspends certain licensure, certification, and registration requirements for health care professionals. Further maintains that professional certifications of individuals in basic life support, advanced cardiac life support, and first aid shall remain in effect, even if they are otherwise due to expire. Deadlines for telecommunicators & trainees employed by primary public safety answering points are suspended until 60 days after the end of any COVID-related public emergency. Rescinds EO 2020-61; *active until end of states of emergency and disaster declaration.*

- **Temporary Enhancements to Operational Capacity, Flexibility and Efficiency of Pharmacies**

~~[EO 2020-25](#)~~ | ~~[EO 2020-56](#)~~ | ~~[EO 2020-93](#)~~ | ~~[EO 2020-124](#)~~ | [EO 2020-152](#)

This Executive Order allows preceptors to supervise student pharmacists to remotely fulfill eligibility for licensure; does not extend other provisions due to decreasing demands on pharmacies. Rescinds EO 2020-124; *active until end of states of emergency and disaster declaration.*

- **Masks**

~~[EO 2020-147](#)~~; [EO 2020-153](#); [FAQs for EO](#)

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With some exceptions,¹ a mask must be worn when in any indoor public space, when outdoors and unable to maintain a distance of 6-feet, and when riding in any public or publicly used transportation. No business, government office, or operation open to the public can provide services to a customer or allow a customer to enter without a mask (additional requirements included in order). Willful violation is considered a misdemeanor, but no term of confinement can be imposed for violations. Rescinds EO 2020-147, including portions of EO 2020-110 & 2020-115 pertaining to face masks; *No end date given*.

- **Improve Equity Across Michigan’s Health Care System**

[EO 2020-7](#); [Press release](#)

Directs the Department of Licensing and Regulatory Affairs (LARA) to begin developing rules that will require implicit bias training as part of the knowledge and skills necessary for licensure, registration and renewal of licenses and registrations of health professionals in Michigan.

- **Expanded Telehealth Options for Michiganders**

[EO 2020-86](#) [EO 2020-138](#)

All healthcare providers (including those not licensed to engage in telehealth but in good standing) are authorized and encouraged to use telehealth when medically appropriate. Providers must abide by SAMHSA/CMS/CDC/DEA guidance & the Medical Marihuana Act, are allowed to prescribe controlled substances, and two-way telecommunication can be considered as an in-person evaluation. EO 2020-86, which also required that insurance carriers cover virtual check-ins and e-visits to facilitate the affordability of telehealth services, is rescinded. *Active until end of states of emergency and disaster declaration*.

- **Naming the “Elliot-Larsen Building”**

[EO 2020-139](#)

The Lewis Cass Building, which houses some MSA operations, has been renamed in honor of the 1976 Elliot-Larsen Civil Rights Act.

- **Coronavirus task force on racial disparities**

[EO 2020-55](#)

Task force will investigate causes of racial disparities in the impact of COVID-19, recommend actions to address. Membership to include lieutenant governor, MDHHS director or their designee, chief medical director, and governor appointed members. *Active until 90 days*

¹Does not apply to the following individuals who: are ages 5 and younger (ages 2 and younger should not wear a mask); cannot medically tolerate wearing a mask; are eating or drinking; are exercising; are receiving a service necessitating the removal of a mask; are asked to temporarily remove the mask for identification; are communicating with someone who is deaf, deafblind, or hard of hearing; are actively engaged in public safety; are at a polling location to vote; are officiating a religious service; are giving a speech & the audience is at least 6 feet away

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after the end of the states of emergency and disaster declared, or such time as the governor defines.

- **Affirming anti-discrimination policies and requiring certain health care providers to develop equitable access to care protocols**

[EO 2020-64](#)

The unprecedented challenges posed by the COVID-19 pandemic have created a heightened need for clear, transparent protocols based on a common understanding of core values, including equitable access to care. This EO affirms anti-discrimination policies and establishes procedures that ensure the equitable allocation of medical resources and remains in effect until the end of the declared states of emergency and disaster. *Active until end of states of emergency and disaster declaration.*

- **Increasing COVID-19 testing by expanding the scope of practice for certain professionals and encouraging the establishment of community**

[EO 2020-104](#)

This enables a broader range of qualified medical professionals to order COVID-19 tests and to encourage the establishment of community testing locations by reducing barriers to sitting and staffing such test sites.

- **Creation of Michigan Nursing Homes COVID-19 Preparedness Task Force** [Executive Order 2020-135](#)

Task force comprised of DHHS, LARA, Michigan LTC Ombudsman Program, House of Representatives (2), Michigan Senate (2), members at large (13); charged with providing recommendation by August 31, 2020 to Governor Whitmer for an action plan on how to prepare nursing homes for any future wave of COVID-19 cases; regular reporting and recommendations on ongoing basis. *Active until June 26, 2022.*

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EPIDEMIC ORDERS

New/Updated

- As of October 5, no new Epidemic Orders had been issued related to Medicaid

Ongoing

- [Mandatory Testing for Michigan Department of Health and Human Services Hospitals and Centers Staff](#)

The Center for Forensic Psychiatry, the Hawthorn Center, the Caro Center, the Walter Reuther Psychiatric Hospital, and the Kalamazoo Psychiatric Hospital must adopt mandatory testing and transmission prevention protocols. *Effective September 14 until lifted.*

- [Additional exceptions to temporary restrictions on entry into residential care facilities](#)

Facilities may allow outdoor visitation if they meet certain criteria and must ensure certain preventative measures are taken. In compliance with Executive Order 2020-174, certain restrictions do not apply. *Effective September 15 until lifted.*

- [Mandatory Testing, Preventative Measures, and Safe Housing for Agricultural Workers](#)

The order does the following: reinforces EO2020-137 and 2020-145; defines testing as “diagnostic tests that seek to identify viral RNA, have received Emergency Use Authorization from the Food and Drug Administration, and are completed by a laboratory of moderate or high complexity under the Clinical Laboratory Improvement Amendments (“CLIA”); and requires employers & housing providers in certain agricultural settings to provide testing for workers or residents.

Effective from August 3 until lifted.

- [Mandatory Testing for Prison Staff](#)

Reinforces EO 2020-170 by outlining testing for Michigan Department of Corrections (MDOC) staff and requiring implementation of transmission prevention protocols

Effective August 19 until lifted.

- **Exceptions to temporary restrictions on entry into residential care facilities**

[Emergency Order Under MCL 333.2253](#)

In line with EO 2020-136, facilities must make best effort to facilitate visitations and may permit in-person visits under certain circumstances. *Active until lifted.*

- **Exceptions to temporary restrictions on entry into congregate care and juvenile justice facilities**

[Emergency Order Under MCL 333.2253](#)

In line with EO 2020-136, visitors may be permitted under specified circumstances. *Active*

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until lifted.

- **COVID-19 Testing and Resource Reporting**

- [Emergency Order Pursuant to MCL 333.2253](#)

- This Emergency Order, issued by MDHHS Director Robert Gordon, requires all facilities conducting and processing COVID-19 tests must do so in accordance to MDHHS instruction and follow issued reporting requirements.

- [Actions for Caregivers of Older Adults](#) | [FAQ](#)

- In response to EO 2020-21 , this guidance for individuals that provide in home services and supports for older adults, such as Direct Care Workers, including when appropriate to engage clients face-to-face, visit the home, and necessary precautions to employ if in the home and to self-monitor. The recently developed FAQ provides additional context for caregivers in the application of the previously released guidance.

- [Actions for Non-Emergency Medical Transportation Providers During COVID-19](#)

- Local MDHHS county offices have been given the directive to limit transportation to necessary healthcare visits, ensure CDC guidance is followed, telephonically screen beneficiaries and transportation providers for symptoms per CDC guidance, prohibit rideshare arrangements, etc.

- **Emergency Order: COVID-19 Testing and Resource Reporting**

- [EO under MCL 333.2253 Regarding Executive Orders 2020-123 and 2020-108](#)

- This Emergency Order, issued by MDHHS Director Robert Gordon, details testing and reporting requirements for testing and reporting for staff and residents; outlines additional efforts to address accuracy of nursing facility data, staffing, and infection control practices

- See also:

- [Press Release](#)
 - [MDHHS Skilled Nursing Facility Testing Guidance](#)
 - [CDC Guidance: Healthcare Infection Prevention & Control FAQs for COVID-19](#)
 - [Nursing Home COVID-19 Plan](#)
 - [6.25.20 Memo from Director Gordon: EO for nursing home testing](#)
 - [SNF COVID-19 Testing FAQ](#)
 - [Nursing Home Testing Financial Implications 6.25.20](#)

- Testing Support: Through the Michigan National Guard, the state will support facilities in completing required testing when requested, as capacity allows. Facilities may request assistance by completing the [MI COVID-19 LTC Testing Support Request Template](#) and send completed request via email to MDHHS-LTCRequests@michigan.gov by July 6, 2020.

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MEDICAL SERVICES ADMINISTRATION

Policy Bulletins – New/Proposed

- **COVID-19 Response: Recission of Portions of Bulletin MSA 20-41**
[Proposed 2057-PDN](#); [MSA 20-61](#)
Rescinds certain portions of [Bulletin No. MSA 20-41](#), which temporarily allowed out of state licensed healthcare professionals and nursing students to be employed by a Medicaid-enrolled hospice agency.
- **COVID-19 Response: Policy for Care and Recovery Centers (CRCs) to Treat COVID-19 Patients and Residents Requiring Nursing Facility Care**
[Proposed 2065-LTC](#); [MSA 20-66](#)
Based on recommendations from the Michigan Nursing Home COVID-19 Task Force and the Center for Health & Research Transformation (CHRT), MDHHS will work with eligible Medicaid-certified nursing facilities to establish Care and Recovery Centers to care for COVID-positive patients discharging from a hospital or residents from NFs that are unable to care for residents with confirmed COVID-19 who have not met criteria for discontinuation of Transmission-Based Precautions, but do not require hospitalization.

Policy Bulletins – Ongoing

- **COVID-19 Response: Specialty Health Supports and Services**
[Proposed 2056-BHDDA](#); [MSA 20-58](#)
Policy includes provisions that DHHS-BHDDA will employ pursuant to the flexibilities afforded by federal authorities to attend to the COVID-19 emergency. Overall, the policy allows PIHPs and CMHSPs to ensure the provision of essential services while also protecting the health & wellness of beneficiaries and providers. *Effective March 10, 2020 until DHHS provides notice.*
- **Updates to the Medicaid Provider Manual; Code Updates**
[MSA 20-59](#)
DHHS has completed the October 2020 update of the online Medicaid Provider Manual.
- **COVID-19 Response: Correction to Bulletin MSA 20-35**
[Proposed 2058-DMEPOS](#); [MSA 20-62](#)
Updates MSA 20-35 (see Policy Bulletins – ongoing), clarifying that clinical findings do not need to be communicated face-to-face and that physician certification of face-to-face encounter performed by a non-physician practitioner is no longer required.
- **COVID-19 Response: COVID-19 Specimen Collection**
[Proposed 2055-Lab](#); [MSA 20-57](#)

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Allows providers to bill for COVID-19 collection services for dates on or after March 10, 2020. Includes specific codes allowed for practitioners, federally qualified health centers, rural health clinics, outpatient hospitals, and independent laboratories. Also includes billing codes for pharmacists, nursing facilities, and home health agencies, subject to certain restrictions. *Effective March 10, 2020 until DHHS provides notice.*

- **COVID-19 Response: Telemedicine Policy Changes for Audiology Services**

[Proposed 2050-Audiology](#); [MSA 20-53](#)

Temporarily allows speech therapy, auditory rehabilitation, and select hearing device services to be performed remotely by audiologists and hearing aid dealers. These telemedicine services will require simultaneous use of both audio and visual capabilities. *Effective June 1, 2020 until DHHS provides notice.*

- **COVID-19 Response: Recission of Portions of Bulletin MSA 20-28 – Executive Order 2020-61**

[Proposed 2054-Practitioner](#); [MSA 20-56](#)

In response to [EO 2020-150](#), temporary suspensions related to services provided by out of state providers, enrollment of ordering providers, and supervision, delegation, and practicing agreements are rescinded. All other provisions of MSA 20-28 remain in effect until further notice. *Effective July 13, 2020.*

- **COVID-19 Response: Suspending All Medicaid Renewals**

[Proposed 2040-Eligibility](#); [MSA 20-37](#)

Renewals for all Medicaid programs will be suspended starting June 1, 2020, and paper renewals will be suppressed starting the same day. Passive renewals will be processed for June 2020 and all renewals will be suspended or suppressed as of July 1, 2020. *Effective June 1, 2020 until DHHS provides notice.*

- **COVID-19 Response: COVID-19 Test Ordering and Pharmacy Enrollment**

[Proposed 2049-Lab](#); [MSA 20-52](#)

Medicaid will enable a broader range of qualified medical professionals to order COVID-19 tests. It will also allow pharmacies to enroll as independent clinical laboratories and cover certain diagnostic tests. *Effective for dates on or after May 26, 2020 until DHHS provides notice.*

- **COVID-19 Response: Durable Medical Equipment, Prosthetics, Orthotics, Medical Supplies Supplemental Billing Policy to MSA 20-14**

[Proposed 2031-DMEPOS](#); MSA 20-25 (link not available)

Billing and coding requirements for items certain items, including personal protection equipment. *Effective March 1, 2020 until DHHS provides notice.*

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- **COVID-19 Response: Emergency Temporary Removal of Prior Authorization for Walking Boots and Wheelchair Batteries; Temporary Coverage of Spirometers for Cystic Fibrosis Beneficiaries in the Home Setting**
[Proposed 2036-DMEPOS](#); MSA 20-32 (link not available)
Bulleting informs durable medical equipment, prosthetic, orthotic and supplies providers of the temporarily removal of prior authorization for walking boots and wheelchair batteries. Also provides temporary coverage of spirometers for cystic fibrosis beneficiaries used in the home setting. *Effective April 1, 2020 until DHHS provides notice.*
- **Medicaid Compliance with Interim Final Rule CMS-5531: Improving Care Planning for Medicaid Home Health Services; COVID-19 Response: Temporary Waiver of Beneficiary Signature for Home-Delivered DMEPOS**
[Proposed 2038-DMEPOS](#); [MSA 20-35](#)
Permanent change for Home Health Agencies and durable medical equipment, prosthetic, orthotic and supplies provider. Temporary waiver of beneficiary signature requirements for home-delivered DMEPOS. *Effective March 1, 2020; signature requirements effective until DHHS provides notice.*
- **COVID-19 Response: Telemedicine Policy Rate Change; MI Care Team Health Action Plan Telemedicine Coverage**
[Proposed 2044-Telemedicine](#); [MSA 20-42](#)
Provides guidance on the reimbursement rate for telemedicine services and allows MI Care Team to deliver the Health Action Plan via telemedicine.
- **COVID-19 Response: Private Duty Nursing (PDN) and Hospice Alternative Staffing Provisions; Virtual Supervisory Visits; Prior Authorization for Private Duty Nursing**
[Bulletin No. MSA 20-41](#)
Temporarily allow: 1) alternative staffing flexibilities for PDN and hospice; 2) use of virtual visits for supervisory visits for PDN, hospice, and home health services; and 3) modify PDN prior authorizations. *Effective April 1, 2020 (or March 31, bulletin is inconsistent); comments due August 2, 2020.* NOTE: also posted under proposed – [Bulletin No. MSA 20-41](#)
- **Section 1135 Waiver**
[Michigan Seeks Approval to Streamline Medicaid](#) | [CMS Approval Letter](#)
MDHHS submitted a Section 1135 waiver request to the Centers for Medicare and Medicaid Services (CMS) to temporarily waive several Medicaid requirements on April 1, 2020. CMS approved the request on April 6, 2020 providing Michigan’s Medicaid program flexibilities to response to impact of the COVID-19 pandemic. The approval letter linked above highlights the flexibilities provided to Michigan.
- **Telemedicine**
[MSA 20 -09](#), [3-12-20 Press Release](#)

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March 12, 2020 Governor Whitmer announced expanded access to telemedicine to support COVID-19 response. MSA 20-09 expands the definition of allowable places of service to include home and other sites deemed appropriate by the provider in addition to further defining distant site provider requirements to include the provider's office, or any established site considered appropriate by the provider, so long as the privacy of the beneficiary and security of the information shared during the telemedicine visit are maintained.

- **Face to Face Service Exceptions**

- [MSA 20-12](#)

- This policy temporarily provides organizations that provide personalized care the flexibility to leverage telemedicine to support provision of specific services such as assessments and care planning where face to face requirements currently exist. *Effective 5/20/20: this policy to remain in effect until further notice. MDHHS will notify providers and stakeholders of termination.*

- **Telecommunications Systems Requirements**

- [MSA 20-13](#)

- This policy provides temporary flexibility in telecommunication systems requirements acceptable under current telemedicine policy. Policy allows providers to deliver services to be conducted via telecommunications systems that have telephonic (audio) capabilities only. Effective 5/20/20: this policy to remain in effect until further notice. MDHHS will notify providers and stakeholders of termination.

- **Durable Medical Equipment Home Delivery**

- [MSA 20-14](#)

- This temporary policy waives quantity limits, prior authorization and documentation requirements for certain medical equipment and supplies, including those that are typically received through home delivery and expands coverage to surgical masks, hand sanitizer and patient gowns. Effective 5/20/20: this policy to remain in effect until further notice. MDHHS will notify providers and stakeholders of termination.

- **Behavioral Health Telepractice; Telephone (Audio Only) Services**

- [MSA 20-15](#)

- This guidance establishes telepractice policy and allows temporary flexibility related to audio/visual to protect the health and welfare of beneficiaries and providers while maintaining access to vital services during the COVID-19 emergency. Programs affected: Medicaid and Healthy MI Plan, effective March 1, 2020 through the termination of public health emergency conditions as outlined in the policy.

- **Options for the Use of Nursing Facility Beds**

- [MSA 20-16](#)

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This policy grants nursing facilities temporary flexibilities with bed plan, use of Medicare/Medicaid bed certification, resident room conversion, and implementation of infection prevention and control measures. Effective 5/20/20: this policy to remain in effect until further notice. MDHHS will notify providers and stakeholders of termination.

- **Out of Pocket Costs**

[MSA 20-17](#) | [3-6-20 Press Release](#),

On March 6th, Gov. Whitmer, announced that Medicaid co-pays would be waived for the testing and treatment of coronavirus. MDHHS is waiving copayment and cost-sharing requirements for both inpatient and outpatient services associated with coronavirus (COVID-19) testing and treatment across Medicaid programs. Effective 5/20/20: this policy to remain in effect until further notice. MDHHS will notify providers and stakeholders of termination.

- **Hospital Transfer and Related Transportation Policy**

[MSA 20-18](#)

This temporary policy supports the establishment of the COVID-19 Statewide Load Balancing Plan by relaxing the Medicaid hospital-to-hospital transfer policy, applicable to both Fee-for-Service and managed care providers. Effective 5/20/20: this policy to remain in effect until further notice. MDHHS will notify providers and stakeholders of termination.

- **Suspending All Medicaid Closures**

[MSA 20-19](#)

MDHHS is suspending program coverage closures for all Medicaid programs beginning March 18, 2020 and will be in effect through the month of April 2020 or until the first of the month following the termination of the Governor's Declaration of a State of Emergency Order (2020-04, and subsequently 2020-33 COVID-19). This temporary suspension of closures applies to Medicaid, MICHild, Healthy Michigan Plan (HMP), and individuals who have active coverage through a met deductible (i.e., spend down). Effective 5/20/20: this policy to remain in effect until further notice. MDHHS will notify providers and stakeholders of termination.

- **Limited Oral Evaluation via Telemedicine**

[MSA 20-21](#)

This policy applies to Medicaid FFS and managed care providers. Programs affected: Medicaid, Health Michigan Plan, Children's Special Health Care Services (CSHCS), MICHild. MDHHS expands dental policy to allow dentists to provide limited oral evaluation via telemedicine, following all requirements of general telemedicine policy described in Bulletin MSA 20-09 and the MDHHS Medical Provider Manual, including scope of practice requirements, contingency plan, and use of both audio and visual service delivery unless otherwise indicated by federal guidance. This policy is intended to be time limited and MDHHS will notify providers of its termination.

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- **Telemedicine Policy Changes, Updates to Coverage for Physical Therapy, Occupational Therapy and Speech Therapy**

[MSA 20-22](#)

This policy applies to Medicaid, Health Michigan Plan, Children's Special Health Care Services, and Maternity Outpatient Medical Services. Allows flexibilities to minimize face-to-face contact whenever possible related to private practice and outpatient hospital PT, OT, and ST, allowing them to be provided via telemedicine (requiring simultaneous use of both audio and visual capabilities). This policy is intended to be time limited and MDHHS will notify providers of its termination.

- **Non-Emergency Medical Transportation (NEMT)**

[MSA 20-23](#)

Programs affected: Medicaid, Healthy Michigan Plan, MIChild, Children's Special Health Care Services. This policy effects temporary flexibilities in medical verification, reimbursement and prior authorization for FFS Medicaid by waiving requirement of least costly mode of transportation, depending on availability. Further, CSHCS will temporarily suspends noted NEMT policy requirements for travel that takes place during the COVID-19 emergency

- **Children's Special Health Care Services (CSHCS) Eligibility and Renewal Requirements**

[MSA 20-24](#)

This policy announced temporary policy changes regarding eligibility for CSHCS during the COVID-19 emergency. MDHHS will waive the requirement that beneficiaries/applicants apply for Medicaid and be placed in a 90-day temporary eligibility period (TEDP and will allow some non-physician providers to submit medical reports for CSHCS eligibility. This policy is intended to be time-limited and MDHHS will notify providers of its termination.

- **Policy for Designated COVID-19 Regional Hubs**

[MSA 20-27](#)

Programs impacted by this policy: Medicaid, MI Choice, PACE, MI Health Link. Temporarily grants Medicaid Certified Nursing Facilities flexibilities to operate as a COVID-19 Regional Hub during the emergency. Describes Regional Hub admission requirements; request for designation as Regional Hub must come from MDHHS and may be made by/granted to whole facility or a unit within a facility (not individual beds). Policy prescribes operational requirements and payer coordination.

- **Temporary Suspension of Certain Provider Enrollment Requirements; Temporary Suspension of Certain Restrictions and Requirements of the Michigan Public Health Code**

[MSA 20-28](#)

Policy allows for temporary relaxation of Medicaid provider enrollment and revalidation requirements to reduce potential administrative burden to ensure critical staff time can be

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devoted to emergency response activities. Further describes suspension of certain restrictions and requirements of the Michigan Public Health Code consistent with [EO 2020-61](#): Temporary relief from certain restrictions and requirements governing the provision of medical services, and any subsequent extensions. Effective March 29, 2020 until end of Executive Order.

- **Telemedicine Reimbursement for FQHCs, RHCs, and THCs**

- [MSA 20-34](#)

- Policy allows for flexibility in reimbursement methodology for telehealth services provided by Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHCs), and Tribal Health Centers (THCs). FQHCs and RHCs will receive Prospective Payment System (PPS) rate and THCs will receive the All-Inclusive Rate (AIR) for qualifying telemedicine visits. Visits rendered by provider while working from home and telephonic (audio only) visits are included and eligible. Refer to MSA 20-09, MSA 20-13 and MHHS Medicaid Provider Manual for service requirements unless otherwise indicated by federal guidance. Policy is time-limited, MDHHS will notify providers of its termination.

- **Clarification on Notice to Terminate Policies and Processes**

- [MSA 20-36](#)

- Provides clarification that temporary COVID-19 Response policies and L letters will remain in effect until further notice: MSA 20-12, 13, 14, 16, 17, 18, 19 and Letter 20-20.

- **Emergency Services Only Beneficiaries & Coverage of Testing and Treatment of COVID-19**

- [MSA 20-40](#)

- Effective for Emergency Services Only (ESO), this policy effective for dates of service on or after March 10, 2020, in addition to currently covered ESO services, medically necessary COVID-19 testing and treatment services provided to ESO beneficiaries covered as follows (summarized): evaluation and management services provided in outpatient setting (in-person or telemed/telephone); diagnostic testing; medications; medical supplies; coverage includes these treatments as precautionary measure for an anticipated positive test result and, follow-up services. Policy intended to be time limited and MDHHS will notify providers of termination.

Provider Letters – New

- As of October 5, no new provider L-Letters related to COVID-19 have issued.

Provider Letters – Ongoing

- **COVID-19 pregnant women dental extension**

- [Medicaid Numbered Letter 20-55](#)

- As a result of COVID-19 restricting the ability of beneficiaries to access dental services, the

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pregnant women dental benefit ([MSA 18-18](#)) will be extended.

- **Premium Pay-Nursing Facilities**
[Medicaid Numbered Letter 20-52](#)
Guidance on \$2/hour premium pay available to eligible nursing home direct care workers including registered nurses, licensed practical nurses, competency-evaluated nursing assistants, and respiratory therapists.
- **Update on Federal COVID-19 Provider Relief Fund**
[Medicaid Numbered Letter 20-53](#)
Guidance regarding application process and deadline extension for additional funds available through the Provider Relief Fund.
- **Guidance on Well Child Visits and Telemedicine**
[Medicaid Numbered Letter 20-33](#)
In light of the public health emergency related to COVID-19, this letter is being issued to highlight guidance from the American Academy of Pediatrics regarding well child care visits and the importance of continued care, either through telemedicine or in-person.
- **COVID-19 – Nursing Facility Guidance**
[Medicaid Numbered Letter 20-44](#)
Supporting guidance for [MSA Bulletin 20-16](#) that covers the use of Medicare-certified beds for Medicaid beneficiaries and the use of non-available beds without prior approval.
- **COVID-19 Response: Premium Pay**
[Medicaid Numbered Letter 20-42](#)
Premium pay announced in L 20-28 will be extended to September 30, 2020; letter gives list of programs, services, and related HCPCS codes.
- **COVID-19 Premium Pay Extended Through September 30, 2020**
[Medicaid Numbered Letter 20-45](#)
Hourly rate increase announced in L 20-26 will be paid through September 30, 2020 and end on October 1, 2020.
- **Program of All-Inclusive Care for the Elderly (PACE) Applications**
[Medicaid Numbered Letter 20-37](#)
MDHHS will not be accepting or approving letters of intent, feasibility studies, new or expansion applications, or enrollment cap increases until the budget can support growth
- **Reimbursement for Dental Personal Protective Equipment (PPE)**
[Medicaid Numbered Letter 20-31](#)
Clarifies questions on reimbursement code that the American Dental Association (ADA)

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suggested using to cover the cost of PPE; Medicaid does not separately reimburse for PPE and providers should not bill beneficiaries for the cost of PPE

- **Long Term Supports & Services (LTSS) COVID-19 Response: Level of Care Determination (LOCD) End Date Extensions Phase II**

[Medicaid Numbered Letter 20-43](#)

MDHHS is extending the end date for existing LOCDs in CHAMPS by 180 days where the end dates fall between July 1, 2020 and October 31, 2020; providers should not conduct LOCDs during this time frame if there is an existing LOCD in CHAMPS

- **Medicaid Targeted Distribution Funding for COVID-19**

[Medicaid Numbered Letter 20-40](#)

Summary of funding available to providers through the Coronavirus Aid, Relief, and Economic Security (CARES) Act. Includes details on eligibility, application process, attestation process, coordination with Medicaid reimbursement, and additional resources.

- **COVID-19 Related Covered Services**

[Coronavirus L 20-16 Letter](#)

This letter provides general guidance on patient assessment and diagnostic testing protocol, patient management after potential COVID-19 Exposure, potential risk of exposure for healthcare personnel, and preventative measures to prevent the spread of COVID-19. Additionally, the letter highlights the breadth of Medicaid covered treatment services and offers COVID-19 related coding guidance.

- **Level of Care Determination (LOCD) End Date Extensions Due to COVID-19**

[Medicaid Numbered Letter 20-19](#)

This letter distributed to nursing facilities, MI Choice, PACE, MI Health Link and details flexibilities related to the completion of existing LOCDs with end dates that fall between March 1, 2020 through June 30, 2020 due to COVID-19 emergency. This letter is intended to be time limited and MDHHS will notify providers of its termination

- **Pharmacy Flexibilities**

[Medicaid Numbered Letter 20-20](#)

This provider notice highlights temporary relaxation on quantity and days supply limits, allows for early refills of prescriptions after at least half of the previous fill has been used, and temporarily waives signature requirements to promote mailing or shipping medications. Note, this notice excludes controlled substances.

Effective 5/20/20: this Letter to remain in effect until further notice. MDHHS will notify providers and stakeholders of termination.

- **COVID-19 Response: Completion of Assessments for Nursing Facility Transition Services**

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[Medicaid Numbered Letter 20-23](#)

Distributed to Independent Living & MI Choice Waiver agencies; provides clarification to MSA 20-12 to relax face-to-face requirement for assessments, reassessments, and completion of other case management activities.

- **COVID-19 Response: Skilled Nursing Facilities**

[Medicaid Numbered Letter 20-24](#)

Details MDHHS requirements for all SNF to report on specific data elements identified by the department including the Personal Protective Equipment (PPE) they have available onsite, information related to COVID-19 cases, and bed availability. These requirements implemented pursuant to Executive Order 2020-50 (EO 2020-50). This measure augments longstanding requirements for reporting infectious disease to local health departments as well as Federal efforts to collect information in response to the COVID-19 emergency.

- **COVID-19 Response: Skilled Nursing Facilities Reporting Requirements**

[Medicaid Numbered Letter 20-25](#)

Provides guidance related to MDHHS required reporting through web-based EMResource tool, accessed at <https://emresource.juware.com/login>. The Department expects to begin publishing data received from SNFs on the MDHHS coronavirus website on Friday, April 24, 2020, with updates issued daily thereafter. SNFs that do not have current account access or have questions related to EMResource should contact the [Regional Healthcare Coalition \(HCC\)](#) that serves the county in which the SNF is located.

- **COVID-19 Response: 2020 Home Help Rate Increases**

[Medicaid Numbered Letter 20-26](#)

Letter to Home Help Individual Caregiver. Outlines permanent rate increases **only** to Home Help individual caregivers who earn less than \$9.90 per hour effective for dates of service beginning April 1, 2020; temporary rate increase of \$2 per hour in premium pay applies to **all** Home Help individual caregivers in effective for dates of service April 1, 2020 to June 30, 2020.

- **COVID-19 Response: Premium Pay**

[Medicaid Numbered Letter 20-27](#)

Letter to Providers. Effective April 1, 2020 through June 30, 2020, a temporary hourly wage increase, "Premium Pay," will be applied to payment for in-home direct care workers providing certain services under following programs: Home Help, MI Choice Waiver, MI Health Link, Behavioral Health. \$2.00 per hour Premium Pay must be applied entirely to direct care worker wages; for programs billing in 15 min increments = \$.50/15-min unit. Additionally, a \$.24 per hour will be applied for agencies to cover additional costs associated with implementation (\$.06 for 15-in incremental units). Program participants receiving services through a self-determination arrangement under the behavioral health, MI Health Link and MI Choice Waver programs must receive an additional \$2.00 per hour or

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\$.50 per unit Premium Pay to implement this increase for hours worked in April, May, June 2020.

- **COVID-19 Response: Premium Pay**
[Medicaid Numbered Letter 20-28](#)
Expands services and codes related to behavioral health as provided in previous Letter 20-27.
- **COVID-19 Federal and MI-specific COVID-19 Reporting Requirements in EMResource for SNFs**
[Medicaid Numbered Letter 20-32](#)
Prescribes daily reporting requirements and methodology applicable to Skilled Nursing Facilities via EMResource. SNFs have the option to complete NHSN Long-Term Care Facility COVID-19 Module in addition to Michigan-specific data elements whereby, if completed, would reduce reporting duplication.
- **MDHHS Response to Address COVID-19 Public Health Emergency**
[Medicaid Numbered Letter 20-34](#)
Letter of Tribal Chairs and Health Directors to notify intent by MDHHS to submit Section 1135 Waiver, Disaster Relief Children's Health Insurance Program, Medicaid State Plan Amendments, Appendix K Preprints, and Section 1115 Demonstration requests to CMS. See letter for details of flexibilities afforded under each authority.
- **Provider Monitoring Requirements during COVID-19 Pandemic**
[Medicaid Numbered Letter 20-39](#)
Recognizing the need for flexibility in complying with provider monitor responsibilities under the MI Choice contract; waiver agencies must complete monitoring activities which can be completed via paper, electronically, virtually, or any combination thereof (providing selected provider is able to furnish MI Choice services during pandemic); agencies may revise providers for monitoring based upon provider's availability to participate in monitoring activities; provider monitoring requirements related to completion of in-person visits are temporarily waived until further action by the state.

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STATE & FEDERAL GUIDANCE

MDHHS [Press Releases](#) & [State Resources](#)

- **The State Emergency Operations Center and the Community Health Emergency Coordination Center** support review of nationally available resources and development of Michigan specific guidance or resources where necessary. These materials are regularly posted to the MDHHS Coronavirus information webpage:
 - [Resources for Health Professionals](#)
 - [Resources for Residents](#)
 - [Resources for Childcare](#)
- **MDHHS, LEO and University of Michigan collaborate to provide new online dashboard** Virtual illustration of COVID-19 risks and trends to provide Michiganders important information about the pandemic status where they live and work. [DASHBOARD](#)
- **Deaf & Hard of Hearing Tool**
[Visual COVID-19 tool](#) for deaf and hard of hearing.
- **MI Symptom App**
<https://misymptomapp.state.mi.us/login>
- **[Nursing Home COVID-19 Plan](#) webpage added to Resources page of www.michigan.gov/coronavirus**
Provides information and links to relevant documentation on vital components to addressing the impact of COVID-19 on nursing facilities: Testing Strategy, Reporting, Staffing, Adaptation to the Regional Hub Model and Infection Prevention and Control

Center for Disease Control (CDC)

- CDC guidance documents can be found [here](#), with filters for audience and topic. Specific resource pages have been developed for:
 - [Healthcare professionals](#)
 - [Laboratories](#)
 - [Health Departments](#)
- CDC Updates can be found [here](#).
- Communication resources can be found [here](#).
- Forecasts, including state-specific information, can be found [here](#).

Centers for Medicare & Medicaid Services (CMS)

- HHS updates on coronavirus can be found [here](#).

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- CMS Medicaid & CHIP Resources, Tools & Checklists for state flexibilities, state waiver amendment approvals, and additional CMS guidance can be found [here](#).
- All CMS emergency guidance can be found [here](#). Recent updates include:
 - [New COVID-19 FAQs for state Medicaid agencies](#)
 - [2020-2021 Medicaid managed care rate development](#) guide

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OTHER RESOURCES AND CONNECTION POINTS

General Contact Information

- Use COVID19donations@michigan.gov for organizations looking to donate to the state's public health response.
- <https://www.mivolunteerregistry.org/> can be used for individuals looking to volunteer.

Kaiser Medicaid Emergency Tracker

- [KFF Medicaid Emergency Authority Tracker: Approved State Actions to Address COVID-19](#)
- Webpage aggregates tracking information on approved Medicaid emergency authorities to address the COVID-19 Coronavirus emergency, including Disaster Relief State Plan Amendments (SPAs), other Medicaid and CHIP SPAs, and other state-reported administrative actions; Section 1115 Waivers; Section 1135 Waivers; and 1915 (c) Waiver Appendix K strategies.

Below is a non-exhaustive list of the various Department/Agency hotlines/email addresses active for COVID-19 response:

Department of Health & Human Services

COVID-19 Hotline - 888-535-6136 (Monday – Friday 8 a.m. to 5 p.m.)

COVID19@michigan.gov (emails answered Monday – Friday 8 a.m. to 5 p.m.)

Provider Hotline - 888-277-9894 (24/7)

Agriculture and Rural Development (MDARD)

MDARD has established an email account for food and ag stakeholders to submit future questions. That email address is mdard-covid19@michigan.gov.

Licensing and Regulatory Affairs (LARA)

LARA has established an email account for questions specific to LARA, mostly related to licensing requirements which many have been addressed by either EO or by further clarification of LARA's licensing requirements and processes. That email address is - LARA-COVID-19-Questions@michigan.gov.

Attorney General

[Consumer Protection](#) including Unemployment Identify Theft, Scam Alert of the Day; report Consumer Protection Act violations [online](#) or by calling 877-765-8388.

1. Below is a list of Medicaid connection points to support conducting business electronically during the COVID-19 response, and Governor Whitmer's Stay Home, Stay Safe Executive Order:

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- a. MDHHS encourages the use of [MiNotifyTPL](#) for Estate Recovery, Special Needs Trusts, Annuity, and Casualty case needs.
- b. CHAMPS Document Management Portal – [instructions can be found here](#)
- c. CHAMPS Claims Submission via Direct Data Entry – [information can be found here](#)