NC Medicaid Managed Care County Playbook

Fact Sheet End of the COVID-19 Public Health Emergency

Background

The COVID-19 federal Public Health Emergency (PHE) began March 20, 2020. It provided protections and flexibilities for Medicaid beneficiaries and providers. The PHE also gave 6.5% enhanced FMAP (Federal Medical Assistance Percentage) funding to states who agreed not to terminate or reduce Medicaid coverage for beneficiaries.

The Consolidated Appropriations Act (also known as the Omnibus Bill) signed into law on December 29, 2022, decoupled the continuous coverage requirement from the PHE. The continuous coverage unwinding began April 1, 2023. For more information on the unwinding, view the <u>Continuous Coverage</u> <u>Unwinding Fact Sheet</u>.

The White House issued an official statement on Jan. 30, 2023, with additional guidance provided by the Department of Health and Human Services Feb. 9, 2023. The statement notes HHS plans to allow the federal COVID-19 PHE to expire May 11, 2023.

PHE UNWINDING

Coverage for the COVID-19 Testing and Treatment (MCV) group will end May 31, 2023, but their FMAP ends May 11, 2023. NC Medicaid will continue to provide coverage to this group until May 31, 2023. They can reapply for Medicaid coverage, but DSS will not have to complete a recertification on these cases.

COVID-19 testing and treatment coverage for the Family Planning Program (FPP) population will also end May 31, 2023. COVID-19 vaccinations will continue to be provided with no cost sharing to the FPP group until September 30, 2024.

Below is a sample Termination Notice for the Medicaid COVID-19 Testing and Treatment coverage group.

Notice of Termination of Medical Assistance

THE CHANGE WHICH WILL TAKE PLACE:

Medicaid COVID-19 Testing and treatment coverage will end.

WHY THE CHANGE WILL BE MADE:

Medicaid coverage for the above beneficiaries was only limited to COVID-19 testing, vaccinations, and COVID-19 treatment (including treatment of a condition that may seriously complicate the treatment of COVID-19. This coverage was provided due to the national Public Health Emergency (PHE). Now that the PHE is ending, this program will also end.

WHEN THE CHANGE WILL BE MADE:

This change will be effective May 31, 2023 due to the ending of the national Public Health Emergency (PHE).

You may be eligible for comprehensive Medicaid coverage. To find out if you are eligible, you must submit an application for Medicaid. You can submit an application in one of the following methods:

- 1. In person at your local county department of social services
- 2. By phone by contacting your local county department of social services
- 3. Online at epass.nc.gov
- By completing a paper application and mailing, emailing or faxing it to your local county department of social services.
 - Individuals who are ineligible for full Medicaid coverage may be eligible for health insurance and help
 paying for it through the Health Insurance Marketplace. We sent your information to them.
 - You can wait for a letter from the Marketplace, or you can contact them directly. To contact the Marketplace, go online to www.healthcare.gov or call 1-800-318-2596.
 - After you complete your application, the Marketplace will tell you if you qualify for health coverage and financial help.
 - In North Carolina, several non-profit organizations offer free, in person assistance with health insurance applications. To schedule an appointment, call 1-855-733-3711 or go online to <u>www.ncnavigator.net</u>

PLEASE CONTINUE READING FOR IMPORTANT INFORMATION REGARDING YOUR RIGHTS TO A HEARING.

HEARING RIGHTS: This decision regarding your eligibility is based on a federal law that ends the State's authority to offer optional COVID-19 Medicaid group coverage on the last day of the Public Health Emergency. A hearing will not be granted if the sole issue for the hearing is the end of authority for the optional COVID-19 Medicaid group. If you disagree with this decision because you believe the State has made an error in determining your Medicaid eligibility, you may request a hearing to review the decision. Call your worker at the number below within 60 days and indicate the reason you are asking for a hearing. The 60th day is your court hearing date. If you do not ask for a hearing by this date, you cannot have a hearing unless you have a good reason for missing this deadline. You may reapply for benefits at any time. To protect your rights, you may BOTH reapply AND ask for a hearing.

If you have additional questions or concerns, contact your caseworker at; County DSS number for

information, or call the DHHS Customer Service Center toll free <u>at 800</u>-662-7030. TDD/Voice for the hearing impaired is also available through this number. The hours are 8:00am-5:00pm, Monday-Friday, excluding State holidays.

Beware of Fraud!

Don't forget to report all changes to your county department of social services within 10 calendar days. If you don't know whether a change is important, ask your caseworker. If you do not truthfully report information and changes, you may be guilty of a misdemeanor or felony When the PHE ends, so will the suspension of reverification for providers enrolled in Medicad. Letters will be sent to providers with approaching reverification due dates, as well as those whose reverification was suspended during the PHE. For more information visit Medicaid's End of Medicaid Continuous Coverage & the federal COVID PHE website at <u>medicaid.ncdhhs.gov/End-of-PHE</u>.

While the continuous coverage provision was removed from the PHE, the Disaster SPA, 1135 and Appendix K remain part of the PHE. The Disaster SPA and 1135 authorities will end May 11, 2023. Appendix K will end Nov. 11, 2023.



*Per 1/30/23 official Federal announcement, the PHE is set to end on 5/11/23.

ADDTIONAL INFORMATION

For additional information on the end of the federal PHE, visit the links below: NC Medicaid – <u>End of Medicaid Continuous Coverage & the federal COVID PHE</u> HHS – <u>COVID-19 Public Health Emergency (PHE)</u>

