

Oct. 2, 2024
MB# 24-056

MEDICAID BULLETIN

TO: All Providers

SUBJECT: Hurricane Helene Emergency Flexibilities

On Sept. 25, 2024, Governor Henry McMaster declared a state of emergency in South Carolina in preparation for Hurricane Helene. On Sept. 30, 2024, U.S. Department of Health and Human Services Secretary Xavier Becerra declared a public health emergency for the state of South Carolina, which was backdated to Sept. 25, 2024, and President Joe Biden approved a major disaster declaration for South Carolina. As part of the state's response to Hurricane Helene, the South Carolina Department of Health and Human Services (SCDHHS) has submitted formal requests to the Centers for Medicare and Medicaid Services (CMS) to temporarily waive or amend some requirements to ensure continued access to care for Healthy Connections Medicaid members impacted by Hurricane Helene. The temporary flexibilities described in this bulletin are in effect statewide retroactive to Sept. 25, 2024, and will expire Oct. 31, 2024.

Temporary Flexibilities

Hospitals

- SCDHHS is temporarily waiving certain physical environment requirements to allow increased flexibilities for surge capacity. SCDHHS will permit facility and non-facility space that is not normally used for patient care to be utilized for patient care, provided the location is approved by the state and will ensure that safety and comfort for patients and staff are sufficiently addressed.
- SCDHHS will temporarily expand the ability for hospitals to offer long-term care services ("swing beds") for patients who do not require acute care but do meet the skilled nursing facility (SNF) level of care criteria as set forth at 42 CFR 409.31. Under section 1135(b)(1) of the act, eligibility requirements at 42 CFR 482.58(a)(1)-(4), "Special Requirements for hospital providers of long-term care services ('swing beds')" are temporarily waived to allow hospitals to establish SNF swing beds payable under the SNF prospective payment system to provide additional options for hospitals with patients who no longer require acute care but are unable to find placement in a SNF.

Skilled Nursing Facilities



- SNF services will be temporarily covered without a qualifying three-day hospital stay for members that experience dislocations.
- Pre-admission Screening and Annual Resident Review (PASARR) processes are temporarily postponed. Retroactively performed screenings or resident reviews must document the reason for the delay in the completion of PASARR requirements.
- SCDHHS will temporarily waive the requirement for physicians and non-physician practitioners to perform in-person visits for nursing home residents and will allow visits to be conducted, as appropriate, via telehealth.
- SCDHHS will temporarily postpone the timeframes in which SNFs must conduct a comprehensive assessment and collect minimum data set data.

Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs)

- SCDHHS will temporarily allow for rooms in ICF/IIDs not normally used as a resident's room to be used to accommodate beds and residents for resident care in emergencies and situations needed to help with surge capacity.
- SCDHHS will temporarily waive requirements for the facility to provide sufficient direct support staff so direct care staff are not required to perform support services that interfere with direct resident care. This will allow facilities to adjust staffing patterns while maintaining the minimum staffing ratios required.

Home Health and Hospice

- Home health agencies will temporarily be allowed to perform initial assessments remotely or by record review.
- SCDHHS will temporarily modify timeframes for hospice providers to complete updates to their comprehensive assessment from 15 to 21 days. Hospice providers must continue to complete other required assessments (i.e. initial and ad hoc assessments based on a change in the patient's condition).
- SCDHHS will temporarily extend the timeframes related to OASIS transmission for home health agencies by:
 - Extending the 5-day completion requirement for the comprehensive assessment to 30 day and
 - Modifying the 30-day OASIS submission requirement.

Durable Medical Equipment (DME)

- Prior authorization requirements and quantity limits for oxygen therapy, positive airway pressure devices, respiratory assist devices, ventilators, suction devices, nebulizers and related supplies are temporarily waived.
- If DME is lost, destroyed, irreparably damaged or otherwise rendered unusable, SCDHHS will waive requirements for in-person assessments, new physician's orders and medical necessity documentation for DME providers. DME providers still must include a narrative description on the claim explaining the reason why the equipment must be replaced and are reminded to maintain documentation indicating the DME was lost,

destroyed, irreparably damaged or otherwise rendered unusable or unavailable as a result of the emergency.

- To the extent otherwise allowable by professional licensing boards, professional practice acts and other laws and regulations, DME providers may temporarily continue to provide services, recurring medical supplies or DME rentals with otherwise valid provider orders that exceed SCDHHS' duration or timeliness standards.
- Requirements for Medicaid Certificates of Medical Necessity (MCMNs) for oxygen, enteral nutrition, parenteral nutrition and medical equipment are temporarily suspended. A valid physician order is still required for these services.

Pharmacy Services

- Replacement prescription refills may be permitted for a quantity up to the amount originally dispensed in circumstances where dispensed medication has been lost or otherwise rendered unusable by damage due to the emergency (controlled substances are excluded).

Additional Flexibilities Being Sought

SCDHHS will also submit a request(s) to CMS seeking additional flexibilities that were not included in CMS' initial waiver. SCDHHS will issue additional provider guidance once this request(s) is approved.

South Carolina's Medicaid managed care organizations (MCOs) are required to ensure the applicable temporary flexibilities described in this bulletin are also applied to services covered by MCOs. This will support SCDHHS' goal to provide continued access to care for all Healthy Connections Medicaid members impacted by Hurricane Helene.

Providers should direct any questions related to this bulletin to the Provider Service Center (PSC). PSC representatives can be reached at (888) 289-0709 from 7:30 a.m.-5 p.m. Monday-Thursday and 8:30 a.m.-5 p.m. Friday. Providers can also submit an online inquiry at <https://www.scdhhs.gov/providers/contact-provider-representative>.

Thank you for your continued support of the South Carolina Healthy Connections Medicaid program.

/s/

Robert M. Kerr