

Dear APG Members:

We understand that there are many questions around the recent regulatory and policy changes being issued by the administration and its agencies in response to the coronavirus (COVID-19). APG is committed to advocating on behalf of our members' interests and helping to educate you and provide a clear understanding of what these changes mean for you, your organizations, and the communities you serve.

Here is what you need to know:

Today: President Trump declared a National Emergency regarding the coronavirus outbreak. This will activate additional funding as well as provider flexibility in administering care such as waivers for three-day hospital stay requirement for skilled nursing facility coverage. Further detail on these flexibilities will be published by the Centers for Medicare and Medicaid Services (CMS) soon.

March 4: Congress passed the [*Coronavirus Preparedness and Response Supplemental Appropriations Act*](#) in which \$8.3 billion of funds were released to assist the Department of Health and Human Services (HHS), States and the Small Business Administration (SBA). This legislation modifies requirements for telehealth for traditional Medicare. We are currently waiting on further details on the additional telehealth flexibilities which can be implemented for Medicare fee-for-service (FFS).

In terms of Medicare Advantage (MA), CMS has published a detailed [memorandum](#) regarding the expanded flexibility in MA. I had a call today with a senior CMS leader who clarified some questions I have received from you.

1. **Telehealth** - The linked document details that CMS has exercised its authority to expand telehealth benefits for MAOs. Practices should contact their MAOs to coordinate which services could be moved to telehealth. MAOs do not need to revise any documents or receive permission from CMS in order to expand the benefits.
2. **Supplemental benefits** - In terms of the option of delivering food and medications to beneficiaries that do not meet definitions for Special Supplemental Benefits for the Chronically Ill (SSBCI), the CMS official requested time to discuss that issue and will be sending more guidance.

3. **Reopen Bids to change benefit offering** - CMS believes that the guidance expanding MA flexibility will alleviate the need for reopening bids.

In the memorandum, CMS also identifies additional flexibilities it will provide to MA plans to help fight the spread of COVID-19. Those new flexibilities allow:

- Waiving cost-sharing for COVID-19 tests
- Waiving cost-sharing for COVID-19 treatments in doctor's offices or emergency rooms and services delivered via telehealth
- Removing prior authorizations requirements
- Waiving prescription refill limits
- Relaxing restrictions on home or mail delivery of prescription drugs from Part D sponsors

Since we are expecting additional guidance, documents, and/or regulations from CMS in the next few weeks to implement the Coronavirus Preparedness Act and the President's National Emergency declaration, we will be sending regular updates to our members.

We are here to serve as a resource for you. Please don't hesitate to contact me [here](#) with any questions you may have or any situations within your practice that you want me to be aware of.

As always, please know that we are in constant contact with federal and agency officials and will share any additional news with you as soon as possible.

Best,

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