The COVID-19 Public Health Emergency Unwinding

On January 30, 2023, the Biden Administration announced the end of the COVID-19 Public Health Emergency (PHE) after nearly three years and 12 extensions. The COVID-19 PHE and National Emergency will expire on May 11, 2023. This document outlines what community health centers need to know about expiration of the COVID-19 PHE and the National Emergency. For any questions, please contact federalpolicy@nachc.org.

COVID-19 Vaccines, Testing, Treatments

Medicaid

- Medicaid and CHIP will cover the COVID-19 vaccine because it was added to the list of ACIP recommended vaccines during the PHE.
- Medicaid and CHIP beneficiaries will have coverage of COVID-19 testing and treatment services without cost-sharing until September 2024.

Medicare

- Medicare beneficiaries will have coverage for all ACIP-recommended vaccines, including the COVID-19 vaccine.
- The prohibition on cost sharing will end at the expiration of the PHE for Medicare and Medicare Advantage beneficiaries for:
  - COVID-19 at-home testing
  - Testing-related services
  - COVID-19 Pharmacological Treatment

Private Insurance

At the end of the PHE, health insurers will no longer be required to:

- Pay out-of-network providers for tests and related services.
- Cover COVID-19 vaccines without cost-sharing when provided by out-of-network providers.
- Reimburse out-of-network providers a reasonable amount for vaccine administration.
  - It should be noted that due to the Affordable Care Act, many privately insured patients may still qualify for free vaccines.

Uninsured Patients

- At the end of the PHE, the temporary Medicaid coverage option that allowed patients to obtain COVID-19 testing services with no cost-sharing will end. NACHC recommends checking your state Medicaid’s 1115 waivers.
Telehealth

Medicare

- The Consolidated Appropriations Act of 2023 extended PHE the following policies through December 31, 2024:
  - Health centers are permitted to serve as distant site providers and provide virtual mental health services.
  - Medical and mental health telehealth visits can be delivered through equipment with both audio and video capability.
  - Waiving in-person requirements for mental health visits.

Medicaid

- During the pandemic, states implemented PHE flexibilities that permitted audio-only telehealth FQHC encounters.
- You can review the latest telehealth Medicaid policies on NACHC’s state telehealth factsheet.
- FQHCs are eligible for PPS payment for audio-only for services covered within the scope of the FQHC benefit. For more information, please review the latest CMS telehealth toolkit.

State Licensure Requirements

- During the COVID-19 PHE many states waived state licensure requirements for providers delivering services across state lines. You can review your state’s latest laws here.

Controlled Substance Prescriptions

- HHS and DEA implemented two flexibilities related to prescribing controlled substances that will end at the expiration of the PHE:
  - A practitioner can prescribe a controlled substance to a patient using telemedicine, even if the patient isn’t at a hospital or clinic registered with the DEA.
  - Qualifying practitioners can prescribe buprenorphine to new and existing patients with opioid use disorder based on a telephone evaluation.

Expanded Scope of Practice

COVID-19 Vaccines

- Under the Public Readiness and Emergency Preparedness Act (PREP), the following health care professionals were permitted to order and administer the COVID-19 vaccine:
  - Dentists, pharmacists, midwives, paramedics, EMTs, physician assistants, respiratory therapists, podiatrists, optometrists, and veterinarians.
- This act is scheduled to last until October 1, 2024, or until HHS declares a final day.

Prescribing COVID-19 Treatments: Paxlovid

- During the COVID-19 PHE, the U.S. Food and Drug Administration (FDA) issued an Emergency Use Authorization for pharmacists to prescribe the COVID-19 treatment medication Paxlovid.
  - This flexibility is not tied directly to the PHE expiration but could expire after May 2023.
    - The FDA said this flexibility would last until the “justification authorizing emergency use of drugs and biological products during the COVID-19 pandemic is terminated.”
**Medicaid Flexibilities**

**COVID-19 State Waivers**
During the COVID-19 pandemic, CMS created expedited processes to support State’s implementation of new Medicaid policies to help providers and create resources to respond to the pandemic.

- **1115 Demonstration Waivers:** Expires 60 days after the COVID-19 PHE
  - States may propose to waive many of the key provisions of the Medicaid statute, including but not limited to which individuals are covered; which benefits must be provided; how much individuals may be charged for premiums and copayments; and how providers will be paid. A 1115 waiver can be very broad or very narrow, depending on the state’s goals.
  - To view current COVID-19-related Section 1115 Waivers click here.

- **Section 1135 Waivers:** Expires at the end of the COVID-19 PHE
  - Allow the Department of Health and Human Services to waive certain Medicare, Medicaid, CHIP, or HIPAA requirements. There are different kinds of 1135 waivers, including Medicare blanket waivers. When there's an emergency, sections 1135 or 1812(f) of the SSA allow HHS to issue blanket waivers to help beneficiaries access care.
  - To view current COVID-19 1135 waivers click here.

**Medicaid Redeterminations**

- In December 2022, Congress passed its year-end omnibus spending bill which delinked the Medicaid continuous coverage requirement from the COVID-19 PHE.
- Starting February 1, 2023, states are permitted to begin the renewal process and have 14 months to complete renewals for beneficiaries.
- April 1, 2023, states are permitted to resume Medicaid terminations for individuals found ineligible.
- NACHC is committed to supporting health centers, PCAs, and HCCNs to ensure health center patients maintain health insurance coverage during the redetermination process. We encourage members to join NACHC’s Medicaid Redeterminations Nodlepod to connect with health center advocates across the country and the latest policy updates.