

State Advocacy

End of Public Health Emergency Guide

On January 30th, the Biden Administration [announced](#) that the Public Health Emergency (PHE) that was declared in 2020 due to the Covid-19 pandemic will end on May 11th, 2023. This means that many of the policies that were enacted due to the PHE will expire. This guide details some of the policies that will expire and result in costs out of pocket. The guide also provides insight into how state affiliates can advocate for some of these policies to continue.

What will ending the public health emergency mean for the disability/Autism community? 15 million people may be dropped from Medicaid.

The PHE ending creates additional risks for the disability community, including:

- Loss of coverage
- Cost
- Access
- Treatment
- Testing

Federal Emergency Flexibilities and Expirations

- If you are covered through **Medicaid and CHIP**:
 - Free Covid-19 Vaccinations will still be covered
 - Free Covid-19 tests will end in 1/01/2024
 - Continuous Enrollment ends 3/31/2023
 - [Telehealth coverage continuation will be state by state](#)
 - Disaster-Relief State Plan Amendments will end on 5/11/2023
 - Section 1115 demonstration waivers will end on 7/10/2023 (see more below)
 - Section 1915(c) waiver Appendix Ks will end on 11/11/2023 (see more below)
 - Section 1135 waivers will end on 5/11/2023
- If you are covered through **Medicare**:
 - Free Covid-19 Vaccinations will still be covered
 - Coverage and costs for oral antivirals will still be covered

- 8 free at-home tests per month and other related testing will end 5/11/2023
- Telehealth services continued through 12/31/2024
- Three month supply of Part D drugs will end on 5/11/2023
- If you are covered through **Private Health Insurance:**
 - 8 free at-home tests per month or \$12 reimbursement for tests will end 5/11/2023
 - Free Covid-19 vaccines will end on 5/11/2023
 - To note: Moderna and Pfizer stated that once the PHE ends, costs will likely be around \$110-130 a dose. Private insurance will vary in what percent they will cover.
- If you are **uninsured:**
 - Free Covid-19 testing, vaccinations, and treatments will end on 5/11/2023
- Here are some **tips** before the PHE ends:
 - Buy tests close to May deadline; don't buy too far in advance because tests expire (after 4-6 months)
 - Get your bivalent booster
 - The most vulnerable will be less protected. Keep this in mind as you decide what precautions to take (i.e. mask in crowded areas, increase ventilation, etc).

State PHE Authorities under Medicaid

- **Unwinding of Medicaid Continuous Coverage:** Due to the PHE, Congress required states to keep people continuously enrolled in their Medicaid programs. Now that the PHE is going to end, up to 15 million people could lose coverage and no longer qualify. To prepare for the unwinding of continuous coverage protection at the end of the PHE, states submitted plans. Georgetown University Health Policy Institute developed a [state by state tracker](#).
 - The National Health Law Program developed a [checklist](#) and a [ten-step issue guide](#) for advocates to ensure states are following the unwinding period.
 - [Guide](#) on “What You Can Do to Help Kids Stay on Medicaid in 2023”

- **Medicaid 1915(c) waiver Appendix Ks:** States were able to use PHE-based authority to make temporary changes to their existing 1915(c) waivers by amending Appendix K of their waiver applications to expand HCBS services. These waivers are only operative during an emergency and will end six months after the emergency ends, or November 11th, 2023. Some provisions states offered through their Appendix Ks include almost all states extending reassessment due dates and all 50 states allowing evaluations, assessments, and person-centered planning meetings to take place virtually. Thirty-nine states included an expansion of payment of family caregivers for services rendered. ADvancing States, NASDDDS, and NAMD has a new [guide](#) to help state Medicaid and aging and disability agencies prepare for the end of all flexibilities. The [Kaiser Family Foundation has a helpful chart listing all waiver provisions and states that chose the provisions](#).
 - Centers for Medicare & Medicaid Services (CMS) [State by State detail on Approved 1915\(c\) Appendix K Waivers](#)
 - Although this waiver ends six months after the end of the PHE or 11/11/2023, the State can choose to offer these provisions in their regular 1915(c) waiver. The state would need to submit a waiver amendment to CMS to add these provisions to their ongoing waiver authority. **Here is how to advocate for your Appendix K provisions to be long term.**
 1. Examine the Appendix K of the relevant 1915(c) waiver/Autism/DD waiver to see what provisions it includes.
 2. Make an appointment with your [state DD agency](#) to find out if the State intends to continue to offer any of these provisions in the Autism/DD waiver after Appendix K authority ends.
 3. Discuss which provisions make sense to continue. If the State will not be making those provisions available under the waiver, talk with your [DD agency](#) about advocating for the provision to be added to the ongoing waiver authority.
 - a. Some provisions may require action by the State legislature.

- **Section 1115 waivers to address Covid-19:** These waivers were designed to help give states more flexibility within their HCBS programs and long-term services and services. These waivers were only taken up by a few states. Some examples of provisions granted include seven states offering retainer payments to personal care providers and four states providing long term services and supports (LTSS) based on immediate need and not the plan. The [Kaiser Family Foundation has a chart listing all waiver provisions and states that chose the provisions.](#)
 - CMS [State by State detail on approved 1115 waivers](#)
- **Section 1135 waivers:** These waivers are available during PHEs to waive or modify certain Medicare, Medicaid, and CHIP requirements to ensure all needs are met for enrollees. Fourteen states used this waiver to pay family members providing services. 30 states expanded their definition of settings that meet HCBS standards and 28 states allowed for verbal consent for person-centered plans. The [Kaiser Family Foundation provides a chart listing all waiver provisions and states that chose the provisions.](#)
 - CMS [State by State detail on approved 1135 waivers](#)