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State/Territory Name: Idaho

State Plan Amendment (SPA) #: 23-0019

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, Maryland 21244-1850



May 11, 2023

Juliet Charron, Administrator Idaho Department of Health and Welfare Division of Medicaid PO Box 8320 Boise, ID 83720-0009

Re: Idaho State Plan Amendment (SPA) 23-0019

Dear Ms. Charron:

The Centers for Medicare & Medicaid Services (CMS) reviewed the proposed Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0019. This amendment proposes to temporarily extend telehealth-related public health emergency flexibilities for the state's three Section 1915(i) programs. These flexibilities were originally approved in Disaster Relief SPAs ID-20-0014, ID-21-0008, and ID-23-0018 with the following modifications to add the telehealth assurances.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that Idaho's Medicaid SPA TN 23-0019 is approved effective May 12, 2023.

If you have any questions, please contact Courtenay Savage at 312-353-3721 or via email at Courtenay. Savage@cms.hhs.gov.

Sincerely,

Alissa M. Deboy -S

Digitally signed by Alissa M. Deboy -S Date: 2023 05.11 08:30 52 -04'00'

Alissa Mooney DeBoy On Behalf of Anne Marie Costello, Deputy Director Center for Medicaid and CHIP Services

Enclosures

cc: Charles Beal, IDHW David Bell, IDHW

CENTERS FOR MEDICARE & MEDICAID SERVICES	
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER 2. STATE 1 D
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI
TO: CENTER DIRECTOR	4. PROPOSED EFFECTIVE DATE
CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	0 €×ФФ× 202 9× 05-12-2023
5. FEDERAL STATUTE/REGULATION CITATION Section 1915(i) of the Social Security Act	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2023 \$ 0
Title XIX of the Social Security Act	b. FFY 2024 \$ 0
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Section 7% A.B.X 7.4.C	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) N/A
9. SUBJECT OF AMENDMENT	
Amendment to the State Plan to temporarily continue certain flexibilities for Idaho's three 1915(i) State Plan Authorities, secured under COVID-19 Public Health Emergency Disaster SPAs.	
10. GOVERNOR'S REVIEW (Check One)	
GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	
	15. RETURN TO JULIET CHARRON, Administrator Idaho Department of Health and Welfare
12. TYPED NAME	Division of Medicaid
43 TITLE	PO Box 83720 Boise, ID 83720-0009
Administrator	3015e, 1D 63720-0009
14. DATE SUBMITTED 04/19/2023	
FOR CMS USE ONLY	
April 19, 2023	17. DATE APPROVED May 11, 2023
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL May 12, 2023	19. SIGNATURE OF APPROXIMO WRESCIAL M. Deboy -S Date: 2023.05.11 B3.1 13.0400
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
Alissa Mooney DeBoy, On Behalf of Anne Marie Costello	Deputy Director, Center for Medicaid and CHIP Services
22. REMARKS 5/5/23: The state authorized CMS to change Box 5 of the CMS-179 to add "Title XIX of the Social Security Act" and to change Box 7 of the CMS-179 to "Section 7.4.C". 5/9/23: The state authorized CMS to change the SPA effective date from 5/11/23 to 5/12/23.	
5.5.25. The state dutionized one to change the of A elective date from 5/1/1/20 to 5/12/20.	

Section 7 - General Provisions

Section 7.4.C. Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency

Effective the day after the end of the PHE until May 11, 2024, the agency temporarily extends the following election(s) in section 7.4 (approved on 04/30/2021 in SPA Number ID-20-0014 COVID19 Adult DD Disaster SPA) of the state plan.

Telehealth:

X The agency utilizes telehealth in the following manner, which may be different than outlined in the state's approved state plan:

The following services offered under the State's 1915(i) State Plan HCBS Benefit for Adults with Developmental Disabilities (State Plan Attachment 3.1-A: Supplement 2) may be delivered via virtual methods (e.g. real-time telephonic or audio-visual) if the service can be safely and effectively delivered via virtual methods, fully meets the service definition when provided via virtual methods, and when appropriate to meet the individual's needs as identified in the person-centered serviced plan:

- developmental therapy (as described in section titled "Services"); and
- community crisis support (as described in section titled "Services").

<u>Information/Assurances for Telehealth Delivery of 1915(i) Services</u>

- Telehealth/virtual care can be the delivery method for these services when appropriate. The use of virtual care will vary depending on the participant's needs and the specific service.
- In-person visits will be required if the service itself requires it to deliver it safely and effectively.
- A service that requires provision of hands-on assistance or physical assistance is not appropriate to be delivered via telehealth/virtual care.
- A provider will document at least one (1) in-person contact with a participant every twelve (12) months.
- All services are available to the participant in-person. The State Medicaid Agency does not require providers to offer, or participants to utilize, telehealth/virtual care for service delivery. If a participant encounters barriers utilizing telehealth/virtual care for the service or requires additional assistance, the service can be accessed in-person. A willing provider may, at their discretion, provide assistance or equipment as a participant may require, but such assistance is not a reimbursable activity.
- Use of telehealth/virtual care can increase service access and continuity of care. This can assist with maintaining an individual in their home and community and among natural supports. Active engagement and integration with the community is a usual and normal component of a participant's plan of care, regardless of service delivery modality.
- Providers who use telehealth/virtual care delivery for these services are expected to adhere to HIPAA requirements. The state assures that this methodology is accepted by the state's HIPAA compliance officer.
- A service delivered via telehealth/virtual care is under the same health and safety standards as the service being delivered in-person.
- A service delivered via telehealth/virtual care is under the same privacy standards as the service being delivered in-person. Providers are required to know and follow all applicable state and federal privacy laws. This applies to information privacy as well as physical privacy. Participants will be informed of this by providers when initially utilizing telehealth/virtual care for service delivery. In situations where privacy cannot be secured for the participant, the provider is responsible to pause the delivery of the service until they have confirmed it is proper to resume or reschedule.

Transmittal No: ID-23-0019 Approval Date: <u>5-11-2023</u> Effective Date: <u>05-12-2023</u>

State/Territory: Idaho

Other Policies and Procedures Differing from Approved Medicaid State Plan /Additional Information:

- 5. <u>Modifications to Processes for 1915(i) State Plan HCBS Benefit for Adults with Developmental Disabilities (State Plan Attachment 3.1-A: Supplement 2).</u> The State may:
- Allow the option to conduct evaluations, assessments, and person-centered service planning meetings virtually (e.g. real-time telephonic or audio-visual) in lieu of face-to-face meetings. The state assures it meets the 1915(i) requirements under 42 CFR §441.720(a)(1)(i)(A) through (C) for the use of telehealth to conduct assessments; and
- Add an electronic method of signing off on any required documents, including the person-centered service plan.

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State/Territory: Idaho

Section 7 - General Provisions

Section 7.4.C. Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency

Effective the day after the end of the PHE until May 11, 2024, the agency temporarily extends the following election(s) in section 7.4 (approved on 05/28/2021 in SPA Number ID-21-0008 COVID19 Children's DD Disaster SPA) of the state plan.

Other Policies and Procedures Differing from Approved Medicaid State Plan /Additional Information:

Modifications to Processes for 1915(i) State Plan HCBS Benefit for Children with Developmental Disabilities (State Plan Attachment 3.1-A: Supplement 1). The State may:

- Allow the option to conduct evaluations, assessments and person-centered service planning meetings virtually (e.g. real-time telephonic or audio-visual) in lieu of face-to-face meetings. The state assures it meets the 1915(i) requirements under 42 CFR §441.720(a)(1)(i)(A) through (C) for the use of telehealth to conduct assessments; and
- Add an electronic method of signing off on any required documents, including the person-centered service plan;

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Section 7 – General Provisions

Section 7.4.C. Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency

Effective the day after the end of the PHE until May 11, 2024, the agency temporarily extends the following election(s) in section 7.4 (approved on 04/28/2023 in SPA Number ID-23-0018 COVID19 1915i SED Disaster SPA) of the state plan.

Other Policies and Procedures Differing from Approved Medicaid State Plan /Additional Information:

Modifications to Processes for 1915(i) Serious Emotional Disturbance (SED) State Plan Authority (State Plan Attachment 3.1-A). The State may:

- Allow the option to conduct evaluations, assessments and person-centered service planning meetings virtually (e.g. real-time telephonic or audio-visual) in lieu of face-to-face meetings. The state assures it meets the 1915(i) requirements under 42 CFR §441.720(a)(1)(i)(A) through (C) for the use of telehealth to conduct assessments; and
- Add an electronic method of signing off on any required documents, including the person-centered service plan;

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