

APPENDIX K: Emergency Preparedness and Response and COVID-19 Addendum

Background:

This standalone appendix may be utilized by the state during emergency situations to request amendments to its approved waiver, to multiple approved waivers in the state, and/or to all approved waivers in the state. It includes actions that states can take under the existing Section 1915(c) home and community-based waiver authority in order to respond to an emergency. Other activities may require the use of various other authorities such as the Section 1115 demonstrations or the Section 1135 authorities.¹ This appendix may be applied retroactively as needed by the state. Public notice requirements normally applicable under 1915(c) do not apply to information contained in this Appendix.

Appendix K-1: General Information

General Information:

A. State: Arkansas

B. Waiver Title(s): AR Choices in Homecare
Living Choices

C. Control Number(s): AR.0195.R06.03
AR.0400.R04.05

D. Type of Emergency (The state may check more than one box):

<input checked="" type="checkbox"/>	Pandemic or Epidemic
<input type="checkbox"/>	Natural Disaster
<input type="checkbox"/>	National Security Emergency
<input type="checkbox"/>	Environmental
<input type="checkbox"/>	Other (specify):

E. **Brief Description of Emergency.** *In no more than one paragraph each*, briefly describe the: 1) nature of emergency; 2) number of individuals affected and the state’s mechanism to identify individuals at risk; 3) roles of state, local and other entities involved in approved waiver operations; and 4) expected changes needed to service delivery methods, if applicable. The state should provide this information for each emergency checked if those emergencies affect different geographic areas and require different changes to the waiver.

COVID-19 pandemic. This amendment will apply waiver-wide for each waiver included in this Appendix, to all individuals impacted by the virus or the response to the virus (e.g. closure of day programs, etc.) This additive Appendix K amendment is extending the end date from July 16, 2022 to 6 months after the end of the public health emergency for all flexibilities approved in previous Appendix K amendments except for the allowance of registered nurses and licensed practical nurses employed with other Medicaid enrolled providers to provide attendant care and nursing services under both ARChoices and Living Choices, and to continue allowance for the level of care evaluation and re-evaluation to occur via telehealth. The end date for both flexibilities, approved in AR.0195.R05.03 and AR.0400.R03.04 on June 22, 2020, will be extended from July 16, 2022 to December 31, 2022.

F. Proposed Effective Date: Start Date: March 12, 2020 **Anticipated End Date:** 6 months after the end of the public health emergency.

G. Description of Transition Plan.

All activities will take place in response to the impact of COVID-19 as efficiently and effectively as possible based upon the complexity of the change.

H. Geographic Areas Affected:

These actions will apply across the waiver to all individuals impacted by the COVID-19 virus

I. Description of State Disaster Plan (if available) *Reference to external documents is acceptable:*

N/A

Appendix K-2: Temporary or Emergency-Specific Amendment to Approved Waiver

Temporary or Emergency-Specific Amendment to Approved Waiver:

These are changes that, while directly related to the state's response to an emergency situation, require amendment to the approved waiver document. These changes are time limited and tied specifically to individuals impacted by the emergency. Permanent or long-ranging changes will need to be incorporated into the main appendices of the waiver, via an amendment request in the waiver management system (WMS) upon advice from CMS.

d. XX Temporarily modify provider qualifications (for example, expand provider pool, temporarily modify or suspend licensure and certification requirements).

ii. **XX Temporarily modify provider types.**

[Provide explanation of changes, list each service affected, and the changes in the provider type for each service].

Please note the following flexibility will end effective December 31, 2022 and not through six months after the end of the PHE: “Allow registered nurses and licensed practical nurses employed with other Medicaid enrolled providers (i.e. hospitals, and ambulatory surgical centers) to provide attendant care and nursing services under both waivers (0400.R03 and 0195. R05).”

e. **XX Temporarily modify processes for level of care evaluations or re-evaluations (within regulatory requirements).** [Describe]

Please note the following flexibility will end effective December 31, 2022 and not through six months after the end of the PHE: “For both Waivers (0400.R03 and 0195.R05), allow for the level of care evaluation or re-evaluation to occur via telehealth (telemedicine) technology that has a video component, where appropriate and needed to ensure the beneficiary can remain on the applicable Waiver. Technology used must be HIPAA compliant.”

8. Authorizing Signature

Signature: /S/

Date: December 19, 2022

Dr. Dawn Stehle

State Medicaid Director or Designee

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