

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: Wyoming_____

B. Waiver Title(s): Children's Mental Health Waiver

C. Control Number(s):

WY.0451.R03.06

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

<input checked="" type="radio"/>	Pandemic or Epidemic
<input type="radio"/>	Natural Disaster
<input type="radio"/>	National Security Emergency
<input type="radio"/>	Environmental
<input type="radio"/>	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.

This is an additive Appendix K amendment which extends the end date of the Appendix K amendment and adds the flexibility to delay 372 and/or evidentiary reporting with an effective date of March 1, 2020. The state is not seeking to extend the flexibilities that previously expired on February 28, 2021.

F. **Proposed Effective Date: Start Date:** March 1, 2020 **Anticipated End Date:** Six months after the conclusion of the public health emergency (PHE).

G. **Description of Transition Plan.**

H. **Geographic Areas Affected:**

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

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.

m. X **Other Changes Necessary** [For example, any changes to billing processes, use of contracted entities or any other changes needed by the State to address imminent needs of individuals in the waiver program]. [Explanation of changes]

The timeframes for the submission of the CMS 372s and the evidentiary package(s) will be extended as needed pursuant to the emergency. In addition, the state may suspend the collection of data for performance measures other than those identified for the Health and Welfare assurance and notes that as a result the data will be unavailable for this time frame in ensuing reports due to the circumstances of the pandemic.

The timeframe extension is for the purpose of extending the flexibilities for delay of 372 and/or evidentiary reporting effective March 1, 2020, until six months after the end of the PHE. This amendment isn't intended to extend the other flexibilities that ended when the Appendix K originally expired on February 28, 2021.

Contact Person(s)

A. The Medicaid agency representative with whom CMS should communicate regarding the request:

First Name: Lisa
Last Name Brockman
Title: Care Management Entity and Children's Mental Health Waiver Manager
Agency: Wyoming Department of Health, Division of Healthcare Financing
Address 1: 122 West 25th Street, 4-West
Address 2: Click or tap here to enter text.
City Cheyenne
State WY
Zip Code 82002
Telephone: 307-777-7326
E-mail Lisa.brockman@wyo.gov
Fax Number Click or tap here to enter text.

B. If applicable, the State operating agency representative with whom CMS should communicate regarding the waiver is:

First Name: Click or tap here to enter text.
Last Name Click or tap here to enter text.
Title: Click or tap here to enter text.
Agency: Click or tap here to enter text.
Address 1: Click or tap here to enter text.
Address 2: Click or tap here to enter text.
City Click or tap here to enter text.
State Click or tap here to enter text.
Zip Code Click or tap here to enter text.
Telephone: Click or tap here to enter text.
E-mail Click or tap here to enter text.
Fax Number Click or tap here to enter text.

8. Authorizing Signature

Signature: /S/

Date: 05/10/2022

State Medicaid Director or Designee

First Name: Jan
Last Name Stall
Title: Interim State Medicaid Agent
Agency: Wyoming Department of Health, Division of Healthcare Financing
Address 1: 122 West 25th Street, 4-West
Address 2: Click or tap here to enter text.
City Cheyenne
State WY
Zip Code 82002
Telephone: 307-777-7908
E-mail Jan.stall@wyo.gov
Fax Number 307-777-6964

ⁱ Numerous changes that the state may want to make may necessitate authority outside of the scope of section 1915(c) authority. States interested in changes to administrative claiming or changes that require section 1115 or section 1135 authority should engage CMS in a discussion as soon as possible. Some examples may include: (a) changes to administrative activities, such as the establishment of a hotline; or (b) suspension of general Medicaid rules that are not addressed under section 1915(c) such as payment rules or eligibility rules or suspension of provisions of section 1902(a) to which 1915(c) is typically bound.