

Welcome to the Public Health Emergency Wind Down - §1135 Waiver Termination for Acute & Continuing Care Facilities

- The webinar will begin momentarily....
- For better sound quality- please select *Phone Call* in the **Audio** tab of your control panel and call in.
- The number and access code are provided on the panel.
- This webinar is being recorded and will be available on the healthoregon.org/coronavirus webpage.

Public Health Emergency Wind Down §1135 Waiver Termination for Acute & Continuing Care Facilities

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§1135 Waivers Ending: Roadmap

- §1135 waivers became available when the president declared an emergency on March 13, 2020
- §1135 waiver will terminate with the Public Health Emergency May 11, 2023
- Waivers are for specific CMS requirements and are in these categories:
 - Facilities & Licensing
 - Workforce
 - Regulations & Conditions of Participation
 - Fiscal
 - Other Facilities
- Resources
- Which flexibilities are ending
- Next steps for facilities
- Questions

Resources:

- [CMS's Creating a Roadmap for the End of the COVID-19 Public Health Emergency](#)
 - Includes links to facility/agency specific memos including hospitals, ASCs, ESRDs, Home Health Agencies, Hospice Agencies, RHCs & FQHCs, and more
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>
- www.healthoregon.org/hflc
- www.healthoregon.org/fps

§1135 Waivers Ending – What isn't ending?

- CMS's [COVID-19 Focused infection Control Survey Tool for Acute and Continuing Care Providers and Suppliers \(REVISED\) QSO-21-08-NLTC REVISED 09/26/2022](#) is still in place
- Facilities subject to CMS regulations must use Centers for Disease Control and Prevention (CDC) guidance about masking for healthcare personnel, patients, support persons, clients and visitors
- CMS refers specifically to CDC's [Interim Infection Prevention and Control Recommendations](#)
- CDC continues to recommend use of Personal Protective Equipment for the care of patients with suspected or confirmed COVID-19
- www.healthoregon.org/hflc has updated guidance memos for ASCs, ESRDs, FQHCs, HHAs, Hospices, Hospitals & CAHs, OPT/SPs, and RHCs
- **The change in the application of Oregon's administrative rule for health care settings does NOT change CMS requirements for facilities and agencies subject to CMS regulations**

§1135 Waivers Ending: All Acute & Continuing Care Providers

- COVID-19 Vaccine payment
- Monoclonal Antibodies
- Stark Law waivers end (aka Individual Physician Self-Referral Law)
- Provider enrollment hotlines shutting down
- Expedited enrollment ends
- Provider state licensure when billing outside state of enrollments returns to deferral to state law
- Providing telehealth without reporting practitioner home address waiver continues through December 31, 2023

§1135 Waivers Ending: Hospitals & CAHs

- Hospital Without Walls (temporary expansion sites) – hospitals and calls will be required to provide services within their hospital departments
 - Off-site screening ends
 - Physical Environment & LSC waivers end
 - Fire drills resume
 - Swing beds for hospitals not otherwise swing-bed eligible end
 - CAH bed count and length of stay waiver ends
 - CAH status & location (including off-campus locations)
 - IPPS patients in non-IPPS units & vice versa ends
- Telemedicine changes
- Verbal order flexibilities end
- Discharge planning flexibilities end
- QAPI flexibilities end
- Nursing services flexibilities end
- EP flexibilities end

§1135 Waivers Ending: Hospitals & CAHs

- To change add a COVID-temporarily licensed space to the permanent hospital license OR to make permanent a change of use of existing licensed space hospitals need to complete
 - Facilities Planning & Safety (FPS) review
 - State Licensure
 - CMS Certification
- Review the [Addition of Services](#) and [Addition of New Hospital Satellite Location](#) memos
- Contact FPS ASAP
- Unless a space is already in process with FPS on May 11, 2023, the space must return to its pre-COVID licensure status and use on May 11, 2023
- OHA Temporary Licenses expire May 11, 2023

§1135 Waivers Ending: Home Health Agencies

- Face-to-face telehealth interactions changes are permanent
- Detailed information sharing for discharge planning flexibility ends
- Plans of Care and Certifying/Recertifying Patient Eligibility changes are permanent
- Clinical records flexibilities end
- Training and Assessment of Aides flexibilities end
- 12-hour annual in-service training requirement for home health aides flexibility will end December 31, 2023
- QAPI flexibilities end
- On-site HHA Aid Supervision visits – see the Roadmap
- OT can complete initial and comprehensive assessments in accordance with Division CC, § 115 changes are permanent

§1135 Waivers Ending: Hospice Agencies

- Training & Assessment of Aides flexibility ends
- Annual training flexibility ends
- QAPI flexibilities end
- Requirement to use volunteers returns to pre-PHE requirements December 31, 2023
- Comprehensive assessment timeframe flexibilities end
- Hospice Aide Competency Testing using Pseudo Patients – see the Roadmap
- Waiving non-core services ends

§1135 Waivers Ending: ESRDs

- Training Program and Period Audits for operators of water/dialysate equipment flexibility ends
- Equipment maintenance & Fire Safety Inspects waiver ended June 6, 2022
- Emergency Preparedness – requirement for maintenance of CPR certification flexibility ends
- Initial comprehensive assessment timeline flexibility ends
- Follow-up comprehensive reassessment within three months flexibility ends
- Home dialysis machine designation waiver ends
- SPRDFs
- Furnishing dialysis on the main premises – see [QSO-18-24-ESRD REVISED 3/22/2023](#)
- ESRD HemoTech Certification flexibility ends
- Physician credentialing flexibility ends

§1135 Waivers Ending: RHCs & FQHCs

- Telehealth and Mental Health see the Roadmap
- Virtual communication services may only be provided to established patients and consent for services requires direct supervision
- Home Nursing Visits – depends on HHA shortage in the area
- Staffing requirement flexibilities end
- Physician supervision of NPs returns to pre-PHE requirements December 31, 2023
- Temporary expansion sites end

§1135 Waivers Ending: ASCs

- Enrollment as a hospital
- CRNA services under supervision of a physician waiver ends

Non - §1135 Changes

- State v. federal requirements
 - Masking
 - Screening
 - Quarantining
 - Vaccinations
- 1606 Support Persons in Hospitals

Live Questions...