



STATE OF DELAWARE

**DELAWARE HEALTH AND SOCIAL SERVICES
DIVISION OF MEDICAID & MEDICAL ASSISTANCE**

**PLANNING & Policy Unit
MEMORANDUM**

REPLY TO
ATTN. OF: Administrative Notice DMMA- **A-04-2020**

TO: All DMMA/DSS Staff

DATE: 3/20/2020

SUBJECT: Documentation for Cases affected by the COVID-19 Emergency Declaration

BACKGROUND

The purpose of this notice is to provide guidance on how to document cases effected by the COVID-19 Emergency Declaration for Medicaid.

On March 13, 2020, the President of the United States issued a proclamation that the COVID-19 outbreak in the United States constitutes a national emergency by the authorities vested in him by the Constitution and the laws of the United States, including sections 201 and 301 of the National Emergencies Act (50 U.S.C. 1601 *et seq.*), and consistent with section 1135 of the Social Security Act (Act). On March 13, 2020, pursuant to section 1135(b) of the Act, the Secretary of the United States Department of Health and Human Services waived or modified certain requirements of titles XVIII, XIX, and XXI of the Act as a result of the consequences of the 2019 Novel Coronavirus (previously referred to as 2019-nCoV, now as COVID-19) pandemic.

Because of this declaration, there may be a delay in application processing times, application renewals times and delays in change of circumstances effecting Medicaid eligibility. This is allowed under 42 CFR 435.912 (e) (2) Timely determination of eligibility.

(e) The agency must determine eligibility within the standards except in unusual circumstances, for example –

- (1) When the agency cannot reach a decision because the applicant or an examining physician delays or fails to take a required action, or
- (2) When there is an administrative or other emergency beyond the agency's control.

If there is a delay in renewal times anyone not renewed timely will continue to received assistance per 42 CFR 435.930 Furnishing Medicaid.

The agency must –

- (a) Furnish Medicaid promptly to beneficiaries without any delay caused by the agency's administrative procedures;
- (b) Continue to furnish Medicaid regularly to all eligible individuals until they are found to be ineligible; and
- (c) Make arrangements to assist applicants and beneficiaries to get emergency medical care whenever needed, 24 hours a day and 7 days a week

DISCUSSION

Any application that had an extended processing time during the disaster declaration time frame must be documented with the reason for the extend timeframes for determination in the applicant' case record.

If there was a delay in the renewal process, document the reason for the extended timeframes for redetermination in the applicant's case record.

Any delay in acting on changes in circumstances affecting Medicaid eligibility should be documented with the reason for extended timeframes for acting on the change in circumstances in applicant's case record.

ACTION REQUIRED

Staff should follow policy in the DSSM under the following sections:

- 14100.5.1 Timely Determination of Eligibility
- 14100.6 Annual Renewal of Eligibility
- 14820 Changes in Circumstances

DIRECT INQUIRIES TO:

3/20/2020
DATE



Glyne Williams, Chief
Planning & Policy
Division of Medicaid & Medical Assistance