IHCP banner page

INDIANA HEALTH COVERAGE PROGRAMS

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IHCP responds to members' concerns about losing Medicaid benefits during the public health emergency

The Indiana Health Coverage Programs (IHCP) will comply with the federal *Families First Coronavirus Response Act* (FFCRA) to determine IHCP members' eligibility for Medicaid benefits during the public health emergency for coronavirus disease 2019 (COVID-19).

The IHCP is reassuring providers, the Division of Family Resources (DFR), and members, that in accordance with the FFCRA, no negative actions, such as terminating any Medicaid benefit category (with few exceptions) or increasing liabilities, can be taken against Medicaid members until after the federal public health emergency ends.

 $\label{lem:members} \mbox{Members' liabilities cannot be increased at this time, even when members'}$

incomes increase. However, some members in nursing facilities (NFs) who may have accumulated additional resources have expressed concerns about their assets disqualifying them from certain Medicaid coverage.

Indiana Medicaid is waiting for guidance from the Centers for Medicare & Medicaid Services (CMS) in regard to members who may seem ineligible for certain Medicaid coverage based on excess resources when the public health emergency ends. Watch future IHCP publications for any additional information on this topic.

For more information about Medicaid during the public health emergency, visit the <u>Coronavirus Disease 2019 (COVID-19)</u> web page at medicaid.gov/resources-for-states.

Countdown to EVV implementation for personal care providers: T-minus 19 weeks

As announced in previous Indiana Health Coverage Programs (IHCP) publications, the 21st Century Cures Act directs states to require providers of personal care services and home health services to use an electronic visit verification (EVV) system to document services rendered.

Providers of personal care services have until **January 1, 2021**, to implement an EVV system for documenting services.

Please note that personal care providers not in compliance with the EVV mandate by January 1, 2021, will experience claims and reimbursement issues until they follow the federal mandate for successfully recording EVV visits.

More information is available on the <u>Electronic Visit Verification</u> web page and in the <u>Electronic Visit Verification FAQs</u> document at in.gov/medicaid/providers. For any general questions or concerns about the EVV Program, email EVV@fssa.in.gov.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 1-800-457-4584.

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