

# **Executive Brief**



## **END OF THE COVID-19 PUBLIC HEALTH EMERGENCY**

#### **ISSUE**

The COVID-19 public health emergency (PHE), and with it the various waivers and flexibilities that helped hospitals deliver excellent care during and after the pandemic, is set to end on **Thursday, May 11**. Hospitals need to prepare before May 11 to ensure they remain in compliance with the changing regulatory landscape once the PHE is officially terminated.

#### **BACKGROUND**

At the start of the COVID-19 pandemic, the federal and state governments used the PHE to suspend some rules governing health care delivery and administration. This was designed to provide hospitals with flexibility to respond to the COVID-19 pandemic. Based on declining COVID-19 cases and acuity, HHS will allow the PHE to expire. The state of Colorado is also ending many of the workforce flexibilities and shifting some public health reporting requirements that have been in place during the pandemic.

#### WHAT YOU NEED TO KNOW

- CMS will rescind the <u>blanket 1135 waivers</u>. A complete list of CMS COVID-19 waivers and flexibilities for hospitals, CAHs, Ambulatory Surgery Centers, and Community Mental Health Centers can be found <u>here</u>.
- Even though state public health orders have been terminated, hospitals are still required to maintain an infectious disease mitigation, vaccine, and treatment plan as well as report hospital bed capacity data to EMResource (per HB 22-1401) and CDC's National Health Care Safety Network.
- Certain COVID-19 PHE flexibilities and policies have been made permanent or otherwise extended for some time. For example, Congress extended the Hospital at Home program and certain telehealth flexibilities through Dec. 31, 2024, when Congress is expected to decide about permanency. Additional information can be found <a href="https://example.com/here">here</a>.

#### WHAT YOU NEED TO DO

- Identify current operations within your organization that are utilizing a waiver or flexibility provided during the COVID-19 pandemic and plan for how to return to pre-pandemic operation.
- Continue to monitor guidance made available by federal and state agencies concerning the return to normal operations.
- Related to the end of the PHE, Colorado's Medicaid program will spend the next 14 months reviewing the eligibility for the 1.7 million members enrolled in Health First Colorado. As providers engage with Medicaid patients, it is important to encourage them to update their information with HCPF and return any renewal paperwork they receive in the mail.

#### WHO SHOULD BE INVOLVED

COOs, regulatory compliance, government relations, emergency preparedness, infection prevention

#### WHAT CHA IS DOING

- Working with state and federal partners to ensure there is a smooth transition for hospitals upon termination of the PHE.
- Compiling and providing hospitals with relevant information related to the end of the PHE.



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#### **RESOURCES**

#### State:

- CHA web page with more details on the state landscape
- CDPHE <u>press release</u> on PHE end
- HCPF web page on Medicaid renewals

#### Federal:

- American Hospital Association Fact Sheet with resources
- HHS Fact Sheet on the Transition Roadmap
- CDC <u>revised guidance</u> for health care facility masking and testing
- CMS web page on coronavirus waivers and flexibilities
- CMS informational bulletin on impacts to Medicaid and CHIP
- AHA <u>special bulletin</u> on streamlined hospital data reporting requirements
- AHA <u>special bulletin</u> on CMS memo to state surveyors
- Deep Dive from Alston & Bird, CHA's federal lobbying team, on the end of the PHE
  - Recording <u>here</u> (Passcode: M\$X5anV%)
  - Slides <u>here</u>
- PYA end of the PHE <u>compliance checklist</u>
- Hall Render Presentation on what health care organizations need to know about the end of the PHE
  - o Recording <u>here</u>
  - Slides here