
7.4.C – Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency

Effective the day after the end of the PHE until May 12, 2024, the Medicaid agency temporarily implements the following change to the state plan:

Section D – Benefit

1. X Suspends Medicaid fee-for-service prior/service authorization requirements in the behavioral health Medicaid program.

2. X The agency assures that newly added benefits or adjustments to benefits comply with all applicable statutory requirements, including the statewideness requirements found at 1902(a)(1), comparability requirements found at 1902(a)(10)(B), and free choice of provider requirements found at 1902(a)(23).

3. X Application to Alternative Benefit Plans (ABP). The state adheres to all ABP provisions in 42 CFR Part 440, Subpart C. This section only applies to states that have an approved ABP(s).
 - a. X The agency assures that these newly added and/or adjusted benefits will be made available to individuals receiving services under ABPs.

 - b. Individuals receiving services under ABPs will not receive these newly added and/or adjusted benefits, or will only receive the following subset:

7.4.C – Temporary Policies in effect following the COVID-19 National Emergency

Effective the day after the end of the PHE until May 11, 2024, the Medicaid agency temporarily extends the following election(s) in 7.4 (approved on April 19, 2023 in SPA 23-0003) of the state plan, superseding section 7.4-B, page 2 (approved December 16, 2022, in SPA 22-0015), with modifications.

Drug Benefit

8. The agency makes the following payment adjustment to the professional dispensing fee when additional costs are incurred by the providers for delivery. States will need to supply documentation to justify the additional fees.

(1) Temporarily revise state plan provisions at Attachment 4.19-B, page 8 (K&L) to allow for a professional dispensing fee to be reimbursed no more than every 22-days per individual medication strength at \$15.86 for pharmacies located on the road system and \$23.78 for pharmacies not located on the road system. Shipping will be reimbursed regardless of the location of the pharmacy or beneficiary.

9. X The agency assures that newly added benefits or adjustments to benefits comply with all applicable statutory requirements, including the statewideness requirements found at 1902(a)(1), comparability requirements found at 1902(a)(10)(B), and free choice of provider requirements found at 1902(a)(23).

10. X Application to Alternative Benefit Plans (ABP). The state adheres to all ABP provisions in 42 CFR Part 440, Subpart C. This section only applies to states that have an approved ABP(s).

- a. X The agency assures that these newly added and/or adjusted benefits will be made available to individuals receiving services under ABPs.

- b. Individuals receiving services under ABPs will not receive these newly added and/or adjusted benefits, or will only receive the following subset: