PUBLIC NOTICE

COVID-19 Treatment at Section 1905(a)(4)(F) of the Social Security Act

During the period starting March 11, 2021 and ending on the last day of the first calendar quarter that begins one year after the last day of the emergency period described in section 1135(g)(1)(B) of the Social Security Act, the state assures the following:

Coverage for the Treatment and Prevention of COVID:

- 1. The state assures coverage of COVID-19 treatment, including specialized equipment and therapies (including preventive therapies).
- 2. The state assures that such coverage:
 - a. Includes any non-pharmacological item or service descried in section 1905(a) of the Act that is medically necessary for treatment of COVID-19;
 - b. Includes any drug or biological that is approved (or licensed) by the U.S. Food & Drug Administration (FDA) or authorized by the FDA under an Emergency Use Authorization (EUA) to treat or prevent COVID-19, consistent with the applicable authorizations;
 - c. Is provided without amount, duration or scope limitations that would otherwise apply when covered for purposes other than treatment or prevention of COVID-19;
 - d. Is provided to all categorically needy eligibility groups covered by the state that receive full Medicaid benefits; and
 - e. Is provided to beneficiaries without cost sharing pursuant to section 1916(a)(2)(I) and 1916A(b)(3(B)(xiii) of the Act; reimbursement to qualified providers for such coverage is not reduced by any cost sharing that would otherwise be applicable under the state plan.
- 3. The state assures compliance with the HHS COVID-19 PREP Act declarations and authorizations, including all of the amendments to the declaration.

Coverage for a Condition that May Seriously Complicate the Treatment of COVID:

- 4. The state assures coverage of treatment for a condition that may seriously complicate the treatment of COVID-19 during the period when a beneficiary is diagnosed with or is presumed to have COVID-19.
- 5. The state assures that such coverage:
 - a. Includes items and services, including drugs, that were covered by the state as of March 11, 2021;
 - b. Is provided without amount, duration or scope limitations that would otherwise apply when covered for other purposes;
 - c. Is provided to all categorically needy eligibility groups covered by the state that received full Medicaid benefits; and
 - d. Is provided to beneficiaries without cost sharing pursuant to section 1916(a)(2(I) and 1916(A)(b)(3)(B)(xiii) of the Act; reimbursement to qualified providers for such coverage is not reduced by any cost sharing that would otherwise be applicable under the state plan.

Reimbursement:

- 1. The state assures that it has established state plan rates for COVID-19 treatment, including specialized equipment and therapies (including preventive therapies). These include:
 - a. Zero-dollar ingredient cost plus an administration fee at 80% of CMS rate for monoclonal antibodies listed on the Provider Administered Drug List (PADL).
 - b. Zero-dollar ingredient cost plus a dispensing fee of \$10.63 for oral COVID-19 Antiviral treatments listed on the Preferred Drug List (PADL).

This public notice is available for review at each county Division of Family and Children Services office. An opportunity for public comment will be held on **June 26, 2023 at 1:00 p.m., via Zoom WebEx audio**. There will be **no in-person** attendance at the Department of Community Health (DCH).

Individuals who are disabled and need assistance to participate during this meeting should call (404) 656-4479 at least three (3) business days prior to the scheduled public hearing to ensure any necessary accommodations can be provided.

Join Zoom Meeting

https://us02web.zoom.us/j/81790432912?pwd=Y0RFQkFq0E82QnhDVGtUVGxnSUhiUT09

Meeting ID: 817 9043 2912

Passcode: Open

One tap mobile

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Dial by your location

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- +1 646 931 3860 US
- +1 301 715 8592 US (Washington DC)
- +1 305 224 1968 US
- +1 719 359 4580 US
- +1 253 205 0468 US
- +1 253 215 8782 US (Tacoma)
- +1 346 248 7799 US (Houston)
- +1 360 209 5623 US
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- +1 669 444 9171 US
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- +1 689 278 1000 US

Meeting ID: 817 9043 2912

Individuals wishing to comment in writing on any of the proposed changes should do so on or before **July 3, 2023** to the Board of Community Health, Post Office Box 1966, Atlanta, Georgia 30301-1966. You may also email comments to Danisha Williams, <u>danwilliams@dch.ga.gov</u> or fax to 404-651-6880.

Comments submitted will be available for review by submitting a request via email to Danisha Williams, <u>danwilliams@dch.ga.gov</u>.

NOTICE IS HEREBY GIVEN THIS 9th DAY OF JUNE 2023 Caylee Noggle, Commissioner