

**Hurricane FAQs**  
**Puerto Rico and United States Virgin Islands**

**Q1: I have evacuees in my state who will likely need Medicaid services. Can providers in my state get paid by Puerto Rico/United States Virgin Islands for Medicaid-eligible evacuees from the territories who see providers in my state?**

**A1:** We have issued waivers to the Puerto Rico (PR) and the United States Virgin Islands (USVI) allowing them to expedite enrollment of out-of-state providers into the PR's and USVI's Medicaid programs should either territory choose to do so. Note, under normal circumstances, PR only covers emergency services when provided off island.

However, as you can imagine, communication with the Medicaid agency has been intermittent and we are still working through precise operational issues with the PR and the USVI to determine if they will opt to do this and if so how to effectuate payment for services. Providers are encouraged to retain records of the services provided to Medicaid beneficiaries from PR while we work on a longer term payment solution. If your state has providers willing to enroll in the USVI Medicaid program, please contact Michael Melendez at [Michael.Melendez@cms.hhs.gov](mailto:Michael.Melendez@cms.hhs.gov) and he can assist with the process.

In the meantime we urge providers to care for patients who are presenting themselves as needing care. We will continue to work with host states as well as the territories to implement the appropriate payment arrangements.

*We are working with Congress to develop a solution to reimburse states and providers who serve Medicaid beneficiaries during this disaster.*

**Q2: I have evacuees in my state from PR/USVI, do I need to enroll them as Medicaid beneficiaries in my state in order for them to get services? If I do enroll them, will my state be made whole for their care?**

**A2:** In general, if evacuees are planning on returning to their home territory, we would not expect them to have to apply for Medicaid in host states. Rather, if they need short term services we would expect them to see providers under waiver authority granted to PR and USVI.

Evacuees unable to return home may be planning on changing their residence to their host states, in which case the host state would apply their normal Medicaid eligibility processes to determine their eligibility as for any state resident. Expedited enrollment processes are available to states to facilitate enrollment and insure prompt availability of coverage.

*We are working with Congress to develop a solution to compensate states that cover evacuees from affected territories.*

**Q3: Does PR cover off-island services?**

**A3:** The PR Medicaid program only covers off-island services to the extent required by federal law and regulations, which generally require coverage only in another state in the case of emergencies.

**Q4: What renewal and enrollment flexibilities are available to states for Medicaid/CHIP beneficiaries during a Hurricane?**

**A4:** There is considerable flexibility for states and territories to streamline and simplify enrollment in both Medicaid and CHIP in emergency situations. States and Territories have flexibility to permit enrollment of new applicants based on self-attestation of necessary information if regular verification sources and processes are not available, and eligibility criteria can be verified post-enrollment. Use of hospitals, providers and other qualified entities identified by the state to make presumptive eligibility determinations is also available to facilitate enrollment and ensure immediate coverage. States and territories also can delay renewals when emergency circumstances prevent them from meeting ordinary deadlines. States generally have flexibility to suspend premiums, enrollment fees and other cost sharing charges for beneficiaries impacted by a hurricane. CMS is available to provide states with technical assistance to ensure that needed state plan amendments or other authorities are in place.

**Q5: Are SSI benefits available to citizens residing in PR and the USVI? And how does this effect Disproportionate Share (DSH) Payments?**

**A5:** No. The population in PR and the USVI are not eligible for the SSI program. The Medicare DSH payment adjustment provides for higher payments to hospitals that treat a disproportionately high share of low income Medicare patients. Medicare DSH payments are based on a formula that takes into account the ratio of the hospital's Medicare patients who are entitled to SSI benefits, and the ratio of the hospital's total patient days for patients who are eligible for Medicaid benefits.

**Q6: How is the Medicaid program in the territories different from the Medicaid program in the states?**

**A6:** The U.S. territories are generally considered states for purposes of Medicaid and CHIP, but their programs differ in many respects from Medicaid and CHIP in the 50 states and the District of Columbia. The most notable difference is that Medicaid in the territories operates with an annual cap on federal financial participation. This means that the federal government will match local dollars up to the cap, and beyond that, the territories must fund the program using only local funds. In contrast, states can access federal dollars for their Medicaid programs without limits as long as they contribute their share. These limits on FFP are paired with the territories' ability to set more limited eligibility parameters than the states. Since Medicaid still operates as an entitlement, with benefits guaranteed to all eligible individuals who apply, this annual limit

has historically meant that the territories exhaust their allotments and shoulder a larger share of the program costs than states.

**Q7: I have evacuees in my State. What are the Medicaid payment rates that the PR and USVI will pay to the providers in my State?**

**A7:** Rates, payment structures and other reimbursement information for both PR and the USVI is available from each territory's respective Medicaid agency. In PR, generally, provider payment will be determined by managed care contractors

**Q8: What flexibility requirements did PR provide to managed care organizations following Hurricanes Irma and Maria?**

**A8:** The government of PR advised all managed care organizations (MCO) that they were lifting pre-authorization requirements for drugs, as well as certain restrictions for refills such as frequency limitations, such that beneficiaries can ensure that they have access to necessary drugs.

PR MCOs were also informed that the government was allowing for out of network utilization without referral requirements for the duration of the emergency, lifting pre-authorization requirements for certain procedures, as many enrollees have been displaced outside of their region of residence and, as transportation between municipalities on the island has been compromised, may not be able to travel to their region of residence to receive services.