CMS Snapshot

January 7-14, 2021

Delivered to you by the Partner Relations Group in the Office of Communications

All releases below are from 2pm Thursday, January 7 through 2pm Thursday, January 14, 2021.

News Releases

*January 7- HHS OCR Enters into a Voluntary Resolution Agreement with the Arizona Department of Child Safety to Protect Limited English Proficient Parents from Discrimination. Today, the Office for Civil Rights (OCR) at the U.S. Department of Health and Human Services announces that it has entered into a Voluntary Resolution Agreement (VRA) with the Arizona Department of Child Safety (DCS) to ensure that individuals with limited English proficiency (LEP) are provided meaningful access to DCS programs and activities, including reunification services.

*January 7- CMS Issues New Roadmap for States to Address the Social Determinants of Health to Improve Outcomes, Lower Costs, Support State Value-Based Care Strategies. Today, the Centers for Medicare & Medicaid Services (CMS) issued guidance to state health officials designed to drive the adoption of strategies that address the social determinants of health (SDOH) in Medicaid and the Children's Health Insurance Program (CHIP) so states can further improve beneficiary health outcomes, reduce health disparities, and lower overall costs in Medicaid and CHIP.

January 8- HHS Finalizes Unprecedented Regulatory Reform through Retrospective Review. Today, the Department of Health and Human Services issued a final rule - PDF to further democratic values of accountability and transparency. Specifically, the Securing Updated and Necessary Statutory Evaluations Timely (SUNSET) rule requires the Department to assess its regulations every ten years to determine whether they are subject to review under the Regulatory Flexibility Act (RFA), which requires regular review of significant regulations.

*January 8- CMS Approves Innovative Tennessee Aggregate Cap Demonstration to Prioritize Accountability for Value and Outcomes. The Centers for Medicare & Medicaid Services (CMS) today approved an innovative demonstration offering unprecedented flexibility to Tennessee's Medicaid program with a new "aggregate cap" approach to Medicaid financing provided to the

state under this demonstration. In Medicaid's current financing framework, the volume – rather than value – of care patients receive drives spending.

*January 8- [CMS Administrator Seema Verma's Press Call Remarks as Prepared for Delivery on TennCare](). "Thank you for joining today's call, as we announce the approval of a groundbreaking new demonstration for the state of Tennessee that infuses the principles of value-based care into the Medicaid program like never before. The section 1115 demonstration, known as "TennCare III," represents a new paradigm for Medicaid, one capable of one day being a national model."

*January 8- [CMS Takes Action to Improve Home Health Care for Seniors, Announces Intent to Expand Home Health Value-Based Purchasing Model](). Today, the Centers for Medicare & Medicaid Services (CMS) announced that the Home Health Value-Based Purchasing (HHVBP) Model has been certified for expansion through rulemaking beginning no sooner than Calendar Year (CY) 2022. The model, implemented in nine states, has resulted in an average 4.6% improvement in home health agencies' quality scores as well as average annual savings of $141 million to Medicare.

*January 11- [HHS to Lead Federal Grants Management Innovations and Efficiencies](). The Office of Management and Budget (OMB) today formally designated the U.S. Department of Health and Human Services (HHS) as a Quality Service Management Office (QSMO) for grants to lead efforts to transform the Federal grants management process end-to-end. With this designation, the Grants QSMO will drive standardization and modernization of systems to increase efficiency and reduce burden for grant applicants and recipients and for the federal workforce government-wide.

*January 11- [HHS Invests $8 Million to Address Gaps in Rural Telehealth through the Telehealth Broadband Pilot Program](). Today, the U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), awarded $8 million to fund the Telehealth Broadband Pilot (TBP) program. The TBP program assesses the broadband capacity available to rural health care providers and patient communities to improve their access to telehealth services.

*January 11- [HHS Launches Web-Based Locator for COVID-19 Outpatient Treatment Sites for Monoclonal Antibodies](). A web-based COVID-19 outpatient [treatment locator]() maintained by the U.S. Department of Health and Human Services (HHS) is now available to assist healthcare providers and patients in finding potential locations for treatment with monoclonal antibody therapeutics. These medicines are authorized for emergency use in treating patients with mild or moderate COVID-19 who are at high risk of developing severe symptoms and requiring hospitalization.

*January 11- [CMS Launches Automated Web Tool for 1135 Waiver Requests and Public Health Emergency-Related Inquiries During Crises Like COVID-19](). Today, the Centers for Medicare & Medicaid Services (CMS) launched an innovative web-based platform to help standardize

"Section 1135" waiver requests and other Public Health Emergency (PHE)-related inquiries the agency receives. Under Section 1135 of the Social Security Act (the Act), the Secretary of Health and Human Services may waive selected provisions of Titles XVIII, XIX, and XXI of the Act in the event of an emergency declared by the President and the Secretary.

*January 12- [OCR Settles Fourteenth Investigation in HIPAA Right of Access Initiative](). The Office for Civil Rights (OCR) at the U.S. Department of Health and Human Services announces its fourteenth settlement of an enforcement action in its HIPAA Right of Access Initiative. OCR announced this initiative as an enforcement priority in 2019 to support individuals' right to timely access their health records at a reasonable cost under the HIPAA Privacy Rule.

*January 12- [Nationwide Study Shows Continued Rise in Opioid Affected Births](). A new study conducted by researchers at the U.S. Department of Health and Human Services (HHS) shows that the rates of pregnant women diagnosed with opioid use disorder and of babies born with withdrawal symptoms increased from 2010-2017. The study, published today in [JAMA]() 🔗 indicates that mothers with opioid-related diagnoses documented at delivery increased by 131%.

*January 12- [HHS Improves Agency Procedures Relating to Transparency and Fairness in Civil Enforcement Actions](). Today, the Department of Health and Human Services (HHS) released a final rule designed to enhance HHS practices involving transparency and fairness in civil enforcement actions. This final rule is part of HHS' broader regulatory reform initiative and also implements [Executive Order 13892](), *Promoting the Rule of Law Through Transparency and Fairness in Civil Administrative Enforcement and Adjudication*.

*January 12- [CMS unleashes innovation to ensure our nation's seniors have access to the latest advancements](). Today, the Centers for Medicare & Medicaid Services (CMS) issued a final rule that propels innovative technology so Medicare beneficiaries have access to the latest, most advanced devices. Today's action represents a step forward that will help smooth the Medicare coverage pathway for innovative products, resulting in faster access to new devices for America's seniors. This action delivers on CMS's Unleashing Innovation and Patients Over Paperwork Initiative.

*January 12- [CMS Releases Final Snapshot for the 2021 Federal Exchange Open Enrollment Period](). Today, the Centers for Medicare & Medicaid Services (CMS) released the final weekly enrollment snapshot that shows approximately 8.3 million people selected individual market plans through the Marketplaces using the federal platform during the 2021 Open Enrollment Period. This total enrollment is nearly the same as enrollments during the 2020 Open Enrollment Period, despite the fact that New Jersey and Pennsylvania transitioned to State-based Exchange platforms starting with the 2021 Open Enrollment Period.

January 13- [Statement from HHS Chief of Staff Brian Harrison on Promoting Fairness and Transparency in HHS Civil Enforcement Actions](). Today, HHS announced through a [policy memorandum - PDF]() that its operating and staff divisions will review and revise their

procedures related to civil enforcement actions and adjudications to ensure that they promote fairness and transparency. Fairness and transparency foster public trust in administrative procedures and functions, and HHS is committed to acting transparently and fairly with respect to all regulated persons, including parties in administrative enforcement and adjudication proceedings.

Fact Sheet

*January 12- Medicare Coverage of Innovative Technology (CMS-3372-F). On October 3, 2019, President Trump issued the *Executive Order on Protecting and Improving Medicare for Our Nation's Seniors (EO 13890)*. Based on the EO 13890 and CMS' continued focus on bringing new and innovative technologies to beneficiaries sooner, we are finalizing a new Medicare coverage pathway, Medicare Coverage of Innovative Technology (MCIT), for FDA-designated breakthrough medical devices.

*January 12- 2021 Federal Health Insurance Exchange Weekly Enrollment Snapshot: Final Snapshot. Approximately 8.3 million people selected or were automatically re-enrolled in plans using the HealthCare.gov platform during the 2021 Open Enrollment period. These snapshots provide point-in-time estimates of weekly plan selections, call center activity and visits to HealthCare.gov or CuidadoDeSalud.gov. The final snapshot reports new plan selections, active plan renewals and automatic renewals. It does not report the number of consumers who paid premiums to effectuate their enrollment.

Blogs

*January 8- THE CMS INNOVATION CENTER: YEAR-IN-REVIEW. 2020 marked the tenth anniversary of the Center for Medicare and Medicaid Innovation (CMMI), and it proved to be a very important year both for the Innovation Center and the broader value-based care movement. At the start of the year, we began a comprehensive process to review every model the Innovation Center has launched over the past decade, including all of our current models.

*January 12- Cervical cancer tests—early detection protects women. All women are at risk for cervical cancer, but did you know it occurs most often in women over 30? Each year, more than 12,000 women in the U.S. are diagnosed with cervical cancer. Fortunately, it's one of the easiest female cancers to detect, and it's highly treatable when found early.

*January 13- Get a glaucoma test and make your vision top priority! More than 3 million people in the U.S. have glaucoma, and some have no idea they have it. Glaucoma is a group of diseases that can cause permanent vision loss and blindness. If you get a glaucoma test and find treatment early, you can protect your eyes from serious vision loss.

*January 14- [Newly insured? Get answers to your health coverage questions](). Now that you're enrolled in a health plan for 2021, you probably have questions about how to get the most out of your new coverage. We're here to help, even after you enroll.

CMS has developed a [Virtual Toolkit]() to help you stay informed on CMS and HHS materials available on the COVID-19. Please share these materials, bookmark the page, and check back often for the most up-to-date information. For more information, please email [partnership@cms.hhs.gov]()