Dear Governor:

Thank you for your continued partnership as we further coordinate the Coronavirus Disease 2019 (COVID-19) response. This unprecedented time has shown the resilience and adaptability of states, and the importance of our shared planning and preparation.

We are writing to you today to share more details regarding the public health emergency (PHE) for COVID-19, as declared by the Secretary of Health and Human Services (HHS) under section 319 of the Public Health Service Act (42 U.S.C. §247d). The current public health emergency was renewed effective January 21, 2021, and will be in effect for 90 days. To assure you of our commitment to the ongoing response, we have determined that the PHE will likely remain in place for the entirety of 2021, and when a decision is made to terminate the declaration or let it expire, HHS will provide states with 60 days’ notice prior to termination.

Predictability and stability are important given the foundation and flexibilities offered to states that are tied to the designation of the PHE. Among other things, the PHE determination provides for the ability to streamline and increase the accessibility of healthcare, such as the practice of telemedicine. It allows under section 1135 of the Social Security Act, in conjunction with a Presidential Declaration under the National Emergencies Act or Stafford Act, the Secretary to waive or modify certain Medicare, Medicaid, Children’s Health Insurance Program (CHIP), and Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule requirements. The goal is to ensure to the maximum extent feasible that, in an emergency area during an emergency period, sufficient health care items and services are available to meet the needs of individuals receiving Medicare, Medicaid, and CHIP and that providers that furnish such items and services can be reimbursed for them and exempt from sanctions, absent fraud or abuse.

Additionally, the available temporary 6.2 percentage point increase in the Medicaid Federal Medical Assistance Percentage (FMAP) included in the Families First Coronavirus Response Act (Pub. L. 116-127) expires at the end of the quarter in which the PHE ends. With the extension and additional advance notice, we seek to provide you with increased budgetary stability and predictability during this challenging time.

In light of the PHE extension, you can expect the continued use of other emergency authorities, including Public Readiness and Emergency Preparedness (PREP) Act declarations and emergency use authorizations (EUA) for diagnostics, treatments, and vaccines. The Department will consider the use of any available flexibility to aid states in their response to this PHE.
We stand ready to support you as we continue to improve the nation’s response to the COVID-19 pandemic. Please do not hesitate to reach out to the HHS Office of Intergovernmental and External Affairs with questions or for further assistance.

Sincerely,

Norris W. Cochran IV

Norris Cochran