

# CHIP Policy Clarification

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## CHIP Policy Clarification 2022-09

**ISSUE DATE:** September 28, 2022

**EFFECTIVE DATE:** March 11, 2021

**SUBJECT:** COVID-19 Cost Sharing in CHIP

**TO:** CHIP MCOs

**FROM:** *Nicole M. Harris*

**Nicole Harris**  
Executive Director, Children's Health Insurance Program (CHIP)

### **PURPOSE:**

This policy clarification is to provide guidance to Managed Care Organizations (MCOs) to ensure compliance with the [American Rescue Plan Act \(ARPA\)](#) provisions that require states to cover treatment (including treatment of a condition that may seriously complicate COVID-19 treatment), testing, and vaccinations for COVID-19 without cost sharing in CHIP.

### **BACKGROUND:**

CMS guidance from State Health Official letters [21-003](#) and [21-006](#) specifically addresses ARPA section 9821 regarding coverage of COVID-19 vaccines, vaccine administration, and treatment under CHIP. States were required to provide this coverage without cost sharing beginning March 11, 2021, if not already doing so. States must ensure that screening, treatment (including treatment of a condition that may seriously complicate COVID-19 treatment), testing, and vaccinations including administration for COVID-19 is without cost sharing. The CHIP state plan will be revised to comply with the ARPA requirement and eliminate cost sharing for COVID-19 screening, testing, treatment, and COVID 19 vaccination for one year after the end of the Public Health Emergency.

Additionally, CHIP will provide COVID 19 Stand-alone Vaccine Counseling at no cost to enrollees per [SHO Letter 22-002](#). Stand-alone Vaccine Counseling is when a patient and/or caregiver receives counseling about a vaccine from a health care practitioner but the patient does not actually receive the vaccine dose at the same time as the counseling (i.e., there is no actual delivery or injection of a vaccine during the practitioner visit) because it is not appropriate to provide the vaccine dose at that time (such as when the patient and/or caregiver does not consent to the patient receiving the vaccines dose at that time).

## **DISCUSSION:**

Effective March 11, 2021, and through the last day of the first calendar quarter that begins one year after the last day of the COVID-19 emergency period described in section 1135(g)(1)(B) of ARPA, and for all populations covered in the CHIP state child health plan, MCOs must ensure continued coverage without cost sharing for the following:

### **COVID-19 Vaccine and Administration:**

- All U.S. Food & Drug Administration (FDA) approved or authorized COVID-19 vaccines and their administration.

### **COVID-19 Screening and Testing:**

- All FDA approved or authorized COVID-19 tests consistent with the Centers for Disease Control and Prevention (CDC) definitions of diagnostic and screening testing for COVID-19 and the CDC recommendations for who should receive diagnostic and screening tests for COVID-19.

### **COVID-19 Treatment:**

- MCOs must ensure that the following coverage of treatments for COVID-19 are provided without amount, duration, or scope limitations:
  - treatments for COVID-19, including specialized equipment and therapies (including preventive therapies),
  - non-pharmacological items and services that are medically necessary for treatment of COVID-19,
  - drugs and biologicals that are approved (or licensed) by the FDA or authorized by the FDA under an Emergency Use Authorization (EUA) to treat or prevent COVID-19, consistent with the applicable authorizations; and
  - treatment of conditions that may seriously complicate COVID-19 treatment during the period when a beneficiary is diagnosed with or is presumed to have COVID-19.

### **COVID-19 Stand-alone Vaccine Counseling**

- A patient and/or caregiver receives counseling about a vaccine from a health care practitioner but the patient does not actually receive the vaccine does at the same time as the counseling (i.e., there is no actual delivery or injection of a vaccine during the practitioner visit) because it is not appropriate to provide the vaccine dose at that time (such as when the patient and/or caregiver does not consent to the patient receiving the vaccines dose at that time). Stand-alone Vaccine Counseling does not mean that no other care or services are provided other than the vaccine counseling. Rather, it means that the vaccine is not injected or delivered during the same practitioner visit as the counseling about the vaccine. Stand-alone Vaccine Counseling could be provided as a component of a practitioner visit in which other services are also rendered.

## **NEXT STEPS:**

1. Review the information contained in this transmittal with appropriate staff.
2. Implement this transmittal via internal policy and procedure changes or development.
3. This transmittal will become obsolete when future updates are issued.

4. Contact Tamara Cogle, CHIP Policy Specialist, at [tcogle@pa.gov](mailto:tcogle@pa.gov) or 717-705-0019 if you have any questions.