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Agenda

- Introduction – KPhA President, Matt Morrison
- Families First Coronavirus Response Act (FFCRA) – KPhA Exec Dir, Aaron Dunkel
- KanCare Bulletin 20056 – Dunkel
- SBA Notice – Dunkel
- Questions - Moderated
- Open Discussion - Moderated

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State and Federal Resources



- Please visit our website <https://kansaspharmacistsassociation.wildapricot.org/COVID-19/> to view a list of resources and the latest information from:
 - KDHE
 - The CDC
 - US Department of Labor
 - The White House
 - OSHA
 - World Health Organization
 - US Food and Drug Administration
 - CMS
 - National Institutes of Health
 - National Institute of Allergies and Infectious Disease
 - USP

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FFCRA



- Requires employers with under 500 employees to provide sick leave and expanded FMLA for specified reasons related to COVID-19
- Provisions apply from April 1 to December 31, 2020
- Act allows:
 - Two weeks (up to 80 hours) of paid sick leave at employee's regular rate of pay if unable to work due to quarantine or illness
 - Two weeks of paid sick leave at 2/3 pay to care for another person with COVID or for a child (under 18) whose school or child care is unavailable for reasons related to COVID
 - Up to an additional 10 weeks of paid expanded family and medical leave at 2/3 pay where an employee, who has been employed for at least 30 calendar days, is unable to work due to a need for leave to care for a child whose school or child care provider is closed or unavailable for reasons related to COVID-19

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FFCRA



- Qualifying Reasons for Leave:
 - Under the FFCRA, an employee qualifies for paid sick time if the employee is unable to work (or unable to telework) due to a need for leave because the employee:
 1. is subject to a Federal, State, or local quarantine or isolation order related to COVID-19;
 2. has been advised by a health care provider to self-quarantine related to COVID-19;
 3. is experiencing COVID-19 symptoms and is seeking a medical diagnosis;
 4. is caring for an individual subject to an order described in (1) or self-quarantine as described in (2);
 5. is caring for a child whose school or place of care is closed (or child care provider is unavailable) for reasons related to COVID-19; or
 6. is experiencing any other substantially-similar condition specified by the Secretary of Health and Human Services, in consultation with the Secretaries of Labor and Treasury.
 - Under the FFCRA, an employee qualifies for expanded family leave if the employee is caring for a child whose school or place of care is closed (or child care provider is unavailable) for reasons related to COVID-19.

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FFCRA



- Calculation of Pay:
 - For leave reasons (1), (2), or (3): employees taking leave are entitled to pay at either their regular rate or the applicable minimum wage, whichever is higher, up to \$511 per day and \$5,110 over a 2-week period
 - For leave reasons (4) or (6): employees taking leave are entitled to pay at 2/3 their regular rate or 2/3 the applicable minimum wage, whichever is higher, up to \$200 per day and \$2,000 over a 2-week period
 - For leave reason (5): employees taking leave are entitled to pay at 2/3 their regular rate or 2/3 the applicable minimum wage, whichever is higher, up to \$200 per day and \$12,000 over a 12-week period

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FFCRA



- Who is a “health care provider” who may be excluded by their employer from paid sick leave and/or expanded family and medical leave?

For the purposes of employees who may be exempted from paid sick leave or expanded family and medical leave by their employer under the FFCRA, a health care provider is anyone employed at any doctor’s office, hospital, health care center, clinic, post-secondary educational institution offering health care instruction, medical school, local health department or agency, nursing facility, retirement facility, nursing home, home health care provider, any facility that performs laboratory or medical testing, pharmacy, or any similar institution, employer, or entity. This includes any permanent or temporary institution, facility, location, or site where medical services are provided that are similar to such institutions.

This definition includes any individual employed by an entity that contracts with any of the above institutions, employers, or entities institutions to provide services or to maintain the operation of the facility. This also includes anyone employed by any entity that provides medical services, produces medical products, or is otherwise involved in the making of COVID-19 related medical equipment, tests, drugs, vaccines, diagnostic vehicles, or treatments. This also includes any individual that the highest official of a state or territory, including the District of Columbia, determines is a health care provider necessary for that state’s or territory’s or the District of Columbia’s response to COVID-19.

To minimize the spread of the virus associated with COVID-19, the Department encourages employers to be judicious when using this definition to exempt health care providers from the provisions of the FFCRA.

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FFCRA



- How do I count hours worked by a part-time employee for purposes of paid sick leave or expanded family and medical leave?

A part-time employee is entitled to leave for his or her average number of work hours in a two-week period. Therefore, you calculate hours of leave based on the number of hours the employee is normally scheduled to work. If the normal hours scheduled are unknown, or if the part-time employee’s schedule varies, you may use a six-month average to calculate the average daily hours. Such a part-time employee may take paid sick leave for this number of hours per day for up to a two-week period, and may take expanded family and medical leave for the same number of hours per day up to ten weeks after that.

If this calculation cannot be made because the employee has not been employed for at least six months, use the number of hours that you and your employee agreed that the employee would work upon hiring. And if there is no such agreement, you may calculate the appropriate number of hours of leave based on the average hours per day the employee was scheduled to work over the entire term of his or her employment.

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FFCRA



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FFCRA



- Can my employer deny me paid sick leave if my employer gave me paid leave for a reason identified in the Emergency Paid Sick Leave Act prior to the Act going into effect?

No. The Emergency Paid Sick Leave Act imposes a new leave requirement on employers that is effective beginning on April 1, 2020.

- The full US Department of Labor FAQ on FFCRA is available at <https://www.dol.gov/agencies/whd/pandemic/ffcra-questions>

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KanCare Bulletin 20056

- Kansas Medicaid Covered Outpatient Drug (COD) disaster preparedness plan
- Effective March 12, 2020
- Includes:
 - Copay exemptions (point-of-sale): FFS prescription copay requirement will be removed temporarily during the natural disaster time frame
 - Drug shortages: for any drug shortages which concern preferred PDL drugs or rebate eligible drugs, approvals for non-preferred PDL drugs or non-rebate eligible drugs will be made, as needed
 - Early refills – MCOs (point-of-sale): early refill requests by the patient can be approved by the pharmacists using the Submission Clarification Code (SCC) 13. This code can be used for all drugs, except for controlled substances. If SCC 13 is not an option available for an MCO, then a pre-programmed early refill limit will be made to allow a refill when 50% of the current fill has been used.

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- Includes (continued):
 - Home Infusion: all drugs not currently approved for home infusion for which a home infusion service is an approved location/provider type per guidelines or package insert, may be approved to be given by providers licensed to provide home infusion services, for those products, on a case-by-case approval by the MCOs/FFS
 - Out of Network Providers: out-of-network providers and pharmacies are allowed using the standard out-of-network process
 - Patient signature/signature logs(point-of-sale): signature will not be required for the delivery of drugs, regardless of claim type, the pharmacy personnel shall write the name of the natural disaster (ex. "COVID-19") on the signature slip or log (paper or electronic) along with the patient name, date, and prescription number
 - Audit teams will be instructed to waive the signature requirement for claims filled between the dates set by Medicaid and posted on-line at <http://www.kdheks.gov/hcf/pharmacy/default.htm>, with the aforementioned documentation.

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- Includes (continued):
 - Prior authorization (PA): new PA requests have no change
 - For renewals, a 90-day extension will be given on any PA request coming due for renewal of maintenance drugs
 - Non-maintenance drugs with a PA will be evaluated and approved on a case-by-case basis by the MCOs/FFS
 - Quantity limits will remain the same as in current policy and patient access to medications will be accounted for by the pharmacist's use of the SCC 13 override option or the pre-programmed 50% utilization override
 - Will allow the pharmacies to monitor their stock and make decisions based upon the needs of all their customers
 - Drugs listed on the 90-day maintenance drug supply list, may require further review, if the drug supply on these medications becomes an issue
 - Antibiotic, anti-fungal, antimalarial, anti-tuberculosis, antiviral agents, or any other drugs of impending necessity should be dispensed by the pharmacy based upon the State Board of Pharmacy and the State Board of Healing Arts guidance given in times of disaster

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- Includes (continued):
 - Spenddown exemption: drug claims will be exempt from spenddown requirements using the diagnosis provided by the state (B97.29 during the current COVID declaration)
 - Pharmacy Benefit Managers (PBMs) will suspend all routine or scheduled audits of pharmacies, on behalf of the MCOs, until after the end of the emergency period, to allow pharmacists to focus solely on addressing the needs of their customers

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SBA Loan Update



- Those looking to apply need to be ready to apply on Friday
- Should reach out to your local banker today to prepare
- If your banker does not have experience with SBA loans, ask them if they know of someone in your area that does

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QUESTIONS



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Poll 1



- We are considering asking the Governor for the ability to test and treat during the COVID emergency for the flu, strep, and COVID-19, when inventory is available. We also know that right now pharmacy is considered tier 3 for PPE distribution of the strategic national stockpile. Knowing this how many of you would prefer we move forward with our ask regarding test and treat?

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Q1



- Has the Kansas Medicaid program has taken any action on the delivery fees and related enhanced fees that CMS is allowing the states to do?
 - We have been in conversation with the program over the last week and they are working on enhanced fees for delivery
 - We are expecting a related bulletin or amended bulletin any day now

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Q2



- We have been having spot shortages of most disinfectants and N-95 masks, has that been the experience across the board?

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DISCUSSION



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Items to Consider

- Reacting to a local COVID outbreak in an LTC
- Local Health Department responses
- ICU bed availability concerns
- Local planning related to securing an offsite triage area for the local hospital
- Action plan for pharmacy if COVID case or known exposure occurs