The COVID-19 pandemic has created unprecedented challenges for healthcare providers and health insurers. The following is a selection of federal and state actions as well as news and analysis articles from the Health Policy Tracking Service as published in its bi-weekly Snapshots. The selection includes Regulatory Intelligence and Reuters news coverage. More COVID-19 news and information can be found via the TRRI platform's search facility.

Additional COVID-19 resources are also available on the Thomson Reuters COVID-19 Resource Center. For a regularly updated list of U.S. state updates on insurance-sector regulatory changes related to the COVID-19 epidemic, please click on this link: http://go-ri.tr.com/fuaD4N.

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COVID-19 COVERAGE

STATE ACTIONS

Alaska
The Department of Health and Social Services has adopted regulation changes dealing with Medicaid Coverage and Payment for Vaccine Products and Vaccine Administration. See 2020 AK REG TEXT 560623 (NS).

Colorado
This rule revision aligns the home health services rule with the federal Coronavirus Aid, Relief, and Economic Security (CARES) Act, and federal regulation, by adding nurse practitioners, clinical nurse specialists, and physician assistants to the definition of "ordering physician." See 2020 CO REG TEXT 572168 (NS).

1 This COVID-19 Coverage Snapshot was compiled by members of the publisher’s staff.
Florida
Emergency rule 64DER20-43 sets forth the reporting requirements for all practitioners and other enrolled COVID-19 vaccine providers administering COVID-19 vaccines. See 2020 FL REG TEXT 572337 (NS).

Massachusetts
This amendment is adopted as an emergency to ensure expanded access to vaccines for the prevention of vaccine preventable diseases, including COVID-19. See 2020 MA REG TEXT 572331 (NS).

Michigan
• 2019 MI H.R. 314 (NS), adopted December 16, resolves to affirm the right of patients and families to direct health care decisions.
• 2019 MI S.B. 1185 (NS), engrossed December 17, torts: liability; pandemic health care immunity act; create.

Minnesota
• 2019 MN H.F. 9, introduced December 14, COVID-19; commissioner of health and human services funding provided for long-term care and protection and support activities, and money appropriated.
• 2019 MN H.F. 16 (NS), introduced December 14, COVID-19; emergency paid leave provided to health care workers excluded from the federal Families First Coronavirus Response Act.
• 2019 MN H.F. 20 (NS), introduced December 14, COVID-19; electronic monitoring requirements modified, long-term care setting infection control requirements modified, hospice and assisted living bill of rights modified, assisted living service termination during peacetime emergency prohibited, SARS-CoV-2 infection control plant in long-term care setting establishment required, Long-Term Care COVID-19 Task Force established, and money appropriated.
• 2019 MN S.F. 23 (NS), introduced December 14, health-related electronic monitoring requirements modifications; long-term care and assisted living provisions modifications; SARS-CoV-2 infections state plan; long-term care covid-19 task force; appropriation.

New Jersey
• 2020 NJ S.B. 2354 (NS), amended/substituted December 17, prohibits cancellation or nonrenewal of insurance policies and insurance premium finance agreements for a period of at least 60 days under certain circumstances after declaration of public health emergency, or state of emergency, or both.
• 2020 NJ S.B. 3267 (NS), introduced December 14, authorizes certain health care professionals to administer COVID-19 vaccine.

New York
To require confirmatory COVID-19 and influenza testing in several settings to improve case statistics and contact tracing. See 2020 NY REG TEXT 572173 (NS).
Washington

- The department is extending the emergency rules listed below to ensure long-term care programs are not significantly impeded during the hiring process due to inability to access the tuberculosis (TB) testing required as a part of the hiring process. This will help to increase the number of long-term care workers necessary to provide essential services to some of Washington’s most vulnerable adults during the outbreak of COVID-19. See 2020 WA REG TEXT 562837 (NS).
- The Washington state board of health has adopted a second emergency rule to continue to designate COVID-19 as a notifiable condition and extends reporting requirements for health care providers, health care facilities, laboratories, and local health jurisdictions to report race, ethnicity, and other demographic data for cases of COVID-19. The rule establishes what testing and demographic data need to be reported as well as the timing and mechanism of reporting. The rule allows for certain waivers by a local health officer. See 2020 WA REG TEXT 562840 (NS).

FEDERAL ADMINISTRATIVE ACTIONS

OCR Issues Guidance on HIPAA, Health Information Exchanges, and Disclosures of Protected Health Information for Public Health Purposes

On December 18, the Office for Civil Rights (OCR) at the U.S. Department of Health and Human Services (HHS) issued guidance on how the Health Insurance Portability and Accountability Act of 1996 (HIPAA) permits covered entities and their business associates to use health information exchanges (HIEs) to disclose protected health information (PHI) for the public health activities of a public health authority (PHA).

The guidance provides examples relevant to the COVID-19 public health emergency on how HIPAA permits covered entities and their business associates to disclose PHI to an HIE for purposes of reporting to a PHA that is engaged in public health activities. The guidance answers these questions:

- What is an HIE?
- When does the HIPAA Privacy Rule permit a covered entity or its business associate to disclose PHI to an HIE for purposes of reporting the PHI to a PHA, without an individual’s authorization?
- Can a covered entity rely on a PHA’s request to disclose a summary record to a PHA or HIE as being the minimum necessary PHI needed by the PHA to accomplish the public health purpose of the disclosure?
- May a covered entity disclose PHI to a PHA through an HIE without receiving a direct request from the PHA?
- May an HIE provide PHI it has received as a business associate of a covered entity to a PHA for public health purposes without first obtaining permission from the covered entity?
- Is a covered entity required to provide notice to individuals about its disclosures of PHI to a PHA for public health purposes? Is an HIE that is a business associate required to provide such notice?

"OCR is issuing this guidance to highlight how HIPAA supports the use of health information exchanges in sharing health data to improve the public’s health, particularly during the COVID-19 public health emergency," said OCR Director Roger Severino.

The Guidance on HIPAA, Health Information Exchanges, and Disclosures for Public Health Purposes may be found at: https://www.hhs.gov/sites/default/files/hie-faqs.pdf.
REGULATORY INTELLIGENCE AND REUTERS NEWS

Moderna Begins Distributing Second COVID-19 Vaccine - U.S. Army General
(Reuters) - Moderna Inc and partners have begun distributing its COVID-19 vaccine with trucks expected to start rolling out to more than 3,700 U.S. locations on Sunday, U.S. Army General Gustave Perna said on a Saturday press call.2

The second COVID-19 vaccine approved for use by U.S. regulators will reach healthcare providers by as early as Monday, Perna said, adding that delivery of the first 20 million doses of vaccines made by Moderna and Pfizer Inc could be pushed back until the first week of January.

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