

MMHPI COVID-19 Regulatory & Reimbursement Newsletter

Letter to Providers #36: State and Federal Updates – December 4, 2020

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With federal and state health care policies changing in response to COVID-19, the Meadows Mental Health Policy Institute (MMHPI) is issuing *COVID-19 Regulatory & Reimbursement Newsletters* to support providers. In these newsletters, we highlight recent changes and extensions to regulatory and reimbursement rules, as well as newly published or updated guidance and answers to frequently asked questions.

These newsletters, along with additional information on mental health resources during a pandemic, are posted here: <https://www.texasstateofmind.org/covid-19/>. If you would like to have additional organizations added to our distribution list or have follow up questions on the content, please email Catie Hilbelink at chilbelink@mmhpi.org.

Texas Updates

Extended Flexibilities

Multiple Medicaid Flexibilities

Date	November 24, 2020
Summary	<p>The following Medicaid and Children’s Health Insurance Program (CHIP) COVID-19 flexibilities have been extended through December 31, 2020:</p> <ul style="list-style-type: none"> • Correction to ‘COVID-19 Guidance: targeted case management through remote delivery’ • Waiver extension for durable medical equipment certification and receipt gorm • Claims for telephone (audio-only) behavioral health services • Claims for telephone (audio-only) medical services • Rural Health Clinic reimbursement for telemedicine and telehealth services • School Health and Related Services (SHARS) provided through telemedicine or telehealth • Claims for telehealth service for occupational, physical, and speech therapy

- [Claims for telephone \(audio-only\) early childhood intervention specialized skills training](#)
- [Claims for telephone \(audio-only\) nutritional counseling services](#)
- [Texas Health Steps checkup guidance extended through July 31, 2020](#)

Effective December 1, 2020, reimbursement for telemedicine (physician delivered) and telehealth (non-physician delivered) services for federally qualified health centers (FQHCs) became benefits of Texas Medicaid. Providers can refer to the articles "[Benefits for Telemedicine Services to Change for Texas Medicaid December 1, 2020,](#)" and "[Benefits for Telehealth Services to Change for Texas Medicaid December 1, 2020,](#)" for additional information about the benefit changes.

Link <https://www.tmhp.com/news/2020-11-24-multiple-medicaid-covid-19-flexibilities-extended-through-december-31-2020>

CHIP Co-payments

Date	November 25, 2020
Summary	The Texas Health and Human Services Commission (HHSC) will waive CHIP co-payments through December 31, 2020. The waiver applies to medical office visit co-payments only.
Link	https://www.tmhp.com/news/2020-11-25-chip-copayments-waived-through-december-31-2020

HCS and TxHmL

Date	November 25, 2020
Summary	In response to COVID-19 and to provide access to needed day habilitation services, HHSC temporarily waived certain requirements in Sections 4320 and 3710 of the Home and Community-based Services (HCS) and the Texas Home Living (TxHmL) billing guidelines. Previously issued on October 21, 2020, HHSC extended this temporary guidance through December 31, 2020.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/updated-home-day-habilitation-information-program-providers-covid-19-il2020-19

1915(c) Waivers

Date	November 25, 2020
Summary	<p>The suspension of face-to-face service coordination visits for fee-for-service Medicaid 1915(c) waiver case managers and service coordinators is extended through December 31, 2020. This temporary policy applies to:</p> <ul style="list-style-type: none"> • Community Living Assistance and Support Services (CLASS) • Texas Home Living (TxHML) • Deaf-Blind with Multiple Disabilities (DBMD) • Home and Community-based Services (HCS) • General Revenue Service Coordinators • Community First Choice Service Coordinators • Pre-admission Screening and Resident Review Habilitation Coordinators <p>Case managers, service coordinators, and habilitation coordinators are encouraged to complete visits due through December 31, 2020. This can be done by phone, telehealth, or telemedicine.</p>
Link	https://www.tmhp.com/news/2020-11-25-update-covid-19-guidance-ffs-service-coordinators-and-case-managers

CLASS Telehealth Therapies

Date	November 25, 2020
Summary	<p>The following CLASS professional and specialized therapy services are available by telehealth. Initially effective March 15, 2020, this flexibility has been extended through December 31, 2020.</p> <ul style="list-style-type: none"> • Physical therapy • Occupational therapy • Speech and language pathology • Recreational therapy • Music therapy • Behavior support • Dietary services • Cognitive rehabilitation therapy
Link	https://www.tmhp.com/news/2020-11-25-covid-19-update-telehealth-guidance-class-professional-and-specialized-therapies

Chemical Dependency Treatment Facilities

Date	November 25, 2020
Summary	Effective November 28, 2020, emergency rules permitting Chemical Dependency Treatment Facility (CDTFs) to provide abuse, neglect, and exploitation training and nonviolent crisis intervention training through live, interactive, instructor-led, electronic means, or by face to face, in person training are extended for 60 days.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/emergency-rules-concerning-chemical-dependency-treatment-facility-abuse-neglect-exploitation

FMSAs and Consumer Directed Services Employers

Date	November 25, 2020
Summary	HHSC extended the suspension of face-to-face consumer directed services (CDS) employer orientations through December 31, 2020. This flexibility was originally published on March 20, 2020.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/updated-guidance-fmsas-consumer-directed-services-employers-covid-19-112020-08

Provider Enrollment Revalidation Due Dates

Date	November 25, 2020
Summary	Provider enrollment revalidation due dates have been extended through December 31, 2020 to prevent provider disenrollment. This flexibility was originally published on April 1, 2020.
Link	https://www.tmhp.com/news/2020-11-25-update-provider-enrollment-revalidation-due-dates-extended-response-covid-19

New and Initial Prior Authorizations

Date	November 25, 2020
Summary	<p>On October 28, 2020, HHSC directed the Texas Medicaid & Healthcare Partnership (TMHP) to move forward with processing new and initial prior authorization requests, including recertification requests, by relaxing document submission timeframes for providers if they are unable to provide certain required documentation during the COVID-19 emergency. This direction will remain in effect through December 31, 2020. This guidance applies to all state plan services, including:</p> <ul style="list-style-type: none"> • Acute care services • Long-term services and supports • Personal assistance services • Personal care services • Community First Choice • Private duty nursing • Day activity and health services • Durable medical equipment and supplies
Link	https://www.tmhp.com/news/2020-11-25-covid-19-guidance-new-and-initial-prior-authorizations

90-Day Prior Authorization Extensions to End December 31, 2020

Date	November 25, 2020
Summary	<p>HHSC will allow TMHP to extend for 90 days existing prior authorization requests that are set to expire through December 31, 2020, after which time the 90-day prior authorization extensions will end.</p>
Link	https://www.tmhp.com/news/2020-11-25-90-day-prior-authorization-extensions-end-december-31-2020

Existing EVV Users: Temporary EVV Policies for COVID-19 to End December 31, 2020

Date	November 24, 2020
Summary	<p>HHSC is extending the Temporary EVV Policies for COVID-19 through December 31, 2020 for program providers currently required to use electronic visit verification (EVV). HHSC will end the temporary policies after December 31, 2020. Program providers submitting EVV claims for dates of service on and after Jan. 1, 2021:</p> <ul style="list-style-type: none"> • Must ensure a matching EVV visit transaction is accepted in the EVV Portal before billing the claim, or the claim will be denied. • Will no longer receive an EVV07 match code in the EVV Portal. • Will no longer have 180 days to complete visit maintenance.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/existing-evv-users-temporary-evv-policies-covid-19-end-dec-31

COVID-19 Testing Procedure Code 87428 Now a Benefit

Date	November 30, 2020
Summary	Effective November 10, 2020, COVID-19 testing procedure code 87428 became a benefit for Medicaid, Healthy Texas Women, and the Children with Special Health Care Needs Services Program.
Link	https://www.tmhp.com/news/2020-11-30-covid-19-testing-procedure-code-87428-now-benefit

Updated FAQs

ICF/IID Providers

Date	November 30, 2020
Summary	HHSC published updated COVID-19 frequently asked questions (FAQs) for Intermediate Care Facilities for Individuals with an Intellectual Disability or Related Conditions (ICF/IID) providers.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/hhsc-publishes-updated-covid-19-frequently-asked-questions-icf-providers

Assisted Living Facilities

Date	November 30, 2020
Summary	HHSC published updated COVID-19 FAQs for assisted living facilities.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/hhsc-publishes-updated-covid-19-frequently-asked-questions-alf-providers-nov-30

DAHS Providers

Date	November 18, 2020
Summary	HHSC published updated COVID-19 FAQs for Day Activity and Health Services (DAHS) providers.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/hhsc-publishes-updated-covid-19-frequently-asked-questions-daahs-providers

Senate Hearing

Date	December 7-8, 2020
Summary	<p>The Texas Senate Committee on Health and Human Services announced it will have hearings on December 7 and 8, 2020 to discuss the following COVID-19 topics:</p> <ul style="list-style-type: none"> • Examine clinical best practices, including therapeutics, for treating COVID-19 patients at each stage of the disease. Monitor the status of vaccine development and distribution. • Analyze the procedures for collecting, modeling, and reporting data on COVID-19 tests, cases, hospitalizations, and fatalities. Examine the role of state agencies, local governments, and private entities. • Evaluate the effects of the COVID-19 public health emergency and the impact of the COVID-19 response on behavioral health, child abuse, family violence, long-term care residents, and delayed medical care. <p>Capitol access is limited to legislators and staff only. Testimony will be limited to invited testimony conducted via video-conference. The public may view the livestream of the hearing at https://senate.texas.gov/av-live.php</p>
Link	https://capitol.texas.gov/tlodocs/86R/schedules/html/C6102020120709301.htm

State Releases Vaccine Allocation Plan

Date	November 23, 2020
Summary	Governor Abbott announced the results of the state’s Expert Vaccine Allocation Panel discussions regarding how best to allocate imminent vaccines. The announcement lays out the guiding principles for Texas' COVID-19 vaccine allocation process, which will serve as a foundation for the state's initial distribution for COVID-19 vaccines expected as early as December.
Link	https://gov.texas.gov/news/post/governor-abbott-dshs-announce-covid-19-vaccine-distribution-plan

TSA's With High Hospitalizations

Date	December 1, 2020
Summary	Recently, two additional Trauma Service Areas (TSAs) — J (Midland/Odessa) and T (Laredo) — were added to the list of TSAs with “high COVID-19 hospitalizations,” defined as seven consecutive days in excess of 15% of COVID-19 hospitalized patients over total capacity.
Link	https://www.dshs.state.tx.us/GA3031/

Revised Guidance for Requesting Free COVID-19 Point of Care Antigen Test Kits

Date	November 25, 2020
Summary	HHSC published a revised version of Provider Letter (PL) 20-49, Process to Request Free COVID-19 Point of Care Antigen Test Kits , for nursing facilities (NF), assisted living facilities (ALF), ICF/IID, HCS, and home and community support services agencies (HCSSA) providers. The letter has been revised to update the link for the BinaxNOW training for staff who will be administering COVID-19 tests using the BinaxNOW Ag card.
Link	https://www.tmhp.com/news/2020-11-25-hhsc-publishes-revised-guidance-requesting-free-covid-19-point-care-antigen-test

Long-term Care Providers: Updated Reporting Guidance

Date	December 1, 2020
Summary	<p>HHSC updated Provider Letter 20-46, Reporting Guidance for Long-Term Care Providers – Point-of-Care Antigen Testing. The provider letter has been revised to include information for ICF providers offering point-of-care (POC) testing for COVID-19 and clarify test reporting requirements for NFs.</p> <p>The letter outlines responsibilities related to reporting COVID-19 test results for providers conducting point-of-care antigen tests within their facilities. This letter is not intended for use by providers who do not conduct COVID-19 POC tests in their facility. Providers who do not conduct COVID-19 POC tests in their facility may refer to PL 20-37.</p>
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/12/hhsc-has-updated-reporting-guidance-long-term-care-providers-point-care-antigen-testing-pl-20-46

Updated Guidance: State Licensure Requirements for Fire Marshal Approval

Date	November 24, 2020
Summary	<p>In March, HHSC requested the Office of the Governor suspend certain regulatory requirements in response to the state of disaster declared in Texas; the Office of the Governor granted HHSC's request to suspend these rules and statutes.</p> <p>A newly published amended guidance letter (GL), GL 20-1002-A, notes that a facility utilizing this rule suspension should provide documentation to HHSC demonstrating that the local municipality was not conducting fire inspections during their licensure renewal period.</p>
Link	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-1002-a.pdf

HHSC Publishes Flu Vaccine Guidance During COVID-19

Date	November 18, 2020
Summary	<p>HHSC published Provider Letter 20-50, Influenza Vaccine Guidance During COVID-19. The letter provides a brief overview of the Adult Influenza Vaccine Initiative and guidance on the administration of the influenza vaccine to residents and staff with and without COVID-19. The letter also informs facilities when an individual should receive the influenza vaccine, even if the facility is not the vaccine administrator.</p> <p>They also published an influenza-related guidance letter (20-52) for HCSSA providers.</p>
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/hhsc-publishes-flu-vaccine-guidance-during-covid-19-pl-20-50

Reminder: Requirements and Protocol for COVID-19 Emergency Staffing Requests

Date	November 24, 2020
Summary	<p>HHSC Long-term Care Regulatory (LTCR) offers emergency staff for facilities facing severe critical shortages. Emergency staffing is only approved for facilities that cannot provide necessary care to residents due to staffing shortages. Emergency staffing is temporary while facilities get alternative staffing resources.</p> <p>Facilities must have staffing contingency plans in place to address potential staffing shortages due to COVID-19 (42 CFR §483.73(b)(6)). Facilities are required to have separate staff assigned to each COVID-19 cohort and not share staff between cohorts unless necessary to maintain adequate staffing (40 TAC §19.2802(i)). Facilities may only request emergency staffing from HHSC if all the following contingency strategies have been exhausted:</p> <ul style="list-style-type: none"> • Share staff between unknown COVID-19 status and positive COVID-19 cohorts (see CDC guidance). • Contact staffing agencies, nearby health care facilities, partners, or local colleges or health care centers to identify supplemental staff (40 TAC §19.2802(j)). • Identify alternate facilities with adequate staffing to care for residents with COVID-19. • Note: Nursing facilities must contact their LTCR Regional Director and local health department before using staff who are asymptomatic and have, or may have, COVID-19. This is generally only allowed in emergencies.

Implement or attempt all other staffing contingency strategies listed above before this step.

If a facility has implemented or attempted each item listed above and still does not have adequate staff to meet critical staffing levels, the facility must [contact the Regional Director for their LTCR Region](#) to request emergency staffing.

If approved for emergency staffing, facilities must submit a transition plan for addressing shortages that includes the following:

- Forecasted timeline for when COVID-19 positive staff will return to work, using the [CDC's Return to Work criteria](#), and when emergency staff can be released.
- Acquiring temporary staff or recruiting new hires.

Link

<https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/reminder-requirements-protocol-covid-19-emergency-staffing-requests>

Survey - DSHS Bamlanivimab Allocations in Texas Long-term Care Facilities

Date	November 24, 2020
Summary	<p>The Texas Department of State Health Services (DSHS) wants to ensure that all nursing facilities and other long-term care facilities have the chance to be included in future allocations of the novel monoclonal antibody bamlanivimab and possibly other novel therapeutics.</p> <p>This month, the U.S. Health and Human Services (HHS) announced its plan to ship bamlanivimab – the Eli Lilly monoclonal antibody treatment issued emergency use authorization by the FDA on November 9 – to states as provided by the federal government. The federal government initially directed that the product be distributed only to hospitals or hospital-affiliated facilities; however, HHS is planning to change their initial policy and allow product to be distributed to other types of facilities as early as this week. These facilities may include nursing facilities and infusion centers, among others.</p> <p>Because bamlanivimab is authorized for use in outpatients, DSHS would like to have a better understanding of outpatient settings that would be willing to act as a provider of this novel therapeutic. A survey of healthcare facilities is provided at the end of this alert that will allow facilities to report their interest in becoming a provider of this scarce resource.</p> <p>Bamlanivimab is still a scarce resource with an extremely limited supply coming to Texas, and those supplies are being directed to regions with the greatest burden of</p>

COVID-19. Because of this, many healthcare facilities will not receive an allocation of bamlanivimab. However, nursing facilities and other long-term care facilities could be important partners in maximizing the potential of this therapeutic and DSHS would like to know which facilities would be willing to provide it to their residents. DSHS would like to ensure that there are providers across the state that are able to provide this therapeutic to higher risk individuals.

Some of the information for which a provider will be asked in the survey includes the facility's point of contact, address, phone number, email address, and pharmacy license number. Please read the bamlanivimab [EUA](#) and [healthcare provider fact sheet](#) prior to completing the survey to ensure that your facility and patient population will meet product use requirements.

If a facility has interest in becoming a provider of bamlanivimab, please respond to this [survey](#).

Link

<https://survey.alchemer.com/s3/6060302/COVID-Monoclonal-Antibody-TX>

Texas Coronavirus Antibody Response Survey (CARES)

Summary

To help public health professionals and scientists better understand the spread of COVID-19 in Texas and the immune response it causes in individuals, The University of Texas Health Science Center at Houston is partnering with DSHS to launch the Texas Coronavirus Antibody Response Survey, Texas CARES. The survey will determine the proportion of people throughout Texas who have COVID-19 antibodies, indicating a past infection and presumably some degree of immune protection. Texas educators, administrators, and allied education staff are invited to participate in Texas CARES.

Link

<https://sph.uth.edu/projects/texascares/index.htm>

Federal Updates

CMS Strategy to Enhance Hospital Capacity

Date

November 25, 2020

Summary

The Centers for Medicare & Medicaid Services (CMS) outlined steps to increase the capacity of the health care system to provide care to patients outside a traditional hospital setting amid a rising number of COVID-19 hospitalizations across the country. These flexibilities include allowances for safe hospital care for eligible patients in their homes and updated staffing flexibility designed to allow ambulatory surgical centers (ASCs) to provide greater inpatient care, when needed.

Link | <https://www.cms.gov/newsroom/press-releases/cms-announces-comprehensive-strategy-enhance-hospital-capacity-amid-covid-19-surge>

Regeneron Allocated to Texas

Summary | HHS [announced](#) state allocations of the second antibody treatment [approved](#) for emergency use, this one made by the biotech company Regeneron. Texas is poised to receive 2,784 doses, which can treat 2,784 patients. Hospitals that expect to receive doses will receive calls from AmerisourceBergen starting November 27, 2020 about their allocations.

The treatment combines two antibodies — casirivimab and imdevimab — administered together by IV. The drug has been shown to significantly reduce virus levels within days of treatment. The drug is only to be used for the treatment of mild-to-moderate COVID-19 in people 12 years and older who are at high risk of developing more severe symptoms but not hospitalized patients. The medication will be distributed through AmerisourceBergen, similar to remdesivir and bamlanivimab distribution; hospitals can accept or decline their allocation in advance.

See FDA’s [fact sheet](#) with additional details for health care providers. HHS has posted an [FAQ](#) and an [overview](#) of the allocation and distribution of the drug. The federal government expects to distribute roughly 300,000 treatments of casirivimab and imdevimab as part of this initial project. This initial allocation is phase 1 and focused on hospitals; phase 2 will be broader and include other facilities.

Link | https://www.phe.gov/emergency/events/COVID19/investigation-MCM/cas_imd/Pages/allocation.aspx

Pfizer Requests EUA for Vaccine

Date | November 20, 2020

Summary | Pfizer announced it has requested emergency authorization of its COVID-19 vaccine. Shown to be 95% effective and without any major safety issues, the Pfizer vaccine could be the first to be cleared for use. The filing could enable its use by the middle to the end of December, according to the Pfizer statement.

Link | <https://www.pfizer.com/news/press-release/press-release-detail/pfizer-and-biontech-submit-emergency-use-authorization>

Frequently Asked Questions: COVID-19 Vaccine Distribution Considerations for the Disability Community

Date	November 23, 2020
Summary	The Association of University Centers on Disability is providing answers to FAQs about COVID-19 vaccine distribution considerations for the disability community. The FAQ includes information on the approval, manufacturing, allocation, and distribution of potential COVID-19 vaccines. The document also includes additional vaccine resources from the national network of University Centers for Excellence in Developmental Disabilities and links to federal, state, and local public health resources.
Link	https://www.aucd.org/template/news.cfm?news_id=15111&parent=16&parent_title=Home&url=/template/index.cfm

NHSN POC Test Reporting Tool Defects

Date	November 23, 2020
Summary	<p>The National Healthcare Safety Network (NHSN) let users know about two defects in NHSN's Point of Care Test Reporting Tool and changes to the long term care facility COVID-19 module. Where available, a workaround is provided. Providers may use the workaround until a resolution is installed.</p> <ol style="list-style-type: none"> 1. Currently, a defect may result in exclusion of staff POC data, from the analysis option "Line Listing-LTC Staff COVID-19 Testing". The data is contained in the system. It can be seen in the Find Resident/Staff option when looking at the results individually. However, results may not show up in the staff line list. NHSN is working to fix the issue and expect a December 12 resolution. 2. Intermittently, if the Test Date field is completed by typing in a date rather than using the calendar fill option, the system may present previously entered dates from which a selection may be made. If one of these is selected, there may be an inability to enter POC test results. To avoid this issue, use the calendar option to enter Test Date. A date for resolution has not been identified. <p>Updates have been made to the NHSN LTCF COVID-19 Module pathways, specifically the Resident Impact and Facility Capacity and Staff and Personnel Impact. Revised forms, form instructions, and CSV templates are available on the LTCF COVID-19 Module website.</p>

Link | <https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/nhsn-poc-test-reporting-tool-defects-changes-ltcf-covid-19-module>

CDC Report: Duke University Control Measures

Date	November 20, 2020
Summary	The Centers for Disease Control and Prevention (CDC) issued a new report about Duke University's COVID-19 prevention strategies, which included risk reduction behaviors, frequent testing using pooled PCR testing, and contact tracing. Among 10,265 students who received testing 68,913 times, 84 had positive results. One half of the infections were asymptomatic, and some had high viral loads.
Link	https://www.cdc.gov/mmwr/volumes/69/wr/mm6946e1.htm?s_cid=mm6946e1_w