

## CMS Provides Medicaid Section 1135 Waivers for States During COVID-19

In our recent white paper, [Medicare Rolls Out Temporary Provider Enrollment Flexibilities During COVID-19 Emergency](#), we explained how Medicare has temporarily relaxed its provider enrollment requirements through an abbreviated process that can be completed over the phone.

In the same spirit, CMS is actively approving state Medicaid waiver requests for flexibilities that will allow those states to focus their resources on their respective COVID-19 responses. The waivers can provide temporary relaxation on a number of Medicaid processes such as:

- Temporarily suspending prior authorization requirements;
- Extending existing authorizations for services through the end of the public health emergency;
- Modifying certain timeline requirements for state fair hearings and appeals;
- Relaxing provider enrollment requirements to allow states to more quickly enroll out-of-state or other new providers to expand access to care, and
- Relaxing public notice and submission deadlines for certain COVID-19 focused Medicaid state plan amendments, enabling states to make changes faster and ensure they can be retroactive to the beginning of the emergency.
- Temporarily waiving requirements that physicians and other health care professionals be licensed in the state in which they are providing services, so long as they have an equivalent licensing in another state

Section 1135 waivers are effective March 1, 2020 and will end upon termination of the public health emergency, including any extensions.

As of March 26, 2020, the 13 states listed below have been granted Section 1135 waivers. Detail on the individual state waivers and additional guidance and materials are published at:

<https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>

State	Current Medicaid and Chip Waivers Related To
Alabama	Pre-Admission Screening and Annual Resident Review/Nursing Facilities
Arizona	Prior Authorizations; Pre-Admission Screening and Annual Resident Review/nursing facilities; Provider Enrollment,
California	Prior Authorizations; State Fair Hearing Requests and Appeal Timelines; Provider Enrollment; Provision of Services in Alternative Settings
Florida	Provider Participation; Prior Authorizations; Pre-Admission Screening and Annual Resident Review/nursing facilities; Alternative Settings for Evacuating Facilities; State Fair Hearing Requests and Appeal Timelines



People. Trust. Results.

*Since 1960*

Illinois	Prior Authorizations; Pre-Admission Screening and Annual Resident Review/nursing facilities; State Fair Hearing Requests and Appeal Timelines; Provider Enrollment; Alternative Settings for Evacuating Facilities
Louisiana	Pre-Admission Screening and Annual Resident Review/nursing facilities; State Fair Hearing Requests and Appeal Timelines; Provider Enrollment; Alternative Settings for Evacuating Facilities
Mississippi	Prior Authorizations; Pre-Admission Screening and Annual Resident Review/nursing facilities; State Fair Hearing Requests and Appeal Timelines; Provider Enrollment; Alternative Settings for Evacuating Facilities
New Hampshire	Prior Authorizations; Pre-Admission Screening and Annual Resident Review/nursing facilities; State Fair Hearing Requests and Appeal Timelines; Provider Enrollment; Alternative Settings for Evacuating Facilities
New Jersey	Prior Authorizations; Pre-Admission Screening and Annual Resident Review/nursing facilities; State Fair Hearing Requests and Appeal Timelines; Provider Enrollment; Alternative Settings for Evacuating Facilities
New Mexico	Prior Authorizations; Pre-Admission Screening and Annual Resident Review/nursing facilities; State Fair Hearing Requests and Appeal Timelines; Provider Enrollment
North Carolina	Provider Enrollment; Alternative Settings for Evacuating Facilities; Pre-Admission Screening and Annual Resident Review/nursing facilities; State Fair Hearing Requests and Appeal Timelines; Prior Authorizations
Virginia	State Fair Hearing Requests and Appeal Timelines; Provider Enrollment; Prior Authorizations;
Washington	Provider Participation; Prior Authorizations; Alternative Settings for Evacuating Facilities; Pre-Admission Screening and Annual Resident Review/nursing facilities; State Fair Hearing Requests and Appeal Timelines; Public Notice and Tribal Consultation

There is no specific form or format that is required to submit the request for a Section 1135 waiver, but the state should clearly state the scope of the issue and the impact. States and territories may submit a Section 1135 waiver request directly to Jackie Glaze, CMS Acting Director, Medicaid & CHIP Operations Group Center for Medicaid & CHIP Services by e-mail (Jackie.Glaze@cms.hhs.gov) or letter.

Additional information and guidance are provided in the Medicaid and CHIP Disaster Response Toolkit, located at: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/index.html>. Remaining questions can be emailed to: [1135waiver@cms.hhs.gov](mailto:1135waiver@cms.hhs.gov)

APS will continue monitoring and relaying government and commercial payer COVID-19 responses and changes as they develop.