

## SECTION 1135 WAIVER UPDATE

Updated: April 22, 2020

### Centers for Medicare and Medicaid Services (CMS) Blanket Waiver

CMS has issued a number of blanket waivers for many Medicare provisions, which primarily affect requirements for facilities (i.e. hospitals, long-term care facilities, home health agencies, etc.). Some of the waivers include:

- Skilled Nursing Facilities (SNF)
  - Waiver of the 3-day prior hospitalization requirement for coverage of a SNF stay
  - Waiver of 42 C.F.R. 483.20 to provide relief to SNFs with respect to the timeframe requirements for Minimum Data Set assessments and transmission
- Critical Access Hospitals
  - Waiver of the 25 bed limit and that the length of stay be limited to 96 hours
- Acute Care Hospitals
  - CMS is waiving requirements to allow acute care hospitals to house acute care inpatients in excluded distinct part units where the distinct part unit's beds are appropriate for acute care inpatient. The Inpatient Prospective Payment System should bill for the care and annotate the patient's medical record to indicate the patient is an acute care inpatient being house in the excluded unit because of capacity issues related to the disaster or emergency.
- Home Health Agencies
  - Relief to Home Health Agencies on the timeframes related to OASIS Transmission
  - Allows Medicare Administrative Contractors to extend the auto-cancellation date of Requests for Anticipated Payment during emergencies.
- Provider Locations
  - CMS waived requirements that out-of-state providers be licensed in the state where they are providing services when they are licensed in another state.
- Provider Enrollment
  - CMS is expediting applications and also waiving the following screening requirements:
    - Application Fee
    - Criminal background checks associated with FCBC (42 C.F.R. 424.518)
  - Postpone all revalidation actions
  - Allow licensed providers to render services outside of their state of enrollment

There are additional provisions waived by CMS and the full details of the waiver can be found here:

<https://www.cms.gov/files/document/covid19-emergency-declaration-health-care-providers-fact-sheet.pdf>

## Section 1135 State Medicaid Waivers

The Centers for Medicare and Medicaid Services (“CMS”) announced the approval of Medicaid waivers under Section 1135 for 54 states and territories:

- [Alabama](#)
- [Alaska](#)
- [Arizona](#)
- [Arkansas](#)
- [California](#)
- [Colorado](#)
- [Commonwealth of Northern Mariana Islands](#)
- [Connecticut](#)
- [Delaware](#)
- [District of Columbia](#)
- [Florida](#)
- [Georgia](#)
- [Hawaii](#)
- [Idaho](#)
- [Illinois](#)
- [Indiana](#)
- [Iowa](#)
- [Kansas](#)
- [Kentucky](#)
- [Louisiana](#)
- [Maine](#)
- [Maryland](#)
- [Massachusetts](#)
- [Michigan](#)
- [Minnesota](#)
- [Mississippi](#)
- [Missouri](#)
- [Montana](#)
- [Nebraska](#)
- [New Hampshire](#)
- [New Jersey](#)
- [New Mexico](#)
- [New York](#)
- [Nevada](#)
- [North Carolina](#)
- [North Dakota](#)
- [Ohio](#)
- [Oklahoma](#)
- [Oregon](#)
- [Pennsylvania](#)
- [Puerto Rico](#)
- [Rhode Island](#)
- [South Carolina](#)
- [South Dakota](#)
- [Tennessee](#)
- [Texas](#)
- [U.S. Virgin Islands](#)
- [Utah](#)
- [Vermont](#)
- [Virginia](#)
- [Washington](#)
- [West Virginia](#)
- [Wisconsin](#)
- [Wyoming](#)

**Alabama** requested that pre-admission screening and annual resident review Level I and Level II Assessments be waived for 30 days. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54029>

**Alaska** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vii) waiver/modification of the tribal consultation requirement imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/89136>

**Arizona** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; and (iii) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54034>

**Arkansas** requested (i) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (ii) temporary suspension for fair-hearing requests; (iii) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (iv) modified deadline and public notice requirements for submission of COVID-19 state plan

amendments effective for the first calendar quarter of 2020. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/89126>

**California** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54030>

**Colorado** requested (i) a temporary suspensions of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vii) modified deadline for submission of COVID-19 state plan amendments effective for the first calendar quarter of 2020. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54062>

**Commonwealth of Northern Mariana Islands** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/93101>

**Connecticut** requested (i) a temporary suspensions of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vi) waiver/modification of public notice and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54075>

**Delaware** requested (i) a temporary suspensions of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; and (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54072>

**District of Columbia** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets

minimum standards; and (vi) waiver/modification of public notice and submission deadline requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/89261>

**Florida** requested (i) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (ii) a waiver of service prior authorization requirements; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) provision of services in alternative settings, including unlicensed facilities; and (v) temporary suspension for fair-hearing requests. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=53995>

**Georgia** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/88951>

**Hawaii** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vi) waiver public notice requirements for submission of emergency-related state plan amendments and/or Section 1115 waivers. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54064>

**Idaho** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54065>

**Illinois** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (v) provision of services in alternative settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54039>

**Indiana** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found

here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54052>

**Iowa** requested that pre-admission screening and annual resident review Level I and Level II Assessments be waived for 30 days. The details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54051>

**Kansas** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (v) temporary suspension for fair-hearing requests. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54054>

**Kentucky** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54059>

**Louisiana** requested (i) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (ii) temporary delay for fair-hearing requests; (iii) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (iv) provision of services in alternative settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54038>

**Maine** requested (i) a temporary suspensions of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vii) waiver/modification of deadline, public notice, and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/90996>

**Maryland** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vii) waiver/modification of public notice and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54062>

**Massachusetts** requested (i) a temporary suspensions of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II

Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vii) waiver/modification of public notice and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54066>

**Michigan** requested (i) a temporary suspensions of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (iv) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (v) waiver/modification of deadline, public notice, and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/89311>

**Minnesota** requested (i) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; (ii) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (iii) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (iv) waiver/modification of public notice and submission deadline requirements imposed on state plan amendments that relate to COVID-19; and (v) temporary suspension for fair-hearing requests. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54071>

**Mississippi** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) suspend pre-admission screen and annual resident review Level I and Level II Assessments for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (vi) provision of services in alternative settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54037>

**Missouri** requested (i) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (ii) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (iii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iv) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; (v) suspend pre-admission screen and annual resident review Level I and Level II Assessments for 30 days; (vi) temporary suspension for fair-hearing requests; and (vii) flexibility in State Plan Amendments, including flexible submission deadlines and public notice requirements. More details available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54060>

**Montana** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (vi) provision of services in alternative settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details available here:

<https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/entry/54092>

**Nebraska** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (v) provision of services in alternative settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vi) waiver/modification of public notice, submission deadline, and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/89161>

**New Hampshire** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (vi) provision of services in alternative settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details about New Hampshire's request can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54031>

**New Jersey** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (vi) provision of services in alternative settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54033>

**New Mexico** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; and (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54032>

**New York** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54067>

**Nevada** requested (i) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (ii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vi) waiver/modification of public

notice and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/90986>

**North Carolina** requested (i) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (ii) provision of services in alternative settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; and (v) a temporary suspension of Medicaid fee-for-service prior authorization requirements. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54036>

**North Dakota** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (vi) waiver/modification of tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54046>

**Ohio** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (iii) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum; (iv) waiver/modification of submission deadline and public notice requirements imposed on state plan amendments that relate to COVID-19; and (v) a waiver to temporarily allow services provided under the § 1915(c) Home and Community-Based Waiver program in settings that have not been determined to meet the home and community-based settings criteria. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/97856>

**Oklahoma** requested (i) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (ii) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; (iii) temporary suspension for fair-hearing requests; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; and (iv) a temporary suspension of Medicaid fee-for-service prior authorization requirements. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54048>

**Oregon** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vii) waiver/modification of public notice and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54061>

**Pennsylvania** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) temporary suspension for fair-hearing requests; (vi) provisional, temporary enrollment of providers who are enrolled



with another State Medicaid Agency or Medicare; and (vii) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54073>

**Puerto Rico** requested (i) temporary suspension for fair-hearing requests; and (ii) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/93186>

**Rhode Island** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) temporary suspension for fair-hearing requests; and (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54053>

**South Carolina** requested (i) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (ii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vi) waiver/modification of public notice and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/88876>

**South Dakota** requested (i) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (ii) temporary suspension for fair-hearing requests; (iii) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (iv) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54047>

**Tennessee** requested (i) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (ii) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (iii) provision of services in alternative settings, including unlicensed facilities. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/88881>

**Texas** requested (i) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (ii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (v) waiver/modification of public notice requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/entry/54093>

**U.S. Virgin Islands** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) temporary delay for fair-hearing requests; and (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/90991>

**Utah** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30

days; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vi) waiver/modification of tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/92206>

**Vermont** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (vi) provision of services in alternative settings, including unlicensed facilities. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/entry/54091>

**Virginia** requested (i) temporary delay for fair-hearing requests; (ii) a temporary suspension of Medicaid fee-for-service prior authorization requirements; and (iii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54035>

**Washington** requested (i) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (ii) a waiver of service prior authorization requirements; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) provision of services in alternative settings, including unlicensed facilities; (v) temporary suspension for fair-hearing requests; and (vi) waiver/modification of public notice and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54022>

**West Virginia** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) temporary suspension for fair-hearing requests; (v) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (vi) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vii) waiver/modification of public notice and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/entry/54094>

**Wisconsin** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) extending pre-existing authorizations for which a beneficiary has previously received prior authorization; (iii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iv) provisional, temporary enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards; and (vi) waiver/modification of submission deadlines, public notice, and tribal consultation requirements imposed on state plan amendments that relate to COVID-19. More details can be found here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/97716>

**Wyoming** requested (i) a temporary suspension of Medicaid fee-for-service prior authorization requirements; (ii) pre-admission screening and annual resident review Level I and Level II Assessments waived for 30 days; (iii) temporary suspension for fair-hearing requests; (iv) provisional, temporary

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enrollment of providers who are enrolled with another State Medicaid Agency or Medicare; and (v) provision of services in Alternative Settings, including unlicensed facilities, provided that the State makes a reasonable assessment that the facility meets minimum standards. More details are available here: <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54070>