EDPMA News Alert:
CMS Approves First State Request for 1135 Medicaid Waiver in Florida

Below is a CMS alert about the first approval of a Medicaid waiver to help address the Covid-19 crisis. Other states have already begun applying for their own waivers. As you will see below, CMS has provided a link where it will be posting the waiver approval letters. You may want to monitor that link for states of interest.

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Action gives state greater flexibility for its COVID-19 response efforts

On March 13, 2020, President Trump declared the rapidly evolving COVID-19 situation a national emergency. This bold action enables the Centers for Medicare and Medicaid Services (CMS) to waive certain requirements in Medicare, Medicaid, and CHIP under Section 1135 authority. This includes the ability to grant state and territorial Medicaid agencies a wider range of flexibilities, and states may now submit Section 1135 waiver requests for CMS approval that will remove administrative burdens and expand access to needed services.

Shortly after the President's declaration, Florida became the first state to submit a Section 1135 waiver request in response to the COVID-19 national emergency. In keeping with CMS's commitment to ensure our state partners have the tools they need to combat COVID-19, the agency acted within days to approve a wide variety
"I want to thank Governor DeSantis for his leadership in Medicaid and for taking full advantage of federal flexibilities," said CMS Administrator Seema Verma. "CMS is committed to removing all unnecessary administrative and bureaucratic barriers that may hinder an effective response to this public health emergency, and I have directed my team to expeditiously process these requests."

The state's approval letter can be found here, and includes flexibilities that enable the state to waive prior authorization requirements to remove barriers to needed services, streamline provider enrollment processes to ensure access to care for beneficiaries, allow care to be provided in alternative settings in the event a facility is evacuated to an unlicensed facility, suspend certain nursing home screening requirements to provide necessary administrative relief, and extend deadlines for appeals and state fair hearing requests. These flexibilities will enable the state to focus its resources on combatting this outbreak and provide the best possible care to Medicaid beneficiaries in their state.

"Florida is acutely focused on eliminating unnecessary barriers on our health care providers who are on the front lines serving our communities most impacted by COVID-19," said Florida Governor Ron DeSantis. "President Trump recognizes this need and Administrator Seema Verma is providing Florida the critical flexibility for our state's Medicaid program by waiving prior authorization requirements for essential health care services and expedited provider enrollment."

CMS provides guidance to states on how to apply for Section 1135 waivers through the Medicaid Disaster Response Tool Kit, which can be found here. CMS will continue to expeditiously review and approve as appropriate all Section 1135 waivers and other requests that the agency receives to ensure that we are providing our state partners with the maximum flexibility they need to care for their Medicaid beneficiaries during the public health emergency. To support these efforts, CMS is developing checklists and tools to expedite requests and approvals for waivers and other commonly requested flexibilities.

While Florida is the first state to apply for this waiver authority, CMS expects more states will also submit similar requests. Additional Section 1135 approval letters will be posted here as they are issued.

This action, and earlier CMS actions in response to the COVID-19 virus, are part of the ongoing White House Task Force efforts. To keep up with the important work the Task Force is doing in response to COVID-19 click here www.coronavirus.gov. For information specific to CMS, please visit the Current Emergencies Website.

Here is a summary of CMS Public Health Action on COVID-19 to date:


March 12, 2020: CMS issued Frequently Asked Questions (FAQs) to aid state Medicaid and Children's Health Insurance Program (CHIP) agencies in their response to the 2019 Novel Coronavirus (COVID-19) outbreak.


March 12, 2020: CMS posted the payment amounts determined by Local Medicare Administrative Contractors (MACs) for claims they receive for COVID-19 Test Pricing in their respective jurisdictions until Medicare establishes national payment rates.


March 10, 2020: CMS issued guidance to home health agencies and dialysis facilities with actionable information for healthcare workers on screening, treatment and transfer procedures to follow when interacting with patients in response to the 2019 Novel Coronavirus (COVID-19) outbreak.


March 10, 2020: CMS issued a frequently asked questions to ensure State Survey Agencies and accrediting organizations charged with inspecting nursing homes and other health care facilities, understand that non-emergency survey inspections are suspended.


March 10, 2020: CMS issued guidance on Medicare Advantage (MA) and Part D health and prescription drug plans informing them of the flexibilities they have to provide healthcare coverage for testing, treatments, and prevention of 2019 Novel Coronavirus Disease (COVID-19).


March 10, 2020: CMS issued guidance on the range of facemasks that can be temporarily used based on recent changes to CDC and FDA facemask and respirator guidance in light of COVID-19 and supply demands.


On March 9, 2020: CMS delivered detailed guidance on the screening, treatment and transfer procedures healthcare workers must follow when interacting with patients to prevent the spread of COVID-19 in a hospice setting. CMS also issued additional guidance specific to nursing homes to help control and prevent the spread of the virus.

On March 9, 2020: CMS issued a fact sheet with additional guidance for healthcare providers and patients about the telehealth benefits in the agency's Medicare program. Expanded use of virtual care, such as virtual check-ins, are important tools for keeping beneficiaries healthy, while helping to contain the community spread of the COVID-19 virus. https://www.cms.gov/newsroom/press-releases/telehealth-benefits-medicare-are-lifeline-patients-during-coronavirus-outbreak


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