| **Item** | **Existing dropdown list of Medicaid/CHIP flexibilities in the current approved 1135 Portal (*OMB approved*)** | **Non-substantive changes/clarifications to list of Medicaid/CHIP flexibilities** |
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|  | Temporary suspension of fee-for-service prior authorization requirements | Medicaid Authorizations - Suspend fee-for-service prior authorizations |
|  | Extension of pre-existing fee-for-service prior authorizations | Medicaid Authorizations - Extend pre-existing authorizations |
|  | Temporary suspension of Pre-Admission Screening and Annual Resident Review (PASRR) Level I and Level II assessments | Long Term Services and Supports (LTSS) - PASRR |
|  | Extension of timelines for service authorization decisions for managed care | Managed Care Appeals, Fair Hearings, and Continuation of Benefits – Modify authorization decision timelines  Managed Care Appeals, Fair Hearings, and Continuation of Benefits-Modify continuation of benefits timelines |
|  | Extension of timelines for appeal requirements for managed care | Managed Care Appeals, Fair Hearings, and Continuation of Benefits-Modify adverse benefit appeals filing timelines  Managed Care Appeals, Fair Hearings, and Continuation of Benefits-Modify timelines to resolve appeals  Managed Care Appeals, Fair Hearings, and Continuation of Benefits-Modify state fair hearings timelines  Managed Care Appeals, Fair Hearings, and Continuation of Benefits-Modify standard appeals timelines |
|  | Extension of timelines for state fair hearing requests and appeals | Fee for Service and Eligibility Fair Hearings-Extend fair hearing request timelines |
|  | Extension of timeframe for reinstatement of services and benefits for a fair hearing request after the date of action | Fee for Service and Eligibility Fair Hearings-Extend timelines for reinstatement of benefits |
|  | Waiver of certain provider enrollment requirements | Provider Enrollment-Pause revalidation deadlines  Provider Enrollment-Waive application fees  Provider Enrollment-Waive criminal background checks  Provider Enrollment-Waive site visits  Provider Enrollment-Allow out-of-state provider reimbursement  Provider Enrollment-Waive licensing requirements |
|  | Modification of deadline for initial level of care determinations for 1915(k) state plan benefits | Long Term Services and Supports (LTSS)-1915(k) State Plan Benefit-Level of Care Determinations  Long Term Services and Supports (LTSS)-1915(k) State Plan Benefit-Person-Centered Service Plan Reviews |
|  | Modification of deadline for initial level of care determinations for 1915(c) HCBS waivers | Long Term Services and Supports (LTSS)-1915(c) Level of Care and Person-Centered Service Plan Timelines-Initial Evaluation of Need  Long Term Services and Supports (LTSS)-1915(c) Level of Care and Person-Centered Service Plan Timelines-Review and Revision of Person-Centered Service Plan |
|  | Modification of deadline for initial level of care determinations for 1915(k) state plan benefits and 1915(c) HCBS waivers | Please See items # 10 and 11 above for a breakout of 1915(k) state plan benefits and 1915(c) HCBS waivers that clarifies the selections for end users. |
|  | Modification of deadline for level of care redeterminations for 1915(c) HCBS waivers | Long Term Services and Supports (LTSS)-1915(c) Level of Care and Person-Centered Service Plan Timelines - Reevaluation |
|  | Modification of deadline for initial evaluations of eligibility and assessments of functional needs for 1915(i) state plan benefits | Long Term Services and Supports (LTSS)-1915(i) Evaluations, Assessments and Person-Centered Service Plans-Initial Evaluation of 1915(i) Eligibility  Long Term Services and Supports (LTSS)-1915(i) Long Term Services and Supports (LTSS)-1915(i) Evaluations, Assessments and Person-Centered Service Plans-Initial Independent Assessment of Need  Long Term Services and Supports (LTSS)-1915(i) Evaluations, Assessments and Person-Centered Service Plans-Reassessments of Need  Long Term Services and Supports (LTSS)-1915(i) Evaluations, Assessments and Person-Centered Service Plans-Review and Revision of the Person-Centered Service Plan |
|  | Modification of deadline for re-evaluations of eligibility and reassessments of functional needs for 1915(i) state plan benefits | Long Term Services and Supports (LTSS)-1915(i) Evaluations, Assessments and Person-Centered Service Plans-Reevaluation of 1915(i) Eligibility |
|  | Modifications of deadline for initial assessments of functional need for 1915(k) state plan benefits | Long Term Services and Supports (LTSS)-1915(k) State Plan Benefit-Initial Assessments |
|  | Modification of deadline for reassessments of functional need for 1915(k) state plan benefits | Long Term Services and Supports (LTSS)-1915(k) State Plan Benefit-Annual Reassessments |
|  | Modification of deadline for conducting initial assessments for 1915(j) self-directed Personal Assistance Services | Long Term Services and Supports (LTSS)-1915(j) State Plan Benefit-Initial Assessments |
|  | Modification of deadline for annual review of the service plan required for the 1915(j) state plan benefit. | Long Term Services and Supports (LTSS)-1915(j) State Plan Benefit-Annual Reviews |
|  | Allowing legally responsible individuals to render personal care services | Use of Legally Responsible Individuals to Render Personal Care Services |
|  | Temporary provision of HCBS in specified settings that have not been determined to meet HCBS settings criteria | Long Term Services and Supports (LTSS)-HCBS Settings Requirements-1915(c)  Long Term Services and Supports (LTSS)-HCBS Settings Requirements-1915(i)  Long Term Services and Supports (LTSS)-HCBS Settings Requirements-1915(k)  Long Term Services and Supports (LTSS)-HCBS Settings Requirements-HCBS services in approved 1115 Demonstration |
|  | Temporary provision of HCBS by entities also providing case management services under a temporary waiver of conflict of interest requirements | Long Term Services and Supports (LTSS)-Conflict of Interest Requirements-1915(c)  Long Term Services and Supports (LTSS)-Conflict of Interest Requirements-1915(i)  Long Term Services and Supports (LTSS)-Conflict of Interest Requirements-1915(k)  Long Term Services and Supports (LTSS)-Conflict of Interest Requirements-HCBS services in approved 1115 Demonstration |
|  | Waive beneficiary and provider written consent of new or amended HCBS person-centered service plans | Long Term Services and Supports (LTSS)-Person-Centered Plan Beneficiary and Provider Signatures-1915(k)  Long Term Services and Supports (LTSS)-Person-Centered Plan Beneficiary and Provider Signatures-1915(c)  Long Term Services and Supports (LTSS)-Person-Centered Plan Beneficiary and Provider Signatures-1915(i)  Long Term Services and Supports (LTSS)-Person-Centered Plan Beneficiary and Provider Signatures-HCBS services in approved 1115 Demonstration |
|  | Modification of deadline for a face-to-face encounter for 1905(a)(7) home health state plan services | Home Health State Plan Services Timeframe (Face-to-Face Encounters) |
|  | Allow individual’s representative to render 1915(j) services | Long Term Services and Supports (LTSS)-1915(j) State Plan Benefit-Use of Representatives |
|  | Allow individual’s representative to render 1915(k) services | Long Term Services and Supports (LTSS)-1915(k) State Plan Benefit-Use of Representatives |
|  | Allow Private Duty Nursing (PDN) services to be delivered by a graduate registered nurse and/or graduate licensed practical nurse | Private Duty Nursing-Modify practitioner requirements  Private Duty Nursing-Modify supervision requirements |
|  | Permit state and clinic to temporarily designate a clinic practitioner’s location as part of the clinic facility so that clinic services may be provided via telehealth | Clinic Facility Requirement-Allow provision of clinic services via telehealth  Clinic Facility Requirement-Allow provision of clinic services in alternative settings |
|  | Provision of clinic services within scope without supervision of physician or dentist | Physician Direction-Allow clinic services to be directed by other licensed professionals |
|  | Provision of psychiatric services under age 21 within scope without supervision of physician or dentist | Physician Direction-Allow inpatient psychiatric services for under 21 to be directed by other licensed professionals |
|  | Modification of deadline for conducting annual monitoring and follow-up activities for targeted case management | Targeted Case Management Timeline - Monitoring and Follow-Up Activities |
|  | Other | Other Section 1135 Waiver Flexibilities |

Note: The following 1135 Flexibility will be deactivated in the portal and will no longer be visible to users when using the drop down menu: "Medicaid and CHIP (as of 3/13/2020)". This item is no longer relevant to 1135 Medicaid / CHIP waivers.