

Nevada COVID-19
1135 Waiver Request
Submitted on April 2, 2020 to CMS

| Item | Request | Authority Path | Status |
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| 1 | Medicaid Authorizations: Require fee-for-service providers to extend pre-existing authorizations through which a beneficiary has previously received prior authorization through the termination of the emergency declaration. | 1135 Also 1915(c) Appendix K | Approved in 4/7/20 1135 Letter Appendix K approved 4/15/20 |
| 2 | Long Term Services and Supports: Suspend pre-admission screening and annual resident review (PASRR) Level I and Level II Assessments for 30 days. | 1135 | Approved in 4/7/20 1135 Letter |
| 3 | Fair Hearings: Allow managed care enrollees to proceed almost immediately to a state fair hearing without having a managed care plan resolve the appeal first by permitting the state to modify the timeline for managed care plans to resolve appeals to one day so the impacted appeals satisfy the exhaustion requirements. | 1135 | Approved in 4/7/20 1135 Letter |
| 4 | Fair Hearings: Give enrollees more than 120 days (if a managed care appeal) or more than 90 days (if an eligibility for fee-for-service appeal) to request a state fair hearing by permitting extensions of the deadline for filing those appeals by a set number of days (e.g., an additional 120 days). | 1135 | Approved in 4/7/20 1135 Letter |
| 5 | Provider Enrollment: Waive criminal background checks associated with temporarily enrolling providers. | 1135 Also 1915(c) Appendix K | Approved in 4/7/20 1135 Letter Appendix K approved 4/15/20 |
| 6 | Provider Enrollment: Waive site visits to temporarily enroll a provider. | 1135 Also 1915(c) Appendix K | Approved in 4/7/20 1135 Letter Appendix K approved 4/15/20 |
| 7 | Provider Enrollment: Permit providers located out-of-state/territory to provide care to an emergency State's Medicaid enrollee and be reimbursed for that service. | 1135 | Approved in 4/7/20 1135 Letter |

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| 8 | Provider Enrollment: Streamline provider enrollment requirements when enrolling providers. | 1135 Also 1915(c) Appendix K | Approved in 4/7/20 1135 Letter Appendix K approved 4/15/20 |
| 9 | Provider Enrollment: Postpone deadlines for revalidation of providers who are located in the state or otherwise directly impacted by the emergency. | 1135 Also 1915(c) Appendix K | Approved in 4/7/20 1135 Letter Appendix K approved 4/15/20 |
| 10 | Provider Enrollment: Waive requirements that physicians and other health care professionals be licensed in the state in which they are providing services, so long as they have equivalent licensing in another state. | 1135 | Approved in 4/7/20 1135 Letter |
| 11 | Provider Enrollment: Waive conditions of participation or conditions for coverage for existing providers for facilities for providing services in alternative settings, including using an unlicensed facility, if the provider's licensed facility has been evacuated. | 1135 | Approved in 4/7/20 1135 Letter |
| 12 | The State of Nevada is requesting a waiver of public notice and tribal consultations. Public notice for state plan amendments (SPAs) are required under 42 C.F.R 447.205 for changes in statewide methods and standards for setting Medicaid payment rates, 42 C.F.R. 447.57 for changes to premiums and cost sharing and 42 C.F.R. 440.386 for changes to Alternative Benefit Plans (ABPs). This is to ensure that the impacted public has reasonable opportunity to comment on such SPAs. The State is requesting flexibility in modifying their tribal consultation timeframe, including shortening the number of days before submission or conducting consultation after submission of the SPA. | 1135 | Approved in 4/7/20 1135 Letter |
| 13 | Waive prior authorization requirements related to COVID-19 testing or treatment in fee-for-service programs or at the Directors discretion under 42 CFR 440.230(b) and section 1135 (b)(1)(c). | 1135 | Under CMS Review |
| 14 | Allow for time periods of pre-approved Prior Authorizations at the discretion of the Director to be extended to 60 days past the termination of the National Emergency under 42 CFR 440.230(b) and section 1135 (b)(1)(c). | 1135 | Under CMS Review |
| 15 | Allow for additional medical facilities to be utilized as defined by Nevada Revised Statute 449.0151 as such: NRS 449.0151 "Medical facility" includes: A surgical center for ambulatory patients; an | 1135 | Under CMS Review |

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| | <p>obstetric center; an independent center for emergency medical care; an agency to provide nursing in the home; a facility for intermediate care; a facility for skilled nursing; a facility for hospice care; a hospital; a psychiatric hospital; a facility for the treatment of irreversible renal disease; a rural clinic; a nursing pool; a facility for modified medical detoxification; .a facility for refractive surgery; a mobile unit; and a community triage center.</p> | | |
| 16 | <p>Allow for Emergency Medicaid – deem testing for COVID-19 to be covered under emergency Medicaid and upon a positive test, cover all treatment under emergency Medicaid.</p> | 1135 | Under CMS Review |
| 17 | <p>Hearings: In accordance with 42 CFR 431.244(f)(4)(I)(B), we seek to be allowed to take final administrative action outside the timelines set in regulation due to the possible unavailability of large numbers of staff and participants. The State will seek to prioritize those hearings requested by beneficiaries who stand to suffer the most harm from delay, including those who meet the standard for an expedited hearing. As a matter of practice, the State will maintain records on the reasons for delay. 42 CFR 438.408 (f)(2) for Managed Care and 42 CFR 431.221(d) for Fee-for-Service, and for the continuance of current benefits, pending hearing outcomes under 42 CFR 431.230.</p> | Concurrence Letter | <p>Under CMS Review</p> <p>Note: The request to allow beneficiaries additional time to request a fair hearing (42 CFR 438.408(f)(2) and 431.221(d)) were addressed in the section 1135 4/7/20 approval letter (see row 5).</p> |