Governor Abbott Announces Approval Of 1135 Medicaid Waiver

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Governor Greg Abbott today announced that the Center for Medicaid and Medicare Services (CMS) has approved the Section 1135 Medicaid Waiver submitted by the Texas Health and Human Services Commission (HHSC) on March 26, 2020. This approval grants Texas flexibility in administering Medicaid while the state continues to respond to COVID-19.

"I thank CMS for quickly granting this waiver so that the Lone Star State can continue to meet the routine needs of Texans on Medicaid," said Governor Abbott. "These flexibilities ensure that care capacity is expanded for Texans who utilize Medicaid services, even as the state continues to respond to COVID-19."

Flexiblities granted under this waiver include:

- Extension of prior authorizations: For enrollees who have an existing prior authorization, CMS approves the state extending a prior authorization approved on or after March 1.

- Suspension of Level 1 and Level II PASRR assessments: All new nursing facility admissions may be treated as an exempted hospital discharge for 30 days. After 30 days, new admissions with a mental illness or intellectual disability should be reviewed as soon as resources are available.

- Fair hearing and appeals: CMS approves the extension of fair hearings up to 120 days (from 90 days) and Texas may choose to allow up 90 days for an enrollee to file an appeal.
- Provider enrollment:
  - Texas may reimburse an out-of-state provider if: the service is provided out-of-state, the provider has an NPI on the claim, and the provider is enrolled in Medicare or another state's Medicaid program.
  - Texas may provisionally/temporarily enroll an out-of-state provider not enrolled in Medicare or another state's Medicaid program and waive the application fee, finger print criminal background check, site visit, and in-state license requirement.
    - Texas must collect information necessary to process claims, screen for state licensure in other states and screen against the OIG exclusion list. Texas must not issue temporary enrollments after the end of the public health emergency, not allow retroactive effective dates earlier than March 1, and Texas must cease payments to temporarily enrolled providers within 6 months of the end of the public health emergency (unless the provider competes a Texas Medicaid enrollment).
  - Texas is granted a waiver to temporarily cease provider revalidation.
  - CMS grants the above flexibilities for CHIP.
- Public notice: CMS grants Texas a waiver of public notice requirements

HHSC is continuing to work with CMS on additional flexibility requests that are associated with those approved today.

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