



# CMS 1135 Waiver Fact Sheet

## **What is a 1135 Waiver?**

When the President declares a disaster or emergency under the Stafford Act or National Emergencies Act and the HHS Secretary declares a public health emergency, the Secretary is authorized to take certain actions in addition to her regular authorities. For example, under section 1135 of the Social Security Act, she may temporarily waive or modify certain Medicare, Medicaid, and Children's Health Insurance Program (CHIP) requirements to ensure that sufficient health care items and services are available to meet the needs of individuals enrolled in Social Security Act programs in the emergency area and time periods and that providers who provide such services in good faith can be reimbursed and exempted from sanctions.

## **How Will These Changes Affect Doctors of Optometry?**

These changes will have the most impact on those practices seeing higher volumes of Medicaid or Medicare patients. Below are the areas that will most directly apply to optometric practices:

- **Suspension of Pre-Existing Authorizations:**  
*Section 1135(b)(1)(C) allows for a waiver or modification of pre-approval requirements if prior authorization processes are outlined in detail in the State Plan for certain benefits.*
  
- **Provider Enrollment:**  
*Depending on the request, this could do the following:*
  - *Waive payment of an application fee to temporarily enroll a provider;*
  - *Waive criminal background checks associated with temporarily enrolling providers;*
  - *Waive site visits to temporarily enroll a provider;*
  - *Permit providers located out-of-state/territory to provide care to an emergency State's Medicaid enrollee and be reimbursed for that service;*



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- *Streamline provider enrollment requirements when enrolling providers;*
  - *Postpone deadlines for revalidation of providers who are located in the state or otherwise directly impacted by the emergency;*
  - *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;*
  - *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.*
- **Hearing Requests:**
- *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*
  - *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)*

## **How Can States or Individual Healthcare Providers Can Ask for Assistance or a Waiver?**

Once an 1135 Waiver is authorized, health care providers can submit requests to operate under that authority or for other relief that may be possible outside the authority to the CMS Regional Office with a copy to the State Survey Agency. Request can be made by sending an email to the CMS Regional Office in their service area. Email addresses are listed below. Information on your facility and justification for requesting the waiver will be required.



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## **Contact Info for CMS Regional Offices**

[ROATLHSQ@cms.hhs.gov](mailto:ROATLHSQ@cms.hhs.gov) (Atlanta RO): Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee

[RODALDSC@cms.hhs.gov](mailto:RODALDSC@cms.hhs.gov) (Dallas RO): Arkansas, Louisiana, New Mexico, Oklahoma, Texas

[ROPHIDSC@cms.hhs.gov](mailto:ROPHIDSC@cms.hhs.gov) (Northeast Consortium): Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia, New York, New Jersey, Puerto Rico, Virgin Islands, Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont

[ROCHISC@cms.hhs.gov](mailto:ROCHISC@cms.hhs.gov) (Midwest Consortium): Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin, Iowa, Kansas, Missouri, Nebraska

[ROSFOSO@cms.hhs.gov](mailto:ROSFOSO@cms.hhs.gov) (Western Consortium): Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming, Alaska, Idaho, Oregon, Washington, Arizona, California, Hawaii, Nevada, Pacific Territories.