



Eric Holcomb, Governor
State of Indiana

Indiana Family and Social Services Administration
402 W. WASHINGTON STREET, P.O. Box 7083
INDIANAPOLIS, IN 46207-7083

March 19, 2020

Calder Lynch and Jackie Glaze
U.S. Department of Health & Human Services
The Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

RE: Request for Emergency Authorities to Support Indiana's Response to COVID-19

Dear Mr. Lynch and Ms. Glaze:

On March 13, 2020, the President of the United States declared the 2019 novel coronavirus (COVID-19) a nationwide emergency pursuant to Section 501(b) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121-5207 (the "Stafford Act"). The President's declaration gives the Secretary of the U.S. Department of Health and Human Services the authority to enhance states' ability to respond to the COVID-19 outbreak, including the power to temporarily waive or modify Medicaid and Children's Health Insurance Program (CHIP) requirements under Section 1135 of the Social Security Act.

The Indiana Family Social and Services Administration (FSSA) is requesting authority to waive certain Medicaid and CHIP requirements to the extent necessary to enable the State to combat the continued spread of COVID-19, including mitigating any disruption in care for FSSA members during the course of the emergency declaration.

We request blanket waivers under Section 1135, including but not limited to those specified by CMS in its [announcement of blanket waivers](#) dated March 13, 2020. In addition, we request the following for the duration of the emergency declaration:

- The ability to temporarily allow modifications to PASRR process allowing a level 1 screen to be conducted by the admitting facility within 24 hours of admission and level 2 screen to be delayed until 30 days after admit.
- The ability to waive prior authorization requirements for select providers most impacted by COVID-19.
- The ability for providers to gain extended prior authorizations through the termination of the emergency declaration.



- The ability to streamline provider enrollment requirements when enrolling providers.
- Allow enrollees to proceed directly to a state fair hearing without having a managed care plan resolve the appeal; the State would modify the timeline for managed care plans to resolve appeals to zero days so that the impacted appeals immediately satisfy the exhaustion requirement.
- Provide payments to facilities not certified to participate in CHIP if they provide services to CHIP enrollees.
- Waive certain bed certification rules to allow a provider to bill Medicaid services for a member served in a bed that is not Medicaid certified.
- Provide payments to facilities for providing services in alternative settings, including an unlicensed facility, if the provider's licensed facility has been evacuated.

We appreciate your commitment to supporting the State's efforts to protect Hoosiers during this public health emergency and may submit additional 1135 waivers as the situation merits.

Sincerely,

A handwritten signature in black ink that reads "Jennifer Sullivan". The signature is written in a cursive, flowing style.

Jennifer Sullivan, MD MPH
Secretary