

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT202330    APRIL 11, 2023

## IHCP to rescind 1135 waivers due to the ending public health emergency

When the coronavirus disease 2019 public health emergency (COVID-19 PHE) expires on May 11, 2023, the Indiana Health Coverage Programs (IHCP) will rescind the [1135 waivers granted to Indiana](#) by the Centers for Medicare & Medicaid Services (CMS). Rescinded services include provisions that waived Level I and Level II Preadmission Screening and Resident Review (PASRR) assessment requirements outlined in the *Social Security Act, Section 1919(e)(7)*, and the timeliness requirements for fair hearing requests outlined in *Code of Federal Regulations 42 C.F.R. §431.221(d)* and *42 C.F.R. §438.408(f)(2)*.



### PASRR assessments

During the COVID-19 PHE, Level I and Level II PASRR assessment requirements have been waived for 30 days, as announced in *IHCP Bulletins* [BT202047](#), [BT202071](#) and [BT202181](#).

Effective May 12, 2023, PASRR screening requirements will return to pre-pandemic timelines. All PASRR Level I and Level II screenings must be conducted prior to a resident being admitted to the nursing facility.

### Fee-for-service and managed care fair hearing timelines

During the COVID-19 PHE, fee-for-service (FFS) members have had 120 days to request a fair hearing for eligibility or FFS appeals. Managed care members have been able to request a fair hearing without exhausting the managed care entity's grievance and appeal process and have had 240 days to request a fair hearing.

Effective May 12, 2023, FFS fair hearing requests must be received no later than 33 calendar days following the effective date of the action being appealed or the date of the notice of agency outlined in *Indiana Administrative Code 405 IAC 1.1-1-3*. Managed care members will have to exhaust the managed care entity's grievance and appeals process before requesting a fair hearing and will have 120 calendar days to request a fair hearing.

## QUESTIONS?

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