

## 1115 Waiver Tracking Chart (as of January 12, 2018)

### Provisions in State Waiver Applications Submitted to CMS

Proposal	Explanation of Proposal	Current Law	State Applications
<b><i>Limits on Eligibility</i></b>			
<b>Work Requirements</b>	Condition eligibility of “able-bodied adults” on completing 20-40 hours of weekly work activities, such as paid employment, volunteering, or approved job training and search activities.	Previous administration rejected similar proposals as inconsistent with objectives of Medicaid Act	<b>Pending:</b> AR, AZ, IN, KS, ME, MS, NC, NH, UT, WI
	Number of hours required, categories of approved work activities, and exempt populations vary by state	Current administration issued <a href="#">guidance</a> on January 11, 2018 supporting work requirements	<b>Approved:</b> KY
<b>Lock Out Penalties</b>	Impose a lockout penalty that bars an individual from receiving Medicaid coverage during the lockout period for non-compliance with one or more eligibility conditions (e.g., work requirements, payment of premiums, reporting requirements). Length of lockout periods varies by state, but ranges from 3-9 months	At least one state (Indiana) has implemented a waiver authorizing a 6-month lockout for failure to pay premiums	<b>Pending:</b> AR, IN, KS, ME, NM, UT, WI <b>Approved:</b> KY
<b>Drug Testing</b>	Require individuals to complete drug screening and testing, and if test is positive, to enter treatment as a condition of eligibility	Not currently authorized	<b>Pending:</b> WI
<b>Presumptive Eligibility</b>	Eliminate ability of hospitals to determine an individual presumptively eligible for Medicaid in order to provide coverage for unforeseen medical expenses	Not currently authorized	<b>Pending:</b> ME, UT
<b>Retroactive Coverage</b>	Remove obligation of states to retroactively cover medical expenses incurred in the three months prior to date of application for individuals who would have been eligible	Some waivers have been approved as part of a broader package to expand coverage and with additional protections to encourage enrollment	<b>Pending:</b> AR, AZ, IN, ME, NM <b>Approved:</b> IA, KY
<b>Partial Medicaid Expansion</b>	Limit the Medicaid Expansion under the Affordable Care Act to income cut offs less than 133% FPL	Not currently authorized	<b>Pending:</b> AR, MA, MI

<b>Asset Test</b>	Limit Medicaid eligibility to individuals with assets less than \$5,000 in value	Not currently authorized The ACA eliminated the asset test for certain populations and required use of Modified Adjusted Gross Income (MAGI) instead	<b>Pending: ME</b>
<b>Enrollment Limits</b>			
<b>Enrollment Time Limit</b>	Impose a 6-month lockout penalty for individuals enrolled in Medicaid for 48 months. Months that a beneficiary is working do not count towards the 48-month limit	Not currently authorized	<b>Pending: WI</b>
<b>Lifetime Limits</b>	Limit total number of months an individual can receive Medicaid over the course of his or her lifetime. Lifetime limits vary by state, from 36 months to 60 months	Not currently authorized	<b>Pending: AZ, KS, UT</b>
<b>Enrollment Cap</b>	Limit the total number of individuals enrolled in the Medicaid expansion	Not currently authorized	<b>Pending: UT</b>
<b>Benefit Reductions</b>			
<b>Non-Emergency Medical Transportation</b>	Eliminate coverage of non-emergency medical transportation	Some states have received waivers of this provision in the past.	<b>Pending: AZ, IN, MA</b> <b>Approved: KY</b>
<b>Early and Periodic, Screening, Diagnostic and Treatment (EPSDT)</b>	Eliminate requirements to cover comprehensive preventive and treatment services for children under age 21	At least one state (Oregon) has received a waiver of EPSDT requirements as part of a comprehensive waiver package, and another state (Utah) recently received a waiver of EPSDT for 19 and 20 year olds as part of a limited substance use/mental health waiver.	<b>Pending: UT</b> (for 19 and 20 year-olds), <b>NM</b> (for 19 and 20 year-olds)
<b>Restricted Formulary</b>	Limit covered pharmaceuticals to a closed formulary covering only one drug per therapeutic class	Not currently authorized	<b>Pending: AZ, MA</b>

<b>Increased Costs for Beneficiaries</b>			
<b>Premiums for Individuals &lt; 150% FPL</b>	Charge monthly premiums for Medicaid coverage for individuals with incomes from 0% to 150% FPL. Amounts charged vary by state, but range up to \$37.50 per month	<p>Medicaid statute prohibits premiums on this low income population, but allows some premiums for populations with incomes above 150% FPL</p> <p>In the past, some states have obtained waivers to impose certain premiums on these low-income populations. (e.g., Indiana and Michigan)</p>	<p><b>Pending:</b> IN, ME, NC, NM, WI, MI (extension of current waiver)</p> <p><b>Approved:</b> KY</p>
<b>Emergency Department Co-Payments</b>	Charge beneficiaries for use of the emergency room. Some states limit the copayment to nonemergency use only, while others apply the copayment to any visit. Charges range from \$8 to \$75	<p>Federal statute authorizes copayments on non-emergency use of the emergency department, under highly circumscribed conditions, and certain states have implemented these copayments</p> <p>Copayments for emergency use of the emergency department not authorized</p>	<p><b>Pending:</b> IN, ME, NM, UT, WI</p> <p><b>Approved:</b> KY</p>
<b>Missed Appointment Fees</b>	Charge beneficiaries fees for missed appointments	Not currently authorized	<b>Pending:</b> NM
<b>Other</b>			
<b>Behavior Incentives</b>	Require beneficiaries to complete a risk assessment and/or adjust premiums or cost-sharing based on answers	Some states have obtained waivers to implement healthy behavior incentives (e.g., Michigan)	<b>Pending:</b> WI, IN, NM, MI (extension of current waiver)
<b>Unilaterally Change Eligibility Requirements</b>	Allow state to change eligibility requirements without seeking CMS approval	Not currently authorized	<b>Pending:</b> UT