## COVID-19 Public Health Emergency Flexibilities, Updated July 5, 2023

The Virginia Medicaid agency implemented a variety of policies in 2020 in response to the needs of members and providers as they confronted the COVID-19 pandemic. The remaining flexibilities are included in the table below, along with information about when those flexibilities will end.

Flexibility	End Date
Waivers	
Members who receive less than one service per month will not be discharged from a HCBS waiver.	Based on CMS guidance, members who have not received services in thirty days may be removed from a Medicaid waiver after notice is provided.
Allow legally responsible individuals (parents of children under age 18 and spouses) to provide personal care/personal assistance services for reimbursement.	This flexibility will remain active until November 11, 2023.
Personal care, respite, and companion aides hired by an agency shall be permitted to provide services prior to receiving the standard 40-hour training.	This flexibility will remain active until November 11, 2023.
Allow beneficiaries to receive monthly monitoring when services are furnished on a less than monthly basis.	This flexibility will remain active until November 11, 2023.
Appeals	
For all appeals filed during the state of emergency, Medicaid members will automatically keep their coverage.	This flexibility is continuing under a 1902(e)(14) waiver approved by CMS.
There will be no financial recovery for continued coverage for appeals filed during the period the emergency.	This flexibility is continuing under a 1902(e)(14) waiver approved by CMS.
Delay scheduling of fair hearings and issuing fair hearing decisions due to an emergency beyond the state's control.	This flexibility is continuing under a 1902(e)(14) waiver approved by CMS for cases that involve existing coverage.
The state may offer to continue benefits to individuals who are requesting afair hearing if the request comes later than the date of the action under 42 CFR 431.230.	This flexibility is continuing under a 1902(e)(14) waiver approved by CMS.