The following flexibilities expire 06/30/2021:

Flexibility	State Regulation
General or Applies to Multiple Services	
Waiver of public notice requirements that	
would otherwise be applicable to state plan	
amendment submission.	
Nursing Facilities	
Suspend Pre-Admission Screening and	§ 32.1-330.
Annual Resident Review (PASRR) Level I and	12 VAC 30-10-520(E)
Level II Assessments for 30 days.	12 VAC 30-60-302
For admissions occurring after March 12,	§ 32.1-330. Long-term services and supports screening
2020, nursing facilities do not need to	required
obtain Medicaid LTSS Screening packages	
that would normally be required by	Items C,E,F
12VAC30-60-308, and may admit	
individuals without the Medicaid LTSS	
screening package. The individual may be	
admitted directly to the nursing facility	
without a LTSS Screening.	
Durable Medical Equipment (DME)	
Allow a temporary extension of current	12 VAC 30-60-75
Certificate of Medical Need (CMN) and	§ 32.1-325(A)(14)
allow a temporary suspension of the	
requirement for a CMN for new DME	
orders. (See footnote)	

Footnote – For DME flexibility related to CMNs:

The DME flexibility for CMNs will end on 6/30/21. Providers will need to get a new CMN for any item in which the current CMN, verbal order or written order will end with the end of the state of emergency (6/30/21). As a reminder, DME providers have 60 days to have a new CMN signed and dated by the ordering practitioner to cover dates of service back to the begin service date on the CMN. So for example, if the begin service date on the new CMN is 7/1/2021, the provider will need to have the CMN signed and dated by 8/29/2021. If the DME provider has a current CMN that covers dates of services beyond 6/30/2021, a new CMN is not required until the current CMN expires. A new CMN is not required for every order only those that used a CMN extension, verbal order, faxed order or written order, in place of a new CMN, during the pandemic.