



Federal Declarations and Flexibilities Supporting Medicaid and CHIP COVID-19 Response Efforts
Effective and End Dates
Updated January 8, 2021

To help states respond to the ongoing coronavirus (COVID-19) pandemic, the White House, the U.S. Department of Health and Human Services (HHS), and the Centers for Medicare and Medicaid Services (CMS) have invoked their emergency powers to authorize temporary flexibilities in Medicaid and the Children’s Health Insurance Program (CHIP). Congress’s legislative relief packages have provided additional federal support for state Medicaid programs, subject to certain conditions. The timeframes for these emergency measures are summarized in the chart below, including the effective dates and expiration timelines dictated by law or agency guidance. The chart also includes current end dates, which are subject to change as federal and state officials take actions to renew or terminate particular authorities. *This SHVS product has been updated to reflect HHS’s [January 7, 2021 declaration](#) renewing the federal Public Health Emergency, as well as CMS’s December 22, 2020 “State Health Official” letter ([SHO 20-004](#)) providing guidance on “resumption of normal activities” following the end of the PHE¹.*

Declaration/Flexibility	Effective Date	Expiration Timeline	Current End Date <i>(as of the date of publication)</i>	Citations
Federal Emergency/Disaster Declarations				
The HHS Public Health Emergency (PHE) Declaration	January 27, 2020 <i>(issued January 31, 2020)</i> Last renewed: January 21, 2021 <i>(issued January 7, 2021)</i>	Expires after 90 days unless renewed by HHS	April 20, 2021	Public Health Service Act § 319(a) <i>[42 USC § 247d(a)]</i>
The President’s National Emergency Declaration under the National Emergencies Act (NEA)	March 1, 2020 <i>(issued March 13, 2020)</i>	Expires after one year unless renewed by the President; may be terminated at any time by the President or by joint resolution of Congress ²	March 1, 2021	NEA § 202(a) <i>[50 U.S.C. §§ 1622(a) & (d)]</i>
The President’s Stafford Act Declarations	Nationwide emergency declaration issued March 13, 2020 <i>(no effective date specified)</i> State “major disaster” declarations are	The Federal Emergency Management Agency (FEMA) determines the start and end dates of the “incident period”	None specified in either the nationwide or state-by-state declarations	Stafford Act §§ 401 (major disaster) & 501 (emergency) <i>[42 USC §§ 5170 & 5191]</i> 44 CFR § 206.32(f)

Federal Declarations and Flexibilities Supporting Medicaid and CHIP COVID-19 Response Efforts
Effective and End Dates
Updated January 8, 2021

	generally effective January 20, 2020			
Temporary Medicaid/CHIP Flexibilities for COVID-19 Response Efforts				
Section 1135 Waiver	March 1, 2020 (or a later date requested by the state and approved by CMS) ³	Generally, end of the PHE, per CMS guidance; ⁴ for certain waivers, CMS has authorized grace periods following the end of the PHE ⁵	April 20, 2021 (except for flexibilities for which CMS has authorized a grace period following the end of the PHE)	Social Security Act (SSA) § 1135(e) [42 USC § 1320b-5(e)] CMS's Medicaid/CHIP FAQ CMS SHO 20-004
Medicaid Disaster Relief State Plan Amendment (SPA)	March 1, 2020 (or a later date chosen by the state) ⁶	End of PHE (or an earlier approved date chosen by the state)	April 20, 2021 (or an earlier date chosen by the state)	Medicaid Disaster Relief SPA Template CMS's Medicaid/CHIP FAQ CMS SHO 20-004
CHIP Disaster Relief SPA	Start of state or federally declared emergency (or a later date chosen by the state) ⁷	End of the PHE or state-declared emergency (or an earlier date chosen by the state)	April 20, 2021 (or an earlier date chosen by the state, or later if the state-declared disaster continues)	CHIP Disaster Relief SPA Example CMS Medicaid/CHIP FAQ CMS SHO 20-004
Section 1915(c) Appendix K (for Medicaid home and community based services (HCBS) programs)	January 27, 2020 (or a later date chosen by the state)	Generally, one year from the effective date (or an earlier approved date chosen by the state), but no later than March 31, 2021 (one year from the last day of the month in which the President executed the NEA declaration). States with expiring COVID-related Appendix K flexibilities may request CMS approval to renew those flexibilities until six months following the end of the PHE.	January 26, 2021 (or an earlier date chosen by the state, or as late as March 31, 2021 if the state chose a delayed effective date). Subject to CMS approval, states may renew COVID-related Appendix K flexibilities until October 20, 2021 .	Section 1915(c) Appendix K Template CMS Medicaid/CHIP FAQ CMS SHO 20-004

Federal Declarations and Flexibilities Supporting Medicaid and CHIP COVID-19 Response Efforts
Effective and End Dates
Updated January 8, 2021

Emergency Section 1115 Waiver	March 1, 2020 (or a later date chosen by the state)	PHE + 60 days (or an earlier date approved in the waiver's Special Terms & Conditions (STCs))	June 19, 2021	COVID-19 Section 1115 Template CMS SHO 20-004
Key Provisions in the Families First Coronavirus Response Act (FFCRA, P.L. 116-127)				
Enhanced Federal Medicaid Assistance Percentage (FMAP)	January 1, 2020	End of the quarter in which the PHE ends	June 30, 2021	FFCRA § 6008(a) CMS SHO 20-004
<ul style="list-style-type: none"> Maintenance of Effort (MOE) Requirement 	January 1, 2020	End of the quarter in which PHE ends	June 30, 2021	FFCRA § 6008(b)(1) & (2) CMS SHO 20-004
<ul style="list-style-type: none"> Continuous Coverage Requirement 	March 18, 2020	End of the month in which the PHE ends	April 30, 2020	FFCRA § 6008(b)(3) 42 CFR § 433.400 (as added by CMS's November 2, 2020 Interim Final Rule (IFR)) CMS SHO 20-004
<ul style="list-style-type: none"> Required Coverage (With No Cost Sharing) of COVID-19 Tests, Treatments, and Vaccines⁸ 	January 1, 2020	End of the quarter in which PHE ends	June 30, 2021	FFCRA § 6008(b)(4) CMS November 2, 2020 IFR CMS SHO 20-004
Coverage for the Optional COVID-19 Testing Eligibility Group	March 18, 2020 (or a later date chosen by the state)	End of the PHE ⁹	April 20, 2021	SSA §§1902(a)(10)(A)(ii)(XXIII) & (ss) [42 USC §§ 1396a(a)(10) & (ss)], as added/amended by FFCRA § 6004(a)(3) and CARES § 3716 CMS SHO 20-004

Support for this product was provided by the State Health and Value Strategies (SHVS) program, a grantee of the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the Foundation.

Notes

¹ The “unwinding” guidance in SHO 20-004 is also summarized in this [presentation](#) from CMS’s January 7, 2021 All-State Medicaid & CHIP Call.

² After the President declares a national emergency, NEA section 202(b) requires that, every six months, “each House of Congress shall meet to consider a vote on a joint resolution to determine whether that emergency shall be terminated.”

³ HHS invoked the 1135 waiver authority on [March 13](#) with an effective date of March 1. Thus, all the 1135 waivers that have since been issued by HHS and CMS have retroactive effect to March 1 unless otherwise specified.

⁴ [CMS's Medicaid/CHIP FAQ](#) states that 1135 waivers last until the end of the PHE. That guidance appears inconsistent with the text of section 1135(e) in two respects, however. First, section 1135(e) provides that emergency waivers can generally be extended up until the termination of either the PHE *or* the presidential emergency declaration (whichever comes first). Applicable presidential emergency declarations can be made under the NEA or the Stafford Act; currently, both types of declarations are in effect nationwide. Section 1135(e) also requires that HHS renew the 1135 waiver authority at least every 60 days. To date, HHS has not issued any express renewal of the 1135 waiver authority.

⁵ For example, many states received 1135 waivers related to provider enrollment in Medicaid, including waivers allowing for delays in provider revalidation and permitting provisional enrollment of providers who were already enrolled with Medicare or with another state's Medicaid program. CMS has authorized a six-month grace period for these flexibilities following the end of the PHE, as described in [SHO #20-004](#).

⁶ Typically, Medicaid SPAs may be effective no earlier than the first day of the quarter in which the SPA was submitted. With respect to Medicaid disaster relief SPAs, CMS will grant 1135 waivers that allow Medicaid SPAs to take effect before the start of the quarter in which the SPA was submitted (but no earlier than the start of the PHE).

⁷ According to CMS's CHIP disaster relief [SPA example](#), states may activate their disaster relief scenarios in response to a disaster declared by the "Governor or FEMA." [CMS's Medicaid/CHIP FAQ](#) states that CHIP disaster relief SPAs may also be activated in response to the COVID-19 PHE. In general, CHIP SPAs may have retroactive effect as far back as the beginning of the fiscal year in which the SPA was submitted, including SPAs that modify the state's disaster relief scenarios. For that reason, [CMS's Medicaid/CHIP FAQ](#) indicates that section 1135 authority is not needed to modify the submission date for SPAs that are submitted by the end of the fiscal year; presumably, however, CMS could grant an 1135 waiver to extend the retroactive date of a CHIP SPA into the prior fiscal year if needed, similar to CMS's use of 1135 waivers to permit Medicaid SPAs to have a retroactive effective date in a previous quarter.

⁸ [CMS's Medicaid/CHIP FAQ](#) clarifies that this coverage requirement applies to COVID-19 tests, treatments, and vaccines that receive an FDA Emergency Use Authorization (EUA).

⁹ Although federal funding for the optional eligibility group ends at the end of the PHE, states may need to keep this group enrolled (without coverage) until the end of the month in which the PHE period ends in order to comply with the continuous coverage conditions in FFCRA section 6008(b)(3), per [CMS's Medicaid/CHIP FAQ](#).