

**CENTERS FOR MEDICARE & MEDICAID SERVICES
WAIVER AUTHORITY**

NUMBER: 11-W-00193/9
TITLE: California Bridge to Reform Demonstration
AWARDEE: California Health and Human Services Agency

All requirements of the Medicaid program expressed in law, regulation, and policy statement, not expressly waived in this list, shall apply to the Demonstration from the approval date, through October 31, 2015, unless otherwise specified.

Under the authority of section 1115(a) (1) of the Social Security Act (the Act), the following waivers shall enable California to implement the California Bridge to Reform Demonstration.

1. Single State Agency **Section 1902(a)(5)**

To the extent necessary to enable the California Medical Assistance Commission to conduct contract negotiations with health care providers.

2. Payment to Providers **Sections 1902(a)(13) 1902(a)(30)**

To allow the state through the California Medical Assistance Commission to negotiate rates with providers on an individual or class basis without regard to the rates currently set forth in the approved state plan , and to the extent necessary to allow the state to set rates for hospitals without using a public process.

3. Freedom of Choice **Section 1902(a)(23)(A)**

To enable the state to require participants to receive benefits through certain, providers and to permit the state to require that individuals receive benefits through managed care providers who could not otherwise be required to enroll in managed care. No waiver of freedom of choice is authorized for family planning providers.

4. Statewideness **Section 1902(a)(1)**

To enable the state to operate the demonstration and implement coverage for new eligibles on a county-by-county basis and to provide managed care plans only in certain geographic areas.

5. Amount, Duration, and Scope of Services and Comparability **Section 1902(a)(10)(B)**

To enable the state to offer a different benefit package to individuals in the seniors and people with disabilities (SPD) program that includes benefits that are not available to all categorically needy individuals. To permit the state to provide different benefits for low-income pregnant

women between 109 percent up to and including 138 percent of the Federal Poverty Level, as compared to other pregnant women in the same eligibility group.