

## INSTRUCTIONS TO STATES FOR SUBMITTING WAIVER REQUESTS UNDER THE AUTHORITY OF SECTION 903 OF THE BENEFITS IMPROVEMENT AND PROTECTION ACT

PACE organization waiver requests must be submitted to the Centers for Medicare and Medicaid Services (CMS) Central Office and applicable Regional Offices by the State Administering Agency (SAA) along with any concerns or conditions identified.

Section 903 of the Benefits Improvement and Protection Act of 2000 (BIPA) allows no more than 90 days from the date of CMS receipt to make a determination on a waiver request. The 90-day clock begins upon receipt of the waiver request in the Center for Medicare Management within CMS Central Office. Your assistance in forwarding these requests to both CMS Central and Regional Offices will help to facilitate timely processing of requests.

Waiver requests submitted to CMS can be submitted under either of the following situations:

- 1) Waiver request accompanying an application
- 2) Waiver request independent of an application

Situation 1: Waiver requests must be prepared and marked as separate documents. Requests will be reviewed simultaneously and in conjunction with the application. Please abide by the following guidelines when submitting waiver requests, which accompany applications.

- 1) Forward the program application (5 hardcopies plus 2 diskettes), the accompanying waiver request, and any concerns or conditions to:

The Centers for Medicare and Medicaid Services  
Center for Beneficiary Choice  
Joseph Lipsky  
Mail Stop C4-23-07  
7500 Security Boulevard  
Baltimore, Maryland 21244

- 2) Forward the program application, (2 hard copies and 1 diskette) the accompanying waiver request, and any concerns or conditions to the applicable RO

- 3) Forward a separate copy of the waiver request and any concerns or conditions to:

The Centers for Medicare and Medicaid Services  
Center for Medicare Management  
Brenda Hudson  
Mail Stop C5-05-27  
7500 Security Boulevard  
Baltimore, Maryland 21244

Please note; the 90-day clock for waiver determinations begins upon CMS Center for Medicare Managements (Central Office) receipt of the waiver request.

Situation 2: Please abide by the following guidelines when submitting waiver requests.

- 1) Forward the waiver request and any concerns or conditions to the applicable RO
- 2) Forward the waiver request and any concerns or conditions to:

The Centers for Medicare and Medicaid Services  
Center for Medicare Management  
Brenda Hudson  
Mail Stop C5-05-27  
7500 Security Boulevard  
Baltimore, Maryland 21244