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**

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

2. **Payment to Providers**

   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**

   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**

   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**

   To allow the state to set rates for hospitals without using a public process.
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.