

Medicaid and CHIP Operations Group

June 29, 2022

Cynthia Beane, MSW, LCSW Commissioner Bureau for Medical Services 350 Capitol Street, Room 251 Charleston, West Virginia 25301-3706

RE: West Virginia Home and Community-Based Services Traumatic Brain Injury Waiver (CMS Control Number (WV. 0876.R02.06)

Dear Commissioner Beane:

The Centers for Medicare & Medicaid Services (CMS) is approving your request to amend WV. 0876.R02.06 West Virginia Home and Community-Based Services Traumatic Brain Injury Waiver. The CMS Control Number for the amendment is WV. 0876.R02.06. Please use this number in future correspondence relevant to this waiver action.

With this amendment, the state is making an increase in Factor C number of waiver participants, the state is adding six additional TBIW slots to years 2, 3, 4 and 5. The effective date of the amendment is July 1, 2021.

The waiver continues to be cost-neutral. The average per capita cost of waiver services estimates (Appendix J.1) have been approved.

This approval is subject to your agreement to serve no more individuals than the total number of unduplicated participants indicated in Appendix J.2 of the waiver. If the state wishes to serve more individuals or make any other alterations to this waiver, an amendment must be submitted for approval.

It is important to note that CMS' approval of this waiver amendment solely addresses the state's compliance with the applicable Medicaid authorities. CMS' approval does not address the state's independent and separate obligations under federal laws including, but not limited to, the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, or the Supreme Court's Olmstead decision. Guidance from the Department of Justice concerning compliance with the Americans with Disabilities Act and the Olmstead decision is available at http://www.ada.gov/olmstead/q&a_olmstead.htm.

The state has identified its intent to use money realized from section 9817 of the American Rescue Plan (ARP). Approval of this action does not constitute approval of the state's spending plan. The state must have an approved spending plan in order to use the money realized from section 9817 of the ARP.

Thank you for your cooperation during the review process. If you have any questions concerning this information, please contact me at (410) 786-7561. You may also contact Chuck Steinmetz at <u>charles.steinmetz@cms.hhs.gov</u> or (215) 861-4169.

Sincerely,

George P. Failla, Jr., Director, Director Division of HCBS Operations and Oversight

cc: Patricia Nisbet, WV HSBS Randall K. Hill, WV HSBS Wendy Hill Petras, CMCS Dominique Mathurin, CMCS Daphne Hicks, CMCS Paul Teti, CMCS