

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

January 4, 2020

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

RE: West Virginia Home and Community-Based Services Intellectual/Developmental Disability Waiver (CMS Control Number WV.0133.R07.03)

Dear Commissioner Beane:

The Centers for Medicare & Medicaid Services (CMS) is approving your request to amend WV.0133.R07.03 for West Virginia's Medicaid Home and Community-Based Services (HCBS) Intellectual/Developmental Disability Waiver. The CMS Control Number for the amendment is WV.0133.R07.03. Please use this number in future correspondence relevant to this waiver action.

With this amendment, the state is implementing Electronic Visit Verification (EVV) and Conflict Free Case Management requirements. The amendment also added four-year degree and online certification criteria for case managers and a modifier to the Transportation Personal Options service to identify employees that do not live in the member's home. The amendment changed case management billing to a monthly fee rather than a 15-minute unit and changed the name "Service Coordination" to "Case Management". It added the Home-Based Person-Centered Supports Personal Options service to identify employees that do not live in the member's home. Finally, the amendment added (1) two new self-directed services: Environmental Accessibility Adaptation Home and Environmental Accessibility Adaptation Vehicle, and (2) four new self-directed extended professional services: Physical Therapy, Occupational Therapy, Speech Therapy and Dietary Therapy. The effective date of the amendment is 04/01/2021.

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.

Thank you for your cooperation during the review process. If you have any questions concerning this information, please contact me at (206) 615-2356, or your staff may contact Chuck Steinmetz at charles.steinmetz@cms.hhs.gov or (215) 861-4169.

Sincerely,

David L. Meacham, Director
Division of HCBS Operations and Oversight

cc:

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