<table>
<thead>
<tr>
<th>Number</th>
<th>Date Received</th>
<th>Comment</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2/3/2022</td>
<td>I strongly support the amendments, particularly the need to provide service in other community locations, including schools where the child's behaviors are often expressed in school thereby resulting in charges and out of home placement due to behavior problems associated with school settings.</td>
<td>West Virginia Bureau for Medical Services (WV BMS) appreciates your time reviewing the proposed changes to the amendment and your feedback. No changes requested. No additional changes to the amendment.</td>
</tr>
<tr>
<td>2</td>
<td>3/3/2022</td>
<td>Permanently expand Medicaid eligibility group (1902(e)(3)/42 CFR §435.225) under 42 CFR §435.217 option. - <strong>Will we be able to bill both regular and Aetna Medicaid for this?</strong></td>
<td>All members served by the waiver are covered by the Mountain Health Promise program administered by Aetna. No additional changes to the amendment.</td>
</tr>
<tr>
<td>3</td>
<td>3/3/2022</td>
<td>Permanently expand the list of eligible degree types for providers to include non-licensed clinicians delivering these services will receive clinical supervision as is required for Licensed Behavioral Health Centers, the provider type that delivers CSED services. • G0176 HA Extended Professional Services • H0004 HO HA Family Therapy - <strong>We support this change</strong></td>
<td>WV BMS appreciates your time reviewing the proposed changes to the amendment and your feedback. No changes requested. No additional changes to the amendment.</td>
</tr>
<tr>
<td>4</td>
<td>3/3/2022</td>
<td>Extend the timeframe an eligible member must begin HCBS before an unused waiver slot is discharged from 180 days up to 365 days, unless the member ages out of eligibility. - <strong>Will pre-discharge Wraparound Facilitation be billable if the youth is transitioning from placement to home? What will be billable for direct service providers?</strong></td>
<td>Currently, pre-discharge Wraparound Facilitation is not a billable service under the CSED Waiver. Not currently a part of this amendment. No additional changes to amendment.</td>
</tr>
<tr>
<td>5</td>
<td>3/3/2022</td>
<td>Adjust the numerator for performance measure A-ai-7 to help ensure that waiver performance measure reporting is clear. - <strong>Not applicable</strong></td>
<td>References numerator for performance measure A-a1-7 have been updated where applicable. No additional changes to the amendment.</td>
</tr>
<tr>
<td></td>
<td>3/3/2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---------</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>6</td>
<td>Remove the “in-home” requirement for Family Therapy to increase service setting options to align the waiver with the State’s wraparound initiative. - Will they pay/will we be able to bill both regular Medicaid AND Aetna Medicaid?</td>
<td>Services delivered under the CSED Waiver are required to be billed to the Mountain Health Promise program for reimbursement, which is administered by Aetna. No additional changes to amendment.</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Add Evidence-Based Therapy requirements to align with CMS and evidence-based practices. – Need clarification on what CMS evidenced-based practice. Is CMS evidence-based practice considered to be the Title IV-E Clearinghouse that is used with Family First, or would this include other evidence-based practices that are supported on the California Clearinghouse?</td>
<td>Evidence-based practice requirements for the CSED Waiver are not related to Title IV-E funding initiatives. Not related to current amendment request. No additional changes to amendment.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Update the conflict free case management service radius from 25 miles to 15 miles to increase access to home and community-based services and also allow members more choice in providers to receive their HCBS from. The decrease in radius mileage will also be beneficial to family and caregivers by requiring less travel time to receive home and community-based services. – Will there be more geographical exclusions if the smaller radius negatively impacts the inclusion of service providers?</td>
<td>BMS will monitor the implementation of the mile-radius change for conflict-free case management and will implement geographic exclusions as necessary to mitigate undue burden for providers and members. No additional changes to amendment.</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Updating BCF (Bureau of Children and Family) to BSS (Bureau of Social Services).- No Comment Additional Comments</td>
<td>References to BCF have been updated to BSS where applicable. No additional changes to the amendment.</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td><strong>Reimbursement Recommendations:</strong> Wraparound Facilitation during Plan Engagement; Tertiary Mobile Response Provider POC participation, and direct service providers POC participation should all be billable. There are hours of billable work and no payment for it</td>
<td>WV BMS appreciates your time reviewing the proposed changes to the amendment and your feedback. Not related to current amendment. No additional changes to amendment.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3/4/2022</td>
<td>I had CSED waiver for my son and it is by far the best service ever offered by WV. The Legislature needs to require Judges to not only use this service but to listen to the providers. Judges have no business working social work.</td>
<td>WV BMS appreciates your time reviewing the proposed changes to the amendment and your feedback. No changes requested. No additional changes to amendment.</td>
</tr>
</tbody>
</table>