

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 12, 2021

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 Aged and Disabled Waiver (CMS Control Number WV.0134.R07.04)

Dear Commissioner Beane:

The Centers for Medicare & Medicaid Services (CMS) is approving your request to amend WV.0134.R07.04 for West Virginia's Medicaid Home and Community-Based Services (HCBS) Aged and Disabled Waiver. The CMS Control Number for the amendment is WV.0134.R07.04. Please use this number in future correspondence relevant to this waiver action.

With this amendment, which was approved on January 8, 2021, the state removes Personal Options Skill Nursing Service Codes of T1001-U2 and T1002-U1 due to utilization review indicating non-use of these service codes. The state also adds Electronic Visit Verification (EVV) and Conflict Free Case Management requirements. Additionally, the state added 4-year degree and online certification criteria for case managers and requirements that all Person-Centered Service Plans (PCSP) must be facilitated by ADW Case Managers as well as a case manager quarterly face to face home visit with the member to assure health and safety. Finally, the state (1) adds a modifier to the ADW traditional transportation code, (2) adds supervision into the personal attendant service definition, and (3) adds Personal Emergency Response System (PERS) unit (usually in the form of a pendant), and a modifier to the ADW Personal Attendant Personal Options to identify employees that live in the member's home. 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 in 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

Enclosure

cc:

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