

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
701 5th Avenue, Suite 1600, MS/RX-200
Seattle, Washington 98104



Medicaid and CHIP Operations Group

May 18, 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 Aged and Disabled Waiver (CMS Control Number WV.0134.R07.00)

Dear Commissioner Beane:

We are approving your request to renew West Virginia’s Medicaid Home and Community-Based Services (HCBS) Aged and Disabled Waiver. The CMS Control Number for the renewal is WV.0134.R07.00 and should be referenced on all future correspondence relating to this waiver renewal.

For this HCBS waiver, you have requested a waiver of 1902(a)(10)(B) of the Social Security Act in order to waive comparability of services. The waiver has been approved for a five year period with an effective date of July 1, 2020.

This waiver will offer the following supports for waiver participants: Case Management, Personal Attendant Services, Community Transition Services, Pre-Transition Case Management, Skilled Nursing and Non- Medical Transportation.

The following number of unduplicated recipients and estimates of average per capita cost of waiver services have been approved:

Waiver Year	C Factor Estimates	D Factor Estimates	D’ Factor Estimates	G Factor Estimates	G’ Factor Estimates
Year 1	7,026	19,181.97	7,665.00	57,396.00	8,406.00
Year 2	7,026	19,181.97	7,867.00	59,440.00	9,078.00
Year 3	7,026	19,181.97	8,074.00	61,556.00	9,804.00
Year 4	7,026	19,181.97	8,287.00	63,747.00	10,588.00
Year 5	7,026	19,181.97	8,505.00	66,017.00	11,435.00

This approval is subject to your agreement to serve no more individuals than those indicated in “C Factor Estimates” shown in the table above. If the state wishes to serve more individuals or make any other alterations to this waiver, an amendment must be submitted for approval. The state may renew the waiver at the end of the five-year period by providing evidence and documentation of satisfactory performance and oversight.

It is important to note that CMS’ approval of this waiver 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.

We appreciate your cooperation during the waiver renewal process. If there are 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:
Patricia Nisbet, MA, LSW