DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 801 Market Street - Suite 9400 Philadelphia, Pennsylvania 19107



Regional Operations Group

SWIFT #092420194017

September 25, 2019

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

Re: West Virginia's Home and Community-Based Services Traumatic Brain Injury Waiver, CMS Control Number, WV.0876.R01.02.

Dear Commissioner Beane:

I am pleased to inform you that the Centers for Medicare & Medicaid Services (CMS) has approved your request to amend West Virginia's Medicaid Home and Community-Based Services (HCBS) Traumatic Brain Injury Waiver. The CMS Control Number for the amendment is WV.0876.R01.02. Please refer to this number in all future correspondence regarding this amendment.

This amendment revises the spousal impoverishment language to indicate in the case of a participant with a community spouse, the state uses spousal post-eligibility rules under §1924 of the Act. After December 31, 2019 (or other date as required by law), spousal impoverishment rules under §1924 of the Act are used to determine the eligibility of individuals with a community spouse for the special home and community-based waiver group. In the case of a participant with a community spouse, the state elects to use spousal post-eligibility rules. In addition, the amendment revises Factor D, the service usage estimates for Waiver Years 4 and 5 to be more realistic based on actual usage.

Estimated expenditures demonstrate that the waiver will remain cost neutral for each waiver year, as reflected in the estimates below. The effective date of this amendment is 07/01/2018.

| Waiver Year | C Factor Estimates | D Factor Estimates | D' Factor Estimates | G Factor Estimates | G" Factor Estimates |
|----------------|-----------------------|-----------------------|------------------------|-----------------------|------------------------|
| 1 | 74 | 30449.00 | 10903.00 | 57396.00 | 8406.00 |
| 2 | 70 | 31972.00 | 11448.00 | 59440.00 | 9078.00 |
| 3 | 86 | 33566.30 | 12020.00 | 61556.00 | 9804.00 |
| 4 | 82 | 20327.00 | 12621.00 | 63747.00 | 10588.00 |
| 5 | 79 | 20409.90 | 13252.00 | 66017.00 | 11435.00 |

This approval is subject to your agreement to serve no more individuals than those indicated above. If the State chooses to make additional alterations to this waiver, an amendment must be submitted for approval.

We appreciate the assistance and cooperation provided by your staff throughout the amendment process and wish you every success in your implementation of this waiver program modification. If you have any questions about this amendment, please contact Margaret Kosherzenko of my staff at 215-861-4288.

Sincerely,

Francis T. McCullough Director Division of Medicaid Field Operations Group East (Philadelphia)

cc: Patricia Nisbet, BMS Daphne Hicks, CMS