CENTERO FOR MEDIO, WE WINEDIO, WE CENTROLO			
TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER 2. STATE WV		
STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL		
FOR. CENTERS FOR MEDICARE & MEDICAID SERVICES	SECURITY ACT O XIX XXI		
TO: CENTER DIRECTOR	4. PROPOSED EFFECTIVE DATE		
CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	January 01, 2023		
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)		
42 CFR § 440.167	a FFY N/A \$ b. FFY N/A \$		
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION		
Supplement 2 to	OR ATTACHMENT (If Applicable)		
Attachments 3.1-A and 3.1-B	Supplement 2 to Attachments 3.1-A and 3.1-B		
Page 13, 14 Attachment 3.1-A Page 9	Page 13, 14		
Attachment 3.1-B Pages 8 and 9	TN 09-08		
· · · · · · · · · · · · · · · · · · ·	Attachment 3.1-A Page 9		
	Attachment 3.1-B Pages 8 and 9		
9. SUBJECT OF AMENDMENT			
This SPA will direct providers to Personal Care Policy with regard	ds to training requirements of the Personal Care program.		
10. GOVERNOR'S REVIEW (Check One)			
GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPECIFIED:		
11. SIGNATURE OF STATE AGENCY OFFICIAL Cynthia Beane, MSW, LCSW Digitally signed by: Cynthia Beane, MSW, LCSW PN: CN = Cynthia Beane, MSW, LCSW email = cynthia.e.beane@wv. gov C = US O = Medical Services OU = WV DHHR Date: 2023 03 8 01 55-55-55.000	15. RETURN TO WV Bureau for Medical Services		
12. TYPED NAME	50 Capitol St. Suite 350 Charleston, WV 25301		
Cynthia Beane	Chaneston, WV 2000		
13. TITLE			
Commissioner, WV Bureau for Medical Services			
14. DATE SUBMITTED 03/31/23			
	USE ONLY		
16. DATE RECEIVED March 31, 2023	17. DATE APPROVED 06/16/2023		
	NE COPY ATTACHED		
18. EFFECTIVE DATE OF APPROVED MATERIAL January 1, 2023 19. SIGNATURE OF APPROVING OFFICIAL			
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL		
Ruth A. Hughes	Acting Director, Division of Program Operations		
22. REMARKS			
Boxes 7 and 8: State authorized pen & ink change on 06-	12-2023		

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia

Attachment 3.1-A

Page 9

	PERSONAL CARE				
			COPE OF MEDICAL AND REE CATEGORICALLY NEEDY		
24.	_	other medical care a the Secretary.	nd any other type of remedial ca	are recognized under State law,	
speci	A.	Transportation.			
	11.	✓ Provided			
		☐ No Limita	tions		
		☑ With Limi			
		☐ Not Provid			
	B.		tian Science nurses.		
		☐ Provided			
		☐ No Limita	ations		
		☐ With Limi	itations*		
		✓ Not Provi	ded		
	C.	Care and services	Care and services provided in Christian Science sanitoria.		
		☐ Provided			
		☐ No Limita	itions		
		With Limit	itations*		
		✓ Not Provie	ded		
	D.	Nursing facility se	ervices for patients under 21 year	ars of age.	
		Provided			
		☐ No Limita	ations		
		With Limi			
		☐ Not Provi			
	E.	Emergency Hospi	ital Services.		
		✓ Provided			
	☑ No Limita				
	☐ With Limi				
		☐ Not Provi	ded		
*Des	scription	n provided on attachi	ment.		
				1	
TN	No: 23	-0005	Approval Date: 06/16/2023	Effective Date: 01/01/2023	

TN No: 23-0005	Approval Date: 06/16/2023	Effective Date: 01/01/2023
Supersedes: 09-08		

Revision: Attachment 3.1- B

HCFA-PM-91-4(BPD) August 1991

Page 8 OMB No.: 0938-

State/Territory: West Virginia

	State/10	errnory:	west virgi	nia		
	SERVI			TION AND SCOPE O THE CATEGOR		L AND REMEDIAL CARE AND Y.
24. by the S	Any otl		cal care and	any other type of i	remedial care rec	cognized under State law, specified
,	Α.		ortation.			
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	B.	Service		an Science nurses.		
			Provided			
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	C.		Provided	novided in Christia	ii Selence samto	iiu.
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	D.	_		vices for patients u	nder 21 vears of	ane
	D.		Provided	vices for patients u	nder 21 years or	age.
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	F.			•		in accordance with a plan of
ıreaime	nt and p			ed person under sup	pervision of a reg	gistered nurse.
			Provided			
			No limitati			
			With limita			
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*Descr	iption pr	ovided o	on attachme	nt.		
TN N	o: 23-0	005		Approval Date:	06/16/2023	Effective Date: 01/01/2023
Supersedes: 93-07 HCFA ID: 7986E			HCFA ID: 7986E			

TN No: 23-0005	Approval Date: 06/16/2023	Effective Date: 01/01/2023
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-STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia Revision: HCFA-PM-94-9 (MB) December 1994

Attachments 3.1-B

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PERSONAL CARE

AMOUNT, SCOPE AND DURATION OF SERVICES PROVIDED MEDICALLY NEEDY GROUP(S):

26.	Personal care services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for individuals with intellectua
	disabilities, or institution for mental disease, that are (A) authorized for the individual by a physician in accordance with a plan of treatment, (B) provided by an individual who is qualified to provide such services and who is not a member of the individual's family and (C) furnished in a home or a community setting.
	_X Provided: _X State Approved (not physician) Plan of Care Allowed _X Services Outside the Home Also Allowed (with limitations) X Limitations Described on Attachment
	Not Provided:

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

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Attachments 3.1-A and 3.1-B

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PERSONAL CARE

24. a. Transportation

Prior authorization may be required for transportation by ambulance, common carrier, or other appropriate means.

d. Nursing Facility Services Under 21 Years

Precertification required prior to authorization of benefits.

e. <u>Emergency Hospital Services</u>

Per 42 CFR 440.170(e), the state covers emergency hospital services provided in a hospital that does not currently meet the Medicare conditions of participation if it is the most accessible hospital available in order to prevent the death or serious impairment of health of a beneficiary.

26. Personal Care Services

Personal care services are available to assist an eligible individual to perform Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) in the individual's home or community. The following family relationships: spouse of a member or parents of a minor child, or court appointed legal guardians, are excluded from providing personal care services for reimbursement by Medicaid.

Personal Care services in the form of assistance with ADLs and IADLs also are available outside the home to eligible individuals who require assistance to obtain and retain competitive employment of at least 40 hours a month. Assistance outside the home may be provided as necessary to assist the individual in getting to and from work, at the work site and in locations for obtaining employment such as employment agencies, human resources offices, and job interview sites. Personal care services provided outside the home to individuals for other than employment services may not exceed twenty (20) hours per month.

Personal care services are limited to a per unit, per month basis (15 minutes per unit) with all services subject to prior authorization. Individuals can receive up to a maximum of 840 units (210 hours) each month, based on assessed need. Services cannot exceed 840 units/210 hours monthly inclusive of the up to 20 hours outside the home as described above. Limitations do not apply to children less than 21 years and can be provided under the States Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program.

A registered nurse currently licensed in West Virginia completes a nursing assessment of need which includes examination of information provided on an application submitted on a beneficiary's behalf from a beneficiary's provider. Applications are accepted from physicians, physician assistants or nurse practitioners. The nurse then develops a state-approved Plan of Care. A nursing assessment must be completed at least once every six months to continue to authorize personal care services through the state approved plan of care.

Personal care is delivered by state enrolled providers who must be certified for the provision of personal care services prior to initiating services. Agency direct-care workers must obtain training in the following required areas:

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PERSONAL CARE

Initially

- Cardiopulmonary Resuscitation (Demonstrated) and First Aid
- Universal Precautions
- Direct Care Worker Skills- focused on assisting individuals with Activities of Daily Living (ADLs)/Instrumental Activities of Daily Living (IADLs)
- Abuse/Neglect/Exploitation
- HIPAA
- Direct Care Ethics
- Member Health and Welfare
- Direct Care Worker Safety
- Member Rights and Responsibilities
- Delivering Person-Centered Care

Annually

- CPR (Demonstration)/First Aid
- Universal Precautions
- Abuse/Neglect/Exploitation
- Medicaid Fraud, Waste, Abuse and how to report
- HIPAA
- Two hours of training focused on enhancing direct care service delivery knowledge and skills must be provided annually.

WV became compliant with the Electronic Visit Verification (EVV) requirements for personal care services (PCS) on April 1, 2021, in accordance with section 12006 of the 21st Century CURES Act.

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