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State/Territory Name: WV

State Plan Amendment (SPA): 22-0018-A

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S3-14-28 Baltimore, Maryland 21244-1850



Financial Management Group

September 13, 2022

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

Reference: TN 22-0018-A

Dear Ms. Beane,

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 22-0018-A. This amendment allows the West Virginia Bureau of Medical Services to provide payments to private or public, non-state government hospitals on behalf of Medicaid individuals with a substance use disorder who are awaiting placement effective June 1, 2022.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C.

Based upon the information provided by the State, we have approved Medicaid State plan amendment: WV 22-0018-A with an effective date of June 1, 2022. The CMS-179 and the amended plan page(s) are attached.

If you have any additional questions or need further assistance, please contact Douglas Spitler at Douglas.Spitler@cms.hhs.gov.

Sincerely,

Rory Howe
Rory Howe
Director

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. FEDERAL STATUTE/REGULATION CITATION Title XIX of the Social Security Act 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachmnet 4.19-A, page 24h	$\frac{2}{\sqrt{2}} = \frac{2}{\sqrt{2}} = \frac{0}{\sqrt{2}} = 0$
9. SUBJECT OF AMENDMENT	
DRG Days Awaiting Placement or Discharge	
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 Cynthia Beane, MSW, LCSW Digitally Signed by: Cynthia Beane, MSW, LCSW email = cynthia.e. beane@wv.gov C = US O = Medical Services OU = WV DHHR Date: 2022.06.28 07:17:35-05:00' 12. TYPED NAME Cynthia Beane 13. TITLE Commissioner, Bureau for Medical Services 14. DATE SUBMITTED 06/28/2022	15. RETURN TO Bureau for Medical Services 350 Capitol Street Room 251 Charleston, West Virginia 25301
FOR CMS USE ONLY	
16. DATE RECEIVED 06/28/2022	17. DATE APPROVED September 13, 2022
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL June 1, 2022	19. SIGNATURE OF APPROVING OFFICIAL Rory Howe
20. TYPED NAME OF APPROVING OFFICIAL	21. THE OF APPROVING OFFICIAL
Rory Howe	Director, Financial Management Group
22. REMARKS	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory West Virginia

ATTACHMENT 4.19-A Page 24h

0. **Payment for Days Awaiting Placement**

For services rendered on or after June 1, 2022, the Department will provide payments to private and public, non-state government owned and operated PPS hospitals for Medicaid individuals with a substance use disorder who are awaiting placement for substance use disorder treatment.

A. General Criteria for Hospital Participation:

- 1. Must be a West Virginia licensed hospital;
- 2. Must be enrolled as a West Virginia Medicaid provider;
- 3. Must be a privately owned provider consistent with 42 CFR §447.272(a)(3) or a public non-state government owned and operated provider consistent with 42 CFR §447.272(a)(2); and
- 4. Must be a participant in West Virginia Medicaid's PPS.

B. Medicaid Individual Criteria:

- 1. Must be eligible for West Virginia Medicaid;
- 2. Must have received Medicaid-covered inpatient hospital services immediately prior to the days awaiting placement;
- 3. Must have a substance use disorder.

C. Payment Methodology:

- 1. When a Medicaid individual no longer requires acute-level care but is awaiting placement for substance use disorder treatment, and when placement in such care is not available, the hospital will be reimbursed for "awaiting placement" days.
- 2. There is no limit on the number of covered days awaiting placement as long as the days are medically necessary. Prior authorization for days awaiting placement is required.
- 3. Payment for each awaiting placement day will be a per-diem rate of \$238. The rate reflects the level of care received and is lower than rates for other inpatient hospital services in a manner consistent with 1861(v)(1)(G) of the Social Security Act.
- 4. No ancillary services will be paid; however, medically necessary physician visits will be reimbursed.

TN No. 22-0018-a Approval Date: September 13, 2022

Superseded TN: NEW Effective Date: 06/01/2022