

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-26-12  
Baltimore, Maryland 21244-1850



**Disabled and Elderly Health Programs Group**

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January 15, 2021

Luz E. Cruz-Romero  
Executive Director, PR Medicaid Program  
Department of Health  
PO Box 70184  
San Juan, PR 00936-8184

Dear Ms. Cruz-Romero:

I am writing to inform you that the Centers for Medicare & Medicaid Services (CMS) has reviewed your territory's Electronic Visit Verification (EVV) Compliance Survey, submitted to determine whether Puerto Rico meets the requirements specified in section 1903(l) of the Social Security Act (the Act), as added by Section 12006(a) of the 21<sup>st</sup> Century Cures Act, for personal care services.

Puerto Rico has indicated that it does not render personal care services under any of the applicable Medicaid authorities specified in section 1903(l) of the Act. Therefore, there are no services for which to require the utilization of an EVV system, and no service claims against which to apply statutorily-mandated reductions in the federal medical assistance percentage (FMAP) for EVV non-compliance.

CMS notes that early and periodic screening, diagnostic, and treatment (EPSDT) requirements set forth in Section 1905(r) of the Act mandate that states and territories provide any medically necessary section 1905(a) service ("state plan service") for children under 21 that corrects or ameliorates any physical or behavioral health condition. State plan services for children under 21 include any service classified as "mandatory" or "optional", regardless of services covered for adults in that state. Your indication in the EVV Compliance Survey that no section 1905(a)(24) personal care services are being provided to children and youth may indicate a compliance issue with EPSDT requirements. Outside of EVV implementation activities, CMS will engage with Puerto Rico to discuss this issue.

Please also be aware that should Puerto Rico add personal care services under any of the authorities specified in the Cures Act, the territory will need to comply with EVV requirements upon implementation of such authority, or be subject to the mandated FMAP reductions. I have included the territory's current EVV Compliance Survey submission with this correspondence. If you have any questions about this correspondence please feel free to contact the CMS EVV mailbox at [evv@cms.hhs.gov](mailto:evv@cms.hhs.gov).

Sincerely,

Alissa Mooney DeBoy, Director