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State Name: Virginia

State Plan Amendment (SPA) #: 21-0011

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 Page

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th Street, Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

June 7, 2021

Karen Kimsey, Director
Department of Medical Assistance Services
600 East Broad Street, Suite 1300
Richmond, VA 23219

RE: Virginia State Plan Amendment 21-0011

Dear Ms. Kimsey:

The Centers for Medicare & Medicaid Services (CMS) has reviewed Virginia's State Plan Amendment (SPA) 21-0011, Tribal Consultation.

The purpose of this SPA is to solicit advice from Tribes and Indian Health Programs, prior to submitting any plan amendments, waiver requests, and proposals for demonstration projects that are likely to have a direct effect on Indians, Indian Health Programs, or Urban Indian Organizations.

This SPA is acceptable. Therefore, we are approving SPA 21-0011 with an effective date of March 1, 2021. Enclosed are the approved SPA page and signed CMS-179 form.

If you have any questions concerning this information, please contact me at (816) 426-6417, or your staff may contact Margaret Kosherzenko at Margaret.Kosherzenko@cms.hhs.gov or (215) 861-4288.

Sincerely,



James G. Scott, Director
Division of Program Operations

Enclosures

cc:
Emily McClellan

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER
2 1 0 1 1

2. STATE
Virginia

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR
CENTERS FOR MEDICARE & MEDICAID SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
3/01/2021

5. TYPE OF PLAN MATERIAL (Check One)

- NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION

42 CFR Part 431

7. FEDERAL BUDGET IMPACT

a. FFY 2021 \$ 0
b. FFY 2022 \$ 0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Pre-Print Page, Page 9

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Same as Box #8

10. SUBJECT OF AMENDMENT

Tribal Consultation

11. 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

Secretary of Health and Human Resources

13. TYPED NAME

Karen Kimsey

14. TITLE

Director

15. DATE SUBMITTED

2/23/2021

16. RETURN TO

Dept. of Medical Assistance Services
600 East Broad Street, #1300
Richmond VA 23219

Attn: Regulatory Coordinator

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED
April 7, 2021

18. DATE APPROVED 06/07/2021

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL
March 1, 2021

20. SIGNATURE OF REGIONAL OFFICIAL

21. TYPED NAME

James G. Scott

22. TITLE

Director, Division of Program Operations

23. REMARKS

Revision: HCFA-AT-80-38
May 22, 1980

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

Citation

42 CFR 431.12(b)
AT-78-90

1.4 State Medical Care Advisory Committee

There is an advisory committee to the Medicaid agency director on health and medical care services established in accordance with and meeting all the requirements of 42 CFR 413.12.

The State enrolls recipients in MCO, HIHP, HAHP, and/or PCCM programs. The State assures that it complies with 42 CFR 438.104(c) to consult with the Medical Care Advisory Committee in the review of marketing materials.

Tribal Consultation:

Section 1902(a)(73) of the Social Security Act requires a State in which one or more Indian Health Programs or Urban Indian Organizations furnish health care services to establish a process for the State Medicaid agency to seek advice on a regular, ongoing basis from designees of Indian health programs, whether operated by the Indian Health Service (IHS), Tribes or Tribal organizations under the Indian Self-Determination and Education Assistance Act (ISDEAA), or Urban Indian Organizations under the Indian Health Care Improvement Act (IHICIA) Consultation is required concerning Medicaid matters having a direct impact on these Indian health programs.

DMAS seeks advice on an ongoing basis from federally recognized tribes, Indian health programs, and Urban Indian organizations on matters related to Medicaid and CHIP programs. DMAS has identified a program designee as an advisory contact, through which, the dissemination of information will occur. Designees from each tribe, Indian health program, and Urban Indian organization receive written communication from DMAS about State Plan Amendments, waiver proposals, waiver extensions, waiver amendments, and waiver renewals before any of these documents are submitted to CMS. Tribes, Indian health programs, and Urban Indian organizations may request additional information, and may request meetings to discuss the proposed changes. DMAS invites these groups to request additional information, and/or offer comments on proposed changes, within 30 days of the notification of State Plan Amendments, waiver proposals, waiver extensions, waiver amendments, and waiver renewals. For emergency-related submissions such as a natural disaster, legislative mandate, etc., DMAS seeks information requests, comments, and/or proposed changes within 15 days of notification. The coordination of this consultation process was established through an email communication with designees from each tribe and Indian Health program on January 29, 2021. To maintain a cooperative channel of communication and informative dialogue between DMAS and the tribal organizations, the Agency sought out, and will continue to seek, advice on a regular, ongoing basis, via email, teleconference, and/or meetings.

TN No. 21-011
Supersedes
TN No. 03-07

Approval Date 06/07/2021

Effective Date 3/1/2021