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State/Territory Name: The United States Virgin Islands

State Plan Amendment (SPA) #: 20-0004 - Corrected

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

May 15, 2023

Gary Smith, Medicaid Director
Department of Human Services
Medical Assistance Program
1303 Hospital Ground
Knur Hansen Complex, Building A
St. Thomas, Virgin Islands 00802

Re: U.S. Virgin Islands State Plan Amendment (SPA) 20-0004

Dear Mr. Smith:

Enclosed is a corrected approval package for your U.S. Virgin Island State Plan Amendment (SPA) submitted under transmittal number (TN) 20-0004. This SPA proposes adding coverage and payment methodology of Personal Care Attendant Services (PCAP) in the U.S. Virgin Islands Medicaid program, approved initially on March 25, 2021. At the time of approval, the PHE's end was unknown. Now that the date is known, the CMS-179 and SPA pages are updated to reflect an effective date of May 12, 2023.

The package contains the corrected CMS-179 and the corrected SPA pages.

If you have any questions, please contact Ivelisse Salce at (212) 606-2411 or via email at Ivelisse.Salce@cms.hhs.gov.

Sincerely,

A large black rectangular redaction box covers the signature of James G. Scott.

James G. Scott, Director
Division of Program Operations

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTER FOR MEDICARE & MEDICAID SERVICES (CMS)	1. TRANSMITTAL NUMBER VI-20-0004	2. STATE U.S. Virgin Islands
	3. PROGRAM IDENTIFICATION: Title XIX of the Social Security Act (Medicaid)	

TO: REGIONAL ADMINISTRATOR Centers for Medicare & Medicaid Services (CMS) Department of Health and Human Services (HHS)	4. PROPOSED EFFECTIVE DATE May 12, 2023
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5. TYPE OF PLAN MATERIAL (Check One)

NEW STATE PLAN AMENDMENT TO 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 Section 1905(a)(24) & 42 CFR 440.167	7. FEDERAL BUDGET IMPACT
	a. FFY 2021 \$ <u>\$1,722,800</u>
	b. FFY 2022 \$ <u>\$2,296,000</u>

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1A Pages 09-11 Attachment 3.1B Pages 10-12	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) New
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10. SUBJECT OF AMENDMENT This amendment permanently adds coverage of Personal Care Attendant (PCA) services for both the Categorically and Medically Needy eligible populations. It provides for the methods and standards for establishing the payment rate.

11. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED

COMMENTS OF THE GOVERNOR'S OFFICE ENCLOSED


NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL 	16. RETURN TO Gary A. Smith Medicaid Director Department of Human Services 1303 Hospital Ground Knud Hansen Complex, Building A St. Thomas, United States Virgin Islands 00802
13. TYPE THE NAME Gary A. Smith	
14. TITLE Medicaid Director	
15. DATE SUBMITTED 9/17/2020	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED 09/17/2020	18. DATE APPROVED 03/25/2021
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PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL 05/12/2023	20. SIGNATURE OF REGIONAL OFFICIAL 
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21. TYPED NAME James G. Scott	22. TITLE James G. Scott, Director, Division of Program Operations
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23. REMARKS	
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State/Territory:

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

25. Home and Community Care for Functionally Disabled Elderly Individuals, as defined, described, and limited in Supplement 2 to Attachment 3.1-A, and Appendices AG to Supplement 2 to Attachment 3.1-A.

Provided Not Provided

26. Personal care services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for the mentally retarded, 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 setting.

Provided: State Approved (Not Physician) Service Plan Allowed
 Services Outside the Home Also Allowed
 Limitations Described on Attachment
 Not provided.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory United States Virgin Islands

**AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED
AND REMEDIAL CARE AND SERVICES PROVIDED TO THE
MEDICALLY NEEDY**

Services are provided in accordance with 42 CFR 440.167.

Services are provided in a resident's own home, in the home of a relative, or in a community-based setting home like a group home, home for the aged assisted living residence, or a supported housing complex where the individual has their own home or apartment.

There are no limitations on the services.

Personal care attendant services mean some or total assistance to an eligible member to perform activities of daily living (ADLs) and instrumental activities of daily living (IADLs) such as personal hygiene, dressing and feeding, and nutritional services in their homes or community-based residential settings. Such PCA services may include, but are not limited to:

- Assistance with nutrition and diet activities such as shopping, financial, meal preparation, and eating,
- Performance of household services such as changing bed linens, making beds, washing dishes, cleaning, dusting and vacuuming, and shopping for essential supplies,
- Assistance with primary personal care such as bathing, grooming, bathroom/toileting and bedpan routines, walking, transferring from bed to chair or wheelchair, positioning, and
- Assistance with self-administration of medications.
- Transportation to medical appointments and assistance in arranging and scheduling such appointments.

The services will be provided by providers enrolled in the VI Medicaid Program who have a minimum of a High School diploma or GED. PCAs will receive additional training and supervision from Registered Nurses employed by the Department of Human Services or the not-for-profit or private agency enrolled with the VI Medicaid Program to provide PCA services. The PCAs receive training once every two years. PCAs who are also CNAs, training is provided annually with recertification. PCAs are trained in assistance with ADLs and IADLs, including but not limited to lifting, turning, bathing, light household chores, etc. In addition to the above training, CNAs are trained in medication set-up, range of motion exercises, and wound care.

TN No. Supersedes New Approval Date 03/25/2021 Effective Date 05/12/2023

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AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED
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All persons providing PCA services must be subject to an ongoing program of Supervision. The supervision must consist of both administrative supervision and nursing. Supervision:

- **Administrative Supervision** is the responsibility of the agency providing PCA services. This supervision aims to ensure that PCA services are provided according to an individual care plan that ensures service delivery complies with all terms of the agreement between the client and the Department of Human Services or the contracting agency providing the PCA services.
- **Nursing Supervision** must ensure that the patient's needs are appropriately met by the PCA agency's care plan for the level, amount, frequency, and duration of PCA services and that the person providing such services is competently and safely performing the functions and tasks specified in the individual plan of care.

Nursing supervision must include:

- an orientation visit with the member to receive the PCA services and the worker at the time of initial case assignment to ensure that the worker providing PCA services understands his/her responsibilities in conjunction with the medical needs of the patient and has received all necessary instructions;
- ongoing evaluation of the patient's needs to determine if the level, amount, frequency, and duration of PCA services continue to be appropriate; and
- evaluation of the ability of the person providing the services and arranging for or providing necessary instructions to meet the medically related needs of the patient in keeping with the goals established by the member's plan of care.
- **VIDHS Oversight** must include periodic reviews of provider records and necessary supporting documentation. Problems identified are addressed through corrective action plans, and any necessary corrective action plans are monitored to ensure they are implemented.

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