

## **Table of Contents**

**State Name:** Virginia

**State Plan Amendment (SPA) #:** 11-01

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  
150 S. Independence Mall West  
Suite 216, The Public Ledger Building  
Philadelphia, Pennsylvania 19106-3499



**Region III/Division of Medicaid and Children's Health Operations**

SWIFT #032320114034

**MAY 31 2011:**

Gregg A. Pane, MD, MPA  
Director  
Department of Medical Assistance Services  
600 East Broad Street, Suite 1300  
Richmond, Virginia 23219

Dear Dr. Pane:

We have reviewed State Plan Amendment (SPA) 11-01, in which the Commonwealth prohibits payments to institutions or entities located outside of the United States in accordance with Section 6505 of the Affordable Care Act.

This SPA is acceptable. Therefore, we are approving SPA 11-01 with an effective date of January 1, 2011. Enclosed are the approved SPA page and signed CMS-179 form.

If you have further questions about this SPA, please contact William G. Cahill at (215) 861-4173.

Sincerely,

Ted Gallagher  
Associate Regional Administrator

Enclosures

cc: Ellen Ambrosini

|  |  |                      |
|--|--|----------------------|
| <b>TRANSMITTAL AND NOTICE OF APPROVAL OF<br/>STATE PLAN MATERIAL<br/>FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b> | 1. TRANSMITTAL NUMBER<br>1 1 - 0 1   | 2. STATE<br>Virginia |
|  | 3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) |                      |
| TO: REGIONAL ADMINISTRATOR<br>CENTERS FOR MEDICARE & MEDICAID SERVICES<br>DEPARTMENT OF HEALTH AND HUMAN SERVICES          | 4. PROPOSED EFFECTIVE DATE<br>January 1, 2011                              |                      |

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<br>42 CFR Part 433, Subpart D    | 7. FEDERAL BUDGET IMPACT<br>a. FFY 2011 \$ 0.0<br>b. FFY 2012 \$ 0.0                     |
| 8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT<br>Pre-Print Page 35.5 | 9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)<br>Same page |

10. SUBJECT OF AMENDMENT  
Prohibition on Payments Outside of the United States

11. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT<sup>2011</sup>       OTHER, AS SPECIFIED  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

Secretary of Health and Human Resources

|  |  |
|--|--|
| 12. SIGNATURE OF STATE AGENCY OFFICIAL     | 16. RETURN TO<br>Dept. of Medical Assistance Services<br>600 East Broad Street, #1300<br>Richmond VA 23219<br>Attn: Regulatory Coordinator |
| 13. TYPED NAME<br>Gregg A. Pane, M.D., MPA |  |
| 14. TITLE<br>Director                      |  |
| 15. DATE SUBMITTED<br>3-22-11              |  |

FOR REGIONAL OFFICE USE ONLY

|                              |                                  |
|------------------------------|----------------------------------|
| 17. DATE RECEIVED<br>3/22/11 | 18. DATE APPROVED<br>MAY 31 2011 |
|------------------------------|----------------------------------|

PLAN APPROVED - ONE COPY ATTACHED

|  |   |
|--|---|
| 19. EFFECTIVE DATE OF APPROVED MATERIAL<br>January 1, 2011 | 20. SIGNATURE OF REGIONAL OFFICIAL            |
| 21. TYPED NAME<br>Ted Gallagher                            | 22. TITLE<br>Associate Regional Administrator |

23. REMARKS



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

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SECTION 4 – GENERAL PROGRAM ADMINISTRATION

Citation

Section 1902(a)(80)  
of the Social Security  
Act, P.L. 111-148  
(Section 6505)

4.44 Medicaid Prohibition on Payments to  
Institutions or Entities Located Outside of  
the United States

X The State shall not provide any  
payments for items or services provided  
under the State Plan or under a waiver to  
any financial institution or entity located  
outside of the United States.

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TN No. 11-01  
Supersedes  
TN No. New Page

Approval Date

MAY 31 2011

Effective Date

01-01-11