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State Name: Virginia

State Plan Amendment (SPA) #: 14-01

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 Pages

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 #012720144036

MAR 21 2014

Cynthia B. Jones, Director
Department of Medical Assistance Services
600 East Broad Street, Suite 1300
Richmond, VA 23219

Dear Ms. Jones:

We have reviewed Virginia's State Plan Amendment (SPA) 14-01, Uniform Assessment Instrument Pediatric Guidance which proposes to incorporate into the State Plan guidance developed by the Department of Medical Assistance Services (DMAS) to aid preadmission screening teams in interpreting the Uniform Assessment Instrument when the applicant is younger than 21 years of age. The effect of this amendment will be to give guidance in order to create statewide uniform application of evaluation policies of applicants for long term care services.

This SPA is acceptable. Therefore, we are approving SPA 14-01 with an effective date of February 1, 2014. Enclosed are the approved SPA pages and signed CMS-179 form.

If you have further questions about this SPA, please contact Margaret Kosherzenko of my staff at 215-861-4288.

Sincerely,

/s/

Francis McClung
Associate Regional Administrator

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 1 4 0 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 February 1, 2014	

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 440.260	7. FEDERAL BUDGET IMPACT a. FFY 2014 \$ 0 b. FFY 2015 \$ 0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attach. 3.1-C, Suppl. 1, Pages 7 and 7.1 of 25	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Replaces Page 7 of 25 (TN 02-03); Add Page 7.1 of 25

10. SUBJECT OF AMENDMENT
Uniform Assessment Instrument Pediatric Guidance

11. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT²⁰¹⁴ 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 <i>/s/ Cynthia B. Jones</i>	16. RETURN TO Dept. of Medical Assistance Services 600 East Broad Street, #1300 Richmond VA 23219 Attn: Regulatory Coordinator
13. TYPED NAME Cynthia B. Jones	
14. TITLE Director	
15. DATE SUBMITTED 1-22-2014	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED JANUARY 27, 2014	18. DATE APPROVED MAR 21 2014
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL FEBRUARY 1, 2014	20. SIGNATURE OF REGIONAL ADMINISTRATOR <i>/s/ Francis McCullough</i>
21. TYPED NAME FRANCIS McCullough	22. TITLE Associate Regional Administrator / Director
23. REMARKS	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

STANDARDS ESTABLISHED AND METHODS USED TO ASSURE HIGH QUALITY OF CARE

- (j) Management of those with sensory, metabolic, or circulatory impairment with demonstrated clinical evidence of medical instability;
 - (k) Chemotherapy;
 - (l) Radiation;
 - (m) Dialysis;
 - (n) Suctioning;
 - (o) Tracheostomy care;
 - (p) Infusion Therapy;
 - (q) Oxygen.
- b. Even when an individual meets nursing facility criteria, provision of services in a noninstitutional setting shall be considered before nursing facility placement is sought.
- c. When assessing an individual, 21 years of age or younger, the teams who are conducting pre-admission screenings for long term care services shall utilize the UAI Pediatric Guidance for children as contained in DMAS' Medicaid Memo (dated October 3, 2012), entitled, "Development of Special Criteria for the Purposes of Pre-Admission Screening," on the DMAS website at

<https://www.ecm.viriniamedicaid.dmas.virginia.gov/WorkplaceXT/getContent?vslid=%7bc4fb1791-9693-409c-937d-5f78139d87b6%7d&impersonate=true&objectType=document&id=%7b1ea71a81-edbf-4fcb-8138-6afabef34b15%7d&objectStoreName=VAPRODOS1>

12 VAC 30-60-307 SUMMARY OF PRE-ADMISSION NURSING FACILITY CRITERIA

- A. An individual shall be determined to meet the nursing facility criteria when:
- 1. the individual has both limited functional capacity and requires medical or nursing management according to the requirements of 12 VAC 30-120-303, or
 - 2. the individual is rated dependent in some functional limitations, but does not meet the functional capacity requirements, and the individual requires the daily direct services or supervision of a licensed nurse that cannot be managed on an outpatient basis (e.g., clinic, physician visits, home health services).
- B. An individual shall not be determined to meet nursing facility criteria when one of the following specific care needs solely describes his or her condition:
- 1. An individual who requires minimal assistance with activities of daily living, including those persons whose only need in all areas of functional capacity is for prompting to complete the activity;

TN No. 14-01
Supersedes
TN No. 02-03

Approval Date **MAR 21 2014**

Effective Date 02/01/14

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

STANDARDS ESTABLISHED AND METHODS USED TO ASSURE HIGH QUALITY OF CARE

2. An individual who independently uses mechanical devices such as a wheelchair, walker, crutch, or cane;
3. An individual who requires limited diets such as a mechanically altered, low salt, low residue, diabetic, reducing, and other restrictive diets;
4. An individual who requires medications that can be independently self-administered or administered by the caregiver;
5. An individual who requires protection to prevent him from obtaining alcohol or drugs or to address a social or environmental problem;
6. An individual who requires minimal staff observation or assistance for confusion, memory impairment, or poor judgment;

TN No. 14-01
Supersedes
TN No. NEW PAGE

Approval Date **MAR 21 2014**

Effective Date 02/01/14