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State Name: Virginia

State Plan Amendment (SPA) #: 17-010

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Approved CMS-179
- 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 #082520174015

February 12, 2018

Jennifer S. Lee, M.D., Director Department of Medical Assistance Services 600 East Broad Street, Suite 1300 Richmond, VA 23219

Dear Dr. Lee:

The Centers for Medicare & Medicaid Services (CMS) has reviewed Virginia's State Plan Amendment (SPA) 17-010, Psychiatric Residential Treatment and Therapeutic Group Home Services. SPA 17-010 indicates that inpatient psychiatric facility services are provided for individuals under 22 years of age. The SPA also clarifies definitions, service components, staff requirements, and service limits for therapeutic group home services.

This SPA is acceptable. Therefore, we are approving SPA 17-010 with an effective date of July 1, 2017. 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 McCullough Associate Regional Administrator

Enclosures

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES	FORM APPROVED OMB No. 0938-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	
(FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PHOGHAM 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 July 1, 2017
5. TYPE OF PLAN MATERIAL (Check One)	
□ NEW STATE PLAN □ AMENDMENT TO BE CONS	DIDERED AS NEW PLAN
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME	NDMENT (Separate transmittal for each amendment)
6. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT a. FFY_2017 \$-0-
42 CFR Part 440	b. FFY_2018 \$ -0-
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
perfine Attachment 3.1A&B - amended pages 6.2,	OR ATTACHMENT (If Applicable)
CM 6.2a, 6.3, and 6.3a 12/4/17 Attachment 3.1Ap7	
The America Stinp	
10. SUBJECT OF AMENDMENT	
Psychiatric Residential Treatment and Therapeutic	c Group Home Services
· · ·	
11. GOVERNOR'S REVIEW (Check One)	
GOVERNOR'S OFFICE REPORTED NO COMMENT ²⁰¹⁷	OTHER, AS SPECIFIED
	Secretary of Health and Human Resources
12. SIGNATURE OF STATE AS ENOY OF FIGURE 1	16. RETURN TO
	Dept. of Medical Assistance Services
Cynthia B. Johes	600 East Broad Street, #1300
14. TITLE Director	Richmond VA 23219
15. DATE SUBMITTED	Atta: Degulator: Coordinator
	Attn: Regulatory Coordinator
FOR REGIONAL OF	18. DATE APPROVED
August 24, 2017	February 9, 2018
19. EFFECTIVE DATE OF APPROVED MATERIAL July 1, 2017	20. SIGNATURE OF REGIONAL OFFICIAL /S/
21. TYPED NAME	22. TITLE
Francis McCullough	Associate Regional Administrator
23. REMARKS	
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State of VIRGINIA

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY and MEDICALLY NEEDY

F. Therapeutic Group Home Services

Service Definition: Therapeutic group home services for children and adolescents younger than the age of 21 years shall provide therapeutic services to restore appropriate skills necessary to promote prosocial behavior and healthy living to include the restoration of coping skills, family living and health awareness, interpersonal skills, communication skills, and stress management skills. Therapeutic services also engage families and reflect family-driven practices that correlate to sustained positive outcomes post-discharge for youth and their family members. Each component of therapeutic group home services is provided for the direct benefit of the beneficiary, in accordance with the individual's needs and treatment goals identified in the individual's treatment plan, and for the purpose of assisting in the individual's recovery. These services are provided under 42 CFR 440.130(d) in accordance with the rehabilitative services benefit.

Service Component Definitions – Therapeutic Group Homes	Staff That Provide Service Components*	
Each component of therapeutic group home services is provided for the direct benefit of the beneficiary, in accordance with the individual's needs and treatment goals identified in the individual's treatment plan, and for the purpose of assisting in the individual's recovery.		
Assessment: the face-to-face interaction in which the provider obtains information from the child or adolescent, and parent, guardian, or other family member or members, as appropriate, about the child's or adolescent's mental health status. It includes documented history of the severity, intensity, and duration of mental health problems and behavioral and emotional issues.	LMHP LMHP-S LMHP-R LMHP-RP	
 Treatment Planning: development of a person-centered plan of care that is specific to the individual's unique treatment needs and acuity levels and includes: (a) individual and family strengths and personal traits that would facilitate recovery and opportunities to develop motivational strategies and treatment alliance; (b) diagnoses, symptoms, complaints, and complications indicating the need for admission; (c) a description of the functional level of the individual; (d) treatment objectives with short-term and long-term goals; (e) orders for medications, psychiatric, medical, dental and any special healthcare needs whether or not provided in the group home, treatments, restorative and rehabilitative services, activities, therapies, therapeutic passes, social services, community integration, diet, and special procedures recommended for the health and safety of the individual; (f) plans for continuing care, including review and modification to the plan of care; and (g) plans for discharge. 	LMHP LMHP-S LMHP-R LMHP-RP	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

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AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY and MEDICALLY NEEDY

Crisis Management: activities and interventions designed to rapidly manage a crisis. The activities and interventions include behavioral health care to provide immediate assistance to individuals experiencing acute behavioral health problems that require immediate intervention to stabilize and prevent harm and higher level of acuity. Activities shall include assessment and short term counseling designed to stabilize the individual. Individuals will be referred to long term	LMHP LMHP-S LMHP-R LMHP-RP
services once crisis has been stabilized.	
Individual and Group Therapy: application of principles, standards, and methods of the counseling profession in (i) conducting assessments and diagnoses for the purpose of establishing treatment goals and objectives and (ii) planning, implementing, and evaluating treatment plans using treatment interventions to facilitate human development and to identify and remediate mental, emotional, or behavioral disorders and associated distresses that interfere with mental health.	LMHP LMHP-S LMHP-R LMHP-RP
Family Therapy: counseling services involving the child's family and	LMHP
significant others to advance the treatment goals, when (1) the	LMHP-S
counseling with the family member and significant others is for the	LMHP-R
direct benefit of the beneficiary, (2) the counseling is not aimed at	LMHP-RP
addressing treatment needs of the beneficiary's family or significant	
others, and (3) the beneficiary is present except when it is clinically	
appropriate for the beneficiary to be absent in order to advance the	
beneficiary's treatment goals. Family therapy shall be aligned with the	
goals of the child's treatment plan. All family therapy services	
furnished are for the direct benefit of the beneficiary, in accordance	
with the beneficiary's needs and treatment goals identified in the	
beneficiary's treatment plan, and for the purpose of assisting in the	
beneficiary's recovery.	
Skills Restoration: Skills restoration is a face-to-face service to assist	LMHP, LMHP-RP, LMHP-S,
beneficiaries in the restoration of lost skills that are necessary to	QMHP-C, QMHP-E, or a QPPMH under the supervision
achieve the goals established in the beneficiary's plan of care. Services include assisting the beneficiary in restoring self-	of a QMHP-C or E.
management, interpersonal, communication, and problem solving	
skills through modeling, coaching, and cueing.	
*Provider qualifications are defined in Attachment 3.1 A&B Suppleme	nt 1 nagos 21 through 21.2

*Provider qualifications are defined in Attachment 3.1 A&B, Supplement 1, pages 31 through 31.3.

Limits:

1. Service authorization shall be required.

2. Individuals under 21 years of age qualifying under EPSDT may receive the services described in excess of any service limit, if services are determined to be medically necessary.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State of VIRGINIA AMOUNT, DURATION, AND SCOPE OF MEDICAL

AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY and MEDICALLY NEEDY

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State of VIRGINIA AMOUNT, DURATION, AND SCOPE OF MEDICAL

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Attachment 3.1-A (BERC) Revision: HFCA-PM-86-20 Page 7 of 9 September, 1986 OMB No. 0938-0193 STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State of VIRGINIA AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY Intermediate care facility services (other than such services in an institution 15. a. for mental diseases) for persons determined, in accordance with §1902(a)(31)(A) of the Act, to be in need of such care. With Limitations* X Provided: X No Limitations Not provided Including such services in a public institution (or distinct part thereof) for ь. the mentally retarded or persons with related conditions. П With Limitations* X Provided: X No Limitations \Box Not provided Inpatient psychiatric facility services for individuals under 22 years of age. 16. With Limitations* X Provided: X No Limitations Not provided Nurse-midwife services 17. X With Limitations* \mathbf{X} Provided: No Limitations Not provided Hospice care (in accordance with §1905(o) of the Act). 18. With Limitations* X Provided: Provided in accordance with the Affordable Care Act (§2302 of P.L. 111-148) X X No Limitations Not provided Description provided on attachment. Effective Date July 1, 2017 Approval Date February 9, 2018 TN No. _ 17-010_ Supersedes 0069P/0002P HCFA ID: 11-04 TN No.