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State Name: Virginia

**State Plan Amendment (SPA) #**: 18-024

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS-179
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 801 Market Street - Suite 9400 Philadelphia, Pennsylvania 19107



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

SWIFT #122820184022

February 1, 2019

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) 18-024, Update to Average Commercial Rate Calculation for Eastern Virginia Medical School. The purpose of SPA 18-024 is to revise the amount of supplemental payments to physicians affiliated with Eastern Virginia Medical School. Virginia SPA 18-024 will change the supplemental payment amount to the difference between the Medicaid payments otherwise made for physician services and 145% of Medicare rates.

This SPA is acceptable. Therefore, we are approving SPA 18-024 with an effective date of November 1, 2018. Enclosed is the approved SPA page 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** 

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER 2. STATE Virginia
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)
REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE  November 1, 2018
5. TYPE OF PLAN MATERIAL <i>(Check One)</i> 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	7. FEDERAL BUDGET IMPACT a. FFY 2019 \$ 41,758
42 CFR Part 440	a. FFY 2019 \$ 41,758 b. FFY 2020 \$ 45,554
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
Attachment 4.19-B, Page 6.4.1	OR ATTACHMENT (If Applicable)
	Same Page
10. SUBJECT OF AMENDMENT	
Update to Average Commercial Rate Calculation for Eastern Virginia Medical School	
11. GOVERNOR'S REVIEW (Check One)	
GOVERNOR'S OFFICE REPORTED NO COMMENT 2019	☑ OTHER, AS SPECIFIED
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	Secretary of Health and Human Resources
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	
	16. RETURN TO
13. TYPED NAME /S/	Dept. of Medical Assistance Services
Jennifer S. Lee, M.D.	600 East Broad Street, #1300
14. TITLE Director	Richmond VA 23219
15. DATE SUBMITTED 12/11/18	Attn: Sarah Samick
FOR REGIONAL OF	THE ACT OF THE PARTY OF THE ACT OF THE PARTY
17. DATE RECEIVED December 19, 2018	18. DATE APPROVED January 31, 2019
PLAN APPROVED - ON	TO CONTROL CON
	20. SIGNATURE OF REGIONAL OFFICIAL
November 1, 2018	/S/
(1888) (1884) 전 1888 (1884) (1884) (1884) (1884) (1884) (1884) (1884) (1884) (1884) (1884) (1884) (1884) (1884	22. TITLE
Francis McCullough	Associate Regional Administrator
23. REMARKS	

#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

### State of VIRGINIA

## METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATE-OTHER TYPES OF CARE

- 18.5. Supplemental payments for services provided by physicians affiliated with Eastern Virginia Medical Center Physicians.
- a. In addition to payment for physician services specified elsewhere in the State Plan, DMAS provides supplemental payments to physicians affiliated with Eastern Virginia Medical Center Physicians for furnished services provided on or after October 1, 2012. A physician affiliated with Eastern Virginia Medical Center Physicians is a physician who is employed by a publicly-funded medical school that is a political subdivision of the Commonwealth of Virginia, who provides clinical services through the faculty practice plan affiliated with the publicly funded medical school, and has entered into contractual arrangements for the assignment of payment in accordance with 42 CFR 447.10.
- b. Effective October, 1, 2012, the supplemental payment amount shall be the difference between the Medicaid payments otherwise made for physician services and 137% of the Medicare rates. The methodology for determining the Medicare Equivalent of the Average Commercial Rate is described in, Supplement 6, Attachment 4.19-B.
- c. Effective November 1, 2018, the supplemental payment amount shall be the difference between the Medicaid payments otherwise made for physician services and 145% of the Medicare rates. The methodology for determining the Medicare Equivalent of the Average Commercial Rate is described in, Supplement 6, Attachment 4.19-B.
- d. Supplemental payments shall be made quarterly, no later than 90 days after the end of the quarter.

TN No. 18-024 Approval Date 01/31/2019 Effective Date 11/01/18

Supersedes TN No. 15-012