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State/Territory Name: United States Virgin Islands

State Plan Amendment (SPA) #: 13-006

This file contains the following documents in the order listed:

- 1) NY Regional Office Approval Letter
- 2) CMS-179 form
- 3) Approved SPA Pages

Department of Health & Human Services
Centers for Medicare & Medicaid Services
26 Federal Plaza, Room 37-100 North
New York, NY 10278



June 18, 2014

Renee Joseph Rhymer
Medicaid Director
Department of Human Services
1303 Hospital Ground
Knud Hansen Complex, Building A
St. Thomas, United States Virgin Islands 00802

Dear Ms. Joseph-Rhymer:

We have completed our review of the submission of United States Virgin Islands State Plan Amendment (SPA) 13-006 which was received in our office on December 18, 2013 and find it acceptable for incorporation into United States Virgin Island's Medicaid State Plan. This SPA proposes to change the service limits for comprehensive tobacco cessation services provided to pregnant women, including both counseling and pharmacotherapy, without cost sharing. In accordance with Section 4107 of the Patient Protection and Affordable Care Act, this SPA will modify current coverage of smoking cessation counseling (SCC) services for all Medicaid recipients, including pregnant women, to include up to two quit attempts per 12 months, which will include up to 4 face-to-face counseling sessions per quit attempt; thus increasing the limits on counseling sessions from 6 to 8 per 12 months.

Please note that the approval date of this SPA is June 18, 2014 with an effective date of October 1, 2013. Copy of the approved State Plan pages and the signed CMS-179 are enclosed.

If you have any questions, or wish to discuss this further, please contact Ivelisse Salce of my staff at (212) 616-2411

Sincerely,

/s/

Michael Melendez
Associate Regional Administrator
Division of Medicaid and Children's Health

Cc: Cynthia Ruff, Special Assistant, DEHPG/CMCS/CMS

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 13-006	2. STATE US Virgin Islands
	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 October 1, 2013	

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 Section 4107 of P.L. 111-148	7. FEDERAL BUDGET IMPACT a. FFY <u>2014</u> \$ <u>\$100,000</u> b. FFY <u>2015</u> \$ <u>\$200,000</u>
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1A, page 10b Attachment 3.1B, page 2.A.1 Attachment 4.19B, page 2	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (if Applicable) Attachment 3.1A, page 10b NEW Attachment 3.1B, page 2.A.1 NEW Attachment 4.19B, page 2

10. SUBJECT OF AMENDMENT

Section 4107 of Public Law 111-148 requires states and territories to provide smoking cessation counseling to pregnant women. The U.S. Virgin Islands will comply with this mandate by providing the minimum required coverage including face-to-face counseling and tobacco cessation drugs to pregnant women. The territory will not make this service available to other non-mandatory populations at this time.

11. GOVERNOR'S REVIEW (Check One)

NEW STATE PLAN OTHER, AS SPECIFIED
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL <i>/s/</i>	16. RETURN TO Renée Joseph-Rhymer Director VI Medicaid Program Department of Human Services 1303 Hospital Ground Knud Hansen Complex, Building A St. Thomas, United States Virgin Islands 00802
13. TYPED NAME Renée Joseph-Rhymer	
14. TITLE Director VI Medicaid Program	
15. DATE SUBMITTED December 18, 2013	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED	18. DATE APPROVED June 18, 2014
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL October 01, 2013	20. SIGNATURE OF REGIONAL OFFICIAL <i>/s/</i>
21. TYPED NAME MICHAEL MELENDEZ	22. TITLE ASSOCIATE REGIONAL ADMINISTRATOR DIVISION OF MEDICAID AND STATE OPERATIONS

23. REMARKS

OFFICIAL

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Agency: US Virgin Islands

Attachment 3.1A
Page 10b

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

Tobacco Cessation Counseling Services for Pregnant Women

4. d 1) Face-to-Face Counseling Services provided:

(i) By or under supervision of a physician;

(ii) By any other health care professional who is legally authorized to furnish such services under State law and who is authorized to provide Medicaid coverable services other than tobacco cessation services; or

(iii) Any other health care professional legally authorized to provide tobacco cessation services under State law *and* who is specifically *designated* by the Secretary in regulations. (none are designated at this time)

2) Face-to-Face Tobacco Cessation Counseling Services for Pregnant Women

Provided: No limitations With limitations*

Please describe any limitations:

The benefit package consists of four (4) counseling sessions per quit attempt, with a maximum of two (2) quit attempts per 12 month period.

The US Virgin Islands is permanently exempt from the provision of freedom of choice of provider. VI Medicaid member must obtain primary care in the primary care provider site, such as the VI Department of Health or Federally Qualified Health Centers, located in the US Virgin Islands. Authorization for services outside of those facilities must be pre-authorized by the VI Medicaid Program, or its agent.

TN No. 13-006 Approval Date JUN 18 2014 Effective Date: October 1, 2013

Supersedes

TN No. NEW

New

OFFICIAL

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Agency: US Virgin Islands

Attachment 3.1B

Page 2.A.1

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

Tobacco Cessation Counseling Services for Pregnant Women

4. d 1) Face-to-Face Counseling Services provided:

(i) By or under supervision of a physician;

(ii) By any other health care professional who is legally authorized to furnish such services under State law and who is authorized to provide Medicaid coverable services other than tobacco cessation services; or

(iii) Any other health care professional legally authorized to provide tobacco cessation services under State law *and* who is specifically *designated* by the Secretary in regulations. (none are designated at this time)

2) Face-to-Face Tobacco Cessation Counseling Services for Pregnant Women

Provided: No limitations With limitations*

Please describe any limitations:

The benefit package consists of four (4) counseling sessions per quit attempt, with a maximum of two (2) quit attempts per 12 month period.

The US Virgin Islands is permanently exempt from the provision of freedom of choice of provider. VI Medicaid member must obtain primary care in the primary care provider site, such as the VI Department of Health or Federally Qualified Health Centers, located in the US Virgin Islands. Authorization for services outside of these facilities must be pre-authorized by the VI Medicaid Program, or its agent.

TN No. 13-006

Approval Date

JAN 18 2014

Effective Date: October 1, 2013

Supersedes

TN No. NEW

New

OFFICIAL

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Territory of the Virgin Islands

Attachment 4.19B

Page 2

Methods and Standards for Establishing Payment Rates – Other Types of Care

- 4) EPSDT
 - a) Examination, screening, testing and treatment rates paid per CPT code according to the fee schedule attached to each provider's Provider Agreement.

- 5) Family Planning
 - a) Reimbursement for services paid per CPT code according to the current Virgin Islands Medicare fee schedule (area-50) that can be found at www.cms.gov/physicianfeessched/.

- 6) Physicians and Other Practitioner's Services
 - a) For on-island and off-island services provided by physicians and other practitioners attendant to a referral from the Department of Human Services or its agent, reimbursement will be paid per CPT for both inpatient and outpatient services according to the current Virgin Islands Medicare fee schedule (www.cms.gov/physiciansfeessched/).

- 7) Home Health Services
 - a) Home Health Agency services are reimbursed based the Virgin Island Medicare fee schedule.
 - b) Home Health aide services are reimbursed based on the Virgin Island Medicare fee schedule.

- 8) Medical Equipment and Supplies
 - a) Reimbursed according to the Virgin Islands Medicare fee schedule.

- 9) Clinic Services
 - a) Reimbursed according to the current Virgin Island Medicare fee schedule by procedure code.

- 10) Dental Services
 - a) The fees in the referenced State's fee schedules are effective as of January 1, 2014 for services provided on or after that date and are published on the Department's fiscal agent's website at www.vimmis.com under the link for "rate code and information".

- 11) Tobacco Cessation Services
 - a) For on-island and off-island services provided by physicians and other practitioners attendant to a referral from the Department of Human Services or its agent, reimbursement will be paid per CPT for outpatient services according to the current Virgin Islands Medicare fee schedule (www.cms.gov/physiciansfeessched/).

TN No 13-006

Approval Date JUN 18 2014

Effective Date October 1, 2013

Supersedes

TN No. 13-005