



**Disabled and Elderly Health Programs Group**

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January 19, 2021

Gary Smith  
Medicaid Director  
Department of Human Services  
3011 Golden Rock Christiansted St.  
St Croix, VI 00820

Dear Mr. Smith:

I am writing to inform you that the Centers for Medicare & Medicaid Services (CMS) has reviewed your territory's Electronic Visit Verification (EVV) Compliance Survey submission and determined, based on the information you provided, that the U.S. Virgin Islands does not meet the requirements specified in section 1903(l) of the Social Security Act, as added by Section 12006(a) of the 21<sup>st</sup> Century Cures Act, for personal care services rendered in some or all applicable authorities available within your territory. The non-compliant program includes the Section 1905(a)(24) state plan personal care benefit.

The territory has indicated to CMS that it has been unable to address EVV implementation because of ongoing financial and infrastructure issues that resulted from the 2017 hurricanes and that continue due to the COVID-19 pandemic.

Because your territory has not demonstrated that it complies with all EVV requirements as specified by the statute, CMS must apply federal medical assistance percentage (FMAP) reductions to personal care service expenditures for the authorities and/or programs listed above, beginning in the first calendar quarter of 2021, consistent with the requirements of 1903(l)(1)(A) of the Act. For each quarter during which the territory is not compliant, FMAP will be reduced by 0.5 percentage points for calendar quarters in 2021; by 0.75 percentage points for calendar quarters in 2022; and by 1 percentage point for calendar quarters in 2023 and each year thereafter.

Because FMAP reductions are assigned each quarter, you are encouraged to review your survey information on a quarterly basis and update your response when you achieve compliance in any or all authorities to ensure FMAP reductions are lifted in a timely manner. Should the territory deliver personal care services in any additional Medicaid authorities other than listed above at a point in the future the territory is also responsible for updating its compliance survey. I have included the territory's current EVV Compliance Survey submission with this letter. If you need assistance, please feel free to contact the CMS EVV mailbox at [evv@cms.hhs.gov](mailto:evv@cms.hhs.gov).

Sincerely,

Alissa Mooney DeBoy, Director