



COMMONWEALTH of VIRGINIA

Office of the Governor

John E. Littel

Secretary of Health and Human Resources

February 8, 2022

Francis McCullough, Associate Regional Administrator
Centers for Medicare & Medicaid Services
801 Market Street, Suite 9400
Philadelphia, PA 19107-3134

Dear Mr. McCullough:

Attached for your review and approval is amendment 22-002, entitled "Non-Emergency Medical Transportation" to the Plan for Medical Assistance for the Commonwealth. I request that your office approve this change as quickly as possible.

Sincerely,

A handwritten signature in black ink that reads "John E. Littel".

John E. Littel

Attachment

cc: Karen Kimsey, Director, Department of Medical Assistance Services

Transmittal Summary

SPA 22-002

I. IDENTIFICATION INFORMATION

Title of Amendment: Non-Emergency Medical Transportation

II. SYNOPSIS

Basis and Authority: The Code of Virginia (1950) as amended, § 32.1-325, grants to the Board of Medical Assistance Services the authority to administer and amend the Plan for Medical Assistance. The Code of Virginia (1950) as amended, § 32.1-324, authorizes the Director of the Department of Medical Assistance Services (DMAS) to administer and amend the Plan for Medical Assistance according to the Board's requirements.

Purpose: This SPA will allow DMAS to add an attestation that DMAS meets all the minimum requirements for Non-Emergency Medical Transportation (NEMT) providers and individual drivers under Section 1902(a)(87) of the Social Security Act – also known as Section 209 of the Medicaid Coverage of Certain Medical Transportation Under the Consolidated Appropriations Act of 2021 (P.L. 116-260).

The minimum requirements include: (a) each provider and individual driver is not excluded from participation in any federal health care program and is not listed on the exclusion list of the Inspector General of the Department of Health and Human Services; (b) each such individual driver has a valid driver's license; (c) each such provider has in place a process to address any violation of a state drug law; and, (d) each such provider has in place a process to disclose to the state Medicaid program the driving history, including any traffic violations, of each such individual driver employed by such provider, including any traffic violations. DMAS has policies and procedures in place that meet these requirements.

Substance and Analysis: The section of the State Plan that is affected by this amendment is "Methods of Providing Transportation"

Impact: There are no costs associated with this SPA.

Tribal Notice: Please see attached.

Prior Public Notice: N/A

Public Comments and Agency Analysis: N/A



Lee, Meredith <meredith.lee@dmas.virginia.gov>

Tribal Notice-Non-Emergency Medical Transportation

1 message

Lee, Meredith <meredith.lee@dmas.virginia.gov>

Thu, Dec 30, 2021 at 12:28 PM

To: TribalOffice@monacannation.com, chiefannerich@aol.com, jerry.stewart@cit-ed.org, Pamelathompson4@yahoo.com, rappahannocktrib@aol.com, regstew007@gmail.com, Robert Gray <robert.gray@pamunkey.org>, tribaladmin@monacannation.com, samflyingeagle48@yahoo.com, chiefstephenadkins@gmail.com, WFrankAdams@verizon.net, bradbybrown@gmail.com, heather.hendrix@ihs.gov, tabitha.garrett@ihs.gov, Kara.Kearns@ihs.gov

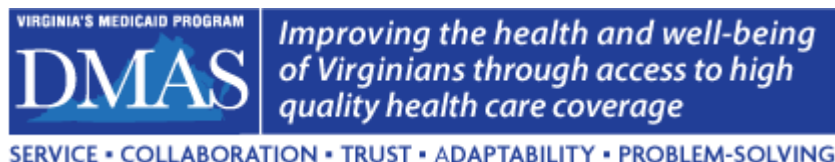
Dear Tribal Leaders and Indian Health Programs:

Attached is a Tribal Notice letter from Virginia Medicaid Director Karen Kimsey indicating that the Dept. of Medical Assistance Services (DMAS) plans to submit a State Plan Amendment (SPA) to the federal Centers for Medicare and Medicaid Services. This SPA will allow DMAS to add an attestation that DMAS meets all the minimum requirements for Non-Emergency Medical Transportation (NEMT) providers and individual drivers under Section 1902(a)(87) of the Social Security Act – also known as Section 209 of the Medicaid Coverage of Certain Medical Transportation Under the Consolidated Appropriations Act of 2021 (P.L. 116-260).

If you would like a copy of the SPA documents or proposed text changes, or if you have any questions, please let us know.

Thank you! -- Meredith Lee

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Meredith Lee
Policy, Regulations, and Manuals Supervisor
Division of Policy, Regulation, and Member Engagement
Department of Medical Assistance Services
600 East Broad Street
Richmond, VA 23219
meredith.lee@dmas.virginia.gov
(804) 371-0552



 **Tribal Notice letter_Amendment 21-033 SPA Non Emergency Medical Transportation, signed.pdf**
304K



COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

KAREN KIMSEY
DIRECTOR

SUITE 1300
600 EAST BROAD STREET
RICHMOND, VA 23219
804/786-7933
800/343-0634 (TDD)
www.dmas.virginia.gov

December 30, 2021

SUBJECT: Notice of Opportunity for Tribal Comment – State Plan Amendment related to Non-Emergency Medical Transportation

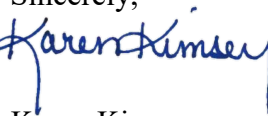
Dear Tribal Leader and Indian Health Programs:

This letter is to notify you that the Department of Medical Assistance Services (DMAS) is planning to amend the Virginia State Plan for Medical Assistance with the Centers for Medicare and Medicaid Services (CMS). Specifically, DMAS is providing you notice about a State Plan Amendment (SPA) that the Agency will file with CMS in order to add an attestation that DMAS meets all the minimum requirements for Non-Emergency Medical Transportation (NEMT) providers and individual drivers under Section 1902(a)(87) of the Social Security Act – also known as Section 209 of the Medicaid Coverage of Certain Medical Transportation Under the Consolidated Appropriations Act of 2021 (P.L. 116-260).

The tribal comment period for this SPA is open through January 29, 2022. You may submit your comments directly to Meredith Lee, DMAS Policy, Regulation, and Member Engagement Division, by phone (804) 371-0552, or via email: Meredith.Lee@dmas.virginia.gov. Finally, if you prefer regular mail you may send your comments or questions to:

Virginia Department of Medical Assistance Services
Attn: Meredith Lee
600 East Broad Street
Richmond, VA 23219

Please forward this information to any interested party.

Sincerely,

Karen Kimsey

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

METHODS OF PROVIDING TRANSPORTATION**12 VAC 30-50-530.**

1. DMAS will ensure necessary transportation for recipients to and from providers of covered medical services. DMAS shall cover transportation to covered medical services under the following circumstances:
 - A. Emergency air and ground ambulance transportation shall be covered as medical services under applicable federal Medicaid regulations. All other modes of transportation shall be covered as medical services under 42 CFR § 431.53 and any other applicable federal Medicaid regulations. These modes include, but shall not be limited to, non-emergency air travel, non-emergency ground ambulance, stretcher vans, wheelchair vans, common user bus (intra-city and inter-city), volunteer drivers, and taxicabs. DMAS may contract directly with providers of transportation or with brokers of transportation services, or both. DMAS may require that brokers not have a financial interest in transportation providers with whom they contract.
 - B. Medicaid provided transportation shall only be available when recipients have no other means of transportation available.
 - C. Recipients shall be furnished transportation services which are the most economical to adequately meet the recipients' medical needs.
 - D. Ambulances, wheelchair vans, taxicabs, and other modes of transportation must be licensed to provide services in the Commonwealth by the appropriate state and/or local licensing agency. Volunteer/registered drivers must be licensed to operate a motor vehicle in the Commonwealth and must maintain automobile insurance.
2. DMAS will ensure necessary non-emergency transportation for full-benefit, dual eligible recipients to obtain medically necessary, non-covered Medicare Part D prescription drugs.
3. DMAS attests that all the minimum requirements outlined in 1902(a)(87) of the Social Security Act are met.

TN No. 05-16Approval Date 11-14-05Effective Date 07-01-05

Supersedes

TN No. 05-11

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 2 — 0 0 0 2

2. STATE

V A

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL

SECURITY ACT XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

1/1/2022

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR 440.170

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2022 \$ 0
b. FFY 2023 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1-D, revised page 1

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

Same as box #7.

9. SUBJECT OF AMENDMENT

Non-Emergency Medical Transportation

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:
Secretary of Health and Human Resources

11. SIGNATURE OF STATE AGENCY OFFICIAL



12. TYPED NAME

Karen Kimsey

13. TITLE

Director

14. DATE SUBMITTED

12/30/2021

15. RETURN TO

Department of Medical Assistance Services
600 East Broad Street, #1300
Richmond VA 23219

Attn: Policy, Regulations, and Manuals Supervisor

FOR CMS USE ONLY

16. DATE RECEIVED

17. DATE APPROVED

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

21. TITLE OF APPROVING OFFICIAL

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

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