

Disabled and Elderly Health Programs Group

December 27, 2019

Mr. Drew Snyder
Division of Medicaid
550 High Street, Suite 1000
Walters Sillers Building
Jackson, MS 39201-1325

Dear Mr. Snyder:

I am writing to inform you that the Centers for Medicare & Medicaid Services (CMS) is granting approval of Mississippi's electronic visit verification (EVV) good faith effort exemption request. CMS has determined that your state's request is in accordance with section 1903(1)(4)(B) of the Social Security Act, as added by section 12006(a) of the 21st Century Cures Act (Cures Act). Specifically, your state has made a good faith effort to comply with EVV requirements by taking steps to update the existing EVV system in the state to comply with the Cures Act, which involves integrating waivers and services not previously included in the EVV system. The state has also conducted stakeholder engagement activities, including conducting meetings with stakeholders prior to its initial implementation of EVV and sending communications regarding the EVV system to beneficiaries with opportunities to provide feedback. The state plans to conduct a series of additional stakeholder meetings with beneficiaries and their families as they move forward with implementation of the remaining personal care services.

In addition, your state has encountered unavoidable delays when implementing its EVV system, including procurement issues with the existing contract which prohibited the state from issuing a contract extension and instead required the state to rebid the contract. Other delays included the prioritization of other system implementations in the state and the implementation of a new 1915(i) service requiring EVV.

Because your state has sufficiently demonstrated it has made a good faith effort to comply with EVV requirements and has encountered unavoidable delays, CMS will not apply federal medical assistance percentage (FMAP) reductions in calendar year 2020. Please be advised that the Cures Act provision on good faith effort exemptions does not provide CMS with authority to delay the FMAP reductions for more than one year. Therefore, if the state is not fully compliant by January 1, 2021, FMAP reductions will be applied beginning in the first quarter of 2021 and every quarter thereafter until the state achieves compliance. If you have any questions please email EVV@cms.hhs.gov or contact the CMS Atlanta Field Office.

Sincerely,



Ralph F. Lollar, Director
Division of Long Term Services and Supports