



*Commonwealth of Virginia*

*Virginia Department of Medical Assistance Services*

**FOR IMMEDIATE RELEASE**

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## **Virginia Medicaid Announces Retainer Payments for Qualified Community-based Providers**

*~Adult day health centers and day services to receive funds  
through June 30, 2020 ~*

**Richmond** – The Virginia Department of Medical Assistance Services (DMAS) announced today that it will make retainer payments to qualified Medicaid providers, preserving access to essential community-based services affected by the COVID-19 health emergency.

Virginia received federal approval to offer retainer payments for adult day health centers and providers that offer day services, including group day, community engagement, and community coaching. The proposed payments will assist providers that are closed or unable to offer their usual level of services due to social distancing orders and other restrictions in place to slow the spread of the novel coronavirus.

“We are pleased to be able to offer support to these critical providers who are so important to the quality of life of our Medicaid members,” said DMAS Director Karen Kimsey. “These providers are valuable partners as we work together to ensure meaningful choices for community-based care, and we look forward to continued progress on this goal.”

The retainer payments will be available for qualified providers through June 30, 2020. DMAS developed a reimbursement process designed to offer payments that reflect payment levels the providers would have received for services if the COVID-19 health emergency had not occurred.

An analysis by the Medicaid agency of service provider billing data determined that, on average, Medicaid service providers claim reimbursement for 65 percent of the amount of adult day services and day services they are authorized to provide each month. Using historical data from July 1, 2019, through December 31, 2019, DMAS developed a formula in which each qualifying provider will receive retainer payments for all authorized claims at 65 percent of the existing reimbursement rate. The retainer payments will only apply to services that cannot be provided because of COVID-19 restrictions.

“We are committed to a fair process that is not overly burdensome to providers in this challenging time,” said Tammy Whitlock, DMAS Deputy Director of Complex Care and Services. “We appreciate the ongoing collaboration with our providers and will continue to work with them as we move forward with this initiative.”

The Centers for Medicare and Medicaid Services (CMS) also approved a state proposal that allows providers flexibility in some cases to offer group day services, community engagement, and community coaching in residential settings, including licensed group homes, sponsored residential and supported living settings, and private unlicensed homes of individuals receiving services through a Developmental Disability Waiver. Providers must meet specific conditions to qualify for this flexibility.

Finally, CMS extended from 30 days to 60 days the permitted time for personal care, respite and companion attendants to perform their duties while a background check is underway, as long as the Medicaid member being served is over the age of 18.