



State Demonstrations Group

March 6, 2026

Christy Donohue
Commissioner
Bureau for Medical Services
West Virginia Department of Human Services
350 Capitol St., Room 251
Charleston, WV 25301

Dear Commissioner Donohue:

The Centers for Medicare & Medicaid Services (CMS) has completed its review of the Substance Use Disorder (SUD) Implementation Plan and Health Information Technology (HIT) Plan for West Virginia's section 1115(a) Medicaid demonstration, entitled "Evolving West Virginia Medicaid's Behavioral Health Continuum of Care" (Project Number 11-W-00307/3). We have determined that the plans are consistent with the requirements outlined in the demonstration's special terms and conditions (STCs) and are therefore approving the SUD Implementation Plan and Health IT Plan. A copy of the approved SUD Implementation Plan and Health IT Plan are enclosed and, hereby, incorporated into the STCs as Attachment C.

States are responsible for following all applicable federal law and regulations when they claim and use federal Medicaid funds and must fully comply with all applicable Medicaid statutes and regulations under a section 1115 demonstration, except where specific provisions have been expressly waived or identified as not applicable for that demonstration. This obligation includes all requirements in title XIX of the Act and implementing regulations governing provider screening and enrollment activities, pre- and post-payment review claiming, payment methodologies and rate-setting, utilization controls, and program integrity including processes to identify, investigate, and refer suspected fraud, and methods to receive complaints and identify questionable practices. States must maintain effective systems and safeguards to prevent, detect, and address any fraud, waste, or abuse (FWA) in the delivery of and payment for Medicaid services, including referrals to law enforcement when appropriate.

States should have heightened monitoring and oversight mechanisms in place featuring robust internal controls to identify and remediate all vulnerabilities (including, but not limited to, FWA and beneficiary access issues) inherent in service areas approved as part of a demonstration. At any time, CMS may request that the state provide a plan detailing the state's systems and safeguards to prevent, detect, and address any FWA relative to this demonstration. Failure to meet program integrity obligations under federal statutes and regulations or under the terms and conditions of this demonstration approval may result in compliance actions or other enforcement measures that could include requirements to develop and implement corrective action plans, withholdings, deferrals, disallowances, and termination of demonstration authority.

We look forward to our continued partnership on the West Virginia section 1115(a)

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demonstration. If you have any questions, please contact your CMS project officer, Ms. Jamie John, at Jamie.John@cms.hhs.gov.

Sincerely,

Angela D. Garner
Director
Division of System Reform Demonstrations

Enclosure

cc: Nicole Guess, State Monitoring Lead, Medicaid and CHIP Operations Group