



Exempt Action Final Regulation Agency Background Document

Agency name	DEPT OF MEDICAL ASSISTANCE SERVICES
Virginia Administrative Code (VAC) citation	12 VAC 30 -141-660
Regulation title	Family Access to Medical Insurance Security Plan (FAMIS)
Action title	CHIPRA FAMIS Managed Care
Final agency action date	
Document preparation date	

When a regulatory action is exempt from executive branch review pursuant to § 2.2-4002 or § 2.2-4006 of the Virginia Administrative Process Act (APA), the agency is encouraged to provide information to the public on the Regulatory Town Hall using this form.

Note: While posting this form on the Town Hall is optional, the agency must comply with requirements of the Virginia Register Act, the *Virginia Register Form, Style, and Procedure Manual*, and Executive Orders 36 (06) and 58 (99).

Summary

Please provide a brief summary of all regulatory changes, including the rationale behind such changes. Alert the reader to all substantive matters or changes. If applicable, generally describe the existing regulation.

The state regulation that is affected by this action is the FAMIS Assignment to Managed Care (12 VAC 30-141-660).

Currently, children enrolled in FAMIS who are assigned to a managed care health insurance plan (MCHIP) in an area where there is only one contracted MCHIP have no option other than coverage through that one MCHIP.

This action implements a mandate in Section 403 of the Children's Health Insurance Plan Reauthorization Act (CHIPRA) of 2009 (Public Law 111-3) that applies certain managed care quality safeguards to the federal State Child Health Insurance Plan. This action allows those children who are assigned to a MCHIP in an area where there is only one contracted MCHIP to request reassignment to the traditional fee-for-service delivery and payment system as an

alternative. In general Section 2103(f) of Social Security Act (42 U.S.C.1397bb(f) is amended by adding at the end the following paragraph:

“(3) COMPLIANCE WITH MANAGED CARE REQUIREMENTS.— The State child health plan shall provide for the application of subsections (a)(4), (a)(5), (b), (c), (d), and (e) of section 1932 (relating to requirements for managed care) to coverage, State agencies, enrollment brokers, managed care entities, and managed care organizations under this title in the same manner as such subsections apply to coverage and such entities and organizations under title XIX.”

The *Code of Virginia* (1950) as amended, §32.1-351, grants to the Board of Medical Assistance Services the authority to administer and amend the Family Access to Medical Security Insurance Plan (FAMIS). The *Code of Virginia* (1950) as amended, § 32.1-351(K), authorizes the Director of DMAS to administer and amend the Family Access to Medical Security Insurance Plan according to the Board’s requirements. The Medicaid authority as established by § 2101 of the *Social Security Act* [42 U.S.C. 1397aa] provides governing authority for payments for services.

This action meets the exemption provided by *Code of Virginia* § 2.2-4006 (A)(4)(c) because it conforms 12VAC 30-141-660 to the requirements of the Federal Statute and does not materially differ. Additionally the Agency has no discretion concerning the implementation of this federal requirement.

Statement of final agency action

Please provide a statement of the final action taken by the agency including (1) the date the action was taken, (2) the name of the agency taking the action, and (3) the title of the regulation.

I hereby approve the foregoing Regulatory Review Summary with the attached amended State Plan pages for Family Access to Medical Security Insurance Security Plan: CHIPRA FAMIS Managed Care (12VAC30-141-660) and adopt the action stated therein. I certify that this final regulatory action has completed all the requirements of the Code of Virginia § 2.2-4012, of the Administrative Process Act. I hereby certify that these regulations are full, true, and correctly dated.

Date

Patrick W. Finnerty, Director
Dept. of Medical Assistance Services

Family impact

Assess the impact of this regulatory action on the institution of the family and family stability.

These changes do not strengthen or erode the authority or rights of parents in the education, nurturing, and supervision of their children; or encourage or discourage economic self-sufficiency, self-pride, and the assumption of responsibility for oneself, one's spouse, and one's children and/or elderly parents. It does not strengthen or erode the marital commitment, but may decrease disposable family income depending upon which provider the recipient chooses for the item or service prescribed.