

State Plan under Title XIX of the Social Security Act**State/Territory:** Virginia**Section 1905(a)(9) Clinic Services**

The state provides coverage for this benefit as defined at section §1905(a)(9) of the Social Security Act (the Act) and 42 C.F.R. 440.90 and as described as follows:

General Assurances**[Select all three checkboxes below.]**

- ☒ The state assures services are furnished by a facility that is not part of a hospital in accordance with 42 C.F.R. 440.90.
- ☒ The state assures that services are furnished by facilities that are organized and operated to provide medical care to outpatients in accordance with 42 C.F.R. 440.90.
- ☒ The state assures that services are furnished under the direction of a physician or dentist in accordance with 42 C.F.R. 440.90(a).

Types of Clinic Services and Limitations in Amount, Duration, or Scope**[Select if applicable, describe below, and indicate if limits may be exceeded based upon state determined medical necessity criteria.]**

- ☒ Limitations apply to all services within the benefit category.

Providers must be enrolled as a clinic provider type. Clinic services are limited to outpatient medical and behavioral health services.

The following services are not clinic services: dental, pharmacy, home health, hospice, physical therapy, occupational therapy, speech language pathology, transportation, 1915(c) waiver services, and community mental health services. To provide these non-clinic services, the provider must enroll as the

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correct provider type and abide by the state plan requirements for those services.

Types of Clinics and Services:

[Select all that apply and describe below as applicable]**Behavioral Health Clinics [Describe the types of behavioral health clinics below and select below if applicable.]:****Limitations apply only to this clinic type within the benefit category. [Describe below and indicate if limits may be exceeded based upon state determined medical necessity criteria.]**

Behavioral health clinics must be enrolled as a clinic provider type and meet applicable state licensing standards for behavioral health clinics. Behavioral health clinic services are limited to Opioid Treatment Programs and Office-Based Addiction Treatment services, provided that the requirements in Attachment 3.1 A&B, Supplement 1, pages 45 and 47 et seq. are met, and outpatient psychiatric services when provided by a qualified therapist as defined below:

- A licensed physician who has completed three years of post-graduate residency training in psychiatry; or
- An individual licensed or registered by one of the boards administered by the Department of Health Professions to provide psychotherapy

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services including an LMHP, LMHP-R, LMHP- RP, or LMHP-S, as defined in Attachment 3.1A&B, Supplement 1, pages 31 and 31.1.

Behavioral health clinic services do not include community mental health services.

IHS and Tribal Clinics **[Select below if applicable.]**:

Limitations apply only to this clinic type within the benefit category.
[describe below and indicate if limits may be exceeded based upon state determined medical necessity criteria].

Tribal facilities enrolled as a clinic provider type may provide any clinic service as defined in Attachment 3.1-A&B, Supplement 1, page 15.3.

Renal Dialysis Clinics **[Select below if applicable.]**:

Limitations apply only to this clinic type within the benefit category.
[Describe below and indicate if limits may be exceeded based upon state determined medical necessity criteria.]

Renal dialysis clinics must comply with the requirements of 42 CFR 441.40.

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Other Clinics [Describe the types of clinics, if any limitations apply, and select below if applicable.]:

Health department clinics, ambulatory surgery clinics, and family planning clinics.



Limitations apply only to this clinic type within the benefit category. [Describe below and indicate if limits may be exceeded based upon state determined medical necessity criteria.]

Health department clinics are operated by state or local governments. Ambulatory surgery clinics must comply with the requirements of 42 CFR Part 416 and the state plan requirements for outpatient services. Family planning clinics must comply with the requirements of 42 CFR 441.20 and the state plan requirements for family planning services.

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Four Walls Exceptions

The state assures that the following services may be furnished outside of the clinic. **[Select the first and second checkbox; Do not select the second checkbox if the state does not enroll IHS or Tribal facilities as providers of clinic services.]**

- ☒ Services furnished outside the clinic, by clinic personnel under the direction of a physician, to an eligible individual who does not reside in a permanent dwelling or does not have a fixed home or mailing address in accordance with 42 C.F.R. 440.90(b).
- ☒ Services furnished outside a clinic that is a facility of the Indian Health Service, whether operated by the Indian Health Service (IHS) or by a Tribe or Tribal organization (as authorized by the Indian Self-Determination and Education Assistance Act (ISDEAA), Pub. L. 93-638), by clinic personnel under the direction of a physician in accordance with 42 C.F.R. 440.90(c).

The state elects to cover the following services outside of the clinic **[Select all that apply.]**

- ☐ Services furnished outside of a clinic that is primarily organized for the care and treatment of outpatients with behavioral health disorders, including mental health and substance use disorders, by clinic personnel under the direction of a physician in accordance with 42 C.F.R. 440.90(d) **[Describe the types of behavioral health clinics such exception applies to below.]**

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☐ Services furnished outside of a clinic that is located in a rural area and is not a rural health clinic (as referenced in section §1905(a)(2)(B) of the Act and 42 C.F.R. 440.20(b) of this subpart) by clinic personnel under the direction of a physician in accordance with 42 C.F.R. 440.90(e) **[Select one of the checkboxes below and describe the definition of a rural area that applies to this exception.]**

☐ A definition adopted and used by a federal governmental agency for programmatic purposes **[Describe below.]**

☐ A definition adopted by a state governmental agency with a role in setting state rural health policy **[Describe below.]**

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The state attests that **[Select the checkbox if the state elects to cover services outside of a clinic that is located in a rural area.]**:

- ☐ The selected definition of a rural area best captures the population of rural individuals that meets more of the four criteria that mirror the needs and barriers to access experienced by individuals who are unhoused:
- The population experiences high rates of behavioral health diagnoses or difficulty accessing behavioral health services;
 - The population experiences issues accessing services due to lack of transportation;
 - The population experiences a historical mistrust of the health care system; and
 - The population experiences high rates of poor health outcomes and mortality.

Additional Benefit Description (Optional)

At its option the state may provide additional descriptive information about the benefit, beyond what is included in the federal statutory and regulatory definitions and descriptions. **[Describe below.]**:

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