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# State/Territory Name: MO

# State Plan Amendment (SPA) #: 19-0018

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 601 East 12<sup>th</sup> Street, Suite 355 Kansas City, Missouri 64106-2898



### Medicaid & CHIP Operations Group

December 9, 2019

Jennifer Tidball, Acting Director Missouri Department of Social Services Broadway State Office Building P.O. Box 1527 Jefferson City, MO 65102-1527

Dear Ms. Tidball:

On October 9, 2019, the Centers for Medicare & Medicaid Services (CMS) received Missouri's State Plan Amendment (SPA) transmittal #19-0018. The purpose of this SPA is to add a procedure code to cover certain emergency services when a participant is treated on-site rather than being transported to an emergency department.

SPA #19-0018 was approved December 6, 2019, with an effective date of January 1, 2020, as requested by the state. Enclosed is a copy of the CMS-179 summary form, as well as the approved pages for incorporation into the Missouri State Plan.

If you have any questions regarding this amendment, please contact Karen Hatcher or Deborah Read at (816) 426-5925.

Sincerely,

12/9/2019

James G. Scott, Director Division of Program Operations

Signed by: James G. Scott -S

Enclosure

cc: Todd Richardson, Medicaid Director Amanda Clutter Marissa Crump Nanci Nikodym

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION		TRANSMITTAL NUMBER:	2. STATE
		0018	мо
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE	
		01-01-2020	
5. TYPE OF PLAN MATERIAL (Check One);			
NEW STATE PLAN     AMENDMENT TO BE CONSIDERED AS NEW PLAN     AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION:		7. FEDERAL BUDGET IMPACT; a. FFY 19_ \$ <u>0</u> b. FFY 20_ \$ <u>(1,077,444)</u>	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:		9. PAGE NUMBER OF THE SUPERSEDES PLAN SECTION OR ATTACHMENT (ICApplicable):	
Attachment 3.1-A page 18e * 12aa* Attachment 4.19B, Page 1aaaaaaa (New Page) *		Attachment 3.1-A, Page 12aa *	
This amendment adds a procedure code to cover certain emergency services when a participant is treated on-site rather than being transported to an emergency department.  II. GOVERNOR'S REVIEW (Check One)  GOVERNOR'S OFFICE REPORTED NO COMMENT GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED: NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTA).			
12. SIGNATURE OF STATE AGENEY ØFEICIAL:	I6: RETURN TO:		
13. TYPE NAME: Jenni fertidball 14. TITLE: Acting Director	MO HealthNet Division Post Office Box 6500 Jefferson City, MO 65102-6500		
15. DATE SUBMITTED: 10-7-19			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: October 9, 2019	18: DATE APPROVED: December 6, 2019		
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: January 1, 2020		ATURE OF REGIONAL OFFICIAL:	
21. TYPED NAME: James G. Scott	22. TITLE: Director, Division of Program Operations		
23. REMARKS:		*	·

\* Pen and Ink changes per state responses received 12.2.19.

FORM HCFA-179 (07-92)

State: Missouri 6.d. Other Practitioner's Services

### Physician Assistant

Physician Assistant services are covered within their scope of practice defined by state law. Physicians Assistants are supervised by licensed physicians, and supervision of the Physician Assistant is included in the scope of practice for each supervising licensed practitioner. Each supervising licensed practitioner shall assume professional responsibility for the services provided by the Physician Assistant.

#### Assistant Physician

Assistant Physician services are covered within their scope of practice defined by state law. Assistant Physicians are supervised by licensed physicians, and supervision of the Assistant Physician is included in the scope of practice for each supervising licensed practitioner. Each supervising licensed practitioner shall assume professional responsibility for the services provided by the Assistant Physician.

### **Emergency Medical Technicians**

Licensed emergency medical technicians (EMT) are covered within their scope of practice defined by state law.

#### **Paramedics**

Licensed paramedics are covered within their scope of practice defined by state law.

#### **Other Licensed Practitioners**

#### <u>Ambulance</u>

Reimbursement for services is made on a fee-for-service basis. The maximum allowable fee for a unit of service has been determined by MO HealthNet to be a reasonable fee, consistent with efficiency, economy, and quality of care. The state payment for each service will be the lower of:

- (1) The provider's actual charge for the services; or
- (2) The Medicaid maximum allowable amount per unit of service.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of ambulance services. The agency's fee schedule rate was set as of January 1, 2020 and is effective for services provided on or after that date. All rates are published at <a href="http://www.dss.mo.gov/mhd/providers/index.htm">http://www.dss.mo.gov/mhd/providers/index.htm</a>.