

## **Table of Contents**

**State/Territory Name: MO**

**State Plan Amendment (SPA) #: 23-0020**

This file contains the following documents in the order listed:

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

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Financial Management Group

October 30, 2023  
Robert Knodell, Director  
Missouri Department of Social Services  
P.O. Box 1527  
Jefferson City, MO 65102-1527

RE: Missouri Medicaid State Plan Amendment TN: 23-0020

Dear Mr. Knodell:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 23-0020. The purpose of this SPA is to allow coverage for reserve bed days for state operated and private Psychiatric Residential Treatment Facilities.

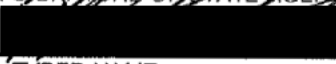
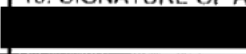
We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C. This is to inform you that Medicaid State plan amendment is approved effective October 1, 2023. We are enclosing the CMS-179 and the amended plan pages.

If you have any additional questions or need further assistance, please contact Fred Sebree at [fredrick.sebree@cms.hhs.gov](mailto:fredrick.sebree@cms.hhs.gov).

Sincerely,



Rory Howe  
Director

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b> <b>FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>		1. TRANSMITTAL NUMBER <u>2 3 0 0 2 0</u>	2. STATE <u>MO</u>
		3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE <b>October 1, 2023</b>	
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 447, 1902(a)(2), and 1903 of the Social Security Act		6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>2024</u> \$ <u>14,017</u> b. FFY <u>2025</u> \$ <u>18,689</u>	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT 4.19 C - Page 9 - New Material		8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)	
9. SUBJECT OF AMENDMENT The purpose of this amendment is to allow coverage for providers when MO HealthNet participants temporarily leave the facility for medical leave days (both physical and mental health related) and for therapeutic leave days (for purposes of transition from PRTF to designated placement).			
10. GOVERNOR'S REVIEW (Check One) <input checked="" type="radio"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <sup>SLV</sup> <input type="radio"/> OTHER, AS SPECIFIED: <input type="radio"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="radio"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
11. SIGNATURE OF STATE AGENCY OFFICIAL 		15. RETURN TO MO HealthNet Division P.O. Box 6500 Jefferson City, MO 65102	
12. TYPED NAME Robert J. Knodell			
13. TITLE Director			
14. DATE SUBMITTED <u>9-5-23</u>			
<b>FOR CMS USE ONLY</b>			
16. DATE RECEIVED <u>9/6/2023</u>		17. DATE APPROVED <b>October 30, 2023</b>	
<b>PLAN APPROVED - ONE COPY ATTACHED</b>			
18. EFFECTIVE DATE OF APPROVED MATERIAL <u>10/1/2023</u>		19. SIGNATURE OF APPROVING OFFICIAL 	
20. TYPED NAME OF APPROVING OFFICIAL Rory Howe		21. TITLE OF APPROVING OFFICIAL Director, FMG	
22. REMARKS  10/12/2023 - State authorizes update in block 15 to add MO HealthNet Division info			

State: Missouri

### Psychiatric Residential Treatment Facility Reserve Bed Days

The state provides coverage, to be paid at 50% of the per diem rate, for reserve bed days for state operated and private Psychiatric Residential Treatment Facilities (PRTF). Medical leave days include inpatient hospital medical/surgical stays and inpatient hospital psychiatric stays. Five days of leave are allowed for medical/surgical stays per treatment episode, and five days of leave are allowed for inpatient psychiatric stays per treatment episode. Therapeutic leave is for purposes of transition from the PRTF to the designated placement and must be included in the participant's plan of care. Ten days of leave are allowed for therapeutic leave per treatment episode.

State Plan TN No. 23-0020  
Supersedes TN No. New Material

Effective Date: October 1, 2023  
Approval Date: October 30, 2023