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State/Territory Name: Missouri

State Plan Amendment (SPA) #: 25-0007

This file contains the following documents in the order listed:

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106

CENTERS FOR MEDICARE & MEDICAID SERVICES
CENTER FOR MEDICAID & CHIP SERVICES

Medicaid and CHIP Operations Group

March 9, 2026

Joshua Moore
Director
MO HealthNet Division
Missouri Department of Social Services
P O Box 6500
Jefferson City, MO 65102-6500

Re: Missouri State Plan Amendment MO-25-0007

Dear Director Moore:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number MO-25-0007. This SPA is to add Applied Behavior Analysis (ABA) and Transcranial Magnetic Stimulation (TMS) services to the Comprehensive Substance Treatment and Rehabilitation (CSTAR) program.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act implementing regulations 42 CFR §§ 440.130(c)-(d) and 447.200. This letter is to inform you that Missouri Medicaid SPA MO-25-0007 was approved on March 9, 2026, with an effective date of July 1, 2025.

If you have any questions, please contact Rhonda Gray at (410) 786-6140 or via email at Rhonda.Gray@cms.hhs.gov.

Sincerely,

Wendy E. Hill Petras
Acting Director, Division of Program Operations

cc: Marissa Crump, Missouri Medicaid
Glenda Kremer, Missouri Medicaid

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

FORM APPROVED
OMB No. 0938-0193

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL

FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES

1. TRANSMITTAL NUMBER: 25 — 0007

2. STATE: MO

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT: (●) XIX ( ) XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
July 1, 2025

5. FEDERAL STATUTE/REGULATION CITATION
42 CFR 447 Subpart C

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 25 $ 0
b. FFY 26 $ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Attachment 3.1-A 17aaaaa, 17aaaaaa-2, 17aaaaaa-3
Attachment 4.19-B 6b

Attachment 3.1-A, Page 16c (NEW)
Attachment 3.1-A, Page 16d (NEW)
Attachment 3.1-A, Page 17aaa-3 (NEW)
Attachment 3.1-A, Page 17aaaa-11a (NEW)
Attachment 4.19-B, Page 4dddd (NEW)

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT *(If Applicable)*
~~Attachment 3.1-A 17aaaaa, 17aaaaaa-2, 17aaaaaa-3~~
~~Attachment 4.19-B 6b~~

Attachment 3.1-A, Page 17aaaaa (TN:23-0010)
Attachment 3.1-A, Page 17aaaaaa-2 (TN:23-0010)
Attachment 3.1-A, Page 17aaaaaa-3 (TN:23-0010)
Attachment 4.19-B, Page 6b (TN:22-0005)

9. SUBJECT OF AMENDMENT

To add Applied Behavior Analysis (ABA) and Transcranial Magnetic Stimulation (TMS) services to the Comprehensive Substance Treatment and Rehabilitation (CSTAR) program.

10. GOVERNOR'S REVIEW *(Check One)*

(●) GOVERNOR'S OFFICE REPORTED NO COMMENT JAF
( ) COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
( ) NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
( ) OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME
Jessica Bax

13. TITLE
DSS Director

14. DATE SUBMITTED 7-28-25

15. RETURN TO
MO HealthNet Division
P.O. Box 6500
Jefferson City, MO 65109

FOR CMS USE ONLY

16. DATE RECEIVED
July 29, 2025

17. DATE APPROVED
March 9, 2026

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
July 1, 2025

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL
Wendy E. Hill Petras

21. TITLE OF APPROVING OFFICIAL
Acting Director, Division of Program Operations

22. REMARKS

Box 7 and 8: State authorized pen and ink change on 3/6/26
Block 7: State Approved pen and ink change on 3/9/26

13.c. Preventive Services

Applied Behavior Analysis (ABA)	ABA therapy consists of approaches and interventions that employ positive reinforcement to teach new abilities, improve a variety of existing skills, and reduce maladaptive behaviors. ABA services are provided in accordance with 42 CFR 440.130(c). ABA therapy seeks to: • improve social skills, • improve communication skills, • increase independent living, • reduce maladaptive behaviors, and • improve life satisfaction. There are two primary types of ABA services: Assessment Services and Adaptive Behavior Treatment services. Assessment Services analyze the situation and lead to recommendations for how to address the issues. The assessment also includes the following components: • A Behavior Identification Assessment includes administration of standardized and non-standardized tests, detailed behavioral history, patient observation and caregiver interview, interpretation of test results, discussion of findings and recommendations with the primary guardian(s)/caregiver(s) and preparation of the report. • Behavior Identification Supporting Assessment-Observational is the observational assessment may be required to finalize or fine-tune the baseline results and plan of care initiated during the identification assessment. • A Behavior Identification Supporting Assessment-Exposure includes the QHCP's interpretation of results, discussion of findings and recommendations with primary caregiver(s) and preparation of report. Adaptive Behavior Treatment addresses the individual's specific target problems and treatment goals as defined in previous assessments. Adaptive behavior treatment is based on principles including analysis and alteration of contextual events and motivating factors, stimulus-consequence strategies, replacement behavior and monitoring of outcomes. Goals of adaptive behavior treatment may include reduction of repetitive and aberrant behavior, improved communication, and social functioning. Adaptive Behavior Treatment may occur in multiple sites and social settings (e.g., controlled treatment programs with individual alone or in a group setting, home, or other natural environment.	A Behavior Identification Assessment is completed by the physician or Licensed Behavior Analyst (LBA). A Behavior Identification Supporting Assessment-Observational by a Registered Behavior Technician (RBT) under the direction of an LBA or Licensed Assistant Behavior Analyst (LaBA). This service can also be provided by a LBA or LaBA. A Behavior Identification Supporting Assessment-Exposure is administered by the RBT under the direction of the LBA or LaBA. This service can also be provided by a LBA or LaBA.

13.c. Preventive Services

Qualifications of Practitioners for Applied Behavior Analysis are as follows:

All Applied Behavior Analysis services provided under the Preventive Services authority must be provided by qualified practitioners through a Comprehensive Substance Treatment and Rehabilitation services or Certified Community Behavioral Health Clinic services MO HealthNet-enrolled provider.

Behavior Technician
Behavior Technicians are paraprofessionals who practice under the supervision of a licensed psychologist, licensed behavior analyst, or licensed assistant behavior analyst. The individual supervising the Behavior Technician is responsible for the work performed by the Behavior Technician. Behavior Technicians must be at least 18 years of age and possess a minimum of a high school diploma or its national equivalent. Behavior Technicians also must have completed 40 hours of RBT training and passed the RBT initial competency assessment. Behavior technicians may provide services for up to 90 calendar days before they will be required to be a registered behavior technician.

Licensed Assistant Behavior Analyst: a person able to furnish services within the scope of their practice as defined by State Law.

Licensed Behavior Analyst: a person able to furnish services within the scope of their practice as defined by State Law.

Registered Behavior Technician (RBT): paraprofessionals who practice under the supervision of a licensed psychologist, licensed behavior analyst, or licensed assistant behavior analyst. The individual supervising the RBT is responsible for the work performed by the RBT. RBTs must be 18 years of age or older and possess a minimum of a high school diploma or its national equivalent. RBTs also must have completed 40 hours of RBT training and passed the RBT exam.

13.d. Rehabilitative Services

Applied Behavior Analysis (ABA)	ABA therapy consists of approaches and interventions that employ positive reinforcement to teach new abilities, improve a variety of existing skills, and reduce maladaptive behaviors. ABA therapy seeks to: • improve social skills, • improve communication skills, • increase independent living, • reduce maladaptive behaviors, and • improve life satisfaction. There are two primary types of ABA services: Assessment Services and Adaptive Behavior Treatment services. Assessment Services analyze the situation and lead to recommendations for how to address the issues. The assessment also includes the following components: • A Behavior Identification Assessment includes administration of standardized and non-standardized tests, detailed behavioral history, patient observation and caregiver interview, interpretation of test results, discussion of findings and recommendations with the primary guardian(s)/caregiver(s) and preparation of the report. • Behavior Identification Supporting Assessment-Observational is the observational assessment may be required to finalize or fine-tune the baseline results and plan of care initiated during the identification assessment. • A Behavior Identification Supporting Assessment-Exposure includes the QHCP's interpretation of results, discussion of findings and recommendations with primary caregiver(s) and preparation of report. Adaptive Behavior Treatment addresses the individual's specific target problems and treatment goals as defined in previous assessments. Adaptive behavior treatment is based on principles including analysis and alteration of contextual events and motivating factors, stimulus-consequence strategies, replacement behavior and monitoring of outcomes. Goals of adaptive behavior treatment may include reduction of repetitive and aberrant behavior, improved communication, and social functioning. Adaptive Behavior Treatment may occur in multiple sites and social settings (e.g., controlled treatment programs with individual alone or in a group setting, home, or other natural environment.	A Behavior Identification Assessment is completed by the physician or Licensed Behavior Analyst (LBA). A Behavior Identification Supporting Assessment-Observational by a Registered Behavior Technician (RBT) under the direction of an LBA or Licensed Assistant Behavior Analyst (LaBA). This service can also be provided by a LBA or LaBA. A Behavior Identification Supporting Assessment-Exposure is administered by the RBT under the direction of the LBA or LaBA. This service can also be provided by a LBA or LaBA.

13.d. Rehabilitative Services

Transcranial Magnetic Stimulation (TMS)	TMS is a non-invasive brain stimulation therapy that uses magnetic pulses to treat certain mental health conditions.	Psychiatrist or Advanced Practice Registered Nurse

13.d. Rehabilitative Services

Agencies contracted with and certified or provisionally certified by the Department of Mental Health as CSTAR providers are the agency provider types qualified to furnish CSTAR services.

Qualifications of Provider Agencies are as follows:

- Certified or provisionally certified as a CSTAR program by the Department of Mental Health;
- Contracted as a CSTAR provider by the Department of Mental Health;
- Medicaid enrolled provider; and
- Agreed to comply with all applicable civil rights laws and regulations, and to maintain auditable records.

Qualifications of Practitioners are as follows:

Adolescent Treatment Team: A team comprised of LMHPs, QMHPs, QBAs and Paraprofessionals.

Advanced Practice Registered Nurse: a licensed registered nurse certified by a nationally recognized professional organization as a certified nurse practitioner, certified nurse midwife, certified nurse anesthetist, or certified clinical nurse specialist under state law.

Licensed Assistant Physician: a person licensed as an assistant physician under Missouri state law who performs tasks that might otherwise be performed by a licensed physician.

Associate Substance Use Counselor: A trainee that meets the requirements set forth by the Missouri Credentialing Board or the appropriate board of professional registration with the Department of Insurance, Financial Institutions & Professional Registration

An Associate Substance Use Counselor must be supervised by a Qualified Addiction Professional who has completed the Missouri Credentialing Board (MCB) Clinical Supervision Training. Clinical supervision must focus on improving the quality of treatment delivered by improving the counseling skills, competencies and effectiveness of the persons supervised. All counselor functions performed by an Associate Substance Use Counselor shall be performed pursuant to the supervisor's control, oversight, guidance and full professional responsibility.

Behavior Technician

Behavior Technicians are paraprofessionals who practice under the supervision of a licensed psychologist, licensed behavior analyst, or licensed assistant behavior analyst. The individual supervising the Behavior Technician is responsible for the work performed by the Behavior Technician. Behavior Technicians must be 18 years of age and possess a minimum of a high school diploma or national equivalent. Behavior Technicians also must have completed 40 hours of RBT training and passed the RBT initial competency assessment. Behavior technicians may provide services for up to 90 calendar days before they will be required to be a registered behavior technician.

Certified Family Support Provider: A family member of an individual age 25 and younger who had or currently has a behavioral/emotional disorder or a substance use disorder, has a high school diploma or equivalent, is credentialed by the Missouri Credentialing Board, and is supervised by an LMHP, QAP, or Community Support Supervisor who has completed the peer supervision training required by the department.

Group Rehabilitation Support Specialist: An individual who:

- Is suited by education, background, knowledge, or experience to present the information being discussed; and
- Demonstrates competency and skill in facilitating group discussion.

Group Rehabilitation Support Specialists must be supervised by an LMHP or QMHP with experience in a related field (LMHP must be available for consultation).

Marital and Family Therapist: a person licensed/provisionally licensed as a marital and family therapist under state law to furnish services within their scope of practice act.

Licensed Assistant Behavior Analyst: a person able to furnish services within the scope of their practice as defined by State Law.
Licensed Behavior Analyst: a person able to furnish services within the scope of their practice as defined by State Law.

Licensed Practical Nurse: a person licensed as a practical nurse under state law to furnish services within their scope of practice act.

Licensed Mental Health Professional (for diagnosis):

- A physician (including a psychiatrist) licensed or provisionally licensed under Missouri law to furnish services within their scope of practice;
- A psychologist licensed or provisionally licensed as a psychologist under state law to furnish services within their scope of practice;
- A resident physician including a resident psychiatrist;
- A professional counselor licensed or provisionally licensed under Missouri law to practice counseling;
- A clinical social worker licensed or provisionally licensed under Missouri law to practice social work;
- A marital and family therapist licensed or provisionally licensed under Missouri law to provide marriage and family services;
- Advanced practice registered nurse, a registered nurse who is currently recognized by the board of nursing as an advanced practice registered nurse;
- A licensed assistant physician under Missouri state law**;**
- A licensed physician assistant under Missouri state law**.**

Licensed Physician: An individual licensed as a physician under state law to furnish services within their scope of practice act.

Licensed Physician Assistant: a person who has graduated from a physician assistant program accredited by the American Medical Association's Committee on Allied Health Education and Accreditation or by its successor agency, who has passed the certifying examination administered by the National Commission on Certification of Physician Assistants and has active certification by the National Commission on Certification of Physician Assistants who provides health care services delegated by a licensed physician under Missouri state law.

Psychiatrist: a licensed physician who is a psychiatrist and delivers services within their scope of practice.

Psychologist: An individual licensed or provisionally licensed as a psychologist under Missouri State law to furnish services within their scope of practice act.

Qualified Addiction Professional (QAP) is one of the following:

- A physician (including a psychiatrist) licensed or provisionally licensed under Missouri state law; or
- An individual who meets the applicable training and credentialing required by the Missouri Credentialing Board, Inc. for any of the following positions:
  - Certified Alcohol and Drug Counselor (CADC)
  - Certified Reciprocal Alcohol and Drug Counselor (CRADC)
  - Certified Reciprocal Advanced Alcohol and Drug Counselor (CRAADC)
  - Certified Criminal Justice Addictions Professional (CCJP)
  - Registered Alcohol Drug Counselor-Provisional (RADC-P)
  - Registered Alcohol Drug Counselor (RADC)
  - Co-occurring Disorder Professional (CDP)
  - Co-occurring Disorders Professional Diplomat (CDPD-D)

Registered Nurse: an individual licensed as a registered nurse to furnish services within their scope of practice act.

Registered Behavior Technician (RBT): paraprofessionals who practice under the supervision of a licensed psychologist, licensed behavior analyst, or licensed assistant behavior analyst. The individual supervising the RBT is responsible for the work performed by the RBT. RBTs must be 18 years of age or older and possess minimum of a high school diploma or national equivalent. RBTs also must have completed 40 hours of RBT training and passed the RBT exam.

Resident Physician: A medical school graduate and doctor in training who is taking part in a graduate medical education (GME) program.

Certified Medical Assistant: a person who performs duties under the direction of medical staff related to the health and wellness of individuals who are ill or otherwise require assistance. A certified medical assistant must have a high school diploma or the equivalent, complete an accredited medical assistant program, and pass the certification exam.

Paramedic: A person trained to assist a physician or give first aid or other healthcare in the absence of a physician, within their scope of practice. The individual must be on the National Registry of Emergency Medical Technicians (NREMT). Paramedics must complete an EMT training program from a state-approved training college or institute.

13.c. Preventive Services

Applied Behavior Analysis Provided through Comprehensive Substance Treatment and Rehabilitation Providers (CSTAR)

The state agency will reimburse Applied Behavior Analysis services provided by Comprehensive Substance Treatment and Rehabilitation (CSTAR) providers at fee-for-service rates established for services provided to single beneficiaries by qualified, individual providers that coordinate care within a multidisciplinary treatment model. These activities and interventions are billed as distinct units of service. Such rates are those as defined and determined by the MO HealthNet Division and in accordance with the provisions of 42 CFR 447 Subpart B. The state payment for each service will be the lower of:

(1) The provider's actual charge for the service; or

(2) The Medicaid maximum allowable amount per unit of service

A maximum rate is established for each 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 applied behavioral analysis services offered by CSTAR providers (as detailed in Section 3.1-A of the state plan under Preventive Services). The Applied Behavior Analysis procedure codes and the Medicaid fee schedule, which includes the maximum rates, are published on the MO HealthNet website at https://dss.mo.gov/mhd/providers/fee-for-service-providers.htm and are effective for services provided on or after July 1, 2025.

13.d. Rehabilitative Services

Rehabilitative Services Provided through Comprehensive Substance Treatment and Rehabilitation Services (CSTAR)

Comprehensive substance use disorder treatment services are offered to individuals to provide a continuum of care within community based settings through Comprehensive Treatment and Rehabilitation Services.

CSTAR services may be provided in accordance with the American Society of Addiction (ASAM) guidelines. Not all CSTAR providers will have clinical staff who are trained and qualified to utilize the ASAM Criteria as of the effective date of this state plan amendment. CSTAR services for those providers utilizing the ASAM criteria will bill for services as detailed in Section 3.1-A under the Comprehensive Substance Treatment and Rehabilitation Services (CSTAR) section.

The state agency will reimburse Comprehensive Substance Treatment and Rehabilitation (CSTAR) providers at fee for service rates established for services provided to single beneficiaries by qualified, individual providers that coordinate care within a multidisciplinary treatment model. These activities and interventions are billed as distinct units of service. Such rates are those as defined and determined by the MO HealthNet Division and in accordance with the provisions of 42 CFR 447 Subpart B. The state payment for each service will be the lower of:

(1) The provider's actual charge for the service; or

(2) The Medicaid maximum allowable amount per unit of service

A maximum rate is established for each 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 rehabilitative services offered by CSTAR providers (as detailed in Section 3.1-A of the state plan). The CSTAR procedure codes and the Medicaid fee schedule which includes the maximum rate are published on the MO HealthNet website at https://dss.mo.gov/mhd/providers/fee-for-service-providers.htm and are effective for services provided on or after July 1, 2025.