

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 East 12th Street, Suite 355
Kansas City, Missouri 64106



Division of Medicaid and Children's Health Operations

December 14, 2012

Brian Kinkade, Interim Director
Missouri Department of Social Services
Broadway State Office Building
P.O. Box 1527
Jefferson City, Missouri 65102-1527

Dear Mr. Kinkade:

On September 27, 2012, the Centers for Medicare & Medicaid Services (CMS) received Missouri's State Plan Amendment (SPA) transmittal #12-17, to remove references to the second surgical opinion requirement for certain elective surgeries. The requirement has been removed from RSMo208.152.

This SPA was approved on December 12, 2012 with an effective of July 1, 2012, as requested by the State. However, during the review of SPA 12-17 CMS performed an analysis of the reimbursement provisions that correspond to the coverage pages. This analysis revealed issues that will require additional information and/or possible revision through a corrective action plan. Under separate cover, CMS will release a letter detailing those issues, and providing guidance on timeframes for correction.

Enclosed is a copy of the CMS 179 form, as well as, the approved page for incorporation into the Missouri State plan.

I appreciate the significant amount of work that your staff dedicated to getting this SPA approved and the cooperative way in which we achieved this much-desired outcome. If you have any questions concerning this SPA, please contact me, or have your staff contact Rhonda Wells or Deborah Read at (816) 426-5925 or Rhonda.Wells@cms.hhs.gov.

Sincerely,

/s/

James G. Scott
Associate Regional Administrator
for Medicaid and Children's Health Operations

cc: Ian McCaslin