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State/Territory Name: Missouri

State Plan Amendment (SPA) #: 20-0024

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

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
233 North Michigan Ave., Suite 600
Chicago, Illinois 60601



Financial Management Group

January 7, 2021

Jennifer Tidball
Acting Director
MO Healthnet Division
P.O Box 6500
Jefferson City, MO 65102

RE: TN 20-0024

Dear Ms. Tidball:

We have reviewed the proposed Missouri State Plan Amendment (SPA) to Attachment 4.19-B, MO-20-0024, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on November 20, 2020. This is a technical plan amendment to update the website address containing program information about the Certified Community Behavioral Health Organizations (CCBHOs).

Based upon the information provided by the State, we have approved the amendment with an effective date of October 1, 2020. We are enclosing the approved CMS-179 and a copy of the new state plan page.

If you have any additional questions or need further assistance, please contact Blake Holt at (415) 744-3754 or blake.holt@cms.hhs.gov.

Sincerely,

A solid black rectangular box redacting the signature of Todd McMillion.

Todd McMillion
Director
Division of Reimbursement Review

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES

1. TRANSMITTAL NUMBER

2 0 — 0 0 24

2. STATE

Missouri

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

TO: REGIONAL ADMINISTRATOR
CENTERS FOR MEDICARE & MEDICAID SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

October 1, 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
42 CFR 431 Subpart M, 42 CFR 447 Subparts A, B and F

7. FEDERAL BUDGET IMPACT

a. FFY 2021 \$ 0
b. FFY 2022 \$ 0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Section 4.19-B pages 6bbb and 6bbbb

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Section 4.19-B pages 6bbb and 6bbbb

10. SUBJECT OF AMENDMENT

This is a technical amendment to correct a web address.

11. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED

12. SIGNATURE OF STATE AGENCY OFFICIAL

16. RETURN TO

13. TYPED

14. TITLE

15. DATE SUBMITTED

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED

11/20/2020

18. DATE APPROVED

1/7/2021

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL

10/1/2020

20. SIGNATURE OF REGIONAL OFFICIAL

21. TYPED NAME

Todd McMillion

22. TITLE

Director, Division of Reimbursement Review

23. REMARKS

12/11/20: State provides concurrence for the following pen and ink changes: Box 15: add "11/20/20" Box 16: add "MO Health Net Division P.O. Box 6500, Jefferson, MO 65102"

13.d. Rehabilitative Services

Reimbursement for CCBH Rehabilitative Services Provided through Certified Community Behavioral Health Organizations (CCBHO)

The Medicaid program will provide coverage for a bundle of medically necessary rehabilitation services provided by practitioners employed by, or associated with, provider entities to be known as Certified Community Behavioral Health Organizations (CCBHO). CCBHOs are provider entities certified by the Missouri Department of Mental Health as meeting the state's qualifications for a CCBHO.

The state agency will reimburse CCBHOs a clinic-specific fee schedule rate applicable to providers affiliated with the CCBHO. Payments will be limited to one payment per day per CCBHO regardless of the number of services provided by a given CCBHO within a single day by a clinic user accessing services from CCBHO practitioners. The clinic-specific CCBH Rehabilitative Services fee schedule rate will be published on the Department of Mental Health (DMH) website at: <https://dmh.mo.gov/certified-community-behavioral-health> and is effective for CCBH rehabilitative services provided on or after July 1, 2019.

Quality Incentive Payments

All CCBHOs are eligible for a Quality Incentive Payment (QIP) based on achieving specific numerical thresholds with regard to state mandated performance measures. The performance period shall be a state fiscal year (7/1 – 6/30). The eligibility of each CCBHO to receive a QIP is judged independently; and in order for a CCBHO to receive a QIP, it must achieve the thresholds with regard to all of the state mandated performance measures. A CCBHO can achieve a threshold on a particular performance measure by meeting or exceeding the statewide mean for that measure, or by improving upon its own performance with regard to that measure compared to the previous performance period. A CCBHO with no prior performance level on a particular measure is required to meet or exceed the posted statewide mean on that measure. Performance measures shall be calculated exclusively on the basis of data for Medicaid beneficiaries, excluding beneficiaries dually eligible for the Medicaid and Medicare programs, individuals on spend down, and other individuals with intermittent gaps in Medicaid eligibility.

State Plan TN# 20-0024
Supersedes TN # 19-0007

Effective Date: October 1, 2020
Approval Date January 7, 2021

13.d. Rehabilitative Services

CCBH Rehabilitative Services Provided through Certified Community Behavioral Health Organizations (CCBHO)

Quality Incentive Payments (continued)

Each CCBHO is required to provide the state with a contact for the purpose of communicating information regarding the QIP performance measures. In addition to posting the applicable measures, thresholds, and statewide mean for each measure on the DMH website's CCBHO pages by May annually, the state will provide each CCBHO's designated contact with the applicable measures and thresholds, and will also provide each designated contact with the CCBHO level of performance, if any, on each measure for the prior reporting period. CCBHOs shall be required to submit data to the state for the calculation of some performance measures. CCBHOs shall submit the required performance measure data within 6 months following the end of the performance year. A description of the data to be submitted by CCBHOs to the Division of Behavioral health (DBH) by December 31 of each year will be located at:

<https://dmh.mo.gov/certified-community-behavioral-health>

CCBHOs that fail to submit required data within six months following the end of the performance year will not be eligible for a quality incentive payment. The state may periodically provide each designated contact with interim draft estimates of the CCBHO performance on certain measures during the course of the performance period as indicators of the CCBHO performance to date. Final results of the performance of each CCBHO on the required measures will be posted by April 1 of each year on the DMH website's CCBHO pages and shared directly with the designated contact of each CCBHO.

DBH shall establish the minimum patient volume in each performance measure denominator that is necessary for the performance measure to be valid. The amount of a quality incentive payment to a CCBHO will equal 1% of the total payments made to the CCBHO for CCBH rehabilitative services in the performance period. If the thresholds are met, quality incentive payments will be made in a lump sum payment, within 9 months following the end of the performance year, after all final data needed to calculate the quality incentive payment is received.

The state mandated QIP performance measures, technical specifications, patient volume minimums, and thresholds, including the statewide mean for each measure are effective July 1, 2019 and are located at:

<https://dmh.mo.gov/certified-community-behavioral-health>

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