

Table of Contents

State/Territory Name: MO

State Plan Amendment (SPA) #: 16-0004

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 12th Street, Suite 355
Kansas City, Missouri 64106



Division of Medicaid and Children's Health Operations

October 12, 2016

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

Dear Mr. Kinkade:

On February 24, 2016 the Centers for Medicare & Medicaid Services (CMS) received Missouri's State Plan Amendment (SPA) transmittal #16-0004, which adds asthma education and assessments to the state plan. On May 24, 2016, the Regional Office (RO) sent a request for additional information (RAI). The state responded to the RAI on July 12, 2016.

This SPA was approved on October 5, 2016, with an effective date of July 1, 2016, as requested by the state. Enclosed is a copy of the CMS 179 form, as well as, the approved pages 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 at (816) 426-5925 or have your staff contact Kevin Slaven at (816) 426-5925.

Sincerely,

10/12/2016

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

Signed by: James G. Scott -A

Enclosure

cc:

Joe Parks, M.D., Director
Debbie Meller

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION	1. TRANSMITTAL NUMBER: <u>1</u> <u>6</u> <u>0</u> <u>4</u>	2. STATE Missouri
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
	4. PROPOSED EFFECTIVE DATE July 1, 2016	

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: 13 CSR 70-3.260	7. FEDERAL BUDGET IMPACT: a. FFY 2016 \$659,325 b. FFY 2017 \$659,325
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A, Page 10f1 (new)* Attachment 3.1-A, Page 10f2 (new)* Section 3.1-A Page 17, 17A, 17B; Section 4.19-B Page 5 * Attachment 4.19-B, Page 4d (new)*	9. PAGE NUMBER OF THE SUPERSEDES PLAN SECTION OR ATTACHMENT (If Applicable): Section 3.1-A Page 17, and 17 B; Section 4.19-B Page 5 *

10. SUBJECT OF AMENDMENT:
 Asthma Education and In-Home Environmental Assessments: This State Plan Amendment proposes to provide asthma education and in-home environmental assessments to individuals with uncontrolled asthma under the age of 21 or Independent Foster Care Adolescents who are in foster care at age 18, or any time during the 30-day period preceding their 18th birthday through age 25. These services will be provided following a physician's prescription by state or nationally certified asthma educators and in-home environmental assessors. This proposed amendment establishes requirements for either a national certification or a state certification for both asthma educators and in-home environmental assessors.

11. GOVERNOR'S REVIEW (Check One)

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

12. SIGNATURE OF STATE AGENCY OFFICIAL: 13. TYPE NAME: Brian Kinkade 14. TITLE: Director 15. DATE SUBMITTED:	16. RETURN TO: MO HealthNet Division P.O. Box 6500 Jefferson City, MO 65102
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FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: February 24, 2016	18. DATE APPROVED: October 5, 2016
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2016	20. SIGNATURE OF REGIONAL OFFICIAL: //s//
21. TYPED NAME: James G Scott	22. TITLE: Associate Regional Administrator for Medicaid and Children's Health Operations
23. REMARKS:	

* Pen and ink changes per email dated 10.03.16.

State MissouriAsthma Preventive Education and Counseling for the Participant and In-Home Assessments for Asthma Triggers:

Asthma Preventive Education and Counseling for the Participant is provided pursuant to the preventive benefit 42 CFR 440.130(c) and In-Home Assessments for Asthma Triggers are provided pursuant to the diagnostic benefit 42 CFR 440.130(a).

Evidence has shown that the combined approach of asthma preventive education and counseling and in-home assessments for asthma triggers leads to better health outcomes in the pediatric population. To improve the health of MO HealthNet participants with asthma and to reduce costs associated with participants with uncontrolled asthma, MO HealthNet will implement a statewide asthma preventive education and counseling and in-home assessment program for asthma triggers focusing on youth participants who have evidence of uncontrolled asthma. Youth participants are defined as any individual younger than the age of 21, and all services are furnished without limitation in accordance with 1905(r) of the Social Security Act.

Definition and Description of Medical Services:

A. Asthma Preventive Education and Counseling

1. Asthma education non-physician (Thirty (30) minute sessions, two (2) per year);
2. Preventive medicine counseling, individual (Fifteen (15) minute sessions four (4) times per year);
3. Preventive medicine counseling, individual (Thirty (30) minute sessions two (2) times per year); OR
4. Self-management education using standardized effective curriculum, individually, either incident to a clinical encounter or as preventative service (Ninety (90) minute session one (1) per year).
5. These services are provided by certified Educators only.

Description of Services: Asthma education, preventive medicine counseling, and self-management education may include informing the participant about the need for increasing adherence to the inhaled corticosteroid (ICS) regimen, optimizing inhalation technique, supporting trigger reduction in indoor environment (home, school and work), identifying and reducing impairment and reducing and managing the risks of asthma exacerbation, increasing compliance with asthma action plans prescribed by the participant's provider, documentation (not performance of) of measures of pulmonary function testing, counseling on the findings of the environmental assessment, education on the management of co-morbid health conditions, increasing health-promoting behaviors (examples include eating healthy foods, tobacco cessation, engaging in physical activity regularly, maintaining a normal weight, being compliant with physician appointments, and following the recommended immunization schedule per participant's age) promotion of non-pharmacologic behaviors, and education on nasal hygiene.

B. In-Home Assessments for Asthma Triggers

1. Asthma environmental assessment non-physician (Two (2) per year).
2. These services are provided by certified Assessors only.

Description of Services: In-home assessments for asthma triggers are limited to a provider's time and activities during an assessment of the child's home or primary residence, in order to determine the source of the child's asthma. In-home assessments for asthma triggers include activities that help to identify and support the reduction of disease causing agents in the home leading to medical complications of asthma. In-home assessments for asthma triggers do not include remediation of issues identified in the home.

State Plan TN# 16-04Effective Date 07-01-16Supersedes TN# New MaterialApproval Date 10-05-16

State Missouri

Asthma preventive education and counseling and in-home assessments for asthma triggers require a referral and/or a prescribed service in the participant's plan of care by a physician and may be provided by practitioners other than physicians or other licensed practitioners. All asthma preventive education and counseling and in-home assessment for asthma triggers services will require a prior authorization.

All asthma preventive education and counseling and in-home assessment for asthma triggers services are home based services, provided by certified Educators and certified Assessors. Additional asthma preventive education and counseling and in-home assessments for asthma triggers requests beyond the initial allocation will go through the prior authorization process and must be deemed medically necessary.

Credentials:**1. Educators**

- a. National Asthma Educator Certification (AEC)
- b. State Certification – Accredited training programs, such as a University, within the state will provide an accredited asthma educator training program and certificate incorporating similar guidelines to the national asthma educator certification; upon successful completion a certificate must be provided. A certificate means that the student has successfully completed the training program and is competent to provide asthma education services.
- c. Asthma Preventive Education and Counseling Providers – shall be certified by a national program or a state program. Eligibility criteria for admission into the certification programs are determined by the administrator of the program.

2. Assessors

- a. National Certification – National Environmental Health Association (NEHA) Healthy Home Specialist or a NEHA Healthy Home Evaluator Micro-Credential
- b. State Certification – Accredited training programs, such as a University, within the state will provide an accredited in-home assessor for asthma triggers training program and certificate incorporating similar guidelines to the national certifications including the Healthy Home Specialist and the Healthy Home Evaluator Micro-Credential; upon successful completion a certificate must be provided. A certificate means that the student has successfully completed the training program and is competent to provide in-home assessment for asthma trigger services.
- c. Asthma In-Home Assessors – shall be certified by a national program or a state program. Eligibility criteria for admission into the certification programs are determined by the administrator of the program.

State Plan TN# 16-04Effective Date 07-01-16Supersedes TN# New MaterialApproval Date 10-05-16

State MissouriAsthma Preventive Education and Counseling for the Participant and In-Home Assessments for Asthma Triggers

The state agency shall provide reimbursement for asthma preventive education and counseling and in-home assessments for asthma triggers to enrolled educators and assessors who are currently certified and in good standing with the state as defined in 4b EPSDT Asthma Preventive Education and Counseling for the Participant and In-Home Assessments for Asthma Triggers. 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 lower of:

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

Reimbursement shall only be made for services authorized by the state agency or its designee. Except as otherwise noted in the plan, state developed fee schedule rates are the same for both public and private providers of asthma preventive education and counseling and in-home assessments for asthma triggers. The agency's fee schedule is published at <http://www.dss.mo.gov/mhd/providers/index.htm> and is effective for services provided on or after the effective date of the state plan amendment noted below.

State Plan TN# 16-04
Supersedes TN# New Material

Effective Date 07/01/16
Approval Date 10/05/16