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REVISED* Public Notice of MO HealthNet Prospective Reimbursement Plan for Nursing Facility Services

October 29, 2020

REVISED November 6, 2020

Pursuant to Sections 1902(a)13(A) of the Social Security Act and 42 Code of Federal Regulations (CFR) 447.205, which mandate that proposed changes in statewide Medicaid payment methods and standards for setting Medicaid payment rates be published and made available for review and comment, this is to advise that:

1. The Missouri Department of Social Services provides notice of the following:

To ensure efficiency, economy, quality of care, and access, 13 CSR 70-10.015 Prospective Reimbursement Plan for Nursing Facility Services is being amended in conjunction with the Missouri Medicaid State Plan (Prospective Reimbursement Plan for Nursing Facility Services section). Effective for dates of service beginning November 1, 2020, the MO HealthNet Division (MHD) will modify the reimbursement plan for nursing facility services, as detailed below. The change is contingent upon approval by the Centers for Medicare and Medicaid Services (CMS).

The amendment results in a fiscal impact to nursing facility reimbursement and hospice reimbursement. Hospice reimbursement is impacted because reimbursement for hospice nursing home room and board services is based on the nursing facility per diem rate.

The MHD estimates a total increase in cost of approximately **\$2.15 million** in expenditures on an annual basis as a result of this change. The increase to nursing facility reimbursement is approximately **\$1.95 million**, composed of **\$0.68 million** state funds and **\$1.27 million** federal funds. The increase to hospice nursing home room and board is approximately **\$0.20 million**, composed of **\$0.07 million** state funds and **\$0.13 million** federal funds.

Following is a summary of the changes to 13 CSR 70-10.015 and the State Plan:

The amendment removes or replaces obsolete processes, language, and terms; clarifies language; allows an extension for cost report filings for good cause shown; amends when cost reports are required for terminating providers or changes in providers; amends when payments will be withheld for late cost report submissions and terminating providers; establishes a required prior authorization process for any out-of-state nursing facility to be reimbursed for nursing facility services; and, revises the methodology for determining prospective rates.

Interpretive services are available by calling the Participant Services Unit at 1-800-392-2161.
Prevodilačke usluge su dostupne pozivom odjela koji učestvuje u ovom servisu na broj 1-800-392-2161.
Servicios Intrepreative están disponibles llamando a la unidad de servicios de los participantes al 1-800-392-2161.

AUXILIARY AIDS AND SERVICES ARE AVAILABLE UPON REQUEST TO INDIVIDUALS WITH DISABILITIES

TDD / TTY: 800-735-2966

RELAY MISSOURI: 711

Missouri Department of Social Services is an Equal Opportunity Employer/Program.

2. Comments may be sent by regular mail, express or overnight mail, in person or by courier within thirty (30) days after publication of this notice and must be sent or delivered to the following address:

MO HealthNet Division
615 Howerton Ct., 2nd Floor
Jefferson City, MO 65109
Attention: Rebecca Rucker

Comments may also be emailed to Ask.MHD@dss.mo.gov. Please use "Public Comment for Prospective Reimbursement Plan for Nursing Facility Services" in the subject line. Comments must be received by November 29, 2020.

3. A copy of the proposed reimbursement methodology is available for public review by going to any Family Support Division Office or by contacting the Department of Social Services, MO HealthNet Division at Ask.MHD@dss.mo.gov. These documents also may be viewed online at <https://dss.mo.gov/mhd/alerts~public-notice.htm>
4. No public hearing will be held.

*** Revisions are bolded.**