

# Missouri

**Medicaid Program:** HealthNet

**Program Administrator:** Missouri Dept. of Social Services

**Regional Telehealth Resource Center:**

Heartland Telehealth Resource Center  
 3901 Rainbow Blvd MS 1048  
 Kansas City, KS 66160  
 (877) 643-4872  
[heartlandtrc.org](http://heartlandtrc.org)

**Note:** \* *Provider manuals may reflect outdated information. It states that its policies are compliant with MO regulation Title 13, 70-3.190. However, a Feb. 2018 Medicaid Bulletin states that this regulation will soon be rescinded and to not follow this regulation.*

*Source: (Notification of rescinding regulation: MO Department of Social Services. Provider Bulletin. Vol. 40, No. 47. Feb. 2, 2018. (Accessed Apr. 2018).*

STATE LAW/REGULATIONS	MEDICAID PROGRAM
<b>Definition of telemedicine/telehealth</b>	
<p><u>Relating to Stroke Centers</u>            “Telemedicine-the use of medical information exchanged from one (1) site to another via electronic communications to improve patient’s health status. A neurology specialist will assist the physician in the center in rendering a diagnosis. This may involve a patient “seeing” a specialist over a live, remote consult or the transmission of diagnostic images and/or video along with patient data to the specialist.”</p> <p><i>Source: MO Code of State Regulation Title 19, 30-40.710.</i></p> <p>"Telehealth" or "telemedicine", the delivery of health care services by means of information and communication technologies which facilitate the assessment, diagnosis, consultation, treatment, education, care management, and self-management of a patient's health care while such patient is at the originating site and the health care provider is at the distant site. Telehealth or telemedicine shall also include the use of asynchronous store-and-forward technology.</p> <p><i>Source: MO Revised Statute Sec. 191.1145 (2016 SB 579).</i></p> <p>Telehealth means the use of medical information exchanged from one site to another via electronic communications to improve the health status of a patient.</p> <p><i>Source: MO Code of State Regulation. Title 20, 2150-2.001.</i></p>	<p>See State Law column (MO Revised Statute 191.1145 and 191.1146).</p> <p><i>Source: MO Department of Social Services. Provider Bulletin. Vol. 40, No. 47. Feb. 2, 2018. (Accessed Apr. 2018).</i></p> <p>“Telehealth means the use of medical information exchanged from one (1) site to another via electronic communications to improve the health status of a patient. Telehealth means the practice of health care delivery, evaluation, diagnosis, consultation, or treatment using the transfer of medical data, audio visual, or data communications that are performed over two (2) or more locations between providers who are physically separated from the patient or from each other.”*</p> <p><i>Source: MO Code of State Regulation, Title 13, 70-3.190 (2010). (Accessed Apr. 2018).</i></p> <p>Telehealth Services are medical services provided through advanced telecommunications technology from one location to another. Medical information is exchanged in real-time communication from an originating site, where the participant is located, to a distant site, where the provider is located, allowing them to interact as if they are having a face-to-face, hands-on session.</p> <p>A Telehealth service requires the use of a two (2)-way interactive video technology.*</p> <p><i>Source: MO HealthNet, Provider Manual, Behavioral Services, Section 13, p. 201 (Jul. 27, 2017); MO HealthNet, Physician Manual, Telehealth Services, p. 276 (May 4, 2017). (Accessed Apr. 2018).</i></p>
<b>Live Video Reimbursement</b>	

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<p><b>Missouri Consolidated Health Care Plan (State employees and retirees health plan)</b>  Telehealth services are covered on the same basis that the service would be covered when it is delivered in person.</p> <p><i>Source: MO Consolidated State Reg. 22:10-3.057.</i></p> <p>For the provision of telehealth services under MO HealthNet, an eligible provider includes:</p> <ol style="list-style-type: none"> <li>(1) Physicians, assistant physicians, and physician assistants;</li> <li>(2) Advanced practice registered nurses;</li> <li>(3) Dentists, oral surgeons, and dental hygienists under the supervision of a currently registered and licensed dentist;</li> <li>(4) Psychologists and provisional licensees;</li> <li>(5) Pharmacists;</li> <li>(6) Speech, occupational, or physical therapists;</li> <li>(7) Clinical social workers;</li> <li>(8) Podiatrists;</li> <li>(9) Optometrists;</li> <li>(10) Licensed professional counselors; and</li> <li>(11) Eligible health care providers under subdivisions (1) to (10) practicing in a rural health clinic, federally qualified health center, or community mental health center.</li> </ol> <p><i>Source: MO Revised Statute Sec. 191.1145 (2016 SB 579).</i></p>	<p>See State Law column (MO Revised Statute 191.1145 and 191.1146).</p> <p><i>Source: MO Department of Social Services. Provider Bulletin. Vol. 40, No. 47. Feb. 2, 2018. (Accessed Apr. 2018).</i></p> <p>HealthNet will reimburse for live video for medically necessary services.</p> <p>Eligible providers:</p> <ul style="list-style-type: none"> <li>• Physicians;</li> <li>• Advanced registered Nurse Practitioners, including Nurse Practitioners with a mental health specialty;</li> <li>• Psychologists.</li> </ul> <p>Telehealth services are limited to:</p> <ul style="list-style-type: none"> <li>• Consultation made to confirm a diagnosis;</li> <li>• Evaluation and management services;</li> <li>• A diagnosis, therapeutic or interpretive service;</li> <li>• Individual psychiatric or substance abuse assessment diagnostic interview examinations;</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• Individual psychotherapy</li> <li>• Pharmacologic management (for RHCs)</li> </ul> <p>Reimbursement to the provider at the distant site is made at the same amount as for an in-person service.*</p> <p><i>Source (eligible providers): MO HealthNet, Provider Manual, Behavioral Services, Section 13, p. 205-206 (Jul. 27, 2017)</i></p> <p><i>Source (psychiatrists): MO HealthNet, Community Psychiatric Rehabilitation Program Manual, Sec. 13, pg. 233-235 (May 4, 2017). (Accessed Apr. 2018).</i></p> <p><i>Source: MO HealthNet, Physician Manual, Telehealth Services, p. 276 (May 4, 2017). (Accessed Apr. 2018).</i></p> <p><i>Source (Pharmacologic management): MO HealthNet, Rural Health Clinic, p. 161 (May 3, 2017). (Accessed Apr. 2018).</i></p> <p>RHCs must bill with their non-RHC provider number when they are either the distant or originating site.</p> <p><i>Source: MO HealthNet, Rural Health Clinic, p. 161 (May 3, 2017). (Accessed Apr. 2018).</i></p> <p><b><u>Comprehensive Substance Treatment and Rehabilitation (CSTAR):</u></b></p> <p>Medication services may be provided via telehealth.</p> <p><i>Source: MO HealthNet, Provider Manual, CSTAR, Section 13, p. 196 (May 4, 2017). (Accessed Apr. 2018).</i></p> <p>Anesthesiologist monitoring telemetry in the operating room is a non-covered service.</p>

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	<p><i>Source: MO HealthNet, Physician Manual, p. 202 (May 4, 2017). (Accessed Apr. 2018).</i></p>
<b>Store and Forward Reimbursement</b>	
<p>Reimbursement for the use of asynchronous store-and-forward technology in the practice of telehealth in the MO HealthNet program shall be allowed for orthopedics, dermatology, ophthalmology and optometry, in cases of diabetic retinopathy, burn and wound care, dental services which require a diagnosis, and maternal-fetal medicine ultrasounds. Payment cannot exceed the payment for a face-to-face consultation of the same level.</p> <p>The department of social services, in consultation with the departments of mental health, health and senior services, shall promulgate rules governing the use of asynchronous store-and-forward technology in the practice of telehealth in the MO HealthNet program. Such rules shall include, but not be limited to:</p> <ol style="list-style-type: none"> <li>(1) Appropriate standards for the use of asynchronous store-and-forward technology in the practice of telehealth;</li> <li>(2) Certification of agencies offering asynchronous store-and-forward technology in the practice of telehealth;</li> <li>(3) Timelines for completion and communication of a consulting provider's consultation or opinion, or if the consulting provider is unable to render an opinion, timelines for communicating a request for additional information or that the consulting provider declines to render an opinion;</li> <li>(4) Length of time digital files of such asynchronous store-and-forward services are to be maintained;</li> <li>(5) Security and privacy of such digital files;</li> <li>(6) Participant consent for asynchronous store-and-forward services; and</li> <li>(7) Payment for services by providers; except that, consulting providers who decline to render an opinion shall not receive payment under this section unless and until an opinion is rendered.</li> </ol> <p><i>Source: MO Revised Statute Sec. 208.670-671 (2016 SB 579).</i></p>	<p>See State Law column (MO Revised Statute 191.1145 and 191.1146).</p> <p><i>Source: MO Department of Social Services. Provider Bulletin. Vol. 40, No. 47. Feb. 2, 2018. (Accessed Apr. 2018).</i></p> <p>HealthNet will not reimburse for store and forward.</p> <p><i>Source: MO HealthNet, Provider Manual, Behavioral Services, Section 13, p. 201 (Jul. 27, 2017); MO HealthNet, Physician Manual, Telehealth Services, p. 276 (May 4, 2017). (Accessed Apr. 2018).</i></p>
<b>Remote Patient Monitoring Reimbursement</b>	
<p>Subject to appropriations, the Department is required to establish a statewide program that permits reimbursement for home telemonitoring services under MO HealthNet.</p> <p>Eligible conditions:</p> <ul style="list-style-type: none"> <li>• Pregnancy</li> </ul>	<p>See State Law column (MO Revised Statute 191.1145 and 191.1146).</p> <p><i>Source: MO Department of Social Services. Provider Bulletin. Vol. 40, No. 47. Feb. 2, 2018. (Accessed Apr. 2018).</i></p> <p>Personal Emergency Response Systems (an electronic device that is programmed to signal a response center</p>

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<ul style="list-style-type: none"> <li>• Diabetes</li> <li>• Heart disease</li> <li>• Cancer</li> <li>• Chronic obstructive pulmonary disease</li> <li>• Hypertension</li> <li>• Congestive heart failure</li> <li>• Mental illness or serious emotional disturbance</li> <li>• Asthma</li> <li>• Myocardial infarction; or</li> <li>• Stroke</li> </ul> <p>The beneficiary must also exhibit two or more the following risk factors:</p> <ul style="list-style-type: none"> <li>• Two or more hospitalizations in the prior twelve-month period;</li> <li>• Frequent or recurrent emergency department admissions;</li> <li>• A documented history of poor adherence to ordered medication regimens;</li> <li>• A documented history of falls in the prior six-month period;</li> <li>• Limited or absent informal support systems;</li> <li>• Living alone or being home alone for extended periods of time;</li> <li>• A documented history of care access challenges; or</li> <li>• A documented history of consistently missed appointments with health care providers</li> </ul> <p>The program must ensure the home health agency or hospital shares telemonitoring clinical information with participant's physician.</p> <p>If the department finds the program is not cost effective, they may discontinue the program and stop providing reimbursement for telemonitoring services.</p> <p>The department may promulgate rules to implement this section.</p> <p><i>Source: MO Revised Statute Sec. 208.686 (2016 SB 579). <a href="http://www.senate.mo.gov/16info/pdf-bill/tat/SB579.pdf">http://www.senate.mo.gov/16info/pdf-bill/tat/SB579.pdf</a></i></p>	<p>once the help button is activated) is available for patients at high risk of being institutionalized.</p> <p><i>Source: MO HealthNet, Provider Manual, Developmental Disabilities Waiver Manual, Section 13, p. 23 (Jul. 15, 2016). (Accessed Apr. 2018).</i></p>
<b>Email/Phone/FAX</b>	
<p>No reference found.</p>	<p>No reimbursement for email.  No reimbursement for phone.  No reimbursement for fax.  No reimbursement for a consultation between healthcare providers.  No reimbursement for services provided via videophone.</p> <p><i>Source: MO HealthNet, Physician Manual, Telehealth Services, p. 276 (May 4, 2017). (Accessed Apr. 2018).</i></p>
<b>Online Prescribing</b>	

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<p>Prescribing or dispensing drugs without sufficient examination is prohibited.</p> <p><i>Source: MO Revised Statutes § 334.100 (2012).</i></p> <p>The physician-patient relationship may be established by a telemedicine encounter, if the standard of care does not require an in-person encounter, and in accordance with evidence-based standards of practice and telemedicine practice guidelines that address the clinical and technological aspects of telemedicine.</p> <p>In order to establish a physician-patient relationship through telemedicine:</p> <ol style="list-style-type: none"> <li>(1) The technology utilized shall be sufficient to establish an informed diagnosis as though the medical interview and physical examination has been performed in person; and</li> <li>(2) Prior to providing treatment, including issuing prescriptions, a physician who uses telemedicine shall interview the patient, collect or review relevant medical history, and perform an examination sufficient for the diagnosis and treatment of the patient. A questionnaire completed by the patient, whether via the internet or telephone, does not constitute an acceptable medical interview and examination for the provision of treatment by telehealth.</li> </ol> <p><i>Source: MO Revised Statute Sec. 191.1145 (2016 SB 579). <a href="http://www.senate.mo.gov/16info/pdf-bill/tat/SB579.pdf">http://www.senate.mo.gov/16info/pdf-bill/tat/SB579.pdf</a></i></p> <p>No health care provider shall prescribe any drug, controlled substance or other treatment to a patient based solely on an evaluation over the telephone unless there is a previously established and ongoing physician-patient relationship.</p> <p>No health care provider shall prescribe based solely on an internet request or questionnaire.</p> <p><i>Source: MO Revised Statute Sec. 334.108 (2016 SB 579).</i></p>	<p>No reference found.</p>
<b>Consent</b>	
<p><b><u>Services related to pregnancy</u></b> Telehealth providers are required to obtain patient consent.</p> <p><i>Source: MO Revised Statutes § 376.1900.1</i></p> <p><b><u>Collaborative Care Arrangement</u></b> Telehealth providers are required to obtain patient consent and document consent in patient's record.</p> <p><i>Source: MO Code of State Regulation. Title 20, 2150-2.240.</i></p> <p>Telehealth providers using asynchronous store-and-forward technology shall be required to obtain</p>	<p>Providers must obtain written patient consent before delivery of telehealth services.</p> <p><i>Source: MO HealthNet, Provider Manual, Behavioral Services, Section 13, p. 202 (Jul. 27, 2017); MO HealthNet, Physician Manual, Telehealth Services, p. 278 (May 4, 2017) &amp; MO HealthNet, Rural Health Clinic, p. 161 (May 3, 2017), (Accessed Apr. 2018).</i></p>

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<p>participant consent before asynchronous store-and-forward services are initiated and to ensure confidentiality of medical information.</p> <p><i>Source: MO Revised Statute Sec. 208.671 (2016 SB 579).</i></p> <p>If an originating site is a school, a parent or guardian must give permission for telehealth services.</p> <p>Advanced Practice Registered Nurses who provides nursing services under a collaborative practice arrangement must obtain informed consent.</p> <p><i>Source: MO Code of State Rules Sec. 20, 2150-5.100 &amp; MO Revised Statute Sec. 335.175.</i></p>	
<b>Location</b>	
<p>A telehealth eligible originating site for MO HealthNet is one of the following:</p> <ol style="list-style-type: none"> <li>(1) An office of a physician or health care provider;</li> <li>(2) A hospital;</li> <li>(3) A critical access hospital;</li> <li>(4) A rural health clinic;</li> <li>(5) A federally qualified health center;</li> <li>(6) A long-term care facility licensed under chapter 198;</li> <li>(7) A dialysis center;</li> <li>(8) A Missouri state habilitation center or regional office;</li> <li>(9) A community mental health center;</li> <li>(10) A Missouri state mental health facility;</li> <li>(11) A Missouri state facility;</li> <li>(12) A Missouri residential treatment facility licensed by and under contract with the children's division. Facilities shall have multiple campuses and have the ability to adhere to technology requirements. Only Missouri licensed psychiatrists, licensed psychologists, or provisionally licensed psychologists, and advanced practice registered nurses who are MO HealthNet providers shall be consulting providers at these locations;</li> <li>(13) A comprehensive substance treatment and rehabilitation (CSTAR) program;</li> <li>(14) A school;</li> <li>(15) The MO HealthNet recipient's home;</li> <li>(16) A clinical designated area in a pharmacy; or</li> <li>(17) A child assessment center as described in section 210.001.</li> </ol> <p><i>Source: MO Revised Statute Sec. 191.1145 (2016 SB 579).</i></p>	<p>See state law column (MO Revised Statute 191.1145 and 191.1146). The originating site is where the MO HealthNet participant receiving the telehealth service is physically located. The originating site and distant site can be billed by the same provider for the same date of service as long as the distant site is not located in the originating site facility.</p> <p><i>Source: MO Department of Social Services. Provider Bulletin. Vol. 40, No. 47. Feb. 2, 2018. (Accessed Apr. 2018).</i></p> <p>Originating sites must be one of the following:</p> <ul style="list-style-type: none"> <li>• Physician or other health care provider office;</li> <li>• Hospital;</li> <li>• Critical Access Hospital;</li> <li>• Rural Health Clinic;</li> <li>• Federally Qualified Health Center;</li> <li>• Missouri state habilitation center or regional office;</li> <li>• Community mental health center;</li> <li>• Missouri state mental health facility;</li> <li>• Missouri state facility;</li> </ul> <p><i>Source: MO HealthNet, Provider Manual, Behavioral Services, Section 13, p. 202 (Jul. 27, 2017). (Accessed Apr. 2018).</i></p> <p><i>Source: MO HealthNet, Physician Manual, Telehealth Services, p. 276 (May 4, 2017). (Accessed Apr. 2018).</i></p> <p>RHCs may act as a distant site provider but must bill with their non-RHC provider number, the originating site must be an RHC or FQHC.</p> <p><i>Source: MO HealthNet, Rural Health Clinic, p. 161 (May 3, 2017). (Accessed Apr. 2018).</i></p>
<b>Cross-State Licensing</b>	

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<p>Health care providers must be fully licensed to practice in Missouri by their respective professional boards.</p> <p>Exception for the following:</p> <ul style="list-style-type: none"> <li>• Informational consultation performed by licensed out of state providers, outside the context of a contractual relationship and on an irregular or frequent basis without the expectation or exchange of direct or indirect compensation;</li> <li>• Furnishing health care services by a health care provider licensed and located in another state in case of an emergency or disaster, provided that no charge is made for the medical assistance;</li> <li>• Episodic consultation by a provider licensed and located in another state who provides such consultation services on request to a physician in Missouri.</li> </ul> <p><i>Source: MO Revised Statute Sec. 191.1145 (2016 SB 579).</i></p>	<p>Payment cannot be made to entities outside of the US, and US territories.</p> <p><i>Source: MO HealthNet, Physician Manual, Telehealth Services, p. 276 (May 4, 2017). (Accessed Apr. 2018).</i></p>
<b>Private Payers</b>	
<p>Payers are required to provide coverage for services through telehealth, if the same service could have been provided through face to face diagnosis, consultation or treatment.</p> <p><i>Source: MO Revised Statutes § 376.1900.1</i></p>	<p>No reference found.</p>
<b>Site/Transmission Fee</b>	
<p><b>Services related to pregnancy</b> Payers are not required to reimburse telehealth providers for site origination fees or costs for the provision of telehealth.</p> <p><i>Source: MO Revised Statutes § 376.1900.1</i></p> <p><b>Missouri Consolidated Health Care Plan (State employees and retirees health plan)</b> Telehealth site origination fees or costs for the provision of telehealth services are not covered.</p> <p><i>Source: MO Consolidated State Reg. 22:10-3.060.</i></p>	<p>Providers can bill Q3014 for the telehealth originating site facility fee.</p> <p><i>Source: MO Department of Social Services. Provider Bulletin. Vol. 40, No. 47. Feb. 2, 2018. (Accessed Apr. 2018).</i></p> <p>FQHCs and RHCs are eligible for an originating site facility fee.</p> <p><i>Source: MO Department of Social Services. Provider Bulletin. Vol. 40, No. 21. Aug. 29, 2017. (Accessed Apr. 2018).</i></p> <p>Originating sites are eligible to receive a facility fee; distant sites are not eligible. The cost of an optional telepresenter is included in the facility fee.</p> <p><i>Source: MO HealthNet, Provider Manual, Behavioral Services, Section 13, p. 202 (Jul. 27, 2017). (Accessed Apr. 2018).</i></p> <p><i>Source: MO HealthNet, Physician Manual, Telehealth Services, p. 277 (May 4, 2017). (Accessed Apr. 2018).</i></p>
<b>Miscellaneous</b>	
<p>The legislation establishes the “Telehealth Services Advisory Committee” to advise the department of social services and propose rules regarding the coverage of</p>	<p>Special documentation requirements apply.</p>

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<p>telehealth services in MO HealthNet program utilizing store-and-forward technology.</p> <p><i>Source: MO Revised Statute Sec. 208.673 (2016 SB 579).</i></p>	<p>A telehealth service must be performed on a private dedicated telecommunications line approved through the Missouri Telehealth Network (MTN).</p> <p><i>Source: MO HealthNet, Provider Manual, Behavioral Services, Section 13, p. 202 (Jul. 27, 2017) &amp; Physician Services, Section 13, p. 278 (May 4, 2017) &amp; MO HealthNet, Rural Health Clinic, p. 161 (May 3, 2017). (Accessed Apr. 2018).</i></p>