Medical Equipment Services

The state agency will establish fee schedules based on the reasonable charge for the services as defined and determined by the MO HealthNet Division. Reimbursement is the lesser of charges or the published fee schedule amount. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both public and private providers of Durable Medical Equipment, orthotic and prosthetic devices, rehabilitative training, hearing aids and audiology services. The agency’s fee schedule rate was set as of March 1, 2022, and is effective for services provided on or after that date. All rates are published at https://dss.mo.gov/mhd/providers/pages/cptagree.htm. The state payment for each service will be the lower of:

1. The provider's actual charge for the service, or;
2. The allowable fee based on reasonable charge as above determined.

Ambulatory Surgical Care Clinics

The state payment for service will be made on the lower of:

1. The provider's actual charge for the service, or;
2. The Medicaid maximum allowable fee under the established all-inclusive rate.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of ambulatory surgical care clinics. The agency’s fee schedule rate was set as of January 1, 2019 and is effective for services provided on or after that date. All rates are published at https://dss.mo.gov/mhd/providers/pages/cptagree.htm.

Nurse-Midwife Services

The state agency will reimburse providers of nurse-midwife services the lower of the provider's usual and customary charge to the general public or the Medicaid maximum allowable amount. For those services reimbursable as nurse-midwife services, the maximum allowable amount will be the same as the physician fees applicable to comparable services.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of nurse midwife services. The agency’s fee schedule rate was set as of July 1, 2019 and is effective for services provided on or after that date. All rates are published at https://dss.mo.gov/mhd/providers/pages/cptagree.htm.

State Plan TN# 22-0001
Supersedes TN# 19-0016

Effective Date February 1, 2022
Approval Date ____________