Personal Care	
Coverage Group/ME Codes	Covered
MO HealthNet for Adults 05, 10,19, 21, 24, 26, E2	Yes
MO HealthNet for Pregnant Women 18, 43, 44, 61, 95, 96, 98	Yes
MO HealthNet for Kids 06, 07, 08, 29, 30, 36, 37, 38, 40, 50, 52, 56, 57, 60, 62,	
64, 65, 66, 68, 70	Yes
CHIP Kids 71, 72, 73, 74, 75, 97	Yes
Uninsured Women's Health Services 80, 89	No
Traditional Medicaid 01, 04, 11, 13, 14, 16, 85, 86	Yes
	105
BCCCP 83, 84	Yes
Blind Programs 02, 03, 12, 15	Yes
Children's Programs 23, 28, 33, 34, 41, 49, 67, 88	Limited
Cinici Citi S 110grafiis 23, 20, 33, 34, 41, 43, 07, 80	Linited
Temporary Women's Assistance for Pregnant Women 58, 59, 94	No
Presumptive Eligibility for Children 87	Yes
Qualified Medicare Benficiary (QMB) 55	No
Qualified Medicale Berlicialy (QMB) 55	No
Missouri RX Plan (MORx) 82	No
Notes: *Does not include ME 23 and 41	
Personal Care Manual	
Provider Bulletins	
Please check fee schedule; certain restrictions apply.	