

John R. Ashcroft
Secretary of State
Administrative Rules Division

RULE TRANSMITTAL

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SECRETARY OF STATE
ADMINISTRATIVE RULES

COPY
001205

Rule Number 13 CSR 70-25.140

Use a "SEPARATE" rule transmittal sheet for EACH individual rulemaking.

Name of person to call with questions about this rule:

Content Sharie Hahn Phone (573) 522-8368 FAX (573) 522-6092

Email address Sharie.L.Hahn@dss.mo.gov

Data Entry Aaron Mealy Phone (573) 526-0414 FAX (573) 522-6092

Email address Aaron.Mealy@dss.mo.gov

Interagency mailing address DLS, Broadway Bldg, 221 W High Street, Room 230

TYPE OF RULEMAKING ACTION TO BE TAKEN

Emergency Rulemaking __ Rule __ Amendment __ Rescission __ Termination

Effective Date for the Emergency _____

Proposed Rulemaking Rule __ Amendment __ Rescission

Rule Action Notice In Addition Rule Under Consideration

Request for Non-Substantive Change

Statement of Actual Cost

Order of Rulemaking __ Withdrawal __ Adopt __ Amendment __ Rescission

Effective Date for the Order _____

Statutory 30 days OR Specific date _____

Does the Order of Rulemaking contain changes to the rule text? NO

YES—LIST THE SECTIONS WITH CHANGES, including any deleted rule text:

Small Business Regulatory
Fairness Board (DED) Stamp

SMALL BUSINESS
REGULATORY FAIRNESS BOARD
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JCAR Stamp

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By Joint Committee on Administrative Rules at 2:10 pm, Aug 27, 2020

STATE CAPITOL
201 W. CAPITOL AVENUE, ROOM 216
JEFFERSON CITY, MISSOURI 65101



(573) 751-3222
WWW.GOVERNOR.MO.GOV

Michael L. Parson

GOVERNOR
STATE OF MISSOURI

August 17, 2020

Sharie Hahn
Special Counsel
Missouri Department of Social Services
Broadway State Office Building
Jefferson City, MO 65102

Dear Sharie:

This office has received your Proposed Rulemaking for the following regulation:

- 13 CSR 70-25.140 Biopsychosocial Treatment of Obesity for Vouth and Adults

Executive Order 17-03 requires this office's approval before state agencies release proposed regulations for notice and comment, amend existing regulations, rescind regulations, or adopt new regulations. After our review, we approve the submission to JCAR and the Secretary of State.

Sincerely,

A handwritten signature in black ink, appearing to read "Caroline M. Coulter".

Caroline M. Coulter
Deputy General Counsel

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MICHAEL L. PARSON, GOVERNOR • JENNIFER TIDBALL, ACTING DIRECTOR

SHARIE L. HAHN, DIRECTOR
DIVISION OF LEGAL SERVICES
P.O. BOX 1527 • BROADWAY STATE OFFICE BUILDING • JEFFERSON CITY, MO 65102-1527
WWW.DSS.MO.GOV • 573-751-3229 • 573-522-6092 FAX

August 27, 2020

Waylene W. Hiles, Director
Joint Committee on Administrative Rules
Capitol Building, Room B-8
Jefferson City, MO 65101

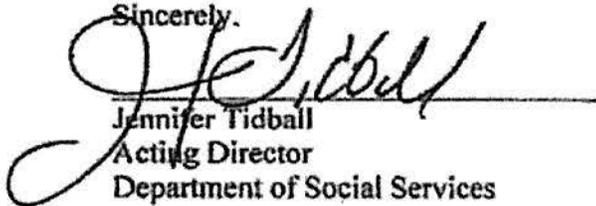
Dear Ms. Hiles:

RE: 13 CSR 70-25.140 Biopsychosocial Treatment of Obesity for Youth and Adults

Attached is an accurate and complete copy of the proposed order regarding proposed rule 13 CSR 70-25.140. This proposed order will be filed concurrently with the Secretary of State.

Statutory authority: sections 208.152, 208.201, and 660.017, RSMo.

Sincerely,


Jennifer Tidball
Acting Director
Department of Social Services

Attachments

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

TDD / TTY: 800-735-2966

RELAY MISSOURI: 711

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August 27, 2020

John R. Ashcroft
Secretary of State
Administrative Rules Division
600 West Main Street
Jefferson City, Missouri 65101

RE: 13 CSR 70-25.140 Biopsychosocial Treatment of Obesity for Youth and Adults

Dear Secretary of State Ashcroft:

CERTIFICATION OF ADMINISTRATIVE RULE

I do hereby certify that the attached is an accurate and complete copy of the proposed rulemaking lawfully submitted by the MO HealthNet Division, Department of Social Services.

The MO HealthNet Division, Department of Social Services further certifies that it has conducted an analysis of whether or not there has been a taking of real property pursuant to section § 536.017, RSMo 2000, that the proposed rulemaking does not constitute a taking of real property under relevant state and federal law.

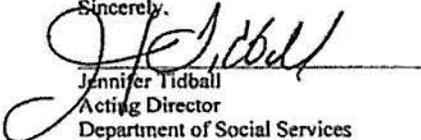
The MO HealthNet Division, Department of Social Services has determined and hereby also certifies that if the proposed rulemaking does affect small business pursuant to sections 536.300 to 536.310, RSMo, a small business impact statement has been filed as required by those sections. If no small business impact statement has been filed the proposed rulemaking either does not affect small business or the small business requirements do not apply pursuant to section 536.300.4, RSMo.

Statutory Authority: sections 208.152, 208.201, and 660.017, RSMo.

If there are any questions regarding the content of this proposed rulemaking, please contact:

Sharie Hahn
221 West High Street, Room 230
Jefferson City, MO 65102
573-526-0414
Sharie.L.Hahn@dss.mo.gov

Sincerely,


Jennifer Tidball
Acting Director
Department of Social Services

Attachments

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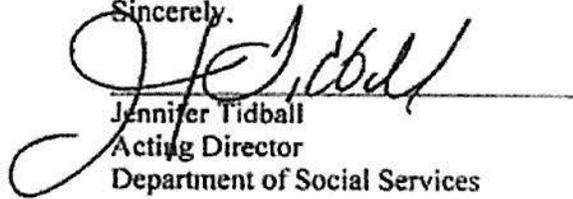
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**DECLARATION
OF PUBLIC COST**

I, Jennifer Tidball, Acting Director of the Missouri Department of Social Services, do declare that it is my opinion that the attached fiscal note for the proposed rule to 13 CSR 70-25.140 is a reasonably accurate estimate.

Sincerely,



Jennifer Tidball
Acting Director
Department of Social Services

**FISCAL NOTE
PUBLIC COST**

- I. Department Title:** Title 13 - Department of Social Services
Division Title: Division 70 – MO HealthNet Division
Chapter Title: Chapter 25 – Physician Program

Rule Number and Name:	13 CSR 70-25.140 Biopsychosocial Treatment of Obesity for Youth and Adults
Type of Rulemaking:	Proposed Rule

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Department of Social Services, MO HealthNet Divison	Annual Cost – FY 21 \$36,038 (6 months) Annual Cost – FY 22 \$158, 177

III. WORKSHEET

The program is scheduled to begin April 1, 2021. The annual cost for six months of FY21 is estimated to be \$36,038 with \$16,440 for children and \$19,598 for adults The annual cost for FY22 is estimated to be \$158,177 with \$55,800 for children and \$102,377.

IV. ASSUMPTIONS

The annual cost for six months of FY 2021 is estimated to be \$36,038 (children \$16,440 and adults \$19,598). The annual cost for FY 2022 is estimated to be \$158,177 (children \$55,800 and adults \$102,377). Due to the implementation schedule for the services savings will not be realized in FY21; however the annual cost savings for FY22 is estimated at \$507,149 (children \$95,144 and adults \$412,005).

CHILDREN SFY 2021 (6 Months)

Month	Year	Percent of Eligible Population Enrolled	Number of Children Receiving IBT Services	Cost (\$60 PMPM)	Savings (\$106 PMPM)	Net Savings (Impact)
January	2021	15%	20	\$1,200	\$2,120	(1,200.00)
February	2021	23%	30	\$1,800	\$3,180	(1,800.00)
March	2021	31%	40	\$2,400	\$4,240	(2,400.00)
April	2021	39%	51	\$3,060	\$5,406	(3,060.00)
May	2021	47%	61	\$3,660	\$6,466	(3,660.00)
June	2021	55%	72	\$4,320	\$7,632	(4,320.00)
				\$16,440	\$29,044	(16,440.00)

ADULTS SFY 2021 (6 Months)						
Month	Year	Percent of Eligible Population Enrolled	Number of Adults Receiving IBT Services	Cost (\$41 PMPM)	Savings (\$206 PMPM)	Net Savings (Impact)
January	2021	15%	34	\$1,394	\$7,004	(1,394.00)
February	2021	23%	52	\$2,132	\$10,712	(2,132.00)
March	2021	31%	71	\$2,911	\$14,626	(2,911.00)
April	2021	39%	89	\$3,649	\$18,334	(3,649.00)
May	2021	47%	107	\$4,387	\$22,042	(4,387.00)
June	2021	55%	125	\$5,125	\$25,750	(5,125.00)
				\$19,598	\$98,468	(19,598.00)

TOTAL CHILDREN AND ADULTS SFY 2021

\$36,038

(36,038.00)

(First 6 months of 'Year 1')

CHILDREN SFY 2022 (Year 1 and Year 2 Services)

Month	Year	Percent of Eligible Population Enrolled	Number of Children Receiving IBT Services	Cost (\$60 PMPM July - Dec) (\$22 PMPM Jan - June)	Savings (\$106 PMPM)	Net Savings (Impact)
July	2021	63%	82	\$4,920	\$8,692	3,772.00
August	2021	71%	92	\$5,520	\$9,752	4,232.00
September	2021	79%	103	\$6,180	\$10,918	4,738.00
October	2021	87%	113	\$6,780	\$11,978	5,198.00
November	2021	95%	124	\$7,440	\$13,144	5,704.00
December	2021	100%	130	\$7,800	\$13,780	5,980.00
January	2022	100%	130	\$2,860	\$13,780	10,920.00
February	2022	100%	130	\$2,860	\$13,780	10,920.00
March	2022	100%	130	\$2,860	\$13,780	10,920.00
April	2022	100%	130	\$2,860	\$13,780	10,920.00
May	2022	100%	130	\$2,860	\$13,780	10,920.00
June	2022	100%	130	\$2,860	\$13,780	10,920.00
				\$55,800	\$150,944	95,144.00

ADULTS SFY 2022 (Year 1 and Year 2 Services)						
Month	Year	Percent of Eligible Population Enrolled	Number of Adults Receiving IBT Services	Cost (\$41 PMPM July - Dec) (\$22 PMPM Jan - June)	Savings (\$206 PMPM)	Net Savings (Impact)
July	2021	63%	144	\$5,904	\$29,664	23,760.00
August	2021	71%	162	\$6,642	\$33,372	26,730.00
September	2021	79%	180	\$7,380	\$37,080	29,700.00
October	2021	87%	198	\$8,118	\$40,788	32,670.00
November	2021	95%	217	\$8,997	\$44,702	35,805.00
December	2021	100%	228	\$9,348	\$46,968	37,620.00
January	2022	100%	228	\$9,348	\$46,968	37,620.00
February	2022	100%	228	\$9,348	\$46,968	37,620.00
March	2022	100%	228	\$9,348	\$46,968	37,620.00
April	2022	100%	228	\$9,348	\$46,968	37,620.00
May	2022	100%	228	\$9,348	\$46,968	37,620.00
June	2022	100%	228	\$9,348	\$46,968	37,620.00
				\$102,377	\$514,382	412,005.00

TOTAL CHILDREN AND ADULTS SFY 2022 **\$158,177** **(\$507,149)**

(Second 6 months of 'Year 1' and First 6 months of 'Year 2')

**FISCAL NOTE
PRIVATE COST**

- I. Department Title:** Title 13 – Department of Social Services
Division Title: Division 70 – MO HealthNet Division
Chapter Title: Chapter 25 – Physician Program

Rule Number and Title:	13 CSR 70-25.140 Biopsychosocial Treatment of Obesity for Youth and Adults
Type of Rulemaking:	Proposed Rule

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
30	Intensive Behavioral Therapy Providers	\$164,303
20	Medical Nutrition Therapy-Registered Dietitians	\$12,260

III. WORKSHEET

The total annual private cost will be \$176,563. The program is scheduled to begin January 1, 2021. FY 2021 six month cost of \$88,282. FY 2022 cost of \$176,563. The training costs will only be incurred if the provider chooses to become a provider for these services.

IV. ASSUMPTIONS

Cost for Training providers to deliver family-based behavioral treatment for obesity.

Training and Supervision by Subject matter experts	\$50,502
Materials expense	\$2,250
Meeting expense	\$13,515
CEU	\$15,750
Annual continuing education	\$1,368
Travel, lodging and meals	\$13,620
Administration (maintain registry, recruitment, Website content, electronic management, Overhead)	\$67,298
Total Cost	\$164,303

Cost to obtain Certificate in Training for Adult Weight Management or Certificate in Training for Child and Adolescent Weight Management.

Registration Fee	\$7,400
Travel, lodging and meals	\$4,860
<hr/>	
Total Cost	\$12,260

Small Business Regulatory Fairness Board Small Business Impact Statement

Date: August 27, 2020

Rule Number: 13 CSR 70-25.140 Biopsychosocial Treatment of Obesity for Youth and Adults

Name of Agency Preparing Statement: MO HealthNet Division

Name of Person Preparing Statement: Kim Johnson

Phone Number: 573-751-7988 **Email:** Kimberly.A.Johnson@dss.mo.gov

Name of Person Approving Statement: Nanci Nikodym

Please describe the methods your agency considered or used to reduce the impact on small businesses

We assembled a group of stakeholders to inform the development of biopsychosocial treatment of obesity services. This group consisted of experts in obesity treatment for youth and adults. We have been working with this group of experts for several months to solicit their input to the program. This proposed rule establishes expectations and standards for biopsychosocial treatment of obesity for both youth and adults. The main cost to providers will come from obtaining and maintaining the required certification and/or certificate training for medical nutrition therapy and intensive behavioral therapy for the treatment of obesity for youth and adults. With the engaged experts, we derived the most appropriate method of training and eligibility criteria for both providers.

Please explain how your agency has involved small businesses in the development of the proposed rule.

Our division had many conference calls with the group of experts to provide input to this rule change, and included them in the development of these rule changes and updates. We have consistently asked this group for suggestions and comments and have made appropriate modifications to the changes in response to their feedback. We have sent them our correspondence and drafts to review and suggest modifications if needed. We continue to have these calls and meetings to complete this rule update.

Please list the probable monetary costs and benefits to your agency and any other agencies affected. Please include the estimated total amount your agency expects to collect from additionally imposed fees and how the moneys will be used.

There is a potential savings for implementation of biopsychosocial treatment of obesity in youth and adults. Obesity leads to increased healthcare costs for individuals and,

ultimately, for the MO HealthNet program covering obese individuals. Reducing obesity will reduce these costs. The annual cost for six months of FY 2021 is estimated to be \$36,011 (children \$16,380 and adults \$19,631). The annual cost for FY 2022 is estimated to be \$132,139 (children \$55,770 and adults \$76,369). Due to the implementation schedule for the services, the state will not realize savings in FY21. The department estimates the annual cost savings for FY22 at \$428,273 (children \$97,149 and adults \$331,124). The goal of the this program is to improve health outcomes for both the youth and adult population by managing obesity and the associated co-morbidities such as heart disease, stroke, and diabetes.

Please describe small businesses that will be required to comply with the proposed rule and how they may be adversely affected.

This rule will require small independent provider practices and hospital-based providers that seek to provide services under this rule to obtain prior authorization from MO HealthNet. There will be no new costs incurred by the referring/prescribing providers. In order to provide services, medical nutrition therapy and intensive behavioral therapy providers will be required to meet the established provider requirements of obtaining a certification and/or certificate, or qualify to provide services based on prior experience and/or training. These criteria will potentially create an initial cost for the providers to obtain the certification and/or certificate, as well as for continuing education.

Please list direct and indirect costs (in dollars amounts) associated with compliance.

This rule will require medical nutrition therapy and intensive behavioral therapy providers to enroll as MO HealthNet providers in order to receive reimbursement for their services. This rulemaking can result in additional revenue for small businesses. The individuals seeking to provide these services for eligible MHD participants will need to meet the required provider eligibility criteria of obtaining a certification and/or certificate, or qualify to provide services based on prior experience and/or training. There are associated costs with each certification and/or certificate training program.

The Certificate in Training for Adult Weight Management course is a two and a half day course with pre and post course materials and testing with a cost of \$370. The Certificate in Training for Child and Adolescent Weight Management is also a two and a half day program with pre and post course materials and testing with a cost of \$370. There will be associated costs of lodging and travel as these courses are multiple days and are not currently taught in Missouri. As part of the provider criteria enrolled providers must maintain 6 obesity related continuing education units (CEUs) or professional equivalent every two years.

The training program for Intensive Behavioral Therapy Certification includes a qualified training program with variable costs depending on the institution that the training occurs and the availability of additional funding. Training institutions may have access to additional funding that will partially or fully cover the cost of the training for these

providers. As part of the provider criteria enrolled providers must maintain 6 obesity related continuing education units (CEUs) or professional equivalent every two years.

This program provides an alternate option for both medical nutrition therapy and intensive behavioral therapy providers that have previous experience working with participants with obesity to be able to provide services without a certificate and/or certification.

The criteria for providers to be eligible to provide services without a certificate and/or certification include the following:

- a provider must have maintained their licensure credentials for a minimum of two (2) years;
- provide documentation of a minimum of two thousand (2,000) of specialty practice delivering weight management within the past 5 years;
- and have documented a minimum of six (6) hours of obesity or weight management continuing education units (CEUs) or professional equivalent post receipt of license.
- Providers following these criteria must also maintain six (6) obesity related continuing education units (CEUs) or professional equivalent every two (2) years in order to continue providing services.

There are many options available to individuals needing to receive CEUs to maintain their certifications including webinars, conferences, and participating in self-paced online courses. The cost of a CEU depends on the type of CEU obtained.

Please list types of business that will be directly affected by, bear the cost of, or directly benefit from the proposed rule.

This rule will affect eligible Medical Nutrition Providers and Intensive Behavioral Therapy Providers providing services within the Biopsychosocial Treatment of Obesity for Youth and Adults Program.

Does the proposed rule include provisions that are more stringent than those mandated by comparable or related federal, state, or county standards?

Yes ___ No X

If yes, please explain the reason for imposing a more stringent standard.

For further guidance in the completion of this statement, please see §536.300, RSMo.

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DEPARTMENT OF SOCIAL SERVICES
Division 70 – MO HealthNet Division
Chapter 25 – Physician Program

SECRETARY OF STATE
ADMINISTRATIVE RULES

PROPOSED RULE

COPY

13 CSR 70-25.140 Biopsychosocial Treatment of Obesity for Youth and Adults

PURPOSE: This rule establishes the MO HealthNet payment policy for the biopsychosocial treatment of obesity for youth and adult participants. The goal of this policy is to improve health outcomes for both the youth and adult population by managing obesity and associated comorbidities.

(1)Administration. The MO HealthNet Division, Department of Social Services, shall administer Biopsychosocial Treatment of Obesity for Youth and Adult participants. Biopsychosocial treatment of obesity services covered and not covered, the limitations under which services are covered, and the maximum allowable fees for all covered services shall be determined by the MO HealthNet Division and shall be included in the MO HealthNet Physician Provider Manual and Behavioral Health Services Manual, which are incorporated by reference and made part of this rule as published by the Department of Social Services, MO HealthNet Division, 615 Howerton Court, Jefferson City, MO 65109, at its website at, <http://manuals.momed.com/manuals/>, August 7, 2020. This rule does not incorporate any subsequent amendments or additions. Biopsychosocial treatment of obesity services covered by the MO HealthNet program shall include only those which are shown to be medically necessary.

(A) In the administration of the rule, the following definitions are used:

1. “Biopsychosocial Treatment of Obesity” means using a combination of obesity screenings, Medical Nutrition Therapy (MNT), and Intensive Behavioral Therapy (IBT) to promote life style changes leading to weight loss in adult and youth participants.

A. “Adult Intensive Behavioral Therapy (IBT)” means obesity management by utilizing intensive multicomponent, behavior-based weight loss interventions that promote and sustain weight loss in adult participants.

B. “Youth Intensive Behavioral Therapy (IBT)” means obesity management by utilizing comprehensive, intensive behavior-based weight loss interventions that can include multi-component family-based behavioral treatment (FBT) interventions tailored to participant needs targeting both the parent/guardian and the youth.

2. “Body Mass Index (BMI)” means a measure that relates body weight to height and is calculated by dividing weight in kilograms (kg) by the square of height in meters (expressed in kg/m²).

A. “Body Mass Index (BMI) Percentile” means the range of BMI values as expressed in percentiles for age and gender as plotted on the pediatric BMI chart.

B. “Pediatric Body Mass Index (BMI) Chart” means a graphic display of normal progressive changes in body mass index for the pediatric population ages two (2) to twenty (20) years of age.

3. “Consultation” for the purpose of this rule means the experienced behavioral health clinician who meets provider requirements for Intensive Behavioral Therapy (IBT) outlined in this

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By Joint Committee on Administrative Rules at 2:11 pm, Aug 27, 2020

regulation support and evaluate the newly certified provider's competency in delivery of behaviorally based intervention for patients diagnosed with obesity.

4. "Medical Nutrition Therapy (MNT)" means nutritional diagnostic, therapy, and counseling services furnished by a registered dietitian, and includes a review of nutritional health, eating habits, and development of an individualized nutrition plan.

5. "Qualified University" means a United States regionally accredited college, university, or foreign equivalent, or an academic university-based medical center affiliated with such a university.

(2) Provider Participation. To be eligible to provide services for the MO HealthNet Biopsychosocial Treatment of Obesity Program:

(A) All Biopsychosocial Treatment of Obesity service providers must be enrolled as MO HealthNet providers.

(B) Provider Requirements for MNT. In order to provide medical nutrition therapy for obesity a provider is required to meet the following criteria:

1. Have a current license to practice as a Licensed Registered Dietitian in the state in which they practice;

2. The Provider will need to obtain one of the following specialist certificates in order to provide MNT for treatment of obesity:

A. Certificate of Training in Adult Weight Management Program;

B. Certificate of Training in Obesity Interventions for Adults;

C. Certificate of Training in Child and Adolescent Weight Management; or

D. Completion of a qualified training program that provides professional medical nutrition therapy training addressing obesity and weight management treatment for participant population(s) served.

3. A licensed provider may provide MNT without a certificate as listed above if the provider meets the following criteria:

A. The provider has maintained a dietitian license credential for a minimum of two (2) years;

B. The provider has documentation of a minimum of two thousand (2,000) hours of specialty practice experience delivering weight management MNT for individuals and/or families and youth with obesity diagnosis within the past five (5) years; and

C. The provider has documentation of a minimum of six (6) hours of obesity or weight management CEUs or professional equivalent post receipt of license credential.

(C) Provider Requirements for IBT. In order to provide individual and/or group intensive behavioral therapy (IBT) and/or family-based behavioral treatment (FBT) for youth and adults a provider is required to meet the following criteria:

1. Have a current license to practice as one of the following provider types: psychiatrist, clinical social worker, psychologist, or professional counselor, marital and family therapist, or psychiatric advanced practice registered nurses. Registered dietitians are eligible to provide group IBT and/or FBT.

2. A specialist certification for the participant population(s) served that was attained through completion of a qualified training program that addresses delivery of behaviorally based intervention for adult and/or youth participants diagnosed with obesity.

3. A licensed provider may provide IBT without a certificate with the following criteria:

A. The licensed provider has maintained one of the aforementioned license credentials for a minimum of two (2) years;

B. The provider has a minimum of two thousand (2,000) hours of specialty practice experience delivering weight management behavioral treatment for individuals and/or families and youth with obesity diagnosis within the past five (5) years; and

C. The provider will have documentation with a minimum of six (6) hours of obesity or weight management CEUs or professional equivalent post receipt of license credential.

(D) Continuing Education Unit (CEU) requirement. The provider must maintain six (6) hours of obesity or weight management CEUs or professional equivalent every two (2) years for the patient population served, either youth or adult or both.

1. The required evaluation and documentation on compliance with certification standards post completion of a qualified training program from an experienced provider does not count toward the 6 hours of CEUs.

(E) The provider must meet the provider qualifications outlined in this regulation in order to bill Medicaid for the service.

(3) Qualified Training Program Requirements.

(A) A qualified training program has stated learning objectives for the course content and includes the following:

1. Content-expert instruction and interactive discussion (which may occur face-to-face or by electronic delivery);

2. Course materials developed by professionals with demonstrated expertise in the content area.

3. Content areas cover evidence-based approaches to effectively deliver weight management and obesity treatment for adult and/or youth participants using a family-centered, comprehensive approach.

4. Sponsored by or conducted in affiliation with a qualified university.

(B) The training program for youth and adults participants shall contain a mix of didactics with simulation work conducted by members of the training center staff.

(C) The qualified training program shall provide a certificate upon completion of the program.

(D) Qualified training programs on IBT and FBT shall provide a means for newly certified behavioral providers to receive evaluation and documentation on compliance with post-program certification standards from an experienced provider using established procedures.

1. After completion of the qualified training program for IBT, the provider is certified for one (1) year.

2. To receive the specialty certificate after one year to continue delivering IBT/GBT, the provider is required to complete clinical consultations with an experienced IBT/GBT provider in accordance with established procedures.

3. The qualified training program will provide those completing the program details on how to obtain a renewal specialist certification and a list of experienced eligible providers to provide consultation and review IBT/GBT competency.

4. Renewal of specialist certification for IBT/GBT will not be issued until the new provider receives documentation on compliance with certification standards from an experienced provider.

(4) Participant Criteria. Any person who is eligible for Title XIX benefits from the Family Support Division and who also meets the following criteria shall be deemed eligible to receive these services:

(A) Be five (5) through twenty (20) years of age for youth services or twenty-one (21) years of age or older for adult services;

(B) Not currently pregnant; and

(C) Be obese by meeting the following criteria:

1.) For youth participants a body mass index (BMI) percentile equal to or greater than the ninety-fifth (95th) percentile for age and gender on the pediatric body mass index (BMI) chart.

2.) For adult participants a body mass index (BMI) equal to or greater than thirty (30).

(D) Not concurrently receiving authorization for other MO HealthNet reimbursed weight reduction services.

(5) Biopsychosocial Treatment of Obesity Services:

(A) Biopsychosocial Treatment of Obesity Services provide integrated medical nutrition therapy and behavioral health services, coordinated by the primary care or referring physician, or other licensed practitioner of healing, to facilitate behavior changes to manage obesity and associated co-morbidities. Biopsychosocial treatment of obesity for youth and adult participants requires a referral and a prescribed service in the participant's plan of care from a prescribing provider as part of an office visit for evaluation and management. The prescribing provider must obtain prior authorization from MO HealthNet before the participant starts receiving services. A prescribing provider is defined as a physician or other licensed practitioner of healing arts within the scope of authorized practice under State law.

1. Service structure for youth participants:

A. Biopsychosocial Treatment of Obesity Youth Services include a six (6) month period of intervention that allows a maximum of four (4) hours of individual IBT and twenty-two (22) hours of group IBT for a total of twenty-six (26) hours of IBT and one (1) hour and (45) minutes of MNT.

B. Upon completion of the month six (6) of services, the dietitian and behavioral health provider shall make recommendations regarding continuation of services after six (6) months based on the continuation criteria set forth by MO HealthNet to the prescribing provider. The prescribing provider shall make the final determination for the participant to continue with the services based on the participant meeting the continuation criteria and request the prior authorization for the additional six (6) months of services.

C. Continuation Criteria for the youth participant months seven (7) through twelve (12) include the following:

(I) The youth participant must meet whichever is lesser of the three (3) youth benchmarks listed below, at the end of month six (6) of services.

(a) A decrease in their BMI chart percentile to less than the ninety-fifth (95th) percentile or 5% of body weight;

(b) The youth participants that had a BMI percentile at the beginning of treatment >99th percentile, shows a decrease of 9 units in percentage above the 95th percentile (as calculated by age and gender norms of the CDC BMI percentile curve); OR

(c) Weight stabilization (defined as ± 0.5 BMI units).

(II) If the youth participant does not meet the weight loss threshold, the prescribing provider shall perform the necessary lab work to rule out the presence of other conditions (e.g., endocrine disorders) that may complicate efforts to reduce weight, and if present, should request to continue with biopsychosocial treatment with medical treatment for the identified condition(s).

D. Continuation of Biopsychosocial Treatment of Obesity Youth services for months seven (7) through twelve (12) include an additional one (1) hour of individual IBT and two (2) hours of group IBT for a maximum of three (3) hours of IBT; and an additional thirty (30) minutes of MNT.

E. Providers are able to structure the services in order to meet the individual needs of the participant within the maximum allowable service structure. The total annual limit for services for

the youth participant is twenty-nine (29) hours for IBT and two (2) hours and fifteen (15) minutes for MNT.

F. If the parent or caregiver does not notify the MNT or IBT providers of absences of the patient and have missed four or more sessions, the MNT or IBT provider may reevaluate the need for further services.

1. Service structure for adult participants:

A. Biopsychosocial Treatment of Obesity Adult Services include a six (6) month period of intervention that allows a maximum of three (3) hours of individual behavior therapy and nine (9) hours of group behavior therapy for a total of twelve (12) hours of behavior therapy and one (1) hour forty-five (45) minutes hours of MNT.

B. Upon completion of the month six (6) of services, the dietitian and behavioral health provider shall make recommendations regarding continuation of services after six (6) months based on the continuation criteria set forth by MO HealthNet to the prescribing provider. The prescribing provider shall make the final determination for the participant to continue with the services based on the participant meeting the continuation criteria and request the prior authorization for the additional six (6) months of services.

C. Continuation Criteria for the adult participant months seven (7) through twelve (12) include the following:

(I) The adult participant must meet the adult benchmark of a reduction in body weight of five (5) percent at the end of month six (6) of services.

(II) If the adult participant does not meet the weight loss threshold, the prescribing provider shall perform the necessary lab work to rule out the presence of other conditions (e.g. endocrine disorders) that may complicate efforts to reduce weight, and if present, should request to continue with biopsychosocial treatment with medical treatment for the identified condition(s).

D. Continuation of Biopsychosocial Treatment of Obesity Adult services for months seven (7) through twelve (12) include an additional one (1) hour of individual IBT and two (2) hours of group IBT for a maximum of three (3) hours of IBT; and an additional thirty (30) minutes of MNT.

E. Providers are able to structure the services in order to meet the individual needs of the participant within the maximum allowable service structure. The total annual limit for services for the adult participants is fifteen (15) hours for behavior therapy and two (2) hours fifteen (15) minutes for medical nutritional therapy.

F. A participant that is unable to meet the continuation criteria for the additional six (6) months of Biopsychosocial Treatment of Obesity services has the option, after twelve (12) months, to re-enroll for services if the participant meets the established criteria and has an approved prior authorization.

G. If the participant does not notify the provider of absences and has missed two or more sessions, the provider may reevaluate the need for further services.

(7) Documentation Requirements for Biopsychosocial Treatment of Obesity

(A) The participant's treatment record shall contain the following documentation, at a minimum:

1. The referring provider's referral with approval from MO HealthNet for months one (1) through six (6) of services;

2. The medical nutritional assessment completed by the dietitian;

3. The initial behavioral assessment completed by the behavioral health provider;

4. Progress notes that include the following information from each visit:

A. A measured weight and calculated BMI for adult participants or BMI percentile for youth participants.

B. Progress the youth/parent/participant is making towards weight loss goals;
C. Challenges (social determinants) the participant is facing and proposed solutions;
D. Recommendations for treatment/care plans; and
E. Collaborative efforts between the providers delivering primary care, medical nutritional therapy, and intensive behavioral therapy;

5. The documented evaluation by the dietitian, behavioral health provider, and referring provider at the end of six (6) months to determine the appropriateness for continuation of services. This should include documented progress towards weight loss goals, a desire to continue receiving services, and confirmation of met continuation criteria.

6. If applicable the referring provider's referral with approval from MO HealthNet for months seven (7) through (12) of services;

7. Final evaluation at the end of the twelve (12) month period including documented metabolic, social, and behavior change endpoints and identified barriers to maintaining weight loss if the participant qualified for continuation of services; and

8. Once services are completed, the prescribing provider shall maintain a treatment record, incorporating recommendations provided by the dietitian and behavioral health provider as appropriate, which outlines how the participant will maintain the weight loss.

(B) The behavioral health provider and dietitian must complete a six (6) month evaluation and the final evaluation report detailing the amount of weight lost over the treatment period, progress with metabolic, social, and behavior change endpoints, challenges to maintaining weight loss, and any future recommendations for maintaining the weight loss in the context of identified challenges. Both evaluations shall be shared with the referring provider and will become part the treatment record. The referring provider may incorporate these recommendations and considerations into ongoing care planning and patient management.

(8) Reimbursement Methodology

(A) MO HealthNet provides reimbursement to enrolled providers providing biopsychosocial treatment of obesity for youth and adults and who are currently licensed, certified and in good standing with the state.

(B) Reimbursement for services is made on a fee-for-services 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. Payment for covered services is the lower of the provider's actual billed charge (should be the provider's usual and customary charge to the general public for the service), or the maximum allowable per unit of service. Reimbursement shall only be made for services authorized by MO HealthNet or its designee.

AUTHORITY: Sections 208.152, 208.201, and 660.017, RSMo. Original rule filed August 27, 2020.

PUBLIC COST: The program is scheduled to begin January 1, 2021. The annual cost for six months of FY21 is estimated to be \$36,011 with \$16,380 for children and \$19,631 for adults. The annual cost for FY22 is estimated to be \$132,139 with \$55,770 for children and \$76,369 for adults.

The annual cost for six months of FY 2021 is estimated to be \$36,011 (children \$16,380 and adults \$19,631). The annual cost for FY 2022 is estimated to be \$132,139 (children \$55,770 and adults \$76,369). Due to the implementation, schedule for the services savings will not be realized

in FY21; however the annual cost savings for FY22 is estimated at \$428,273 (children \$97,149 and adults \$331,124).

PRIVATE COST: The total annual private cost will be \$176,563. The program is scheduled to begin January 1, 2021. FY 2021 six month cost of \$88,282. FY 2022 cost of \$176,563. The training costs will only be incurred if the provider chooses to become a provider for these services.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Department of Social Services, Legal Services Division-Rulemaking, PO Box 1527, Jefferson City, MO 65102-1527, or by email to Rules.Comment@dss.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.