Rules of
Department of Social Services
Division 70—MO HealthNet Division
Chapter 55—Nurse-Midwife Program

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Title 13—DEPARTMENT OF SOCIAL SERVICES
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13 CSR 70-55.010 MO HealthNet Program Benefits for Nurse-Midwife Services

PURPOSE: The purpose of this rule is to establish, via regulation, the Department of Social Services’ MO HealthNet Division guidelines regarding MO HealthNet coverage and reimbursement for services provided by nurse-midwives as mandated in Title 42 CFR 440.220(1).

PUBLISHER’S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

(1) Administration. The Nurse-Midwife Program shall be administered by the Department of Social Services, MO HealthNet Division. The medical services covered and not covered, the program limitations, and the maximum allowable fees for all covered services shall be determined by the Department of Social Services, MO HealthNet Division, and shall be included in the Nurse-Mid-Wife Program provider manual and provider bulletins, which are incorporated by reference and made a 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 www.dss.mo.gov/mhd, June 15, 2009. This rule does not incorporate any subsequent amendments or additions.

(2) Persons Eligible. Any person who is eligible for MO HealthNet benefits from the Department of Social Services and is in need of medical services in accordance with the procedures described in this regulation.

(3) Provider Participation. To be eligible for participation in the MO HealthNet Nurse-Midwife Program, a provider must meet the following criteria:

(A) Be currently licensed and maintain an active license as a registered nurse.
1. A nurse-midwife who resides in or outside Missouri and who practices in whole or in part in Missouri must be a currently licensed registered nurse (RN) in Missouri.
2. A nurse-midwife who provides services, in whole or in part, to MO HealthNet participants in a state other than Missouri must be a currently licensed registered nurse (RN) in that state and be legally authorized under that state’s law to practice as a nurse-midwife; and

(B) Be currently certified and maintain active certification by the American College of Nurse-Midwives.

(4) MO HealthNet reimbursement for nurse-midwives will be limited to the following types of care in accordance with federal and state laws. The MO HealthNet Nurse-Midwife Provider Manual will contain a listing of covered and noncovered services:

(A) Complete care, management and monitoring of the woman in the absence of medical complications and her unborn/newborn infant throughout the course of the normal cycle of gestation including pregnancy, labor and delivery, and the initial post-delivery/postpartum period not to exceed six (6) weeks; and

(B) Routine post-delivery care of the neonate, including physical examination of the baby and conference with parents.

(5) Nurse-midwives may be reimbursed by MO HealthNet for services performed in the following locations:

(A) Inpatient hospital;
(B) Outpatient hospital;
(C) Office; and
(D) Home.

(6) Reimbursement. MO HealthNet reimbursement for service(s) rendered will be the lower of the provider’s usual and customary charge to the general public or the MO HealthNet maximum allowable amount.

(7) General Regulations. This rule shall not encompass all of the general regulations of the MO HealthNet Program. These regulations, however, shall be in effect for nurse-midwife services.
