



Rules of
Department of Health
and Senior Services
Division 10—Office of the Director
Chapter 4—Coordinated Health Care Services

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**Title 19—DEPARTMENT OF
HEALTH AND SENIOR SERVICES**
Division 10—Office of the Director
**Chapter 4—Coordinated Health Care
Services**

**19 CSR 10-4.010 Primary Care Resource
Initiative for Missouri (PRIMO) Program**

PURPOSE: This rule implements a system of incentives to develop coordinated health care services available and accessible to all persons under Primary Care Resource Initiative for Missouri (PRIMO).

(1) The following definitions shall be used in the interpretation and enforcement of this rule:

(A) Approved family practice residency program means a graduate medical education program designed to train family or general practice physicians and approved by the Accreditation Council for Graduate Medical Education for allopathic residencies or by the American Osteopathic Association for osteopathic residencies;

(B) Approved primary care residency program means a graduate medical education program designed to train family practice, general practice, general pediatric or general internal medicine physicians and approved by the Accreditation Council for Graduate Medical Education for allopathic residencies or by the American Osteopathic Association for osteopathic residencies;

(C) Area of defined need means a geographic area or population designated by the Missouri Department of Health and Senior Services as experiencing a shortage of accessible primary and preventive health care providers and adverse health outcomes;

(D) Department means the Missouri Department of Health and Senior Services;

(E) Director means the Director of the Missouri Department of Health and Senior Services;

(F) Forgivable loan means the financial assistance provided by the Department of Health and Senior Services for professional education that may be forgiven, fully or partially, in return for qualifying employment;

(G) Forgiveness means the monetary reduction of a recipient's PRIMO debt in exchange for qualifying employment in a defined area of need;

(H) Eligible student means a Missouri resident accepted or enrolled in a participating institution in a formal course of instruction leading to:

1. A bachelor of science degree leading to certification as a primary care advanced

practice nurse, a doctor of dentistry or a doctor of allopathic or osteopathic medicine;

2. A master of science degree in nursing leading to a primary care advanced practice nursing degree;

3. A degree as a doctor of allopathic or osteopathic medicine;

4. A degree as a doctor of dentistry;

5. A degree leading to licensure as a registered dental hygienist; or

6. Based on documented need assessments utilizing a scientifically proven methodology, all other health profession students will be considered for funding pending resource availability;

(I) Participating institution means an institution in Missouri, which grants degrees as a doctor of allopathic or osteopathic medicine; as a doctor of dentistry; as a master of science in nursing leading to certification as a primary care advanced practice nurse; as a bachelor of science in a field leading to acceptance into a school of allopathic or osteopathic medicine, school of dentistry or a master of science in nursing program; leading to licensure as a registered dental hygienist; or an institution, which offers an approved primary care residency program;

(J) Advanced practice nurse means a nurse who has received a graduate degree from a participating accredited college or university with a concentration in advanced practice nursing and who has received from the Missouri State Board of Nursing a "Document of Recognition" authorizing the nurse to practice as a certified nurse practitioner or a certified clinical specialist. Nursing specialties are limited to family, adult, women's health, gerontology and pediatric nurse practitioner;

(K) Primary health care provider means a generalist physician, advanced practice nurse, dentist or dental hygienist specializing in the provision of primary and preventive health care services;

(L) Qualified employment means employment at a minimum of thirty (30) hours per week in this state providing primary health care services in an area of defined need;

(M) Resident means an individual who has lived in this state for any purpose, other than attending an educational institution located within this state, for one (1) or more years before submitting an application for financial assistance from the department;

(N) Rural area means a town or community within this state, which is not an urbanized area. An urbanized area is defined as a central city(ies) and its contiguous, closely settled territory with a combined population of at least fifty thousand (50,000); and

(O) Primary health care services are defined as the actual, hands-on provision of

primary and preventive health care services by a licensed physician specializing in family practice, general practice, general internal medicine or general pediatrics, or by an advanced practice nurse specialist certified in family, women's health, pediatric, gerontology, or adult health or a licensed general dentist or dental hygienist.

(2) The department in cooperation with appropriate public and nonprofit agencies, institutions and organizations, shall develop and implement a statewide, integrated primary and preventive health care delivery system including the education, recruitment and retention of health care professionals, extending from high school student identification and support systems to placement of professionals in areas of defined need.

(A) The department may contract with appropriate public and/or nonprofit agencies, institutions and organizations to develop and implement a statewide recruitment, education and support system for high school and undergraduate college students to enter into primary and preventive health care professional education.

1. The system shall assure appropriate and academically sound pre-college academic preparation.

2. The system shall provide experiential, hands-on learning opportunities.

3. The system shall emphasize recruitment of minority students and students from areas of defined need or rural areas.

(B) The department may provide financial assistance to eligible students and resident physicians.

1. Eligible students and resident physicians may apply for financial assistance from the Primary Care Resource Initiative for Missouri (PRIMO) Program, upon acceptance for admission into an approved Missouri institution or residency program.

2. To qualify for assistance the applicant shall have no other conflicting service obligation, with the exception of the National Guard or military reserves.

3. Recipients must apply for funding annually.

4. In return for an obligation to provide primary health care services in an area of defined need upon completion of their training eligible students may receive forgivable loans as follows:

A. Full-time undergraduate and dental hygienist students may receive five thousand dollars (\$5,000) per academic year not to exceed four (4) loans;

B. Full-time graduate nursing students may receive five thousand dollars (\$5,000)



per academic year not to exceed two (2) loans;

C. Part-time undergraduate and dental hygienist students may receive three thousand dollars (\$3,000) per academic year not to exceed six (6) loans;

D. Part-time graduate nursing students may receive three thousand dollars (\$3,000) per academic year not to exceed four (4) loans;

E. Graduate nursing students engaged in a clinical experience with a preceptor may receive one (1) five thousand dollar (\$5,000) loan.

5. In return for an obligation to provide primary health care services in an area of defined need upon completion of their training eligible students at schools of allopathic and osteopathic medicine and dentistry may receive forgivable loans as follows:

A. Students enrolled in a six (6)-year program may receive ten thousand dollars (\$10,000) per academic year for year one (1) and year two (2) of the program;

B. Students enrolled in a six (6)-year program may receive from twenty thousand dollars (\$20,000) to twenty-five thousand dollars (\$25,000) based upon the participating institution's tuition, for academic years three (3) through six (6), not to exceed four (4) loans;

C. Students enrolled in a four (4)-year program may receive from twenty thousand dollars (\$20,000) to twenty-five thousand dollars (\$25,000) based upon the participating institution's tuition, not to exceed four (4) loans.

6. Selected primary care resident physicians may receive ten thousand dollars (\$10,000) per year in forgivable loans, not to exceed three (3) loans.

7. Interest at the rate of nine and one-half percent (9 1/2%) per year from the date of check issuance shall be charged on all PRIMO loans.

8. The department may grant a deferral of repayment of principal and interest when deferral is in the best interests of the state and the PRIMO program.

9. Interest accrued during a deferral period by a PRIMO scholar shall be forgiven on the same basis as the original principal and interest.

10. Forgiveness of interest and principal for financial assistance recipients engaged in qualified employment shall occur at the rate of twenty percent (20%) per calendar year of the total financial assistance provided through the PRIMO program. If a recipient receives assistance for less than five (5) years, forgiveness shall occur on a year-for-year basis.

11. Forgiveness and cash repayment periods shall begin no later than six (6) months following the completion of training.

12. Recipients found to be in default of their contracts shall be allowed a cash repayment period of up to sixty (60) months. The repayment period shall begin the first day of the calendar month following the month the recipient is found to be out of compliance.

13. Preference for financial assistance shall be given to:

A. Students previously participating in the PRIMO or PRIMO approved programs;

B. Minority students and students from areas of defined need or rural areas;

C. Students with an interest in providing primary health care services in areas of defined need.

(C) The department may provide support to participating institutions to facilitate development of programs to increase the number of primary health care professionals and clinical training sites in areas of defined need.

(D) The department may facilitate the development of community-based, comprehensive primary health care delivery systems throughout the state.

1. The department may contract with organizations to develop community-based, comprehensive primary health care delivery systems.

2. Participation will be prioritized according to community health care needs, extent of community support and a documented community strategic intervention plan.

3. Participants will be reviewed annually and may be approved for continued funding, not to exceed five (5) consecutive years, based on:

A. Availability of state funds;

B. Participant's documented accomplishments and adherence to project activities; and

C. Annual detailed record to the department of the expenditure of PRIMO funds.

(3) PRIMO program participants shall file with the department the following completed forms:

(A) All applicants for financial assistance shall file form MO 580-1968 (4-99);

(B) Applicants approved for financial assistance shall file the contract form MO 580-1966 (3-96).

AUTHORITY: section 191.411, RSMo Supp. 2001. This rule was previously filed as 19 CSR 50-4.010. Emergency rule filed Nov. 1, 1994, effective Nov. 11, 1994, expired March

*10, 1995. Emergency rule filed Feb. 23, 1995, effective March 5, 1995, expired July 2, 1995. Original rule filed Nov. 1, 1994, effective June 30, 1995. Changed to 19 CSR 10-4.010, July 30, 1998. Rescinded and readopted: Filed Feb. 15, 2002, effective Aug. 30, 2002. ***

**Original authority: 191.411, RSMo 1993 amended 2001.*

***Pursuant to Executive Orders 20-04, 20-10, and 20-12, 19 CSR 10-4.010, paragraph (2)(B)7, was suspended from March 25, 2020 through December 30, 2020.*

19 CSR 10-4.020 J-1 Visa Waiver Program

PURPOSE: This rule outlines the Department of Health and Senior Services' J-1 visa waiver recommendation process in accordance with section 214(l) of the Immigration and Nationality Act.

(1) The following definitions shall be used in the interpretation of this rule:

(A) Department means the Missouri Department of Health and Senior Services;

(B) Director means the director of the Missouri Department of Health and Senior Services;

(C) Health Professional Shortage Area (HPSA) means a geographic area, population group, or facility designated by the United States Department of Health and Human Services, Health Resources and Services Administration with a shortage of primary care, dental, or mental health providers and services;

(D) Primary Care Specialty means a physician practicing Family Medicine, General Internal Medicine, General Pediatrics, General Obstetrics and Gynecology, or General Psychiatry; and

(E) Primary Care Physician means a physician practicing in one (1) of the Primary Care Specialties in (1)(D).

(2) A waiver request must come from a Missouri health care facility on behalf of a J-1 Visa physician. All of the required information and documentation, as required by the United States Department of State, J-1 Visa Waiver Program, must be submitted in a single application package with the documents presented in the order as prescribed in subsections (2)(A)-(H). Waiver requests that do not comply with these requirements will not be considered. The required documents include:

(A) A completed Form DS-3035, J-1 Visa Waiver Recommendation Application;

(B) An employment contract between the physician and the health care facility employing the physician named in the waiver



application that includes the following:

1. The name and address of the health care facility;
 2. A statement that the physician agrees to begin employment with the employer within ninety (90) days of receiving the waiver;
 3. A statement that indicates the physician's specialty;
 4. The specific geographical area or areas where the physician will practice medicine;
 5. A statement by the physician that he or she agrees to meet the requirements set forth in the Immigration and Nationality Action, Section 214(l);
 6. An employment period of at least three (3) years in a designated HPSA; and
 7. A full-time schedule of at least forty (40) hours per week in direct patient care in the HPSA;
- (C) Proof that the location where the physician will practice medicine is in a designated HPSA;
- (D) Copies of all Forms IAP-66 or DS-2019, Certificate of Eligibility for Exchange Visitor (J-1) Status;
- (E) A copy of the physician's curriculum vitae;
- (F) Proof of eligibility for licensure with the Missouri Board of Healing Arts;
- (G) A copy of the statement of no objection from the physician's country of nationality or last residence, if the physician is contractually obligated to return to the home country; and
- (H) An original and one (1) unbound copy of the entire application package shall be included.

(3) Application packages will be accepted between October 1 and October 31 of the current year. Each application package received by the department will be reviewed for completeness. Complete applications are those which include all required documentation, as listed in subsections (2)(A)-(H). Complete applications will be forwarded for approval by the director or his/her designee in the priority as outlined in sections (4)-(6). Upon approval, the department will send the request to the appropriate federal authorities.

(4) The department's J-1 Visa Waiver Program will give priority to those physicians in one (1) of the following primary care specialties: Family Medicine, General Pediatrics, General Obstetrics and Gynecology, General Internal Medicine, or General Psychiatry. Primary Care Physician applications that meet all applicable requirements will always receive an available selection regardless of

the location or HPSA score of the application. If the department receives more than thirty (30) completed application packages between October 1 and October 31, application packages will be prioritized in the following order:

(A) Primary Care Physicians will be prioritized before other specialties;

(B) HPSA score of the health care facility employing the physician. Higher HPSA scores will be prioritized before lower HPSA scores.

1. In the event that up to six (6) Primary Care Physician applications are received, each Congressional district will be allotted three (3) J-1 Visa Waiver recommendations for specialists. Primary Care Physician applications will not impact other recommendations. If a Congressional district fails to fill its allotted recommendations, those recommendations in excess will be returned to the remaining pool of available recommendations. If a Congressional district has more than three (3) applications, the applications will be recommended based on HPSA score.

2. In the event that seven (7) or more, but no more than fourteen (14), Primary Care Physician applications are received, each Congressional district will be allotted two (2) J-1 Visa Waiver recommendations for specialists. Primary Care Physician applications will not impact other recommendations. If a Congressional district fails to fill its allotted recommendations, those recommendations in excess will be returned to the remaining pool of available recommendations. If a Congressional district has more than two (2) applications, the applications will be recommended based on HPSA score.

3. In the event that fifteen (15) or more, but no more than twenty-two (22), Primary Care Physician applications are received, each Congressional district will be allotted one (1) J-1 Visa Waiver recommendation for a specialist. Primary Care Physician applications will not impact other recommendations. If a Congressional district fails to fill its allotted recommendations, those recommendations in excess will be returned back to the remaining pool of available recommendations. If a Congressional district has more than one (1) application, the application will be recommended based on HPSA score.

4. In the event that more than twenty-two (22) primary care physician applications are received, all remaining applications will be recommended based on the highest HPSA score of the specialist(s).

5. In the event that more than thirty (30) Primary Care Physician applications are received, all applications will be recommended based on the highest HPSA score.

(5) In addition to the eligible physicians set forth in section (4), waivers may be recommended for other specialties and subspecialties.

(A) Physicians trained in other specialties may be considered for recommendation for a J-1 Visa Waiver based on the following criteria:

1. Vacant recommendation slots must be available; and

2. The specialty physician's application must comply with all other requirements of the J-1 Visa Program.

(B) The number of specialty recommendations in any given program year will be determined by the number of available recommendation slots after all application packages for primary care physicians as outlined in section (4) are reviewed. If more application packages are received for specialists than the department has recommendations available, priority will be determined by the HPSA score of the location of the health care facility employing the physician. (i.e. higher Primary Care HPSA scores will be assigned higher priority.)

(C) In the event that there are fewer remaining J-1 Visa Waiver recommendations available than applicants, and with all of those applications having equal status in priority, remaining J-1 Visa Waiver(s) will be recommended by lottery.

(6) If the department recommends less than thirty (30) physicians for J-1 Visa Waivers for application packages received between October 1 and October 31 of the current year, application packages will continue to be accepted, reviewed for completeness, and recommended in the order of the date they are received for any specialty until all available slots are filled.

(A) In the event that there are fewer remaining waivers than applicants, and with all of those applicants having equal status in priority, remaining waiver(s) will be recommended by lottery.

(7) It is the responsibility of the physician and the employer to meet Missouri's licensing and credentialing requirements as delineated by the Missouri Board of Healing Arts.

(8) A physician who is practicing under a J-1 Visa in another state who wishes to practice in a HPSA in Missouri and obtain a J-1 Visa Waiver may do so only under the following conditions:

(A) The physician must complete the J-1 Visa Waiver Application process in Missouri and obtain a Missouri medical license prior to commencing practice;



(B) The physician should make no plans for the transfer or to move personal possessions until the department has approved the request. The physician retains sole responsibility for notifying the employer of the intent to transfer, and payment of any financial penalty caused by a breach of contract, as determined by the employer; and

(C) All other J-1 Visa Waiver requirements remain in effect.

(9) A physician with a J-1 Visa Waiver who is practicing in Missouri and who wishes to transfer to another HPSA in Missouri may do so under the following conditions:

(A) At least sixty (60) days in advance of the proposed change, the physician must notify the department of the new practice site address, telephone number, site director, and the effective date of the proposed change;

(B) The reason for the transfer must be explained in the written notice;

(C) A new J-1 Visa Waiver employer contract must be submitted to the department prior to approval of the transfer; and

(D) The physician should make no plans for the transfer or moving of personal possessions until the department has issued written approval of the transfer. The physician retains sole responsibility for notifying the employer of the intent to transfer and payment of any financial penalty caused by a breach of contract, as determined by the original employer.

(10) The department is not responsible for exceptions to or interpretations of these policies which have occurred without the written approval of the director of the department or his/her designee.

(11) The department is not responsible for any practice arrangements or contractual obligations entered into by the physician prior to approval of a J-1 Visa Waiver request.

AUTHORITY: section 191.411.1, RSMo 2016. This rule was previously filed as 19 CSR 50-4.020. Emergency rule filed April 17, 1995, effective April 27, 1995, expired Aug. 24, 1995. Original rule filed April 17, 1995, effective Oct. 30, 1995. Changed to 19 CSR 10-4.020 July 30, 1998. Emergency amendment filed Sept. 19, 2000, effective Sept. 29, 2000, expired March 27, 2001. Amended: Filed Sept. 19, 2000, effective Feb. 28, 2001. Emergency amendment filed Dec. 16, 2002, effective Dec. 26, 2002, expired June 23, 2003. Amended: Filed Dec. 16, 2002, effective May 30, 2003. Emergency rescission and rule filed Sept. 17, 2019, effective Oct. 1, 2019, expired March 27, 2020. Rescinded and readopted: Filed Sept. 17,*

2019, effective April 30, 2020. Amended: Filed April 1, 2020, effective Sept. 30, 2020.

**Original authority: 191.411, RSMo 1993, amended 2001, 2007.*

19 CSR 10-4.030 National Interest Waiver Program

PURPOSE: This rule establishes the procedure for requesting an attestation from the Department of Health that an alien physician's work in an area or areas of the United States that have been designated as having a shortage of health care providers by the Secretary of Health and Human Services is in the public interest for the purpose of applying for a National Interest Waiver from the Immigration and Naturalization Service.

(1) The following definitions shall be used in interpretation and enforcement of this rule:

(A) Department means the Missouri Department of Health;

(B) Director means the director of the Missouri Department of Health;

(C) Board means the Board of Registration for the Healing Arts, Missouri Department of Economic Development;

(D) Physician means an individual licensed and registered pursuant to Chapter 334, RSMo;

(E) Hospital means a facility licensed in the state of Missouri pursuant to Chapter 197, RSMo;

(F) Health Professional Shortage Area (HPSA) means an area or facility designated by the Secretary of Health and Human Services as having inadequate health care providers; and

(G) Approved practice site means the practice location for which the department has issued the attestation of public interest.

(2) The department may provide attestations in support of a National Interest Waiver request for waiver to the job offer requirement that applies to alien second preference employment-based immigrant visa petitions.

(A) The request must contain all of the following information and documentation and must be submitted in a single package with the documents presented in the order they are listed in paragraphs (2)(A)1.-9. Waiver requests which do not comply with these requirements will not be considered. Each request shall contain:

1. A written request from the physician that the department provide a letter that the physician's work in such an area, areas or facility is in the public interest;

2. A detailed written description of the

service area, facility or population in which the physician will be working, including documentation of its designation as a Health Professional Shortage Area and the services currently being provided;

3. A letter from the board stating that the physician is licensed in good standing in Missouri;

4. A letter from the medical director of all hospitals at which the physician has privileges delineating the status of the privileges that were granted, when the privileges began and how the privileges may have changed over time along with an explanation for any changes;

5. A written statement from the physician's malpractice insurance carrier stating the claims made against the physician and the disposition of those claims;

6. A written statement from the city council or county commission, whose jurisdiction includes the physician's practice site, that the physician's services are required by and are in the interest of the community;

7. A written statement from the local public health agency, whose jurisdiction includes the physician's practice site, that the physician's services are required by and are in the interest of the community;

8. A copy of the physician's employment contract for the practice site for a period of no less than five (5) years; and

9. A written statement as to how the denial of the waiver will affect the provision of medical services in that community.

(3) No attestation shall be granted to any physician who fails to provide any of the information in paragraphs (2)(A)1.-9.

(4) No attestation shall be granted to any physician who does not have privileges at any hospital in Missouri.

(5) A physician must work at the approved practice site for a minimum of five (5) years. If the physician fails to comply with this section, the department shall report the physician to the Immigration and Naturalization Service and other agencies as necessary.

(6) A physician with a National Interest Waiver from Missouri, who wishes to transfer to another qualifying practice site in Missouri, may do so under the following circumstances:

(A) The physician must notify the department at least sixty (60) days prior to the proposed change. The notice must contain, at minimum the following:

1. All the information and documentation required in subsection (1)(A) of this rule; and



2. A detailed explanation as to the reason for the change; and

(B) The physician retains sole responsibility for financial liabilities caused by the change in approved practice site.

(7) Physicians for whom the department provides public attestations shall supply the following to the department by February 1 of each year:

(A) Name;

(B) Address of the physician's present practice site(s);

(C) The number and characteristics of the patients served including:

1. Gender;

2. Age distributions; and

3. Payor source (Medicaid, Medicare, commercial insurance or self-pay);

(D) Letters of continued support from the medical director of all hospitals at which said physician has privileges;

(E) Letters of continued support from the local public health agency; and

(F) Letter from the board stating that the physician is licensed in good standing in Missouri.

AUTHORITY: section 191.411, RSMo 2000. Emergency rule filed March 27, 2001, effective April 9, 2001, expired Jan. 17, 2002. Original rule filed March 27, 2001, effective Sept. 30, 2001.*

**Original authority: 191.411, RSMo 1993.*

19 CSR 10-4.040 Definition of a Public Health Setting

PURPOSE: The purpose of this rule is to implement section 332.311, RSMo as amended by HB567 of the 91st General Assembly and define the public health settings in which a dental hygienist may practice without the supervision of a dentist.

(1) For the purposes of section 332.311, RSMo only, the term "public health setting" shall be defined as a location where dental services authorized by section 332.311, RSMo are performed so long as the delivery of services are sponsored by a governmental health entity which includes:

(A) Department of Health and Senior Services;

(B) A county health department;

(C) A city health department operating under a city charter;

(D) A combined city/county health department; or

(E) A nonprofit community health center qualified as exempt from federal taxation

under section 501(c)(3) of the *Internal Revenue Code* including a community health center that receives funding authorized by sections 329, 330, and 340 of the United States Public Health Services Act.

AUTHORITY: section 332.311.2, RSMo Supp. 2001. Emergency rule filed March 15, 2002, effective March 25, 2002, expired Sept. 20, 2002. Original rule filed March 15, 2002, effective Aug. 30, 2002.*

**Original authority: 332.311, RSMo 1969, amended 1997, 2001.*

19 CSR 10-4.050 Healthy Communities Incentive Program

PURPOSE: This rule establishes the requirements and the process for participation of a health professional in the Healthy Communities Incentive Program.

(1) The following definitions shall be used in interpretation and enforcement of this rule:

(A) Approved practice site means the practice location for which the department agreed to provide support;

(B) Area of defined need means a geographic area or population designated by the Missouri Department of Health and Senior Services as experiencing a shortage of accessible primary and preventive health care services;

(C) Dentist means an individual licensed and registered pursuant to section 332.071, RSMo;

(D) Department means the Missouri Department of Health and Senior Services;

(E) Director means the director of the Missouri Department of Health and Senior Services;

(F) Hospital means a facility licensed in the state of Missouri pursuant to Chapter 197, RSMo;

(G) Licensing board means the Board of Registration for the Healing Arts and the Missouri State Dental Board within the Missouri Department of Economic Development;

(H) Physician means an individual licensed and registered pursuant to Chapter 334, RSMo;

(I) Sliding scale fee means a fee structure that provides adjustment to charges for all individuals under two hundred percent (200%) of the federal poverty limit, based upon family income and size.

(2) The department may contract with select- ed primary care physicians and general dentists to provide health care services to populations in need within the state.

(3) Applicants must submit a written request that contains all of the following information and documentation presented in the order they are listed in subsections (3)(A)–(H). Applications for participation that do not comply with these requirements will not be considered. Each request shall contain:

(A) A written request from the applicant for participation in the program;

(B) A detailed written description of the proposed practice site, including the facility in which the applicant will be working and the health care services currently provided at that site;

(C) Official notification from the applicable Missouri licensing board that the applicant is licensed in good standing;

(D) For physicians, a letter from the medical director of all hospitals at which the physician has or will have privileges delineating the status of the privileges. This should include when the privileges began or will begin, how they may have changed over time and an explanation for any changes;

(E) A written statement from the applicant's malpractice insurance carrier setting forth any claims that have been made against the applicant and the disposition of those claims;

(F) A written statement from the local public health agency, whose jurisdiction includes the applicant's proposed practice site, that the applicant's services are required by and are in the interest of the community;

(G) A copy of the applicant's employment contract for the proposed practice site for a period of no less than four (4) years; and

(H) Documentation of agreement to provide care to the populations in the area of defined need, including:

1. Acceptance as a provider by the Missouri Medicaid agency; and

2. A copy of the sliding scale fee.

(4) Selection for participation in the Healthy Communities Incentive Program will be prioritized utilizing the following criteria:

(A) The degree of need for health professional services (areas with a lack of access for the entire population will be given priority over those areas without access for specific populations);

(B) Recruitment of health professionals into an area will be given priority over retention of existing providers;

(C) Those employed by an organization with a history of service to the underserved may be given priority over other employment types including self-employed applicants; and

(D) Those approved practice sites participating with the department in the financing of the incentive payments.



(5) Participation in the Healthy Communities Incentive Program shall consist of payments to individual health professionals under a written contract.

(A) The contract period shall be, at a minimum, four (4) years in length;

(B) Contract amount shall be one hundred thousand dollars (\$100,000) for each four (4)-year period;

(C) Payment for the contract shall be due the final quarter of the last year of the contract period; and

(D) Pre-payment of the contract amount may be made to facilitate placement in areas of defined need within the state.

(6) Participants shall supply the following to the department by July 1 of each year:

(A) Participant's name;

(B) Address of the contracted practice site(s);

(C) The number and characteristics of the patients served including:

1. Gender;

2. Age distributions; and

3. Payor source (Medicaid, Medicare, Commercial Insurance or Sliding Scale Fee);

(D) Letters of continued support from the Local Public Health Agency; and

(E) Letter from the applicable licensing board stating that the participant is licensed in good standing in Missouri.

(7) If an individual violates the written contract the state shall be entitled to recover from the individual an amount equal to the sum of:

(A) The total of the amounts prepaid by the state on behalf of the individual;

(B) The interest on the amounts which would be payable if at the time the amounts were paid they were loans bearing interest at the maximum prevailing rate as determined by the Treasurer of the United States; and

(C) Any legal fees or associated costs incurred by the department or the state of Missouri in the collection of damages.

AUTHORITY: section 191.411, RSMo Supp. 2001. Original rule filed Feb. 15, 2002, effective Aug. 30, 2002.

**Original authority: 191.411, RSMo 1993, amended 2001.*