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

Title		Page
19 CSR 10-4.010	Primary Care Resource Initiative for Missouri (PRIMO) Program	3
19 CSR 10-4.020	J-1 Visa Waiver Program	4
19 CSR 10-4.030	National Interest Waiver Program	17
19 CSR 10-4.040	Definition of a Public Health Setting	17
19 CSR 10-4.050	Healthy Communities Incentive Program	18

**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.*

19 CSR 10-4.020 J-1 Visa Waiver Program

PURPOSE: This rule establishes the requirements for implementing recent changes to section 212(e) of the Immigration and Nationality Act made by section 220 of the Immigration and Nationality Technical Corrections Act of 1994, P.L. No. 103-416, 108 Stat. 4319-20 that allows state departments of public health to request a waiver of the two-year home presence requirement of foreign medical graduates who are in the United States in J-1 visa status to serve in federally designated health professional shortage areas.

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. Therefore, the material which is so incorporated is on file with the agency who filed this rule, and with the Office of the Secretary of State. Any interested person may view this material at either agency's headquarters or the same will be made available at the Office of the Secretary of State at a cost not to exceed actual cost of copy reproduction. The entire text of the rule is printed here. This note refers only to the incorporated by reference material.

(1) The following definitions shall be used in the 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; and

(C) Health professional shortage area (HPSA) means those counties or parts of counties designated by the United States Department of Health and Human Services as having a shortage of primary care physicians as published in the *Code of Federal Regulations*.

(2) The department is committed to assisting all residents of Missouri to have access to

quality, affordable health care. Therefore, under certain conditions, the department is prepared to consider recommending a waiver of the foreign residence requirement on behalf of physicians holding J-1 visas.

(A) A waiver request must come from a Missouri health care facility on behalf of a J-1 physician and not directly from a J-1 physician. All of the required information and documentation must be submitted in a single package with the documents presented in the order in paragraphs (2)(A)1.-14. Waiver requests that do not comply with these requirements will not be considered. The required documents include:

1. A letter from the head of the facility at which the physician will be employed that—

A. Requests that the department act as an interested government agency and recommend a waiver for the J-1 physician;

B. Summarizes how the health care facility has attempted to locate qualified United States physicians;

C. Describes the physician's qualifications, proposed responsibilities and how his/her employment will satisfy important unmet health care needs of a medically underserved rural community; and

D. States unequivocally that the facility is offering the physician at least three (3) years of employment in a job consistent with the department's mission;

2. A detailed description of the health care facility will be provided, including the nature and extent of the facility's medical services;

3. Valid contract of employment with the health care organization for not less than three (3) years;

4. List of HPSAs or documentation from state and local health care officials stating need for services of the physician;

5. Recruitment and retention efforts including copies of advertisements, agreements with placements services or other like documentation, and if these are not available, a detailed statement describing recruitment efforts. A statement should be submitted detailing the plans for retaining the physician during and beyond the three (3)-year obligation;

6. Effect on area of waiver denial;

7. Qualifications, including proof of Missouri medical licensure eligibility;

8. Physician's curriculum vitae and letters of recommendation;

9. Copies of all IAP-66s of physician, copies of I-94s of physician and family members, and proof of passage of examinations required by the United States Immigration and Naturalization Service;

10. Completed physician data sheet (attached as Appendix A);

11. Completed J-1 visa waiver policy affidavit and agreement (attached as Appendix B);

12. Valid offer of employment with health care organization for at least three (3) years;

13. A copy of the notice from the department that the facility has been pre-determined eligible for participation in the program; and

14. An original and one (1) unbound copy of the entire package should be included.

(3) Missouri health care facilities seeking to employ a foreign medical graduate holding a J-1 visa must be pre-determined by the department as eligible for participation in the J-1 Visa Waiver Program.

(A) Eligible applicants will provide the department the following information and assurances:

1. Estimated enumeration of the patient population to be served.

2. Description of demographic characteristics of the population(s) to be served, including age groups, ethnicity, poverty status, health status and insurance coverage.

3. A copy of the sliding fee scale and the applicable policy utilized by the facility.

(B) Eligible applicants may request a packet of materials and instructions detailing the information and documentation that is required in order to submit an appropriate case file for review from the department.

(4) Each case file received by the center will be reviewed for completeness and forwarded for approval to the director or his/her designee. Upon approval, the department will request the appropriate federal authorities for a waiver of the residence requirement.

(5) The department's J-1 Visa Waiver Program in Missouri will give priority to those physicians who are board-eligible or board-certified in one (1) of the following specialties: Family Practice, General Practice, General Pediatrics, Obstetrics/Gynecology, General Internal Medicine or Psychiatry and providing services in a primary care clinical setting. Physicians with other subspecialties or fellowship experience are not considered to be primary care physicians for the purpose of the J-1 Visa Waiver Program in Missouri. The credentials of the J-1 physician must be confirmed by the Missouri Board of Healing Arts. The physician must be eligible for licensure in Missouri.

(A) The department may determine emergency rooms to be primary care clinical settings where substantial amounts of primary care services are delivered in that setting. In order to qualify for participation, the sponsoring facility must provide the following:

1. The number and types of primary care encounters in the emergency room.

2. The demographic characteristics of the populations accessing primary care services in the emergency room.

3. The payor source for primary care services in the emergency room.

4. Documentation that primary care services for the identified population(s) are not available in the community.

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

(A) Physicians trained in other specialties may be considered for placement in the J-1 Visa Program in Missouri based on the following criteria:

1. Vacant slots in the program must be available; and

2. The employer must demonstrate that the specialist services are essential to the medical needs of the underserved; and

3. The specialty physician's application must have the concurrence in writing of the primary care physicians practicing in the community that the specialty is needed in the area; and

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

(B) Only four (4) slots will be allocated to specialty placement in any given program year.

(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 request for a J-1 visa waiver for a physician to enter private practice shall comply with the following:

(A) The practice must be located in a HPSA;

(B) The owner of the practice must be the employer for the J-1 physician and must submit a letter of support for the J-1 visa waiver request;

(C) The practice employer must—

1. Certify that it will provide health care services to all patients, including Medicare and Medicaid patients, without regard to ability to pay or the source of payment and must include a sliding fee scale for adjusting



patient bills for those who are unable to pay; and

2. Conspicuously post the sliding fee scale in the practice site, in the language(s) of patients receiving services; and

3. Provide the department two (2) reports each calendar year detailing the following:

A. The number of patients covered by sliding fee scale services;

B. The number of Medicaid patients served;

C. The number of Medicare patients served;

D. The total number of patients served;

E. The demographic characteristics of patients served, including data on age, gender, and ethnicity; and

F. Evaluation of services provided and community need; and

(D) All other J-1 visa waiver requirements remain in effect.

(9) A physician must work at the facility for a minimum of three (3) years. If the physician fails to fulfill the terms of the contract with the facility, the facility must notify the department. This information will be forwarded to Immigration and Naturalization Services and other agencies as necessary.

(10) 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.

(11) A physician with a J-1 visa waiver who is practicing in Missouri 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.

(12) 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. Applicants should be aware that hospitals or physician recruiters are not expert in the requirements of each state, and should contact the department with any questions.

(13) 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.

(14) In order to assist and facilitate the placement of primary care practitioners in designated HPSAs in Missouri, the department will provide, upon request, the following information:

(A) List of designated HPSAs in Missouri;

(B) List of hospitals located in HPSAs;

(C) List of community health centers in HPSAs in Missouri; and

(D) Procedure to request a J-1 visa waiver.

AUTHORITY: section 191.411.1, RSMo 1994. 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.*

*Original authority: 191.411, RSMo 1993.

APPENDIX B
 LICENSED HOSPITALS IN COUNTIES DESIGNATED AS
 PRIMARY CARE HEALTH PROFESSIONAL SHORTAGE AREAS

FAIRFAX COMMUNITY HOSPITAL HIGHWAY 59 FAIRFAX MO 64446 ATCHISON COUNTY	NORTH KANSAS CITY HOSPITAL 2800 CLAY EDWARDS DR N KANSAS CITY MO 64116 CLAY COUNTY
BARTON COUNTY MEMORIAL HOSP SECOND AND GULF ST LAMAR MO 64759 BARTON COUNTY	SPELMAN MEMORIAL HOSPITAL 601 S 169 HIGHWAY SMITHVILLE MO 64089 CLAY COUNTY
CALLAWAY COMMUNITY HOSPITAL 10 S HOSPITAL DR FULTON MO 65251 CALLAWAY COUNTY	COOPER CO MEM HOSPITAL RR 1, HIGHWAY B BOONVILLE MO 65233 COOPER COUNTY
FULTON STATE HOSPITAL 600 E FIFTH ST FULTON MO 65251 CALLAWAY COUNTY	MISSOURI BAPTIST HOSP OF SULLIVAN 751 SAPPINGSTON BRDG SULLIVAN MO 63080 CRAWFORD COUNTY
CARROLL CO MEMORIAL HOSPITAL 1502 N JEFFERSON CARROLLTON MO 64633 CARROLL COUNTY	SALEM MEMORIAL DISTRICT HOSPITAL PO BOX 774, HWY 72 N SALEM MO 65560 DENT COUNTY
CASS MEDICAL CENTER 1800 E MECHANIC HARRISONVILLE MO 64701 CASS COUNTY	GENTRY CO MEMORIAL HOSPITAL COLLEGE AND CLARK ALBANY MO 64402 GENTRY COUNTY
RESEARCH BELTON HOSPITAL 17065 S 71 HIGHWAY BELTON MO 64012 CASS COUNTY	LAKELAND REGIONAL HOSPITAL 440 SOUTH MARKET SPRINGFIELD MO 65806 GREENE COUNTY
CEDAR CO MEMORIAL HOSPITAL 1401 S PARK ST EL DORADO SPNGS MO 64744 CEDAR COUNTY	LESTER E COX MEDICAL CTR NORTH 1423 N JEFFERSON ST SPRINGFIELD MO 65802 GREENE COUNTY
EXCELSIOR SPRINGS MEDICAL CTR 1700 RAINBOW BLVD EXCELSIOR SPNGS MO 64024 CLAY COUNTY	LESTER E COX MEDICAL CTR SOUTH 3801 S NATIONAL AVE SPRINGFIELD MO 65807 GREENE COUNTY
LIBERTY HOSPITAL 2525 GLENN HENDREN LIBERTY MO 64068 CLAY COUNTY	SPRINGFIELD COMMUNITY HOSPITAL 3535 SOUTH NATIONAL SPRINGFIELD MO 65807 GREENE COUNTY
MERCY HOSPITAL HWY 5 & 60, BOX 528 MANSFIELD MO 65704 WRIGHT COUNTY	

**LICENSED HOSPITALS IN COUNTIES DESIGNATED AS
PRIMARY CARE HEALTH PROFESSIONAL SHORTAGE AREAS**

DOCTORS HOSPITAL OF SPRINGFIELD 2828 N NATIONAL SPRINGFIELD MO 65801 GREENE COUNTY	LEES SUMMIT HOSPITAL 530 N MURRAY RD LEE'S SUMMIT MO 64801 JACKSON COUNTY
ST JOHNS REGIONAL HEALTH CTR 2727 McCLELLAND BLVD JOPLIN MO 64804 GREENE COUNTY	MEDICAL CENTER OF INDEPENDENCE 17203 E 23RD ST INDEPENDENCE MO 64057 JACKSON COUNTY
WRIGHT MEMORIAL HOSPITAL 701 EAST FIRST TRENTON MO 64683 GRUNDY COUNTY	MENORAH MEDICAL CENTER 4949 ROCKHILL RD KANSAS CITY MO 64110 JACKSON COUNTY
HARRISON CO COMMUNITY HOSPITAL POB 428, HWY 69, 136 BETHANY MO 64424 HARRISON COUNTY	PARK LANE MEDICAL CENTER 5151 RAYTOWN RD KANSAS CITY MO 64133 JACKSON COUNTY
KELLER MEMORIAL HOSPITAL 600 W MORRISON FAYETTE MO 65248 HOWARD COUNTY	REHABILITATION INSTITUTE 3011 BALTIMORE AVE KANSAS CITY MO 64108 JACKSON COUNTY
BAPTIST MEDICAL CENTER 6601 ROCKHILL RD KANSAS CITY MO 64131 JACKSON COUNTY	RESEARCH MEDICAL CENTER 2316 E MEYER BLVD KANSAS CITY MO 64132 JACKSON COUNTY
CHILDRENS MERCY HOSPITAL 24TH AT GILLHAM RD KANSAS CITY MO 64108 JACKSON COUNTY	RESEARCH PSYCHIATRIC CENTER 2323 E 63RD ST KANSAS CITY MO 64130 JACKSON COUNTY
CRITTENTON CENTER 10918 ELM KANSAS CITY MO 64134 JACKSON COUNTY	ST JOSEPH HLTH CTR OF KANSAS CITY 1000 CARONDELET DR KANSAS CITY MO 64114 JACKSON COUNTY
INDEPENDENCE REGIONAL HEALTH CTR 1509 W TRUMAN RD INDEPENDENCE MO 64050 JACKSON COUNTY	ST LUKES HOSPITAL OF KC WORNALL RD AT 44TH KANSAS CITY MO 64111 JACKSON COUNTY
LAKESIDE HOSPITAL 8701 TROOST AVE KANSAS CITY MO 64131 JACKSON COUNTY	ST MARYS HOSP OF BLUE SPRINGS 201 WEST RD MIZE RD BLUE SPRINGS MO 64015 JACKSON COUNTY



LICENSED HOSPITALS IN COUNTIES DESIGNATED AS
PRIMARY CARE HEALTH PROFESSIONAL SHORTAGE AREAS

TRINITY LUTHERAN HOSPITAL 3030 BALTIMORE KANSAS CITY MO 64108 JACKSON COUNTY
TRINITY LUTHERAN NORTH 2800 MAIN ST KANSAS CITY MO 64108 JACKSON COUNTY
TRUMAN MEDICAL CENTER 2301 HOLMES ST KANSAS CITY MO 64108 JACKSON COUNTY
TRUMAN MEDICAL CTR-EAST 7900 LEE'S SUMMIT RD KANSAS CITY MO 64139 JACKSON COUNTY
TWO RIVERS PSYCHIATRIC HOSPITAL 5121 RAYTOWN RD KANSAS CITY MO 64133 JACKSON COUNTY
VETERANS ADM HOSPITAL 4801 LINWOOD BLVD KANSAS CITY MO 64128 JACKSON COUNTY
WESTERN MO MENTAL HLTH CTR 600 E 22ND ST KANSAS CITY MO 64108 JACKSON COUNTY
JEFFERSON MEMORIAL HOSPITAL PO BOX 350 CRYSTAL CITY MO 63019 JEFFERSON COUNTY
USAF 351ST STRATEGIC HOSPITAL WHITEMAN AFB WHITEMAN AFB MO JOHNSON COUNTY
WESTERN MO MEDICAL CTR 403 BURKARTH RD WARRENSBURG MO 64093 JOHNSON COUNTY

BREECH MEDICAL CENTER 325 HARWOOD AVE LEBANON MO 65536 LACLEDE COUNTY
LINCOLN CO MEM HOSPITAL 1000 E CHERRY TROY MO 63379 LINCOLN COUNTY
PEMISCOT MEMORIAL HEALTH SYSTEMS PO BOX 489 HAYTI MO 63851 PEMISCOT COUNTY
PERRY CO MEMORIAL HOSP 434 N WEST ST PERRYVILLE MO 63775 PERRY COUNTY
PIKE CO MEMORIAL HOSP 2305 W GEORGIA ST LOUISIANA MO 63353 PIKE COUNTY
US GENERAL WOOD ARMY HOSPITAL FT LEONARD WOOD MO PULASKI COUNTY
RAY CO MEMORIAL HOSPITAL 904 WOLLARD BLVD RICHMOND MO 65085 RAY COUNTY
REYNOLDS CO GENERAL MEM HOSP HWY 21 S, PO BOX 520 ELLINGTON MO 63638 REYNOLDS COUNTY
RIPLEY CO MEMORIAL HOSP GRAND & PLUM ST DONIPHAN MO 63935 RIPLEY COUNTY
SCOTLAND CO MEM HOSPITAL RR 1 BOX 53 MEMPHIS MO 63555 SCOTLAND COUNTY

**LICENSED HOSPITALS IN COUNTIES DESIGNATED AS
PRIMARY CARE HEALTH PROFESSIONAL SHORTAGE AREAS**

MISSOURI DELTA MED CTR 1008 N MAIN ST SIKESTON MO 63801 SCOTT COUNTY	LUTHERAN MEDICAL CTR 2639 MIAMI ST LOUIS MO 63118 ST LOUIS CITY COUNTY
ALEXIAN BROTHERS HOSPITAL 3933 S BROADWAY ST LOUIS MO 63118 ST LOUIS CITY COUNTY	MALCOLM BLISS MENTAL HEALTH CTR ST LOUIS CITY COUNTY
BARNES HOSPITAL ONE HOSPITAL PLAZA ST LOUIS MO 63110 ST LOUIS CITY COUNTY	ST LOUIS CHILDRENS HOSPITAL 400 S KINGSHIGHWAY ST LOUIS MO 63110 ST LOUIS CITY COUNTY
BETHESDA GENERAL HOSPITAL 3655 VISTA AVE ST LOUIS MO 63110 ST LOUIS CITY COUNTY	ST LOUIS REGIONAL MED CTR 5535 DELMAR BLVD ST LOUIS MO 63113 ST LOUIS CITY COUNTY
CARDINAL GLENNON CHILDRENS HOSPITAL 1465 S GRAND BLVD ST LOUIS MO 63104 ST LOUIS CITY COUNTY	ST LOUIS STATE HOSPITAL 5400 ARSENAL ST ST LOUIS MO 63139 ST LOUIS CITY COUNTY
CENTRAL MEDICAL CENTER 4411 N NEWSTEAD ST LOUIS MO 63115 ST LOUIS CITY COUNTY	ST LOUIS UNIVERSITY HOSPITAL 3635 VISTA ST LOUIS MO 63110 ST LOUIS CITY COUNTY
DEACONESS HOSPITAL 12303 DePAUL DR BRIDGETON MO 63044 ST LOUIS CITY COUNTY	STE GENEVIEVE CO MEM HOSP HWY 61 & 32, POB 468 STE GENEVIEVE MO 63670 STE GENEVIEVE COUNTY
HAWTHORNE CHILDREN'S PSYCH HOSP 1901 PENNSYLVANIA ST LOUIS MO 63133 ST LOUIS CITY COUNTY	DEXTER MEMORIAL HOSPITAL 1200 N ONE MILE RD DEXTER MO 63841 STODDARD COUNTY
INCARNATE WORD HOSPITAL 3545 LAFAYETTE ST LOUIS MO 63104 ST LOUIS CITY COUNTY	TEXAS CO MEMORIAL HOSPITAL 1333 SAM HOUSTON BLV HOUSTON MO 65483 TEXAS COUNTY
JEWISH HOSP OF ST LOUIS 216 S KINGSHIGHWAY ST LOUIS MO 63110 ST LOUIS CITY COUNTY	WASHINGTON CO MEM HOSP 300 HEALTH WAY POTOSI MO 63664 WASHINGTON COUNTY



Appendix C
Community Health Centers in
Health Professional Shortage Areas in Missouri

Big Springs Medical Association, Inc.
P.O. Box 157
Ellington, Missouri 63638
314/663-2313
Service Area: Carter, Oregon, Reynolds and
Shannon counties

New Madrid County Group Practice, Inc.
P.O. Box 400
New Madrid, Missouri 63869
314/748-2592
Service Area: Dunklin, Mississippi, New
Madrid, Pemiscot, Scott and
Stoddard counties

Caldwell County Medical Aid Corp.
P.O. Box 248
Hamilton, Missouri 64644
816/583-2713
Service Area: Caldwell, Daviess, Livingston
and Ray counties

Richland Medical Center, Inc.
P.O. Box 777
Richland, Missouri 65556
314/765-5131
Service Area: Camden, Laclede, Miller and
Pulaski counties

Model Cities Health Corp.
4900 Swope Parkway
Kansas City, Missouri 64130
816/923-5800
Service Area: Inner Kansas City

Family Care Center of Carondelet
6313 Michigan Avenue
St. Louis, Missouri 63111
314/353-5190
Service Area: South St. Louis

Samuel U. Rodgers Com. Health Center
825 Euclid
Kansas City, Missouri 64124
816/474-4920
Service Area: Kansas City

Neighborhood Health Center, Inc.
2600 Hadley St.
St. Louis, Missouri 63106
314/241-2200
Service Area: St. Louis

Northeast Missouri Health Council, Inc.
800 W. Jefferson
Kirksville, Missouri 63501
816/626-2626
Service Area: Clark, Knox and Scotland
counties

People's Health Centers, Inc.
5701 Delmar Blvd.
St. Louis, Missouri 63112
314/367-7848
Service Area: St. Louis

Northwest Health Services, Inc.
502 State St.
Mound City, Missouri 64470
816/442-5419
Service Area: Holt and West Nodaway counties

St. Louis Comp. Health Center, Inc.
5471 Dr. Martin Luther King Dr.
St. Louis, Missouri 63112
314/367-5820
Service Area: St. Louis

Cabot Westside Clinic
1810 Summit Street
Kansas City, Missouri 64108-2174
816/471-0900
Service Area: Kansas City/Hispanic Community



APPENDIX D

J-1 VISA WAIVER POLICY AFFIDAVIT AND AGREEMENT

I, _____, being duly sworn, hereby request the Missouri Department of Health to review my application for the purpose of recommending waiver of the foreign residency requirement set forth in my J-1 visa, pursuant to the terms and conditions as follows:

I understand and acknowledge that the review of this request is discretionary and that in the event a decision is made not to grant my request, I hold harmless the State of Missouri, the Department of Health, any and all State of Missouri employees, agents and assigns from any action or lack of action made in connection with this request.

I further understand and acknowledge that the entire basis for the consideration of my request is the Department of Health's voluntary policy and desire to improve the availability of primary medical care in medically underserved regions.

I understand and agree that in consideration for a waiver, which eventually may or may not be granted, I shall render primary medical services to patients, including the indigent for a minimum of forty (40) hours per week within a U.S. Public Health Services designated health professional shortage area. Such service shall commence not later than ninety (90) days after I receive notification of approval by both the U.S. Immigration and Naturalization Service (INS) and the U.S. Department of Labor and shall continue for a period of at least three (3) years.

I agree to incorporate all the terms of this J-1 Visa Waiver Affidavit and Agreement to any and all employment agreements I enter pursuant to paragraph 3 and to include in each such agreement a liquidated damages clause, payable to the employer. This damages clause shall be activated by my termination of employment, initiated by me for any reason, only if my termination occurs before fulfilling the minimum three-year service agreement.

I further agree that any employment agreement I enter pursuant to paragraph 3 shall not contain any provision which modifies or amends any of these terms of this J-1 Visa Waiver Affidavit and Agreement.

I understand and agree that my primary medical care services rendered pursuant to paragraph 3 shall be in a Medicare and Medicaid certified facility which has an open, non-discriminatory admissions policy and that will accept medically indigent patients.

I have read and fully understand the "Program Guidelines," a copy of which is attached hereto and is specifically incorporated by reference.

I expressly understand that this waiver of my foreign service requirement must ultimately be approved by the INS, and I agree to provide written notification of the specific location and nature of my practice to the Department of Health at the time I commence rendering services on a semi-annual basis thereafter.

I understand and acknowledge that if I willfully fail to comply with the terms of this J-1 Visa Affidavit and Agreement, the Department of Health will notify INS. Additionally, any and all other measures available to the Department of Health will be taken in the event of non-compliance.

I declare under the penalties of perjury that the foregoing is true and correct.

Subscribed and sworn to before me this _____ day of _____, 199__.

Notary Public

J-1 VISA WAIVER INFORMATION SHEET FOR FOREIGN PHYSICIANS

Federal laws require that foreign physicians seeking to pursue graduate medical education or training in the U.S. must obtain a J-1 exchange visitor visa. The J-1 visa allows physicians to remain in the U.S. until their studies are completed. However, upon completion of their studies, the physicians must return to their home country for at least two years before they will be able to return to the U.S.

Physicians who are subject to, but do not wish to comply with, the two-year home country residence requirement may apply for a waiver of that requirement under any one of the four grounds provided by the U.S. Immigration law:

- a. Exceptional hardship to his/her U.S. citizen or permanent resident spouse or child.
- b. Persecution if forced to return to home country.
- c. A statement in support of a waiver from an interested U.S. government agency.
- d. A statement in support of a waiver from a state department of public health or its equivalent.

The Missouri Department of Health will consider recommending a waiver of the foreign residence requirement on behalf of physicians holding J-1 visas who have been admitted to the U.S. under a J visa before, on, or after the date of enactment of this Act and before June 1, 1996, under the following conditions:

A waiver request to the Department of Health must come from a U.S. health care facility on behalf of a J-1 physician and not directly from a J-1 physician.

The physician must be a primary care physician applying for a waiver to work in a geographic area designated by the Secretary of Health and Human Services as having a shortage of health care professionals.

The physician must demonstrate a bona fide offer of employment at a health facility and must agree to work 40 hours per week for at least three years for a Medicare and Medicaid certified medical facility which also accepts medically indigent patients.

The physician must provide a copy of a letter of no objection from the physician's home government.

The physician's status will be changed to that of an H1-b visa.

If the physician fails to fulfill the terms of the contract with the health care facility, they would not be eligible to apply for an immigrant visa or permanent residence unless they returned to their home country for two years.

There will be a limit of twenty (20) waiver requests per state per fiscal year.

J-1 VISA PHYSICIAN REPORTING FORM

PHYSICIAN:

Name: _____ Date: _____

Address:

Home: _____ Office: _____

Type of medical practice: _____

Location of medical practice: _____

Street _____
City _____ State _____
County _____ ZIP Code _____

I hereby certify that I, the undersigned, do provide primary health care services at the above-stated address a minimum of 40 hours per week.

Physician's Signature

EMPLOYER:

I do hereby certify Doctor _____ is employed by _____ and provides 40 hours of primary health care per week.

Employer's Signature

Notary:

Return:



Physician Data Sheet

- 1. Full name: _____
- 2. Date of birth: _____ Place of birth: _____
- 3. Country of nationality or last legal permanent residence: _____
- 4. Date and place of issuance of original exchange-visitor (J-1) visa: _____

- 5. Present address: _____ Immigration district: _____
- 6. Home phone: _____ Business phone: _____
- 7. List of exchange-visitor programs in which you participated. If known, give the program number. Also include field of specialization:

- 8. Alien registration number, if known: _____
- 9. If your exchange-visitor program includes U.S. government funds, funds from your own government, or from an international organization, please give full particulars concerning the funding:

- 10. Is your spouse in J-1 status? _____ If so, is he/she also applying for a waiver? Please give full explanation:

- 11. Give the reasons for not wishing to fulfill the 2-year home-country residence requirement to which you agreed at the time you accepted exchange visitor status (use additional sheet if needed).

- 12. Please include copies of all IAP-66's issued during your stay in this country.

Signature: _____ Date: _____

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 selected 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.*