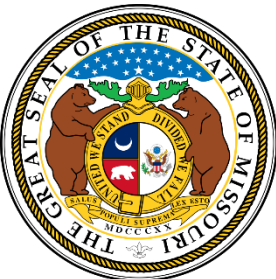


# MISSOURI

## Department of Social Services (DSS) <sup>108, 109, 110, 111</sup>

Assessment & Counseling	Pharmacotherapy	 <p>Adults with obesity: <b>30%</b> <sup>3</sup> Adults with diabetes: <b>10%</b> <sup>3</sup></p> <p><b>13%</b> of residents covered by Medicaid/CHIP <b>\$9.6 billion</b> in total Medicaid spending (2015)</p> <p><b>51%</b> enrolled in managed care <b>49%</b> enrolled in fee-for-service <sup>4</sup></p> <p><b>Resources &amp; Contacts:</b></p> <p><b>Missouri Department of Social Services</b> MO HealthNet Division Phone: 573-751-3425</p> <p><b>Missouri Department of Insurance</b> Phone: 573-751-4126</p> <p><b>Department of Health &amp; Senior Services</b> Phone: 573-751-6400</p>
<p><b>COVERAGE may include:</b></p> <p><b>Preventive Counseling</b> 99401-99402<sup>†</sup>, 99385-99387, 99395-99397</p> <p><b>Behavioral Assessment/Intervention</b> 96150-96154*, 98960<sup>†</sup>, S0315-S0316</p> <ul style="list-style-type: none"> <li>- The treatment of obesity is noncovered unless the treatment is an integral and necessary part of a course of treatment for a concurrent or complicating medical condition.</li> <li>- Individuals with a BMI &gt; 25 kg/m<sup>2</sup> and another chronic condition may be eligible for MO Primary Care Health Home (PCHH) services.</li> <li>- Covers lifestyle interventions for obesity management, including nutritional counseling and physical activity promotion</li> <li>- Health and behavior assessment/intervention (HBAI) services are covered only when the participant has a referral from a healthcare provider</li> <li>- Must indicate that biopsychosocial factors are affecting treatment of an underlying physical illness or injury.</li> <li>- Additional <b>eligibility criteria</b> may apply.</li> </ul> <p><b>Nutritional Consultation &amp; Therapy</b> None</p> <p><sup>†</sup> Requires prior authorization <sup>*</sup>Billable only when provided by a licensed social worker or clinical psychologist.</p>	<p><b>NOT COVERED</b></p> <ul style="list-style-type: none"> <li>- MO Medicaid typically <b>excludes</b> coverage of drugs used to promote weight loss</li> <li>- Xenical is on <b>prior authorization</b> list, but indicated only for treatment of dyslipidemia</li> </ul>	
	Bariatric Surgery	
	<p><b>COVERAGE may include:</b></p> <p>Gastric Bypass, Gastric Band, Sleeve Gastrectomy</p> <ul style="list-style-type: none"> <li>- Prior authorization is required.</li> <li>- Participant must have a BMI &gt; 40 kg/m<sup>2</sup> or a BMI &gt; 35 with a comorbid condition (diabetes, hypertension, CVD, CKD).</li> <li>- Participant must be a non-smoker/tobacco user or provide evidence of cessation.</li> <li>- Primary diagnosis must be for a complicating medical condition; claims should reflect obesity as a secondary diagnosis.</li> </ul> <p><u>Note:</u> Refer to the Physician Manual (Section 8) to review MHD's prior authorization policy.</p>	