



American Academy of
PHYSICIAN ASSISTANTS

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Medicaid-Missouri

Overview

Medicaid is a program whereby federal and state governments share the cost of providing approximately 58 million needy Americans with health care coverage. To qualify for the program, states must include hospital services, prevention services, skilled nursing and home health care coverage for adults, and prevention and treatment services for children.

Unlike Medicare, Medicaid has a state funding component, and allows each state to write its own rules for medical coverage. Therefore, every state may define PA scope of practice and reimbursement rules.

State Specific Information

Missouri Medicaid has a fee-for-service plan and managed care plans.

Covered Services

Medically necessary physician services generally are covered when provided by a PA; state law and scope of practice guidelines apply. PAs are NOT covered for first assisting at surgery. PAs are not authorized DME prescribers.

Billing Instructions/Enrollment/Credentialing

PAs are not enrolled in the Missouri Medicaid program. Bill claims under the physician's provider number; append modifier –AR.

Reimbursement Rate

100%

Supervision

State law/general supervision. Physician must be on site at least 66% of time and otherwise within 30 miles.

More information:

The Missouri Medicaid profile, compiled by the AAPA, can be found [online](#).

The State of Missouri [Provider Manual website](#) contains valuable information

For further assistance, contact the Tricia Marriott, AAPA director of reimbursement advocacy, tmarriott@aapa.org.

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