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State/Territory Name: Mississippi

State Plan Amendment (SPA) #: 21-0021

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

September 28, 2021

Mr. Drew Snyder
Executive Director
Mississippi Division of Medicaid
550 High Street, Suite 1000
Jackson, MS 39201

Re: Mississippi State Plan Amendment (SPA) 21-0021

Dear Executive Director Snyder:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (MS) 21-0021. This SPA proposes to allow the Division of Medicaid (DOM) to 1) revise coverage and payment methodology for extended services for pregnant and post-partum women who are at risk of morbidity or mortality, 2) set the fees for extended services for pregnant women the same as those in effect on July 1, 2021, and 3) remove the five percent (5%) reimbursement reduction effective July 1, 2021.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR § 447.201. This letter is to inform you that Mississippi Medicaid SPA 21-0021 was approved on September 23, 2021 with an effective date of July 1, 2021.

If you have any questions, please contact Etta Hawkins at (404) 562-7429 or via email at Etta.Hawkins@cms.hhs.gov.

Sincerely,

A solid black rectangular box redacting the signature of James G. Scott.

James G. Scott, Director
Division of Program Operations

cc: Margaret Wilson
Will Ervin

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 21-0021	2. STATE MS
FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July 1, 2021	

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN
 AMENDMENT TO BE CONSIDERED AS NEW PLAN
 AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: 42 C.F.R. § 447.201	7. FEDERAL BUDGET IMPACT: FFY 2021: \$0.00 FFY 2022: \$0.00
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A, Page 20a and 20b, page 1 Attachment 4.19-B, Page 20a and b	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 3.1-A, Page 20a and 20b, page 1 Attachment 3.1-A, Page 20a and 20b, page 2-6 deleted Attachment 4.19-B, Page 20a and b
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10. SUBJECT OF AMENDMENT:
State Plan Amendment (SPA) 21-0021 is being submitted to allow the Division of Medicaid (DOM) to 1) revise coverage and payment methodology for extended services for pregnant and post-partum women who are at risk of morbidity or mortality, 2) set the fees for extended services for pregnant women the same as those in effect on July 1, 2021, and 3) remove the five percent (5%) reimbursement reduction effective July 1, 2021.

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT
 OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. AGENCY OFFICIAL: <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div>	16. RETURN TO: Drew L. Snyder Miss. Division of Medicaid Attn: Margaret Wilson 550 High Street, Suite 1000 Jackson, MS 39201-1399
13. TYPED NAME: Drew L. Snyder	
14. TITLE: Executive Director	
15. DATE SUBMITTED: JUN 30 2021	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 06/30/2021	18. DATE APPROVED: 09/23/21
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PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: 07/01/2021	20. SIGNATURE OF REGION <div style="background-color: black; width: 100%; height: 15px;"></div>
21. TYPED NAME: James G. Scott	22. TITLE: Director, Division of Medicaid Program Operations

23. REMARKS:

State of Mississippi

DESCRIPTIONS OF LIMITATIONS AS TO AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND SERVICES PROVIDED

Extended Services for Pregnant and Post-Partum Women up to sixty (60) days post-partum

1. Medical Risk Screening performed by a physician, nurse practitioner, physician assistant or certified nurse-midwife per pregnancy as medically necessary,
2. Screening, Brief Intervention, and Referral to Treatment (SBIRT) performed by a physician, nurse practitioner, physician assistant, certified nurse midwife, clinical psychologist, license clinical social worker (LCSW), licensed professional counselor (LPC), or licensed marriage and family therapist (LMFT).

Extended services for pregnant and post-partum women up to sixty (60) days post-partum who are at risk of morbidity or mortality from unstable medical and/or mental health conditions as determined by the Medical Risk Screening.

1. Initial nursing assessment and evaluation performed by a registered nurse (RN) per pregnancy unless medically necessary,
2. Nursing Services, per fifteen (15) minutes, to include health education, performed by a registered nurse,
3. Home visit for postnatal assessment and follow-up performed by a registered nurse per pregnancy unless medically necessary,
4. Nutritional assessment and counseling performed by a registered dietician or licensed nutritionist per pregnancy unless medically necessary,
5. Nutritional counseling and dietician visit per 15 minutes performed by a registered dietician or licensed nutritionist,
6. Mental health assessment performed by a non-physician practitioner per pregnancy unless medically necessary,
7. Behavioral health prevention education services performed by a mental health professional.

State: Mississippi

Methods and Standards For Establishing Payment Rates-Other Types of Care

Extended Services for Pregnant Women

Reimbursement will be on a fee-for-service basis.. Payment will be the established Mississippi Medicaid fee.

The established fees were based on like procedures and services currently paid in the Mississippi Medicaid program. Effective July 1, 2021, all fees will remain the same as those effective for State Fiscal Year (SFY) 2021.

Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers of extended services for pregnant women. All rates are published on the agency's website at www.medicaid.ms.gov/providers/fee-schedules-and-rates/#.