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State/Territory Name: **Mississippi**

State Plan Amendment (SPA) #: **21-0035**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/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 17, 2021

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

Re: Mississippi State Plan Amendment (SPA) 21-0035

Dear Mr. Snyder:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 21-0035. This amendment proposes to do the following: (1) update the fees for telehealth services to match the fees in effect on July 1, 2020; (2) add Federally Qualified Health Centers (FQHC) and Rural Health Centers (RHC) as distant site providers; (3) add language to clarify that FQHCs, RHCs, and Community Mental Health Centers may receive originating or distant site facility fees when services are provided by the same organization; (4) add additional originating sites; and (5) add clarifications to the state plan which dictate that telehealth services must be compliant with the Health Insurance Portability and Accountability Act.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR § 435.733. This letter is to inform you that Mississippi Medicaid SPA 21-0035 was approved on September 17, 2021, with an effective date of July 1, 2021.


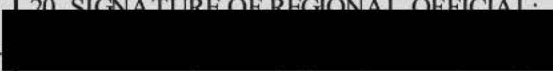
If you have any questions, please contact Etta Hawkins at (404) 562-7429 or via email at Etta.Hawkins@cms.hhs.gov.

Sincerely,

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

James G. Scott, Director
Division of Program Operations

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		1. TRANSMITTAL NUMBER: 21-0035	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): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> 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 2020: \$0.00 FFY 2021: \$0.00	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19-B page 26 Attachment 3 1-A Introductory Pages 1 and 2*		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 4.19-B page 26 Attachment 3 1-A Introductory Page 1	
10. SUBJECT OF AMENDMENT: State Plan Amendment (SPA) 21-0035 is being submitted to allow the Division of Medicaid (DOM) to 1) set the fees for telehealth services the same as those in effect on July 1, 2020, 2) add Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs) as distant site providers, 3) add language that FQHCs, RHCs and Community Mental Health Centers (CMHCs) delivering simultaneous distant and originating site can receive the originating or distant site facility fees when such services are appropriately provided by the same organization, 4) add school which employs a school nurse, inpatient hospital and the beneficiary's home as an originating site, and 5) add telehealth services must be Health Insurance Portability and Accountability Act (HIPAA) compliant, effective July 1, 2021.			
11. GOVERNOR'S REVIEW (Check One): <input checked="" type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		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: 06/30/2021			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: June 30, 2021		18. DATE APPROVED: 9/17/2021	
PLAN APPROVED – ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2021		20. SIGNATURE OF REGIONAL OFFICIAL: 	
21. TYPED NAME: James G. Scott		Director, Division of Program Operations	
23. REMARKS: *Pen & Ink change to Box 8 authorized by state on 9/13/2021. State authorized the addition of Introductory Page 2.			

MEDICAL ASSISTANCE PROGRAM

Introductory Page 1

State of Mississippi

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

Telehealth Service

- 1) Telehealth service is defined as the practice of health care delivery by a provider to a beneficiary who is under the care of a provider at a different geographical location.
- 2) The Division of Medicaid covers medically necessary health services to eligible Medicaid beneficiaries as specified in the State Plan. If a service is not covered in an in-person setting, it is not covered if provided through telehealth.
- 3) Telehealth service must be delivered in a real-time communication method that is Health Insurance Portability and Accountability Act (HIPAA) compliant and is:
 - a. Live;
 - b. Interactive; and
 - c. Audiovisual.
- 4) The originating or spoke site is defined as the physical location of the beneficiary at the time the telehealth service is provided via telecommunications system. Telehealth services are covered in the following originating sites:
 - a. Office of a physician or practitioner;
 - b. Outpatient Hospital (including a Critical Access Hospital (CAH));
 - c. Rural Health Clinic (RHC);
 - d. Federally Qualified Health Center (FQHC);
 - e. Community Mental Health/Private Mental Health Centers;
 - f. Mississippi State Department of Health (MSDH) clinics,
 - g. Therapeutic Group Homes;
 - h. Indian Health Service Clinic;
 - i. School-based clinic,
 - j. School which employs a school nurse licensed as a Mississippi Registered Nurse,
 - k. Inpatient hospital, and
 - l. Beneficiary home.
- 5) The distant or hub site is defined as the physical location of the provider delivering the telehealth service via telecommunications system. The following provider types are allowed to render telehealth services as a distant site:
 - a. Physicians,
 - b. Physicians Assistants,
 - c. Nurse Practitioners,
 - d. Psychologists,
 - e. Licensed Clinical Social Workers (LCSWs),
 - f. Professional Counselors (LPCs),
 - g. Licensed Marriage and Family Therapists (LMFTs),
 - h. Board Certified Behavior Analysts (BCBAs) or Board Certified Behavior Analyst-Doctorals (BCBA-Ds),
 - i. Community Mental Health Centers (CMHCs),
 - j. Private Mental Health Centers,
 - k. Federally Qualified Health Centers (FQHCs),
 - l. Rural Health Centers (RHCs),
 - m. Therapists: Speech, Occupational and Physical, and
 - n. Mississippi State Department of Health (MSDH) clinics.

State of Mississippi

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- 6) Telehealth services must be delivered by a participating Medicaid provider acting within their scope-of-practice at both the originating and distant site.
- 7) The following are not considered telehealth services and are not covered:
- a. Telephone conversations;
 - b. Chart reviews;
 - c. Electronic mail messages;
 - d. Facsimile transmission;
 - e. Internet services for online medical evaluations; or
 - f. The installation or maintenance of any telecommunication devices or systems.

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES –OTHER TYPES OF CARE

Telehealth Services

Payment for telehealth services is made as follows:

The originating or spoke site provider is paid a Mississippi Medicaid telehealth originating site facility fee per completed transmission except for when the originating site is an inpatient hospital or the beneficiary's home. The inpatient hospital originating site fee is included in the All Patient Refined Diagnosis Related Group (APR-DRG) payment. There is no originating site fee paid when the originating site is the beneficiary's home. The originating site provider may not bill for an encounter or Evaluation and Management (E&M) visit unless a separately identifiable service is performed.

The distant or hub site provider is paid the current applicable Mississippi Medicaid fee for the telehealth service provided.

Providers delivering simultaneous distant and originating site services to a beneficiary are reimbursed

1. The current applicable Mississippi Medicaid fee-for-service rate for the medical service(s) provided, and
2. Either the originating or distant site facility fees, not both, except for RHC, FQHC and CMHC when such services are appropriately provided by the same organization.

The Mississippi Medicaid telehealth originating site facility fee was calculated by an actuarial firm using the May 2013 Bureau of Labor Statistics (BLS) mean wage for Nurse Practitioners in MS adjusted by 35% for benefits and 2% for wage growth at half of the rate for 30 minute increments. The Mississippi Medicaid telehealth originating site facility fee is effective July 1, 2020 based on the annual percentage change in the Medicare physician fee schedule for Level III Established Patient E&M code effective on January 1, 2020.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of telehealth services. All rates are published on the Division of Medicaid's website at <http://www.medicaid.ms.gov/providers/fee-schedules-and-rates/>.