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State/Territory Name: Mississippi

State Plan Amendment (SPA) #: 23-0027

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

October 4, 2023

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

Re: Mississippi State Plan Amendment (SPA) 23-0027

Dear Executive Director Snyder:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0027. This SPA is submitted to extend its current waiver from seeking a RAC vendor approved in State Plan Amendment (SPA) 22-0024 for one (1) additional year to attempt to procure a new, competitively bid RAC contract that complies with current state and federal laws and regulations.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR 455.516 and 455.502. This letter is to inform you that Mississippi's Medicaid SPA 23-0027 was approved on October 4, 2023, with an effective date of July 1, 2023, for a period of one year.

If you have any questions, please contact Tandra Hodges at (404) 562-7409 or via email at Tandra.Hodges@cms.hhs.gov.

Sincerely,

A black rectangular box redacts the signature of James G. Scott.

James G. Scott, Director
Division of Program Operations

Enclosures

cc: Robin Bradshaw

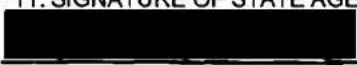
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER <u>2 3 — 0 0 2 7</u>	2. STATE <u>MS</u>
	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July 1, 2023	
5. FEDERAL STATUTE/REGULATION CITATION 42 C.F.R. §§ 455.502, 455.516	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>23</u> \$ <u>0</u> b. FFY <u>24</u> \$ <u>0</u>	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Section 4 page 36b and 36c	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Section 4 page 36b and 36c	

9. SUBJECT OF AMENDMENT
This SPA is being submitted to request an extension for a period of one (1) year in order to attempt to procure a new, competitively bid RAC contract that complies with the current state and federal laws and regulations.

10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

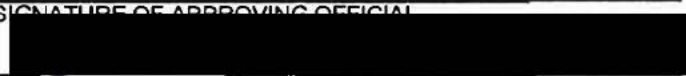
OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL 	15. RETURN TO Drew L. Snyder Miss. Division of Medicaid Attn: Robin Bradshaw 550 High Street, Suite 1000 Jackson, MS 39201-1399
12. TYPED NAME Drew L. Snyder	
13. TITLE Executive Director	
14. DATE SUBMITTED SEP 05 2023	

FOR CMS USE ONLY

16. DATE RECEIVED September 5, 2023	17. DATE APPROVED October 4, 2023
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PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL July 1, 2023	19. SIGNATURE OF APPROVING OFFICIAL 
20. TYPED NAME OF APPROVING OFFICIAL James G. Scott	21. TITLE OF APPROVING OFFICIAL Director, Division of Program Operations

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State of Mississippi

4.5 Medicaid Recovery Audit Contractor Program

<p><u>Citation</u></p> <p>Section 1902(a)(42)(B)(i) of the Social Security Act</p>	<p><input type="checkbox"/> Effective April 1, 2017, the State has established a program under which it will contract with one or more recovery audit contractors (RACs) for the purpose of identifying underpayments and overpayments of Medicaid Claims under the State plan and under any waiver of the State Plan.</p>
<p>Section 1902 (a)(42)(B)(ii)(I) of the Act</p>	<p><input checked="" type="checkbox"/> The State is seeking an exception to establishing such program for the following reasons:</p> <p>Pursuant to 42 CFR § 455.516, the Division of Medicaid is seeking an exception to 42 CFR § 455.502(b), which requires contracting with a RAC. The Division of Medicaid's RAC contract expired on March 31, 2021. The Division of Medicaid submitted an amendment to Mississippi Department of Finance and Administration requesting an extension for another year; however, prior to approval, a merger was completed creating a new entity. As such, the new entity cannot execute a new contract for RAC services for another year. The Division of Medicaid attempted to competitively procure another vendor. However, of the two offers submitted, neither met the minimum costs or federal/state requirements to be a RAC vendor and the procurement was cancelled. The Division of Medicaid seeks to extend its current waiver from seeking a RAC vendor approved in State Plan Amendment (SPA) 22-0024 for one (1) additional year in order to attempt to procure a new, competitively bid RAC contract that complies with current state and federal laws and regulations. The current waiver expires June 30, 2023.</p>
<p>Section 1902(a)(42)(B)(ii)(II)(aa) of the Act</p>	<p><input type="checkbox"/> The State/Medicaid agency has contracts of the type(s) listed in section 1902(a)(42)(B)(ii)(I) of the Act. All contracts meet the requirements of the statute. RACs are consistent with the statute.</p> <p>Place a check mark to provide assurance of the following:</p> <p><input type="checkbox"/> The State will make payments to RAC(s) only from amounts recovered.</p> <p><input type="checkbox"/> The State will make payments to the RAC(s) on a contingent basis for collecting over payments.</p> <p>The following payment methodology shall be used to determine State Payments to Medicaid RACs for identification and recovery of overpayments (e.g., the percentage of the contingency fee):</p> <p><input type="checkbox"/> The State attests that the contingency fee rate paid to the Medicaid RAC will not exceed the highest rate paid to Medicare RACs, as published in the</p>

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
 MEDICAL ASSISTANCE PROGRAM

	<p>Federal Register.</p> <p>__The State attests that the contingency fee rate paid to the Medicaid RAC will exceed the highest rate paid to Medicare RACs as published in the Federal Register. The State will only submit for FFP up to the amount equivalent to that published rate.</p> <p>__The contingency fee rate paid to the Medicaid RAC that will exceed the highest rate paid to Medicare RACs, as published in the Federal Register. The state will submit a justification for that rate and will submit for FFP for the full amount of the contingency fee.</p>
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<p>Section 1902(a)(42)(B)(ii)(II)(bb) of the Act</p> <p>Section 1902(a)(42)(B)(ii)(III) of the Act</p> <p>Section 1902(a)(42)(B)(ii)(IV)(aa) of the Act</p> <p>Section 1902(a)(42)(B)(ii)(IV)(bb) of the Act</p> <p>Section 1902(a)(42)(B)(ii)(N)(cc) of the Act</p>	<p>__The following payment methodology shall be used to determine State payments to Medicaid RACs for the identification of underpayments (e.g., amount of flat fee, the percentage of the contingency fee): Percentage of recovery established through procurement process.</p> <p>__The State has an adequate appeal process in place for entities to appeal any adverse determination made by the Medicaid RAC(s).</p> <p>__The state assures that the amounts expended by the State to carry out the program will be amounts expended as necessary for the proper and efficient administration of the State Plan or waiver of the plan.</p> <p>The state assures that the recovered amounts will be subject to a State's quarterly expenditure estimates and funding of the State's share.</p> <p>__Efforts of the Medicaid RAC(s) will be coordinated with other contractors or entities performing audits of entities receiving payments under the State plan or waiver in the State, and/or State and Federal law enforcement entities and the CMS Medicaid Integrity Program.</p>
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