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State/Territory Name: Mississippi

State Plan Amendment (SPA) MS: 22-0008

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
Center for Medicaid & CHIP Services
233 North Michigan Ave., Suite 600
Chicago, Illinois 60601



Financial Management Group

November 4, 2022

Mr. Drew Snyder, Executive Director
Mississippi Division of Medicaid
Attention: Margaret Wilson
550 High Street, Suite 1000
Jackson, MS 39201-1399

RE: Mississippi State Plan Amendment (SPA) Transmittal Number 22-0008

Dear Mr. Snyder:

We have reviewed the proposed Mississippi State Plan Amendment (SPA) 22-0008, which was submitted to the Centers for Medicare & Medicaid Services (CMS) September 08, 2022. State Plan Amendment (SPA) allows the Division of Medicaid (DOM) to reimburse independent laboratory and X-Ray services from a statewide uniform fee schedule based on ninety percent (90%) of the Medicare fee schedule in effect January 1 of each year and updated each July, effective for services provided on or after that date.

Based upon the information provided by the State, we have approved the amendment with an effective date of July 1, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Monica Neiman at 945-356-1231 or via email at monica.neiman@cms.hhs.gov

Sincerely,



Todd McMillion
Director
Division of Reimbursement Review

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER <u>2 2 - 0 0 0 8</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 <p style="text-align: center;">July 1, 2022</p>	
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR § 430.10 ,1905(a)(3) <input checked="" type="radio"/> ther Laboratory and X-ray services	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY <u>2022</u> \$ <u>44,421</u> b FFY <u>2023</u> \$ <u>176,666</u>	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B, Page 3 TN: 22-0008	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B, Page 3 TN: 21-0008	

9. SUBJECT OF AMENDMENT
State Plan Amendment (SPA) 22-0008 is being submitted to allow the Division of Medicaid (DOM) to reimburse independent laboratory and X-Ray services from a statewide uniform fee schedule based on ninety percent (90%) of the Medicare fee schedule updated each July and effective for services provided on or after that date, effective July 1, 2022.

10. 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

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 <p style="text-align: center; font-size: 1.2em;">SEP 08 2022</p>	

FOR CMS USE ONLY

16. DATE RECEIVED September 8, 2022	17. DATE APPROVED November 4, 2022
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PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL July 01, 2022	19. SIGNATURE OF APPROVING OFFICIAL
20. TYPED NAME OF APPROVING OFFICIAL Todd McMillion	21. TITLE OF APPROVING OFFICIAL Director, Division of Reimbursment Review

22. REMARKS

Pen and Ink change approved by the State and processed by CMS on the following fields:

- Box 5: 1905(a)(3) ther Laboratory and X-ray services
- Box 7: TN: 22-0008
- Box 8: TN: 21-0008

State of Mississippi

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

Independent Laboratory and X-Ray Services - Reimbursement is made from a Mississippi Medicaid statewide uniform fee schedule based on ninety percent (90%) of the Medicare fee schedule in effect January 1 of each year and updated each year as of July, effective for services provided on or after that date. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. All fees are published on the agency's website at <http://www.medicaid.ms.gov/FeeScheduleLists.aspx>.