

**NOTICE OF TERMINATION  
WITHDRAWAL OF PROPOSED RULE**

**STATE OF MISSISSIPPI  
OFFICE OF THE GOVERNOR  
DIVISION OF MEDICAID**

Miss. Division of Medicaid  
c/o Ginnie McCardle, Staff Officer  
Walter Sillers Building  
550 High St.  
Suite 1000  
Jackson, MS 39201  
(601) 359-6310  
<http://www.dom.state.ms.us>

**Date Rule Proposed:** July 11, 2008

**Name of proposed rule being terminated:**

SPA2008-022 Reimbursement to Nurse Practitioner and Physician Assistant Providers

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**Explanation of the purpose of the proposed rule and the reason(s) for proposing the rule:**

Pursuant to Miss Code Ann. § 43-13-117 (1972 as amended), if current or projected expenditures of the Division are reasonably anticipated to exceed the amount of funds appropriated to the Division for any fiscal year, the Governor shall discontinue any or all of the payment of the types of care and services provided under this section that are deemed to be optional services and when necessary, shall institute any other cost containment measures on any program or programs authorized under the article to the extent allowed under the federal laws governing that program. Therefore, this State Plan Amendment reflects necessary cost containment measures to assure Medicaid operates within expected revenues as described. This State Plan Amendment will affect Nurse Practitioner and Physician Assistant Providers.

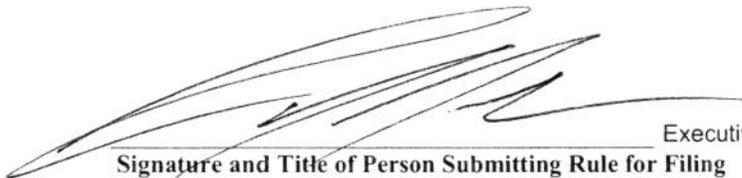
**Reason(s) for terminating the proposed rule:**

After additional deliberations, the agency has determined that the proposed rule should be withdrawn in consideration of other options.

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**Date Proposed Rule Terminated:** July 31, 2008



Executive Director

Signature and Title of Person Submitting Rule for Filing

**State of Mississippi**  
**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE**

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6d. Other Practitioners' Services:

Nurse Practitioner and Physician Assistant Services: Reimbursement for nurse practitioner and physician assistant services shall be at 90% of the fee for reimbursement paid to licensed physicians under the statewide physician fee schedule for comparable services under comparable circumstances.

Nurse practitioner and physician assistant services for EPSDT beneficiaries, if medically necessary, which exceed the limitations and scope for Medicaid beneficiaries, as covered in this Plan, are reimbursed according to the methodology in the above paragraph.

Pharmacy Disease Management Services: The pharmacy disease management services are reimbursed on a per encounter basis with an encounter averaging between fifteen and thirty minutes. The reimbursement is a flat fee established after reviewing Medicaid's physician fee schedule and reimbursement methodologies and fees of other states and third party payers.

The Division of Medicaid, as required by state law, shall reduce the rate of reimbursement to providers for any service by ten percent (10%) of the allowed amount for that service.

**State of Mississippi**  
**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE**

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17. Nurse-midwife services

The reimbursement for certified nurse midwifery services shall not exceed ninety percent (90%) of the reimbursement rate for comparable services rendered by a physician.

The Division of Medicaid, as required by state law, shall reduce the rate of reimbursement to providers for any service by ten percent (10%) of the allowed amount for that service.

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TN No. 2008-22  
Supercedes  
TN No. 2002-06

Date Received \_\_\_\_\_  
Date Approved \_\_\_\_\_  
Date Effective August 6, 2008

## Notice of Proposed Rule Adoption

### State of Mississippi Office of the Governor Division of Medicaid

#### Economic Impact Statement For Nurse Practitioner and Physician Assistant Providers

The Executive Director of Medicaid is required by law to recommend expenditure containments when expenditures are expected to exceed funds available for any fiscal year. Medicaid is facing a \$90,000,000 shortfall in state revenues for FY2009; therefore, certain cost containment measures have been identified as necessary to balance Medicaid's budget. These measures include reducing certain non-institutional providers an additional 5% reduction in reimbursement in addition to the 5% reduction as outlined in Miss. Code Ann. § 43-13-117 (1972 as amended).

It is estimated that it will cost the Division of Medicaid approximately \$5,000 to enforce the increased reduction in payments to providers. This includes system changes and staff time.

An estimate of the total economic impact for nurse practitioner and physician assistant providers, including small business providers, is noted in the chart below. The total economic impact for providers in State FY 2009 is equal to the sum of federal and state savings noted in the chart below. The Division of Medicaid estimated the impact utilizing the actual and estimated expenditures for the same services for FY2008.

<b>FFY2008 Federal Savings</b>	<b>FFY2008 State Share Savings</b>	<b>FFY2009 Federal Savings</b>	<b>FFY2009 State Share Savings</b>
\$ 144,076.30	\$ 44,777.15	\$ 859,358.75	\$ 273,761.97

The Division of Medicaid is facing a \$90,000,000 shortfall in state revenues for FY2009. If this cost containment measure is not enacted, there will not be sufficient revenues to reimburse providers for the entire year.

State law limits cost containment measures that may be taken and precludes the Governor from changing eligibility or benefits; therefore, the only option is to reduce expenditures is to reduce payment.