

PUBLIC NOTICE

May 29, 2020

Pursuant to 42 C.F.R. Section 447.205, public notice is hereby given for the submission of a Medicaid State Plan Amendment (SPA) 20-0018 Graduate Medical Education (GME) Reimbursement. The Division of Medicaid, in the Office of the Governor, will submit this proposed SPA to the Centers for Medicare and Medicaid Services (CMS) effective June 1, 2020, contingent upon approval from CMS, our Transmittal #20-0018.

1. Mississippi Medicaid SPA 20-0018 GME addresses calculations for GME payments for a hospital during a cap building period effective June 1, 2020.
2. The estimated annual aggregate expenditures is anticipated to \$0.00.
3. The Division of Medicaid is submitting this proposed SPA to be in compliance with 42 C.F.R. § 447.201 which requires all policy and methods used in setting payment rates for services be included in the State Plan. The purpose of this SPA is to outline the documentation requirements for a hospital to receive GME payments and address the calculations for GME payments during a hospital's cap building period.
4. A copy of the proposed SPA will be available in each county health department office and in the Department of Human Services office in Issaquena County for review. A hard copy can be downloaded and printed from www.medicaid.ms.gov, or requested at 601-359-2081 or by emailing at Margaret.Wilson@medicaid.ms.gov.
5. Written comments will be received by the Division of Medicaid, Office of the Governor, Office of Policy, Walter Sillers Building, Suite 1000, 550 High Street, Jackson, Mississippi 39201, or Margaret.Wilson@medicaid.ms.gov for thirty (30) days from the date of publication of this notice. Comments will be available for public review at the above address and on the Division of Medicaid's website at www.medicaid.ms.gov.
6. A public hearing on this SPA will not be held.

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Q. Medical Education Payments

The Mississippi Division of Medicaid (DOM) reimburses Mississippi hospitals which meet the following criteria: (1) accreditation from the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA), (2) has a Medicare approved teaching program for direct graduate medical education (GME) costs, and (3) is eligible for Medicare reimbursement. The hospital must be accredited at the beginning of the state fiscal year in order to qualify for the quarterly payments during the payment year. To be eligible for payment, services must be performed on the campus of the teaching hospital or at a participating hospital site. Only the teaching hospital or the participating hospital site is eligible for reimbursement. DOM does not reimburse for indirect GME costs.

Medical education payments are calculated annually on July 1, as a per resident amount based on the total Medicaid hospital inpatient stays as calculated by DOM. During the year of implementation, effective October 1, 2019, the payments will be made to eligible hospitals in three (3) equal installments in December, March and June. Thereafter, the payments will be made to eligible hospitals on a quarterly basis in September, December, March and June. The number of residents per hospital is defined as the sum of the number of Medicare approved resident full time equivalents (FTEs) reported on the applicable lines on the most recent Medicare cost report filed with DOM for the calendar year immediately prior to the beginning of the state fiscal year for established programs. Any hospital which establishes a new accredited teaching program or is in a five (5) year resident cap building period for the

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teaching program must submit documentation of accreditation, Medicare approval, a CEO or CFO signed attestation statement of the estimated number of resident positions to be filled during the upcoming state fiscal year, and start date of the GME program prior to the July 1 calculation of the payments. The attested number of residents used to calculate medical education payments will be compared to the actual number of FTEs reported on the applicable lines of the most recent Medicare cost report filed with DOM for the calendar year immediately prior to the ending of the state fiscal year. If the comparison shows that the attested number of residents differs from actual FTEs reported on the cost report, the medical education payments will be adjusted using the actual FTEs. The adjustment may result in an increase or decrease in future medical education payments. The program must be in operation as of July 1 of the payment year.

The per resident rate will be as follows:

- A. For residencies of Mississippi academic health science centers with a Level 1 trauma center:
 - 1. \$65,000 per FTE for hospitals with 7,500 or more Medicaid hospital inpatient stays, or
 - 2. \$55,000 per FTE for hospitals with fewer than 7,500 Medicaid hospital inpatient stays.

- B. For residencies of all other accredited hospitals:
 - 1. \$35,000 per FTE for hospitals with greater than 7,500 Medicaid hospital inpatient stays,
 - 2. \$27,500 per FTE for hospitals with 2,000 to 7,500 Medicaid hospital inpatient stays, or
 - 3. \$25,000 per FTE for hospitals with fewer than 2,000 Medicaid hospital inpatient stays.

Medical education costs will not be reimbursed to out-of-state hospitals.

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