

PUBLIC NOTICE

August 28, 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) 20-0013 Vaccines. 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 September 1, 2020, contingent upon approval from CMS, our Transmittal # 20-0013.

1. Mississippi Medicaid SPA 20-0013 changes the reimbursement methodology of vaccine administration by a licensed pharmacist, employed by a Mississippi Medicaid pharmacy provider, working within the scope of their pharmacy license to a fee calculated at 100% of the Medicare rate.
2. The expected annual aggregate expenditures is an increase of \$52,817 if all of the CDC recommended vaccines for adults are covered in the pharmacy venue. This estimate is based on all CDC recommended vaccines being administered at the current utilization rate of the shingles/pneumococcal pneumonia vaccine and reimbursed at 100% of the Medicare rate.
3. The Division of Medicaid is submitting this proposed SPA to be in compliance with 42 C.F.R. § 447.201 which requires policy and methods used in setting payment rates for services to be included in the State Plan.
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.

State of Mississippi

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

6d. Other Licensed Practitioners' Services:

Nurse Practitioner Services: Services furnished by a registered nurse who is licensed and certified by the Mississippi Board of Nursing as a nurse practitioner including, but not limited to nurse anesthetists, nurse midwives, family nurse practitioners, family planning nurse practitioners, pediatric nurse practitioners, obstetrics-gynecology nurse practitioners and neonatal nurse practitioners, under regulations adopted by the Division.

Physician Assistant Services: Physician assistant services are those provided by physician assistants who are licensed by the State Board of Medical Licensure and are practicing with physician supervision under regulations adopted by the Division.

Pharmacy Vaccine Services: A licensed pharmacist, employed by a Mississippi Medicaid pharmacy provider, working within the scope of their pharmacy license may administer vaccinations that are recommended by the Centers for Disease Control and Prevention. The pharmacy provider must be an enrolled Vaccine for Children (VFC) provider to be reimbursed for the administration of vaccines to beneficiaries eighteen (18) years of age and younger.

Pharmacy Disease Management Services: Disease management services are those provided by specially credentialed pharmacists for Medicaid recipients with specific chronic disease states of diabetes, asthma, lipids, or coagulation. It is a patient-centered concept integrating the pharmacist into the health care team with shared responsibility for disease management and therapeutic outcome. The process provides cost-effective, high quality health care for patients referred by their physician. The referring physician requests disease management services from any credentialed participating pharmacist in Mississippi. With the appropriate transfer of pharmacy care records, including a written referral from the physician to the pharmacist, the referral is considered documented. All laboratory test results must be included because the pharmacist is not allowed reimbursement for laboratory procedures. In order to be cost-effective for the Medicaid program, the disease management services performed by the pharmacist cannot duplicate those provided by the physician.

State of Mississippi

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

6d. Other Licensed Practitioners' Services:

Nurse Practitioner Services: Services furnished by a registered nurse who is licensed and certified by the Mississippi Board of Nursing as a nurse practitioner including, but not limited to nurse anesthetists, nurse midwives, family nurse practitioners, family planning nurse practitioners, pediatric nurse practitioners, obstetrics-gynecology nurse practitioners and neonatal nurse practitioners, under regulations adopted by the Division.

Physician Assistant Services: Physician assistant services are those provided by physician assistants who are licensed by the State Board of Medical Licensure and are practicing with physician supervision under regulations adopted by the Division.

Pharmacy Vaccine Services: A licensed pharmacist, employed by a Mississippi Medicaid pharmacy provider, working within the scope of their pharmacy license may administer vaccinations that are recommended by the Centers for Disease Control and Prevention. The pharmacy provider must be an enrolled Vaccine for Children (VFC) provider to be reimbursed for the administration of vaccines to beneficiaries eighteen (18) years of age and younger.

Pharmacy Disease Management Services: Disease management services are those provided by specially credentialed pharmacists for Medicaid recipients with specific chronic disease states of diabetes, asthma, lipids, or coagulation. It is a patient-centered concept integrating the pharmacist into the health care team with shared responsibility for disease management and therapeutic outcome. The process provides cost-effective, high quality health care for patients referred by their physician. The referring physician requests disease management services from any credentialed participating pharmacist in Mississippi. With the appropriate transfer of pharmacy care records, including a written referral from the physician to the pharmacist, the referral is considered documented. All laboratory test results must be included because the pharmacist is not allowed reimbursement for laboratory procedures. In order to be cost-effective for the Medicaid program, the disease management services performed by the pharmacist cannot duplicate those provided by the physician.

State of Mississippi

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

6d. Other Licensed 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.

Reimbursement to a pharmacy provider, for vaccine administration by a pharmacist, is the same fee as a primary care physician outlined in Attachment 4.19-B page 5a.

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.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private other licensed practitioner providers. The Division of Medicaid's fee schedule rate was set as of July 1, 2020, and is effective for services provided on or after that date. All rates are published at www.medicaid.ms.gov/providers/fee-schedules-and-rates/#. The Division of Medicaid will reduce the rate of reimbursement to providers for any service by five percent (5%) of the allowed amount for that service. The 5% reduction has been in effect since July 1, 2002, and the fee schedule already incorporates the 5% adjustment. The federal match will be paid based on the reduced amount.

State of Mississippi

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

6d. Other Licensed 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.

Reimbursement to a pharmacy provider, for vaccine administration by a pharmacist, is the same fee as a primary care physician outlined in Attachment 4.19-B page 5a.

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.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private other licensed practitioner providers. The Division of Medicaid's fee schedule rate was set as of July 1, 2020, and is effective for services provided on or after that date. All rates are published at www.medicaid.ms.gov/providers/fee-schedules-and-rates/#. Notwithstanding any other provision in this section, ~~the~~ The Division of Medicaid shall will reduce the rate of reimbursement to providers for any service by five percent (5%) of the allowed amount for that service. The 5% reduction has been in effect since July 1, 2002, and the fee schedule already incorporates the 5% adjustment. The federal match will be paid based on the reduced amount.

State of Mississippi

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

13c. Preventive Services:

Vaccine Ingredient Cost:

The federal Vaccine for Children (VFC) program provides vaccines free of charge to VFC enrolled providers. The Division of Medicaid does not reimburse for the cost of vaccines supplied through the VFC program.

Vaccines not covered through the VFC program are reimbursed:

1. In the pharmacy setting, at the actual acquisition cost (AAC) of the vaccine and are listed on the Division of Medicaid's website at <https://medicaid.ms.gov/providers/fee-schedules-and-rates/#>. The AAC is defined as the wholesale acquisition cost (WAC) plus 0% for any claim type.
2. In the office setting, according to Attachment 4.19B, page 12a.3.

Vaccine administration for VFC vaccines is outlined in Attachment 4.19-B, page 5a.

Vaccine administration for non-VFC vaccines:

1. For a pharmacist is located in Attachment 4.19-B, page 6d.
2. For practitioners is located on the physician fee schedule at <https://medicaid.ms.gov/providers/fee-schedules-and-rates/>.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. The Division of Medicaid's fee schedule rate was set as of July 1, 2020, and is effective for services provided on or after that date. All rates are published at www.medicicaid.ms.gov/providers/fee-schedules-and-rates/#. The Division of Medicaid will reduce the rate of reimbursement to providers for any service by five percent (5%) of the allowed amount for that service. The 5% reduction has been in effect since July 1, 2002, and the fee schedule already incorporates the 5% adjustment. The federal match will be paid based on the reduced amount.

State of Mississippi

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

13c. Preventive Services:

Vaccine Ingredient Cost:

The federal Vaccine for Children (VFC) program provides vaccines free of charge to VFC enrolled providers. The Division of Medicaid does not reimburse for the cost of vaccines supplied through the VFC program.

Vaccines not covered through the VFC program are reimbursed:

1. In the pharmacy setting, at the actual acquisition cost (AAC) of the vaccine and are listed on the Division of Medicaid's website at <https://medicaid.ms.gov/providers/fee-schedules-and-rates/#>. The AAC is defined as the wholesale acquisition cost (WAC) plus 0% for any claim type.
2. In the office setting, according to Attachment 4.19B, page 12a.3.

Vaccine administration for VFC vaccines is outlined in Attachment 4.19-B, page 5a.

Vaccine administration for non-VFC vaccines:

1. For a pharmacist is located in Attachment 4.19-B, page 6d.
2. For practitioners is located on the physician fee schedule at <https://medicaid.ms.gov/providers/fee-schedules-and-rates/>.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. The Division of Medicaid's fee schedule rate was set as of July 1, 2020, and is effective for services provided on or after that date. All rates are published at www.medicicaid.ms.gov/providers/fee-schedules-and-rates/#. The Division of Medicaid will reduce the rate of reimbursement to providers for any service by five percent (5%) of the allowed amount for that service. The 5% reduction has been in effect since July 1, 2002, and the fee schedule already incorporates the 5% adjustment. The federal match will be paid based on the reduced amount.