

State of Mississippi

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

13. Other Diagnostic, Screening, Preventive, and Rehabilitative Services: Mental Health Services described in Attachment 3.1-A, Exhibit 13.d are reimbursed as follows:

Covered services billed using Current Procedural Terminology (CPT) codes for psychiatric therapeutic procedures are reimbursed based on ninety percent (90%) of the most recent final Medicare fee schedule published by the Centers for Medicare and Medicaid Services (CMS) as of April 1, 2020 and effective July 1, 2020 for services provided on or after that date.

Covered services billed using Healthcare Common Procedure Coding System (HCPCS) are reimbursed according to a statewide uniform fixed fee schedule. In establishing the fee schedule, the Division of Medicaid (DOM) engaged an actuarial firm to establish fees. DOM provided service descriptions and other information for the existing mental health services offered and the proposed new services. The relationships between comparable services for Medicaid programs in other states were examined to develop factors to apply to existing Mississippi fees to calculate the new service group fees with the fees for the existing mental health services. Consideration was given to the service descriptions, required provider credentials and current costs associated with services. Preliminary fees were modified to better reflect the expected provider cost relative to other mental health services. The agency's state developed fee schedule rate is set as of July 1, 2012, and is effective for services provided on or after that date. Effective September 1, 2020, Intensive Community Outreach and Recovery Team (I-CORT) services will be paid the rate established July 1, 2012, for Intensive Outpatient Programs (IOP) and Mental Health Assessments by a Non-Physician will be paid ninety percent (90%) of the Medicaid physician rate for a Psychiatric Diagnostic Evaluation. Effective April 1, 2021, I-CORT will be paid at ninety percent (90%) of the Programs of Assertive Community Treatment (PACT) rate.

Except as otherwise noted in the plan, state-developed uniform fixed fee schedule rates are the same for both governmental and private providers of mental health rehabilitative services as described in Attachment 3.1-A, Exhibit 13.d. All rates are published on the agency's website at <http://www.medicaid.ms.gov/FeeScheduleLists.aspx>.

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~~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 when applicable. The five percent (5%) reduction has been in place for community mental health services since July 1, 2002 and the fee schedule already incorporates the five percent (5%) reduction.~~

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