

PUBLIC NOTICE

April 26, 2022

Pursuant to 42 C.F.R. Section 447.205, public notice is hereby given for the submission of a Medicaid State Plan Amendment (SPA) 22-0002 End-Stage Renal Disease (ESRD) Immunizations. 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 May 1, 2022, contingent upon approval from CMS, our Transmittal #22-0002.

1. Mississippi Medicaid SPA 22-0002 does not change the reimbursement methodology. This submission is updating the State Plan to clarify the reimbursement of immunizations in dialysis facilities.
2. The expected annual aggregate expenditures is budget neutral.
3. The Division of Medicaid is submitting this proposed SPA to comply with 42 C.F.R. § 447.201 that requires the Division of Medicaid to submit a SPA describing the policy and methods used in setting payment rates for each type of service included in the Mississippi 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 601-359-3984 or by emailing at DOMPolicy@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 DOMPolicy@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 PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM
State of Mississippi**

Attachment 3.1-A
Exhibit 9b

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

9b. End-Stage Renal Dialysis (ESRD) Services

The Division of Medicaid covers all end-stage renal dialysis (ESRD) services and items used to furnish outpatient maintenance dialysis in an ESRD facility or in a beneficiary's home. According to Section 1881 of the Act and 42 CFR § 413.174, ESRD facilities are classified as either:

- (a) Hospital-Based ESRD Facilities as defined in 42 CFR § 413.174(c), or
- (b) Freestanding ESRD Facilities as defined in 42 CFR § 413.174(b).

There is no distinction between the two facility types for the purposes of payment under the ESRD Prospective Payment System (PPS).

A renal dialysis facility or renal dialysis center must provide dialysis services, as well as adequate laboratory, social, and dietetic services to meet the needs of the ESRD beneficiary according to 42 CFR § 413.171.

The Division of Medicaid reimburses dialysis facilities for influenza, Hepatitis B and pneumonia vaccines when provided by and administered by the dialysis facility to beneficiaries receiving dialysis services.

The Division of Medicaid covers for all medically necessary services for EPSDT-eligible beneficiaries without regard to service limitations and with prior authorization.

TN No. 22-0002

Date Received

Supersedes

Date Approved

TN No. 14-003

Date Effective 05/01/2022

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

Dialysis Center Services

A. Payment Methodology

Effective January 1, 2014, dialysis centers shall be reimbursed at a bundled end-stage renal disease (ESRD) prospective payment system (PPS) rate. The ESRD PPS rate is equal to the Medicare ESRD bundled PPS rate as of January 1, 2021 published in the Federal Register in the fourth (4th) quarter of the preceding calendar year. The ESRD PPS rate provides a single payment to freestanding and hospital-based dialysis centers covering all resources used in providing dialysis treatment in the centers or at a beneficiary's home, including supplies, equipment, drugs, biologicals, laboratory services, and support services. A complete listing of drugs, biologicals and lab services included in the ESRD PPS rate can be viewed at www.medicaid.ms.gov/FeeScheduleLists.aspx.

Influenza, Hepatitis B and pneumonia vaccines are excluded from the ESRD PPS rate, and can be billed outside of the PPS rate.

B. Rate Setting

New dialysis centers are assigned an ESRD PPS rate equal to the prevailing Medicare bundled ESRD base PPS rate as of January 1, 2021, adjusted by the ESRD PPS Wage Index for the provider's Core-Based Statistical Area (CBSA) labor market area in effect January 1, 2021.

Effective July 1, 2021, the dialysis center's ESRD PPS rate shall be equal to the bundled ESRD base PPS rate established by Medicare as of January 1, 2021 adjusted by the ESRD PPS Wage Index, with no further updates.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM
State of Mississippi

Attachment 3.1-A
Exhibit 9b

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

9b. End-Stage Renal Dialysis (ESRD) Services

The Division of Medicaid covers all end-stage renal dialysis (ESRD) services and items used to furnish outpatient maintenance dialysis in an ESRD facility or in a beneficiary's home. According to Section 1881 of the Act and 42 CFR § 413.174, ESRD facilities are classified as either:

- (a) Hospital-Based ESRD Facilities as defined in 42 CFR § 413.174(c), or
- (b) Freestanding ESRD Facilities as defined in 42 CFR § 413.174(b).

There is no distinction between the two facility types for the purposes of payment under the ESRD Prospective Payment System (PPS).

A renal dialysis facility or renal dialysis center must provide dialysis services, as well as adequate laboratory, social, and dietetic services to meet the needs of the ESRD beneficiary according to ~~42 CFR § 405.2102~~ 42 CFR § 413.171.

The Division of Medicaid reimburses dialysis facilities for influenza, Hepatitis B and pneumonia vaccines when provided by and administered by the dialysis facility to beneficiaries receiving dialysis services.

The Division of Medicaid covers for all medically necessary services for EPSDT-eligible beneficiaries without regard to service limitations and with prior authorization.

TN No. ~~14-003~~ 22-0002

Date Received

Supersedes

Date Approved

TN No. ~~New-14-003~~

Date Effective 05/01/2022

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

Dialysis Center Services

A. Payment Methodology

Effective January 1, 2014, dialysis centers shall be reimbursed at a bundled end-stage renal disease (ESRD) prospective payment system (PPS) rate. The ESRD PPS rate is equal to the Medicare ESRD bundled PPS rate as of January 1, 2021 published in the Federal Register in the fourth (4th) quarter of the preceding calendar year. The ESRD PPS rate provides a single payment to freestanding and hospital-based dialysis centers covering all resources used in providing dialysis treatment in the centers or at a beneficiary's home, including supplies, equipment, drugs, biologicals, laboratory services, and support services. A complete listing of drugs, biologicals and lab services included in the ESRD PPS rate can be viewed at www.medicaid.ms.gov/FeeScheduleLists.aspx.

Influenza, Hepatitis B and pneumonia vaccines are excluded from the ESRD PPS rate, and can be billed outside of the PPS rate.

B. Rate Setting

New dialysis centers are assigned an ESRD PPS rate equal to the prevailing Medicare bundled ESRD base PPS rate as of January 1, 2021, adjusted by the ESRD PPS Wage Index for the provider's Core-Based Statistical Area (CBSA) labor market area in effect January 1, 2021.

Effective July 1, 2021, the dialysis center's ESRD PPS rate shall be equal to the bundled ESRD base PPS rate established by Medicare as of January 1, 2021 adjusted by the ESRD PPS Wage Index, with no further updates.