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State of Mississippi Methods and Standards for Establishing Payment Rates – Other Types of Care

Physicians' services – The normal reimbursement rate for Medicaid physician services is ninety percent (90%) of the Medicare Physician Fee Schedule in effect as of January 1, 2022 and as may be adjusted each July thereafter. All rates are published at https://medicaid.ms.gov/providers/fee-schedules-and-rates/#.

Enhanced Primary Care Physician Payment:

The Division of Medicaid will continue to reimburse for services provided by physicians who self-attest as having a primary specialty designation of family medicine, pediatric medicine or internal medicine formerly authorized by 42 C.F.R. § 447.400(a).

Effective July 1, 2016, the Division of Medicaid will reimburse for services provided by obstetricians and gynecologists (OB/GYNs) with a primary specialty/subspecialty designation in obstetric/gynecologic medicine who attest to one (1) of the following:

- 1) Physician is board certified by the American Congress of Obstetricians and Gynecologists (ACOG) as a specialist or subspecialist in obstetric/gynecologic medicine, or
- 2) Physician with a primary specialty/subspecialty designation in obstetric/gynecologic medicine and has furnished the evaluation and management services and vaccines administration services listed below that equal at least sixty percent (60%) of the Medicaid codes they have billed during the most recently completed calendar year but does not have an ACOG certification, or
- 3) Physician, newly enrolled as a Medicaid provider, with a primary specialty/subspecialty designation in obstetric/gynecologic medicine and attests that the evaluation and management services and vaccines administration services listed below will equal at least sixty percent (60%) of the Medicaid codes they will bill during the attestation period, or
- 4) Non-physician practitioner providing primary care services in a Practice Agreement with a qualified physician enrolled for increased primary care services.

Primary Care Services' reimbursement applies to certain Evaluation and Management (E&M) and Vaccine Administration Codes.

TN No. <u>22-0011</u> Supersedes TN No. 21-0012 Date Received
Date Approved
Date Effective 07/01/2022

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State of Mississippi			
Methods and Standards for	Establishing Payment Ra	tes – Other Type	s of Care

Enhanced primary Care Services' fees are reimbursed at one hundred percent (100%) of the Medicare Physician Fee Schedule in effect as of January 1, 2022 and as may be adjusted each July thereafter. All rates are published at https://medicaid.ms.gov/providers/fee-schedules-and-rates/#.

Physician services not otherwise covered by the State Plan but determined to be medically necessary for EPSDT beneficiaries are reimbursed according to the methodology described above.

TN No. <u>22-0011</u> Supersedes TN No. <u>21-0012</u> Date Received
Date Approved
Date Effective 07/01/2022

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State of Mississippi Methods and Standards for Establishing Payment Rates – Other Types of Care

Physicians' services – The normal reimbursement rate for Medicaid physician services is ninety percent (90%) of the Medicare Physician Fee Schedule in effect as of January 1, 202<u>20</u> and as may be adjusted each July thereafter. All rates are published at https://medicaid.ms.gov/providers/fee-schedules-and-rates/#.

Enhanced Primary Care Physician Payment:

The Division of Medicaid will continue to reimburse for services provided by physicians who selfattest as having a primary specialty designation of family medicine, pediatric medicine or internal medicine formerly authorized by 42 C.F.R. § 447.400(a).

Effective July 1, 2016, the Division of Medicaid will reimburse for services provided by obstetricians and gynecologists (OB/GYNs) with a primary specialty/subspecialty designation in obstetric/gynecologic medicine who attest to one (1) of the following:

- 1) Physician is board certified by the American Congress of Obstetricians and Gynecologists (ACOG) as a specialist or subspecialist in obstetric/gynecologic medicine, or
- 2) Physician with a primary specialty/subspecialty designation in obstetric/gynecologic medicine and has furnished the evaluation and management services and vaccines administration services listed below that equal at least sixty percent (60%) of the Medicaid codes they have billed during the most recently completed calendar year but does not have an ACOG certification, or
- 3) Physician, newly enrolled as a Medicaid provider, with a primary specialty/subspecialty designation in obstetric/gynecologic medicine and attests that the evaluation and management services and vaccines administration services listed below will equal at least sixty percent (60%) of the Medicaid codes they will bill during the attestation period, or
- 4) Non-physician practitioner providing primary care services in a Practice Agreement with a qualified physician enrolled for increased primary care services.

Primary Care Services' reimbursement applies to certain Evaluation and Management (E&M) and Vaccine Administration Codes.

TN No. <u>21-0012</u>22-0011 Supersedes TN No. <u>21-0002-</u>21-0012 Date Received ______ Date Approved ______ Date Effective 07/01/2021____2022

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State of Mississippi				
Methods and Standard	s for Establishing	Payment Rates -	Other Types	of Care

Enhanced primary Care Services' fees are reimbursed at one hundred percent (100%) of the Medicare Physician Fee Schedule in effect as of January 1, 202<u>9</u> and as may be adjusted each <u>July thereafter</u>. All rates are published at https://medicaid.ms.gov/providers/fee-schedules-and-rates/#.

Physician services not otherwise covered by the State Plan but determined to be medically necessary for EPSDT beneficiaries are reimbursed according to the methodology described above.

TN No. <u>21-0012</u>22-0011 Supersedes TN No. <u>21-0002</u>-21-0012 Date Received ______ Date Approved ______ Date Effective 07/01/2021____2022