

PUBLIC NOTICE

September 30, 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) 22-0027 Durable Medical Equipment (DME) and Medical Supplies. 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 October 1, 2022, contingent upon approval from CMS, our Transmittal #22-0027.

1. State Plan Amendment (SPA) 22-0027 Durable Medical Equipment (DME) and Medical Supplies is being submitted to allow the Division of Medicaid (DOM) to update the rates for DME and Medical Supplies October 1, 2022 and July 1 of each year thereafter based on the Medicare Rural Rate in effect January 1 of that year, effective October 1, 2022.
2. The expected increase in annual aggregate expenditures in federal dollars is \$436,054 for Federal Fiscal Year 2023 (FFY23) and \$436,054 for FFY24. The expected increase in annual aggregate expenditures in state dollars is \$92,996 for State Fiscal Year 2023 (SFY23) and \$123,995 for SFY 24.
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. These changes are being made to be in compliance with Miss. Code § 43-13-117, amended by MS House Bill 657, effective July 1, 2022. Additional authority: Miss. Code § 43-13-121.
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.

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

VIII. Durable Medical Equipment

A. The payment for the purchase of new Durable Medical Equipment (DME) is the lesser of the provider's usual and customary charge or a fee from statewide uniform fee schedule effective as of October 1, 2022 and July 1 of each year thereafter and effective for services provided on or after those dates. The Mississippi statewide uniform fee schedule will be calculated using eighty percent (80%) of the Medicare rural rate, if available, or the non-rural rate if there is no rural rate, on the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Fee Schedule in effect on January 1 of each year.

If there is no DMEPOS fee, the provider will be reimbursed a fee determined by the Division of Medicaid, as needed, based on the lower of the Division of Medicaid's average/established fee or the average of the fees from other states, when available, or determine the fee from cost information from providers and/or manufacturers, survey information from national fee analyzers, or other relevant fee-related information.

- B. If there is no DMEPOS fee or a fee determined by the Division of Medicaid, the provider will be reimbursed a fee calculated through the following manual pricing:
1. Manufacturer's Suggested Retail Price (MSRP) minus twenty percent (20%), or
 2. If there is no MSRP, then the provider's invoice received from a wholesaler or manufacturer plus twenty percent (20%).
- C. The payment for rental of DME is made from a Mississippi statewide uniform fee schedule based on ten percent (10%) of eighty percent (80%) of the Medicare DMEPOS in effect January 1 of that year or Mississippi Medicaid established fee as described in letter A or B not to exceed ten (10) months. After rental benefits are paid for ten (10) months, the DME becomes the property of the Mississippi Medicaid beneficiary unless otherwise authorized by the Division of Medicaid through specific coverage criteria.
- D. The payment for purchase of used DME is made from a Mississippi statewide uniform fee schedule based on fifty percent (50%) of eighty percent (80%) of the Medicare DMEPOS in effect January 1 of that year or Mississippi Medicaid established fee as described in letter A or B.
- E. The payment for repair of DME is the cost of the repair, not to exceed fifty percent (50%) of eighty percent (80%) of the Medicare DMEPOS in effect January 1 of that year or Mississippi Medicaid established fee as described in letter A or B.
- F. Any durable medical equipment not listed on the fee schedule may be requested for coverage by submitting documentation to the Division of Medicaid's UM/QIO who will determine medical necessity on a case-by-case basis.

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

DME for Early and Periodic Screening, Diagnosis, and Treatment (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 paragraphs.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of DME. All rates are published at www.medicaid.ms.gov/providers/fee-schedules-and-rates/#.

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

Medical Supplies

- A. The payment for the purchase of Medical Supplies is the lesser of the provider's usual and customary charge or a fee from a Mississippi statewide uniform fee schedule effective as of October 1, 2022 and updated July 1 of each year thereafter and effective for services provided on or after those dates. The statewide uniform fee schedule will be calculated using eighty percent (80%) of the rural rate, if available, or the non-rural rate if there is no rural rate, on the Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Fee Schedule in effect on January 1 of each year.
- B. If there is no DMEPOS fee, the provider will be reimbursed a fee determined by the Division of Medicaid, as needed, based on the lower of the Division of Medicaid's average/established fee or the average of the fees from other states, when available, or determine the fee from cost information from providers and/or manufacturers, survey information from national fee analyzers, or other relevant fee-related information.
- C. If there is no DMEPOS fee or a fee determined by the Division of Medicaid, the provider will be reimbursed a fee calculated through the following manual pricing:
1. Manufacturer's Suggested Retail Price (MSRP) minus twenty percent (20%), or
 2. If there is no MSRP, then the provider's invoice received from a wholesaler or manufacturer plus twenty percent (20%).
- D. Any medical supplies not listed on the Mississippi Medicaid fee schedule may be requested for coverage by submitting documentation to the Division of Medicaid's UM/QIO who will determine medical necessity on a case-by-case basis.

Medical Supplies 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 paragraphs.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of medical supplies. All rates are published at www.medicaid.ms.gov/providers/fee-schedules-and-rates/#.

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

VIII. Durable Medical Equipment

A. The payment for the purchase of new Durable Medical Equipment (DME) is the lesser of the provider's usual and customary charge or a fee from statewide uniform fee schedule effective as of October 1, 2022 and July 1 of each year thereafter, 2020 and effective for services provided on or after July 1 those dates, 2020. The Mississippi statewide uniform fee schedule will be calculated using eighty percent (80%) of the Medicare rural rate, if available, or the non-rural rate if there is no rural rate, on the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Fee Schedule in effect on January 1 of each year, 2020.

~~B.~~ If there is no DMEPOS fee, the provider will be reimbursed a fee determined by the Division of Medicaid, as needed, based on the lower of the Division of Medicaid's average/established fee or the average of the fees from other states, when available, or determine the fee from cost information from providers and/or manufacturers, survey information from national fee analyzers, or other relevant fee-related information. ~~Effective July 1, 2021, the rates will remain the same as those effective for State Fiscal Year (SFY) 2021.~~

~~C.~~ B. If there is no DMEPOS fee or a fee determined by the Division of Medicaid, the provider will be reimbursed a fee calculated through the following manual pricing:

1. Manufacturer's Suggested Retail Price (MSRP) minus twenty percent (20%), or
2. If there is no MSRP, then the provider's invoice received from a wholesaler or manufacturer plus twenty percent (20%).

~~D.~~ C. The payment for rental of DME is made from a Mississippi statewide uniform fee schedule based on ten percent (10%) of eighty percent (80%) of the Medicare DMEPOS in effect January 1, ~~2020~~ of that year or Mississippi Medicaid established fee as described in letter A or B not to exceed ten (10) months. After rental benefits are paid for ten (10) months, the DME becomes the property of the Mississippi Medicaid beneficiary unless otherwise authorized by the Division of Medicaid through specific coverage criteria.

~~E.~~ D. The payment for purchase of used DME is made from a Mississippi statewide uniform fee schedule based on fifty percent (50%) of eighty percent (80%) of the Medicare DMEPOS in effect January 1, ~~2020~~ of that year or Mississippi Medicaid established fee as described in letter A or B.

~~F.~~ E. The payment for repair of DME is the cost of the repair, not to exceed fifty percent (50%) of eighty percent (80%) of the Medicare DMEPOS in effect January 1, ~~2020~~ of that year or Mississippi Medicaid established fee as described in letter A or B.

~~G.~~ F. Any durable medical equipment not listed on the fee schedule may be requested for coverage by submitting documentation to the Division of Medicaid's UM/QIO who will determine medical necessity on a case-by-case basis.

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Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of DME. ~~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/#.

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

Medical Supplies

- A. The payment for the purchase of Medical Supplies is the lesser of the provider's usual and customary charge or a fee from a Mississippi statewide uniform fee schedule effective as of October 1, 2022 ~~an updated July 1, 2020~~ of each year thereafter and effective for services provided on or after those dates ~~July 1, 2020~~. The statewide uniform fee schedule will be calculated using eighty percent (80%) of the rural rate, if available, or the non-rural rate if there is no rural rate, on the Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Fee Schedule in effect on January 1 of each year, ~~2020~~.
- B. If there is no DMEPOS fee, the provider will be reimbursed a fee determined by the Division of Medicaid, as needed, based on the lower of the Division of Medicaid's average/established fee or the average of the fees from other states, when available, or determine the fee from cost information from providers and/or manufacturers, survey information from national fee analyzers, or other relevant fee-related information. ~~Effective July 1, 2021, the rates will remain the same as those effective for State Fiscal Year (SFY) 2021.~~
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