

PUBLIC NOTICE

June 30, 2023

Pursuant to 42 C.F.R. Section 447.205, public notice is hereby given for the submission of a Medicaid State Plan Amendment (SPA) 23-0017 Graduate Medical Education (GME) Payment. 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 July 1, 2023, contingent upon approval from CMS, our Transmittal #23-0017.

1. State Plan Amendment (SPA) 23-0017 is being submitted to allow the Division of Medicaid (DOM) to change the payment per resident effective July 1, 2023.
2. The expected annual increase is \$9,573,900. GME payments are only made from October to June of each year. For that reason, the federal annual aggregate expenditures is \$0 for the remainder of Federal Fiscal Year 2023 (FFY23) and \$7,397,753 for FFY24. The expected increase in state annual aggregate expenditures is \$0 for FFY23 and \$2,176,147 for FFY24.
3. This SPA is being submitted to comply with federal Medicaid regulations. 42 C.F.R. § 447.201 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. This SPA also complies with 42 CFR § 413.75.
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 of Mississippi
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Q. Medical Education Payments

The Mississippi Division of Medicaid (DOM) reimburses Mississippi hospitals which meet the following criteria: (1) accreditation from the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA), (2) has a Medicare approved teaching program for direct graduate medical education (GME) costs, and (3) is eligible for Medicare reimbursement. The hospital must be accredited at the beginning of the state fiscal year in order to qualify for the quarterly payments during the payment year. To be eligible for payment, services must be performed on the campus of the teaching hospital or at a participating hospital site. Only the teaching hospital or the participating hospital site is eligible for reimbursement. DOM does not reimburse for indirect GME costs.

Medical education payments are calculated annually on July 1, as a per resident amount based on the total Medicaid hospital inpatient stays as calculated by DOM. During the year of implementation, effective October 1, 2019, the payments will be made to eligible hospitals in three (3) equal installments in December, March and June. Thereafter, the payments will be made to eligible hospitals on a quarterly basis in September, December, March and June. The number of residents per hospital is defined as the sum of the number of Medicare approved resident full time equivalents (FTEs) reported on the applicable lines on the most recent Medicare cost report filed with DOM for the calendar year immediately prior to the beginning of the state fiscal year for established programs. Any hospital which establishes a new accredited teaching program or is in a five (5) year resident cap building period for the teaching program must submit

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documentation of accreditation, Medicare approval, the most recent Medicare interim rate letter, and start date of the GME program prior to the July 1 calculation of the payments. The number of residents used to calculate medical education payments during cap building years will be the number of FTEs as reported on the Medicare interim rate letter. If the number of FTEs reported on the Medicare interim rate letter does not cover the entire cost reporting period, the reported FTEs will be annualized and used to calculate medical education payments. The program must be in operation as of July 1 of the payment year.

The per resident rate will be \$65,000 per FTE.as follows:

- ~~A. For residencies of Mississippi academic health science centers with a Level 1 trauma center:~~
- ~~1. \$65,000 per FTE for hospitals with 7,500 or more Medicaid hospital inpatient stays, or~~
 - ~~2. \$55,000 per FTE for hospitals with fewer than 7,500 Medicaid hospital inpatient stays.~~
- ~~B. For residencies of all other accredited hospitals:~~
- ~~1. \$35,000 per FTE for hospitals with greater than 7,500 Medicaid hospital inpatient stays,~~
 - ~~2. \$27,500 per FTE for hospitals with 2,000 to 7,500 Medicaid hospital inpatient stays, or~~
 - ~~3. \$25,000 per FTE for hospitals with fewer than 2,000 Medicaid hospital inpatient stays.~~

Medical education costs will not be reimbursed to out-of-state hospitals.

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