

State of Mississippi

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

13c. Preventive Services: Preventive services mean services provided by a physician or other licensed practitioner of the healing arts within the scope of his practice under State law to:

- 1) Prevent disease, disability, and other health conditions or their progression;
- 2) Prolong life; and
- 3) Promote physical and mental health and efficiency.

The Division of Medicaid covers all FDA-approved adult vaccines recommended by the Advisory Committee on Immunization Practices (ACIP), and their administration, without cost-sharing. Changes based on ACIP recommendations are made as necessary.

Annual Physical Examination: The Division of Medicaid will cover annual physical examinations. Through this provision, eligible Mississippi Medicaid beneficiaries will be encouraged to choose a medical home and undertake a physical examination to establish a baseline level of health. Beneficiaries under age 21 will access the mandatory periodic screening services through EPSDT providers in the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program.

A medical home is defined as the usual and customary source that provides both preventative and treatment or diagnosis of a specific illness, symptom, complaint, or injury. The medical home will serve as the focal point for a beneficiary's health care, providing care that is accessible, accountable, comprehensive, integrated, and patient-centered.

Dual eligibles whose Medicare Part B effective date is prior to January 1, 2005 will be eligible for the physical examination. For dual eligibles whose Medicare Part B effective date is on or after January 1, 2005, the annual physical examination is covered after twelve months have elapsed from the original effective date of Medicare Part B coverage. Beneficiaries enrolled in Medicare Part B coverage on and after January 1, 2005 are entitled to a one time only "Welcome to Medicare" physical examination with the first six months of Medicare coverage,

Radiology and laboratory procedures which are a standard part of a routine adult age/gender physical examination or well child periodic screening may be billed by the provider performing the procedure, and coverage will be determined based on current Mississippi Medicaid policies for the individual procedures.

Medication Checks: Regular and periodic monitoring by a psychiatrist or physician of the therapeutic effects of medications prescribed for mental health purposes.

Providers of medication checks must meet the standards as established under Sections 41-19-31 through 41-19-39 and/or Section 41-4-7(g), Mississippi code of 1972, as amended.

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