## State of Mississippi

## METHODS OF PROVIDING TRANSPORTATION

The Contractor shall be paid monthly in accordance with the Contractor's bid response based on a retrospective review of the prior month transportation claims.

The Contractor's monthly payment shall be based on:

- 1. The Contractor's bid rate: per trip leg utilized by beneficiaries by transportation trip type category, and
- 2. An administrative fee capped each month at an amount not to exceed 15% of the monthly trip leg payment.

The Contractor shall provide timely payment to each contracted NET Provider for the services rendered. The Contractor may reimburse NET Providers through any payment arrangement agreeable to both parties, including a sub-capitation arrangement. All payment arrangements must include an incentive or safeguard to ensure utilization data for every encounter is submitted to the Contractor.

Transportation for long-term care residents is reimbursed as part of the long-term care benefit using the methodology in Attachment 4.19-D.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of transportation provided by PPEC centers. The Division of Medicaid's fee schedule rate was set as of May 1, 2025 and is effective for services provided on or after that date. Reimbursement is the lesser of the provider's usual and customary charges or the fee from the state-developed fee schedule, which is published at <a href="https://medicaid.ms.gov/providers/fee-schedules-and-rates/#">https://medicaid.ms.gov/providers/fee-schedules-and-rates/#</a>.

NET ambulance hospital-to-hospital transports are reimbursed the lesser of the provider's usual and customary charge or a fee from a statewide uniform fee schedule updated July 1, 2020 and effective for services provided on or after July 1, 2020 of each year which can be located at <a href="https://medicaid.ms.gov/providers/fee-schedules-and-rates/#">https://medicaid.ms.gov/providers/fee-schedules-and-rates/#</a> and is calculated as seventy percent (70%) of the Medicare ambulance fee schedule in effect as of January 1, 2020. If a Medicare fee is not established, then the fee is set at seventy percent (70%) of the Medicare fee for a comparable service.

The Division of Medicaid requires that no agreement (contractual or otherwise) exists between the State or any form of local government and the transportation broker to return or redirect any of the Medicaid payment to the State or form of local government (directly or indirectly). This assurance is not intended to interfere with the ability of a NET Broker to contract for transportation services at a lesser rate and credit any savings to the program.

TN No. <u>25-0012</u> Supersedes TN No. 23-0026

Date Effective: 05/01/25 Date Approved: 08/14/25 Date Received: 05/21/25

## **State of Mississippi**

## METHODS AND STANDARDS FORESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE

The Division of Medicaid reimburses Prescribed Pediatric Extended Care (PPEC) providers the lesser of:

- 1. The provider's usual and customary charge,
- 2. An hourly rate for each completed hour up to six (6) hours of services, or
- 3. A daily rate for over six (6) hours of services

Rates are calculated utilizing the costs used to set the 2023 average small nursing facility rates, adjusting the staff costs to reflect the minimum requirements for a PPEC and removing food costs, dietary salaries and benefits, and other expenses not related to costs incurred by a PPEC.

Except as otherwise noted in the state plan, state-developed fee schedule rates are the same for both governmental and private providers of PPEC services. The Division of Medicaid's statewide uniform fee schedule rate was set as of May 1, 2025, and is effective for services provided on or after that date. All fees are published on the Division of Medicaid's website at https://medicaid.ms.gov/providers/fee-schedules-and-rates/.

The Division of Medicaid reimburses for transportation provided by PPECs as described in Attachment 3.1-D.

 TN No. 25-0012
 Date Received: 05/21/25

 Supersedes
 Date Approved: 08/14/25

 TN No. 23-0019
 Date Effective: 05/01/25