

Mississippi Medicaid Update

HFMA Region 9

May 6, 2026

Agenda



Medicaid Spending



Spending Growth



Enrollment Trend



Medicaid Payment Structures



VBP and MS Hospital Access Program

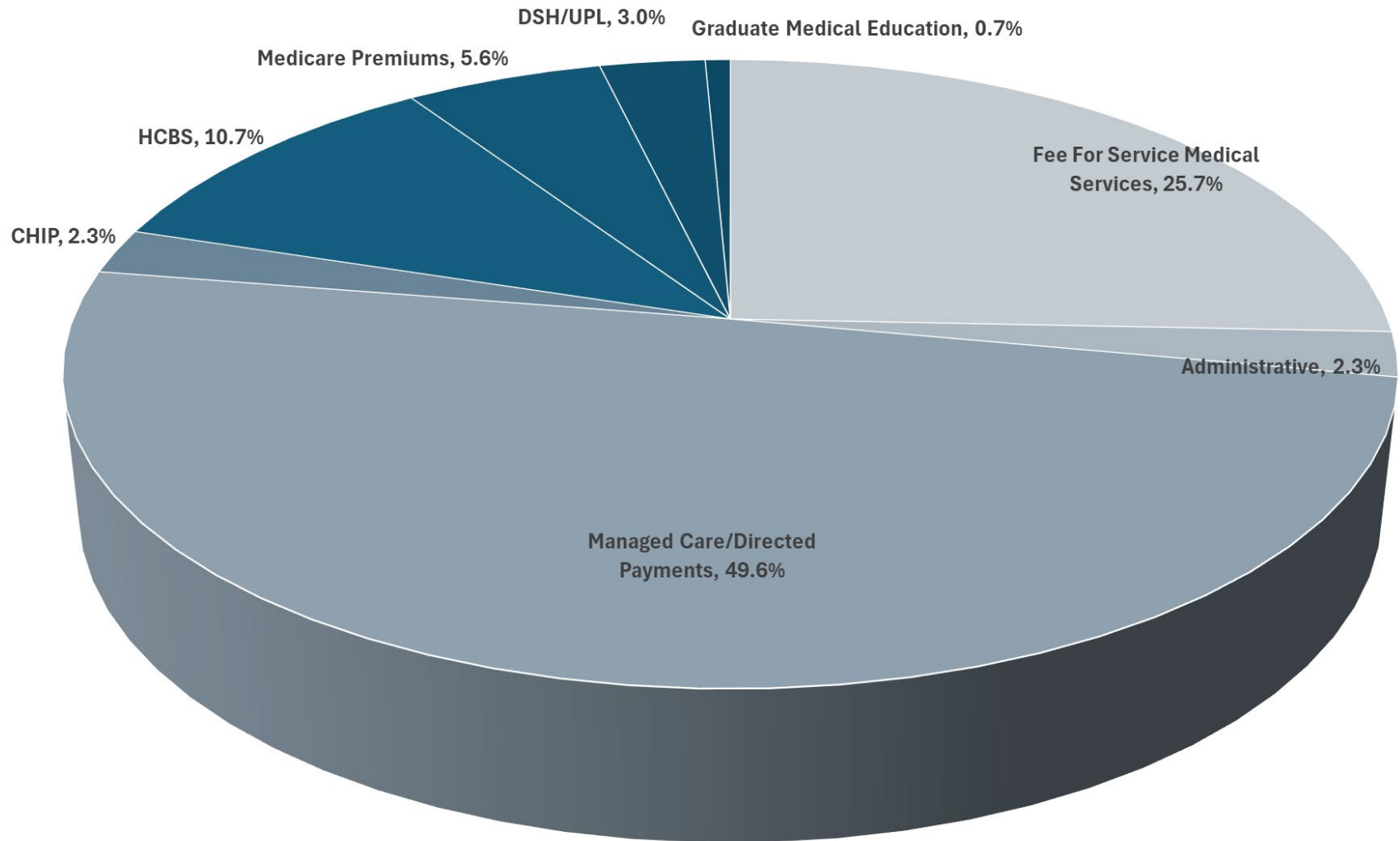


Changes at Medicaid

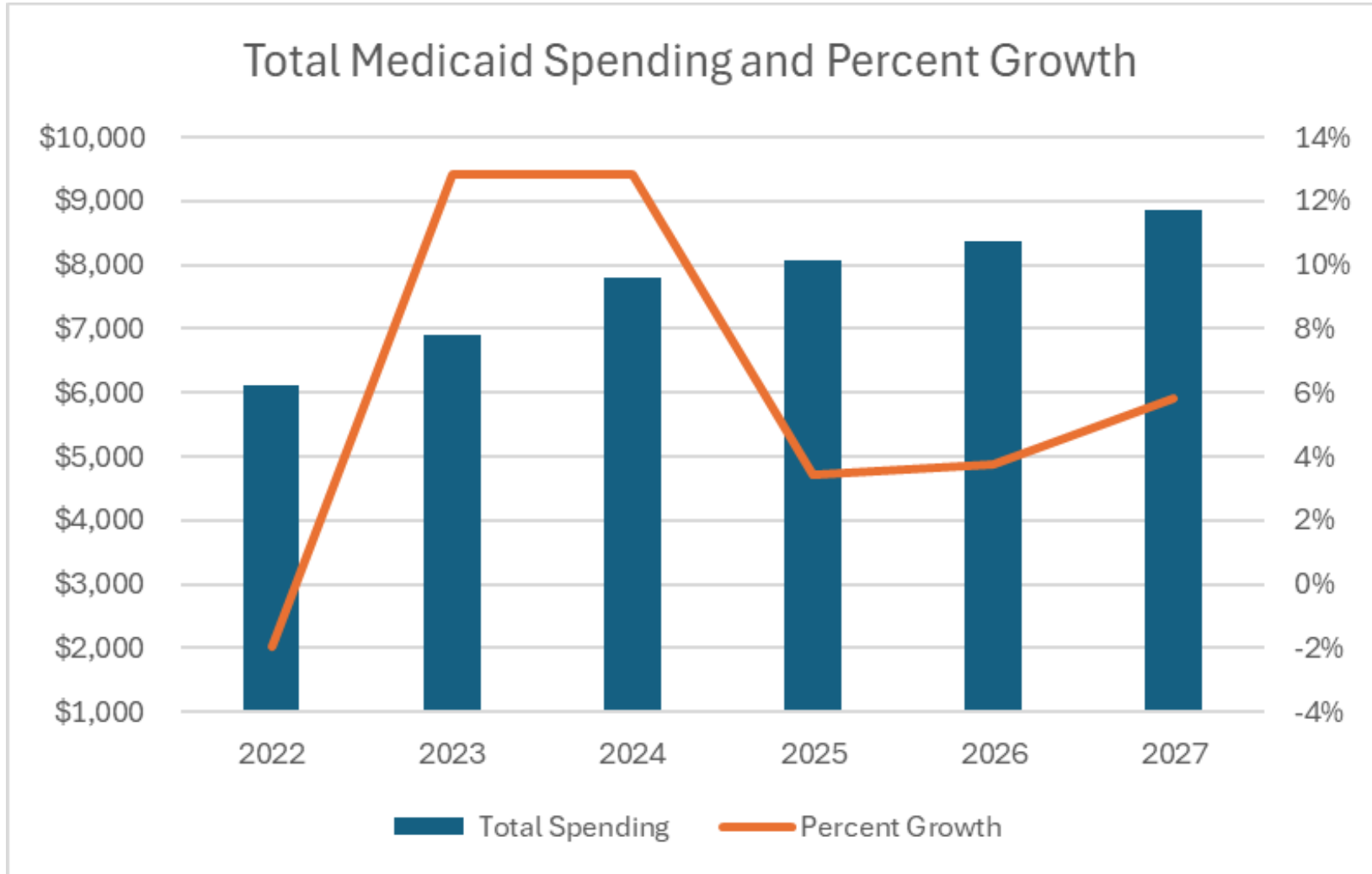


Contact Information

SFY 2025 Medicaid Spending

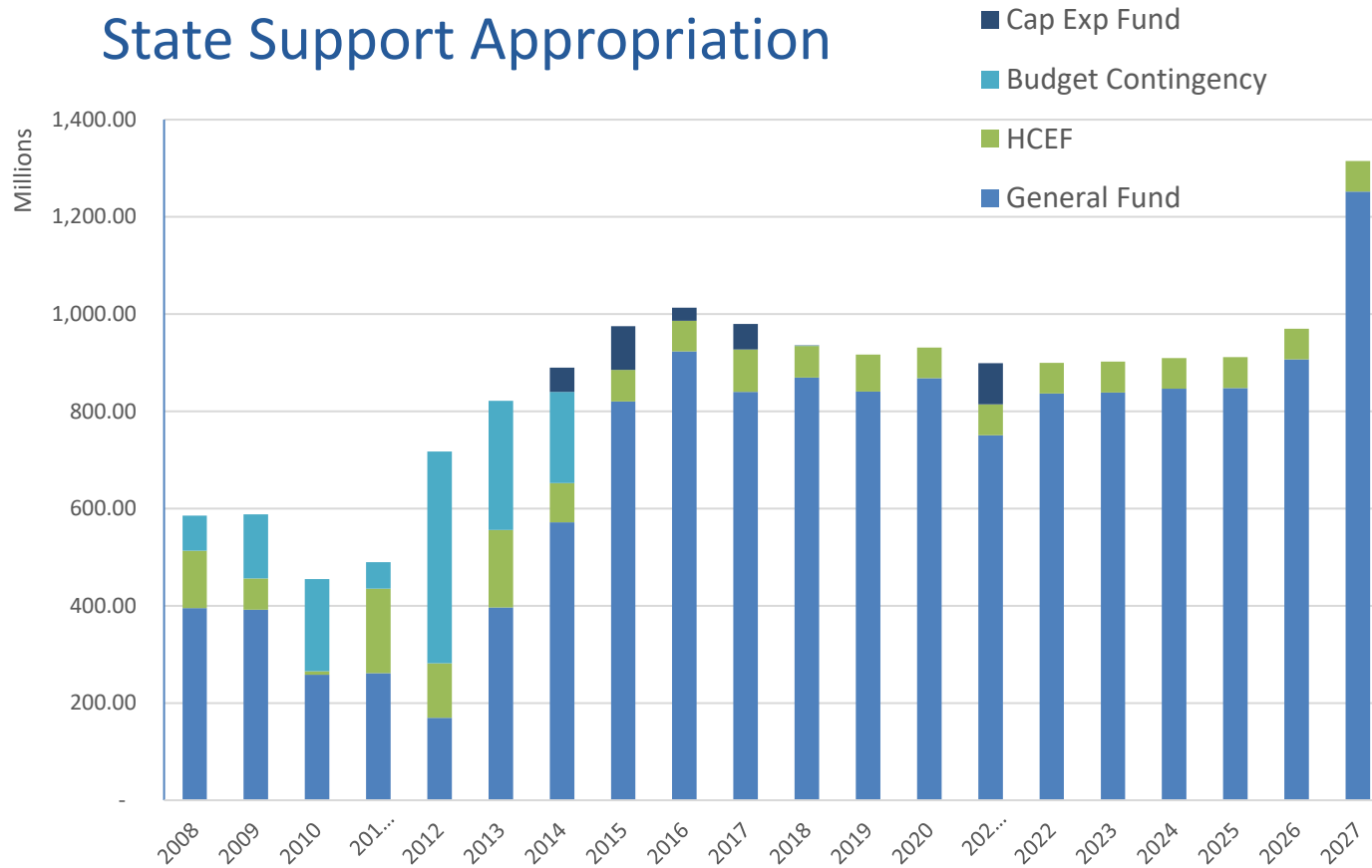


Spending Growth



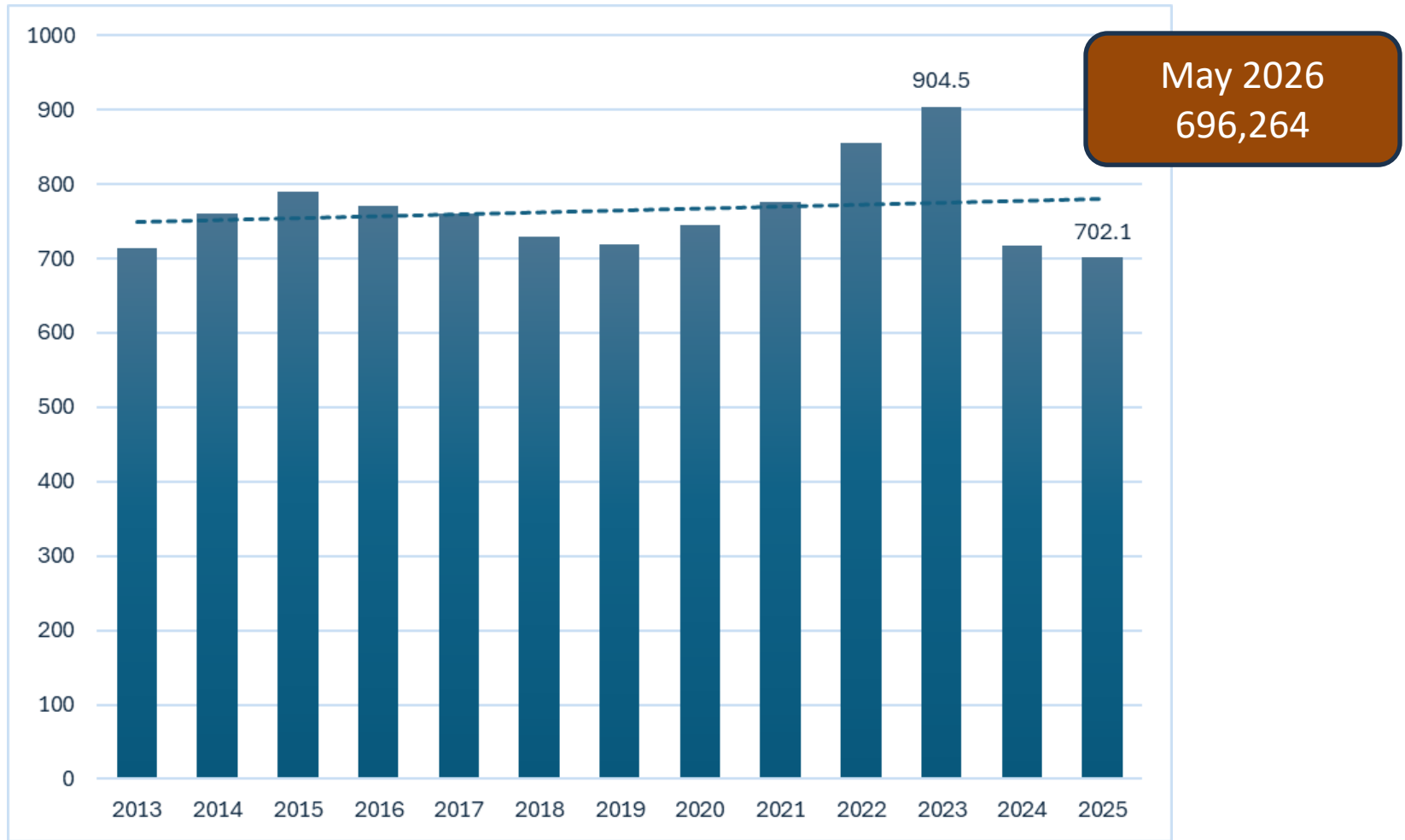
State Share

State Support Appropriation



2013-2025 Medicaid Enrollment

(in thousands)



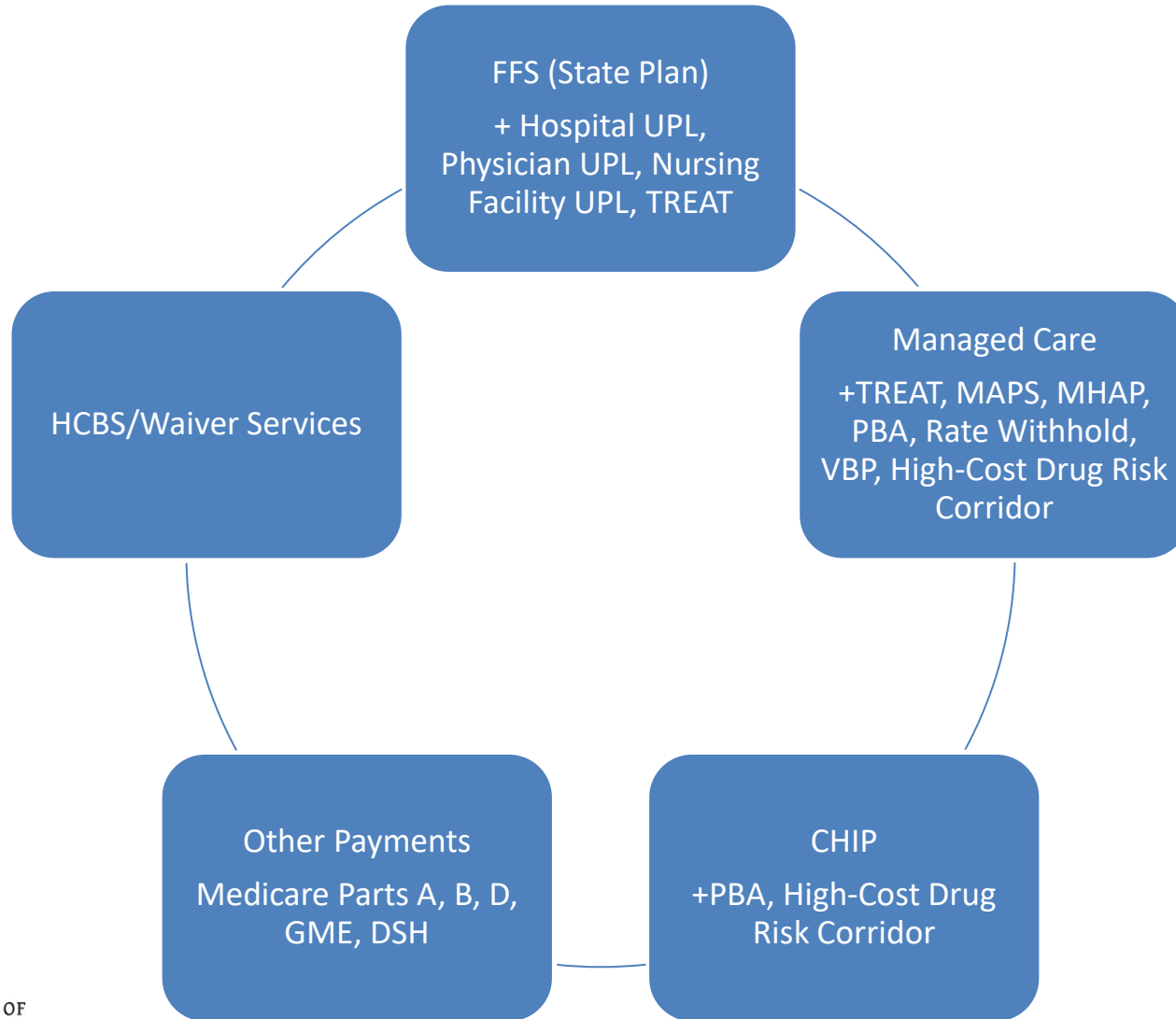
Medicaid Budget Shortfall

- \$391 Million - Initial DOM budget request increase for FY2027
- \$353 Million – Updated budget request increase
- \$200 Million – Budget increase received in FY2027 appropriation

\$153 million shortfall in state funding creates a total shortfall in funding to pay providers for care for MS Medicaid members of **\$662.3 million based on the March spending projection.**

An updated FY2027-2028 spending projection will be received in June to create the FY2028 budget request.

Medicaid Payment Structures



New Grants



CMS Transforming Maternal Health (TMaH) Model
Transforming Maternal Care: Mississippi MOMentum Initiative

Cell and Gene Therapy (CGT) Access Model

Nursing Home Staffing Campaign

Links to more info:

[Transforming Maternal Health Model - Mississippi Division of Medicaid](#)

[Cell and Gene Therapy \(CGT\) Access Model - Mississippi Division of Medicaid](#)

[Nursing Home Careers | CMS](#)

VBP Incentive Program - MOMS

- Program Launch: SFY July 1, 2024
- Objective: **Incentivize high value care**
- Incentives: Will be shared by CCOs with hospitals and other providers.
- Program Focus Areas:
 - 1. Maternal Health**
 - Mississippi Outcomes for Maternal Safety (MOMS) Risk Assessment and Timely Follow-up
 - Cesarean Birth (PC-02)
 - 2. Mental Health**
 - Antidepressant Medication Management: Continuation Phase Treatment (AMM-AD)
 - 3. Metabolic Health**
 - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)

More information including previous webinars:
<https://medicaid.ms.gov/value-based-incentives/>
Email questions to: QIPP@medicaid.ms.gov

MS Hospital Access Program

MHAP BY SFY				
SFY	MHAP-TPP	MHAP-FSA	MHAP-QIPP	TOTAL MHAP
2016	\$533,110,956	\$	\$	\$533,110,956
2017	\$533,110,956	\$	\$	\$533,110,956
2018	\$422,241,632	\$110,869,324	\$	\$533,110,956
2019	\$380,017,469	\$153,093,487	\$	\$533,110,956
2020	\$215,886,793	\$275,000,000	\$42,224,163	\$533,110,956
2021	\$0	\$317,886,793	\$215,224,163	\$533,110,956
2022	\$0	\$285,603,168	\$247,507,788	\$533,110,956
2023	\$0	\$313,053,124	\$288,100,478	\$601,153,602
2024	\$0	\$733,317,426	\$788,996,459	\$1,522,313,885
2025 (submitted to CMS)	\$	\$719,679,373	\$820,744,321	\$1,540,423,694
2026 (Estimate)	\$	\$719,066,188	\$844,121,178	\$1,510,325,958

More information on MHAP including lots of QIPP resources like methodology supplements, previous webinars and attestations:
<https://medicaid.ms.gov/value-based-incentives/>
 Email questions to: QIPP@medicaid.ms.gov

MHAP – FSA \$694,749,941

Fee Schedule Adjustment Payment Table - FY2026		
Payment Type	Total Amount	Allocation for Interim Payments
Inpatient (non-REH)	\$451,587,462	\$9,340.16 per discharge
Outpatient (non-REH)	\$241,586,175	Increase of 77.59%
Outpatient (REH)	\$1,576,304	Increase of 37.99%

- Interim FSA payments calculated using managed care inpatient discharges and outpatient payments from the state fiscal year July 1, 2023, through June 30, 2024 (based on paid date)
- Interim payments reconciled in May 2027 to actual encounters for rating period, July 1, 2025 - June 30, 2026 (based on service date)
- Reconciliation amounts for FY2025 MHAP will be calculated in May 2026

MHAP QIPP - \$815,576,017

QIPP Payment Table			
Payment Type	Total Amount	Allocation for Interim Payments	Measurement Basis
PPHR	\$271,858,673	33.3% of QIPP Pool split by hospital based on SFY 2025 MHAP Payments	Assessed based on performance against the statewide a/e ratio
PPC	\$271,858,672	33.3% of QIPP Pool split by hospital based on SFY 2025 MHAP Payments	Assessed based on performance against the statewide a/e ratio
AM PPC	\$271,858,672	33.3% of QIPP Pool split by hospital based on SFY 2025 MHAP Payments	Second Year – Hospitals will receive AM PPC payments for receipt and review of reports
PPHR/PPC VBP Bonus	\$50,000,000	Prorated to hospitals meeting performance levels for each metric	Assessed based on all QIPP metrics

NEW at Medicaid

Upcoming MHAP changes

A CMS final rule issued in the spring of 2024 will require DOM to stop making interim MHAP payments and will instead require MHAP and other state directed payments to be made by the MCOs with the payment of claims. During 2026, attestations that no agreements exist between providers that would hold any other provider harmless from the impact of provider taxes.

H.R. 1

H.R 1, OBBBA will require reduction of MHAP to 110% of Medicare beginning in FY 2029 (July 2028). This is expected to reduce MHAP by approximately \$150 million every year for 10 years based on the FY2026 amount. Other CMS regulations for calculation of State Directed Payments still apply – calculation of ACR, updates of data, amount of tax room, etc. – so that amount is subject to change.

Provider Tax Invoices and Payments

DOM will have a new system to deliver provider tax invoices and to allow providers to submit electronic payments for those taxes.

NEW at Medicaid (cont.)

Rural Health Transformation

Mississippi has secured \$205 million for the first budget period of a five-year grant through the Rural Health Transformation (RHT) Program, part of a historic \$50 billion federal investment authorized by the One Big Beautiful Bill Act.

The intention of this program is to create a sustainable healthcare landscape that supports rural communities. The State's application included requests for funding for initiatives in six categories:

- **Statewide Rural Health Assessment:** a comprehensive statewide assessment of rural healthcare needs, both today and looking forward ten years
- **The Coordinated Regional Integrated Systems Initiative:** create a connected, data-driven network of emergency, clinical and community-based services
- **The Workforce Expansion Initiative:** strengthen the healthcare workforce in rural areas, improving access, continuity, and quality of care; targeted programs will address recruitment, retention, training, and career pathway development for all healthcare professionals.

Link for more information:

[Mississippi Rural Health Transformation Program - Mississippi RHT Program](#)

NEW at Medicaid (cont.)

Rural Health Transformation (cont.)

- **The Health Technology Advancement and Modernization Initiative:** modernize rural healthcare systems by strengthening the digital backbone that supports high-quality, coordinated, and secure care.
- **The Telehealth Adoption and Provider Support Initiative:** strengthen rural healthcare by increasing virtual care access, supporting providers in adopting telehealth, and exploring innovative payment models. Investments will enhance connectivity, technology, and diagnostic tools to enable real-time remote care.
- **The Building Rural Infrastructure for Delivery, Growth and Efficiency Initiative:** strengthen rural healthcare infrastructure by improving access to specialized care, closing care gaps, and supporting innovative pilot programs that enhance healthcare delivery and improve outcomes. The initiative focuses on building physical, operational, and programmatic capacity to address unmet needs, improve care coordination and foster sustainable rural healthcare systems.

Link for more information:

[Mississippi Rural Health Transformation Program - Mississippi RHT Program](#)

NEW at Medicaid (cont.)

Interoperability and Patient Access

- The Interoperability and Patient Access rule (CMS-9115-F) focuses on interoperability and patient access, making it easier for members to get their health records when they need it most in a way they can best use it. (For more information about this rule, visit the CMS website <https://www.cms.gov/newsroom/fact-sheets/interoperability-and-patient-access-fact-sheet>.)

New Options for Members Managing Digital Medical Records

- The first step for members to get access is to register for the mobile website app or download the third-party app from the Apple Store or Google Play on a mobile device or computer – just like downloading a game or an app from your favorite store. The third-party app will help connect the member to individual medical history that DOM currently has available. There are two third-party apps that have currently partnered with DOM.

Link for more information:

[Interoperability and Patient Access - Mississippi Division of Medicaid](#)

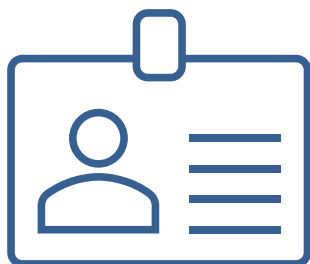
Policy Updates

Notification of updates on the State Plan, Administrative Code or Waivers

If a provider or individual would like to be added to the distribution list for notification of updates to the State Plan, Administrative Code, or Waivers please notify the Division of Medicaid at DOMPolicy@medicaid.ms.gov.



Contact Information



Fiscal Agent-Gainwell

- Provider and Beneficiary Services Call Center 1-800-884-3332
- Provider Field Representatives: <https://medicaid.ms.gov/wp-content/uploads/2022/12/Provider-Field-Representatives.pdf>

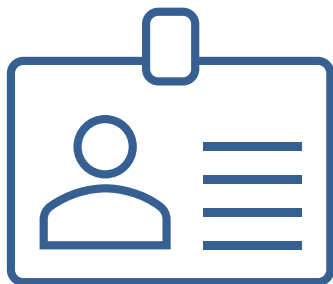
DOM

- Late Breaking News: <https://medicaid.ms.gov/late-breaking-news/> Email LateBreakingNews@medicaid.ms.gov to sign up for email alerts. Include name, business and phone (optional).
- Provider Bulletins: <https://medicaid.ms.gov/providers/provider-resources/provider-bulletins/>
- DOM Switchboard 1-800-421-2408 or 601-359-6050

MCO Issue Reporting Procedures

- [MississippiCAN Feedback - Mississippi Division of Medicaid](#)

Managed Care Contact Information



Magnolia Health
magnoliahealthplan.com

1-866-912-6285



Molina Healthcare
MolinaHealthCare.Com

1-844-809-8438



TrueCare
<https://www.mstruecare.com/ms/plans/>

1-833-230-2110

Contract end: June 30, 2025

United Healthcare 1-800-557-9933
uhcommunityplan.com 1-877-743-8731

Questions

