

PUBLIC NOTICE

July 27, 2026

Pursuant to 42 C.F.R. Section 447.205, public notice is hereby given for the submission of a Medicaid State Plan Amendment (SPA) 26-0013 Inpatient Single Case Agreement. 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 August 1, 2026, contingent upon approval from CMS, our Transmittal #26-0013.

1. State Plan Amendment (SPA) 26-0013 Inpatient Single Case Agreement is being submitted to allow DOM to enter into a single-reimbursement rate agreement with out-of-state hospital providers for psychiatric and behavioral services.
2. The annual aggregate expenditures is expected to be budget neutral.
3. The Division of Medicaid is submitting this proposed SPA in compliance with 42 C.F.R. § 447.253 and 447.271.
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

Title XIX Inpatient Hospital Reimbursement Plan

5. Contracts for transplant services negotiated prior to October 1, 2012, are honored through the term of the contract.
6. For transplant services not available in Mississippi and not listed in the *Milliman U.S. Organ and Tissue Transplant Cost Estimates and Discussion* in effect as of July 1, 2019, the Division of Medicaid will make payment using the Mississippi APR-DRG payment methodology. If Mississippi APR-DRG payment impacts access to care, the Division will reimburse what the domicile state pays for the service.
- C. For specialized services not available in Mississippi, the Division of Medicaid will make payment based on Mississippi APR-DRG payment methodology. If Mississippi APR-DRG payment affects access to care, the Division will reimburse what the domicile state pays for the service or a comparable payment other states reimburse under APR-DRG.
- D. Effective August 1, 2026, the Division may establish a single-reimbursement rate for out-of-state hospital providers for psychiatric and/or behavioral services rendered to children and youths, with complex medical conditions, under age twenty-one (21).
 1. The single-reimbursement rate agreement is calculated based on the provider's price transparency file. The reimbursement rate for out-of-state hospital services in accordance with single-reimbursement rate agreements may not exceed the usual and customary charges of the facility for such services. The following services will be reimbursed at fifty percent (50%) of the listed charges:
 - a. Room and Board:
 - i. Medication management
 - ii. Regimented daily programming from 7am to 10 pm
 - iii. Recreational therapy
 - iv. Dietary
 - v. 24/7 nursing care
 - vi. Wound care
 - vii. Telemetry 24/7
 - ix. Therapies (PT/OT/ST)
 - b. Multidisciplinary Treatment Plan Assessment
 - c. Group Therapy
 2. Any additional services specifically required by the treatment plan must be billed separately and will be reimbursed in accordance with the Mississippi Medicaid Fee Schedule.

Rates for services are the same for private and governmental providers and are published on the Division of Medicaid's website at <https://medicaid.ms.gov/providers/fee-schedules-and-rates/#>

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