

By: Senator(s) Blackwell

To: Rules

SENATE CONCURRENT RESOLUTION NO. 535
(As Adopted by the Senate and House)

1 A CONCURRENT RESOLUTION SUSPENDING THE DEADLINES AND OTHER
2 PROVISIONS OF JOINT RULE NO. 40 FOR THE PURPOSE OF THE FURTHER
3 CONSIDERATION AND PASSAGE OF SENATE BILL NO. 2799, 2021 REGULAR
4 SESSION, ENTITLED "AN ACT RELATING TO THE MISSISSIPPI MEDICAID
5 PROGRAM; TO AMEND SECTION 43-13-117, MISSISSIPPI CODE OF 1972,
6 RELATING TO REIMBURSEMENT FOR CARE AND SERVICES UNDER THE MEDICAID
7 PROGRAM; TO DELETE CERTAIN OUTDATED PROVISIONS RELATING TO
8 REIMBURSEMENT OF INPATIENT HOSPITAL SERVICES; TO PROVIDE THAT
9 MEDICAID IS AUTHORIZED TO MAKE PARTIAL PAYMENTS FOR NURSING
10 SERVICES; TO PROVIDE FOR NURSING FACILITY REIMBURSEMENT FOR HOME
11 LEAVE DAYS; TO DELETE CERTAIN OUTDATED PROVISIONS RELATING TO
12 REIMBURSEMENT OF NURSING FACILITY SERVICES; TO PROVIDE FOR
13 REIMBURSEMENT FOR FEES FOR PHYSICIAN SERVICES COVERED ONLY BY
14 MEDICAID; TO AUTHORIZE THE DIVISION TO REIMBURSE OBSTETRICIANS AND
15 GYNECOLOGISTS FOR CERTAIN PRIMARY CARE SERVICES AT 100% OF THE
16 MEDICARE RATE; TO DELETE THE PROVISION THAT REQUIRES THE DIVISION
17 TO ALLOW PHYSICIAN-ADMINISTERED DRUGS TO BE BILLED AND REIMBURSED
18 AS A MEDICAL CLAIM OR PHARMACY POINT-OF-SALE; TO PROVIDE THAT THE
19 DIVISION SHALL MAKE PARTIAL PAYMENTS, AS DETERMINED BY THE
20 DIVISION, TO INTERMEDIATE CARE FACILITY SERVICES AND TO DELETE
21 CERTAIN PROVISIONS RELATING TO FAIR RENTAL REIMBURSEMENT FOR SUCH
22 FACILITIES; TO DEFINE CLINIC SERVICES AS IT RELATES TO THE
23 REIMBURSEMENTS BY MEDICAID FOR THOSE SERVICES; TO AUTHORIZE
24 MEDICAID REIMBURSEMENT FOR THERAPEUTIC AND CASE MANAGEMENT MENTAL
25 HEALTH SERVICES PROVIDED BY SERVICE PROVIDERS ACCREDITED BY THE
26 JOINT COMMISSION OR CERTAIN OTHER ACCREDITING AGENCIES; TO PROVIDE
27 THAT MEDICAID MAY ESTABLISH AN UPPER PAYMENT LIMITS PROGRAM FOR
28 AMBULANCE TRANSPORTATION AND ASSESS PROVIDERS OF SUCH SERVICE; TO
29 REQUIRE THE DIVISION OF MEDICAID TO RECOGNIZE FEDERALLY QUALIFIED
30 HEALTH CENTERS (FQHC), RURAL HEALTH CLINICS (RHC) AND COMMUNITY
31 MENTAL HEALTH CENTERS (CMHC) AS BOTH AN ORIGINATING AND DISTANT
32 SITE PROVIDER FOR THE PURPOSES OF TELEHEALTH REIMBURSEMENT; TO
33 DELETE THE PROVISIONS RELATING TO MEDICAID'S DEVELOPMENT OF AN
34 ALTERNATIVE MODEL FOR DISTRIBUTION OF MEDICAL CLAIMS AND



35 SUPPLEMENTAL PAYMENTS FOR SERVICES; TO AUTHORIZE REIMBURSEMENT FOR
36 CERTAIN PSYCHIATRIC SERVICES; TO CLARIFY THE REIMBURSEMENT OF
37 PEDIATRIC SKILLED NURSING SERVICES, INPATIENT PSYCHIATRIST
38 SERVICES AND NONEMERGENCY TRANSPORTATION SERVICES; TO DELETE THE
39 PROVISION THAT REQUIRES MEDICAID TO REIMBURSE CROSSOVER CLAIMS FOR
40 INPATIENT HOSPITAL SERVICES AND THOSE UNDER MEDICARE PART B; TO
41 DELETE CERTAIN PROVISIONS RELATING TO THE REIMBURSEMENT OF
42 PHYSICIAN ASSISTANT SERVICES; TO PROVIDE THAT THE DIVISION MAY
43 ESTABLISH COPAYMENTS AND COINSURANCE FOR ANY MEDICAID SERVICES; TO
44 ALLOW THE DIVISION TO USE ENHANCED REIMBURSEMENTS AND UPPER
45 PAYMENT LIMIT PROGRAMS FOR ITS REIMBURSEMENT PROGRAM; TO AUTHORIZE
46 REIMBURSEMENT FOR A BARIATRIC SURGERY PROGRAM; TO DELETE THE
47 PROVISION THAT REQUIRES MEDICAID TO REDUCE THE RATE OF
48 REIMBURSEMENT TO CERTAIN PROVIDERS FOR SERVICES BY 5% OF THE
49 ALLOWED AMOUNT FOR THAT SERVICE; TO REQUIRE PROVIDERS TO MAINTAIN
50 RECORDS AS PRESCRIBED BY THE DIVISION AND IN ACCORDANCE WITH
51 FEDERAL LAW; TO DELETE CERTAIN ENROLLMENT LIMITATIONS AND
52 PROVISIONS RELATING TO MANAGED CARE PROGRAMS; TO ALLOW THE
53 DIVISION OF MEDICAID TO APPROVE THE USE OF ALTERNATIVE PAYMENT
54 MODELS FOR REIMBURSEMENT RATES; TO CLARIFY LIMITATIONS ON MEDICAID
55 ELIGIBILITY FOR ENROLLMENT IN MANAGED CARE PROGRAMS; TO DELETE THE
56 PROVISIONS THAT PROVIDE FOR THE COMMISSION ON EXPANDING MEDICAID
57 MANAGED CARE; TO REQUIRE CONTRACTORS RECEIVING PAYMENTS UNDER A
58 MANAGED CARE DELIVERY SYSTEM TO DISCLOSE TO THE CHAIRMEN OF THE
59 SENATE AND HOUSE MEDICAID COMMITTEES THE ADMINISTRATIVE EXPENSES
60 FOR THE PRIOR YEAR, AND THE NUMBER OF EMPLOYEES IN MISSISSIPPI WHO
61 ARE DEDICATED TO MEDICAID AND CHIP LINES OF BUSINESS AS OF JUNE 30
62 OF EACH YEAR; TO PROVIDE FOR REVIEWS OF THE MANAGED CARE PROGRAMS
63 BY THE STATE AUDITOR; TO REQUIRE THAT ALL MANAGED CARE CONTRACTORS
64 SHALL DEVELOP AND IMPLEMENT A UNIFORM CREDENTIALING PROCESS BY
65 WHICH ALL PROVIDERS ARE CREDENTIALLED BY JULY 1, 2022; TO DELETE
66 THE PROVISION THAT THERE SHALL NOT BE CUTS TO INPATIENT AND
67 OUTPATIENT HOSPITAL PAYMENTS; TO EXTEND THE AUTOMATIC REPEALER ON
68 THIS SECTION; TO DIRECT THE DIVISION TO EVALUATE THE FEASIBILITY
69 OF CONTINUING TO ADMINISTER PHARMACY BENEFITS UNDER
70 FEE-FOR-SERVICE AND DENTAL BENEFITS UNDER MANAGED CARE; TO DIRECT
71 MANAGED CARE CONTRACTORS TO IMPLEMENT INNOVATIVE PROGRAMS FOR
72 MEMBERS WITH PREDIABETES AND DIABETES; TO AUTHORIZE THE DIVISION
73 TO NEGOTIATE A LIMITATION ON LIABILITY TO THE STATE OF CERTAIN
74 PROSPECTIVE CONTRACTORS; TO AMEND SECTION 43-13-145, MISSISSIPPI
75 CODE OF 1972, TO PROVIDE THAT NURSING FACILITIES OPERATED BY THE
76 UNIVERSITY OF MISSISSIPPI MEDICAL CENTER ARE NOT EXEMPT FROM THE
77 ANNUAL ASSESSMENT FOR THE SUPPORT OF THE MEDICAID PROGRAM, TO
78 DELETE CERTAIN TECHNICAL PROVISIONS RELATING TO THE ASSESSMENT AND
79 COLLECTION OF THE HOSPITAL ASSESSMENT, TO CLARIFY THE PROCEDURE
80 FOR PAYMENT OF THE HOSPITAL ASSESSMENT FOR THE NONFEDERAL SHARE
81 NECESSARY FOR THE MEDICARE UPPER PAYMENT LIMITS (UPL) PROGRAM AND
82 THE DISPROPORTIONATE SHARE HOSPITAL (DSH) PROGRAM; TO AUTHORIZE
83 AND DIRECT THE DIVISION OF MEDICAID TO PROVIDE UP TO 12 MONTHS OF
84 CONTINUOUS COVERAGE POSTPARTUM FOR ANY INDIVIDUAL WHO QUALIFIES
85 FOR MEDICAID AS A PREGNANT WOMAN TO THE EXTENT ALLOWABLE UNDER



86 FEDERAL LAW; TO EXTEND THE AUTOMATIC REPEALER ON THIS SECTION; TO
87 AMEND SECTION 41-7-191, MISSISSIPPI CODE OF 1972, TO DELETE THE
88 MORATORIUM ON THE AUTHORITY OF THE STATE DEPARTMENT OF HEALTH TO
89 ISSUE A HEALTH CARE CERTIFICATE OF NEED FOR THE CONSTRUCTION OR
90 CONVERSION OF CHILD/ADOLESCENT PSYCHIATRIC OR CHEMICAL DEPENDENCY
91 BEDS PARTICIPATING IN THE MEDICAID PROGRAM AND TO DELETE CERTAIN
92 RESTRICTIONS ON MEDICAID REIMBURSEMENT FOR SUCH BEDS; TO AMEND
93 SECTION 41-75-5, MISSISSIPPI CODE OF 1972, TO DELETE THE
94 RESTRICTION ON POST ACUTE RESIDENTIAL BRAIN INJURY REHABILITATION
95 FACILITIES PARTICIPATION IN THE MEDICAID PROGRAM; TO AMEND SECTION
96 83-9-353, MISSISSIPPI CODE OF 1972, TO DELETE CERTAIN RESTRICTIONS
97 ON REMOTE PATIENT TELEMONITORING SERVICES; AND SUSPENDING THE
98 DEADLINES AND OTHER PROVISIONS OF JOINT RULE NO. 40 FOR THE
99 PURPOSE OF THE FURTHER CONSIDERATION AND PASSAGE OF HOUSE BILL NO.
100 1008, 2021 REGULAR SESSION, ENTITLED "AN ACT TO AMEND SECTION
101 43-13-117, MISSISSIPPI CODE OF 1972, TO MAKE VARIOUS TECHNICAL
102 AMENDMENTS AND REVISIONS TO THE MEDICAID SERVICES AND MANAGED CARE
103 PROVISIONS; TO EXTEND THE DATE OF THE REPEALER ON THIS SECTION; TO
104 AMEND SECTION 43-13-145, MISSISSIPPI CODE OF 1972, TO MAKE SEVERAL
105 TECHNICAL AMENDMENTS AND REVISIONS TO THE MEDICAID ASSESSMENT
106 PROVISIONS; TO DELETE THE DATE OF THE REPEALER ON THIS SECTION; TO
107 AMEND SECTIONS 43-13-107 AND 43-13-117.1, MISSISSIPPI CODE OF
108 1972, WHICH RELATE TO THE MEDICAID PROGRAM, TO MAKE SOME MINOR,
109 NONSUBSTANTIVE CHANGES; TO BRING FORWARD SECTIONS 43-13-103,
110 43-13-105, 43-13-109, 43-13-113, 43-13-116, 43-13-120, 43-13-121,
111 43-13-123, 43-13-125 AND 43-13-139, MISSISSIPPI CODE OF 1972,
112 WHICH RELATE TO THE MEDICAID PROGRAM, FOR THE PURPOSES OF POSSIBLE
113 AMENDMENT; AND FOR RELATED PURPOSES."

114 BE IT RESOLVED BY THE SENATE OF THE STATE OF MISSISSIPPI, THE
115 HOUSE OF REPRESENTATIVES CONCURRING THEREIN, THAT all of the
116 deadlines and other provisions imposed by Joint Rule No. 40 are
117 suspended for the purpose of the further consideration and passage
118 of Senate Bill No. 2799, 2021 Regular Session, entitled " AN ACT
119 RELATING TO THE MISSISSIPPI MEDICAID PROGRAM; TO AMEND SECTION
120 43-13-117, MISSISSIPPI CODE OF 1972, RELATING TO REIMBURSEMENT FOR
121 CARE AND SERVICES UNDER THE MEDICAID PROGRAM; TO DELETE CERTAIN
122 OUTDATED PROVISIONS RELATING TO REIMBURSEMENT OF INPATIENT
123 HOSPITAL SERVICES; TO PROVIDE THAT MEDICAID IS AUTHORIZED TO MAKE
124 PARTIAL PAYMENTS FOR NURSING SERVICES; TO PROVIDE FOR NURSING



125 FACILITY REIMBURSEMENT FOR HOME LEAVE DAYS; TO DELETE CERTAIN
126 OUTDATED PROVISIONS RELATING TO REIMBURSEMENT OF NURSING FACILITY
127 SERVICES; TO PROVIDE FOR REIMBURSEMENT FOR FEES FOR PHYSICIAN
128 SERVICES COVERED ONLY BY MEDICAID; TO AUTHORIZE THE DIVISION TO
129 REIMBURSE OBSTETRICIANS AND GYNECOLOGISTS FOR CERTAIN PRIMARY CARE
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131 THAT REQUIRES THE DIVISION TO ALLOW PHYSICIAN-ADMINISTERED DRUGS
132 TO BE BILLED AND REIMBURSED AS A MEDICAL CLAIM OR PHARMACY
133 POINT-OF-SALE; TO PROVIDE THAT THE DIVISION SHALL MAKE PARTIAL
134 PAYMENTS, AS DETERMINED BY THE DIVISION, TO INTERMEDIATE CARE
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136 FAIR RENTAL REIMBURSEMENT FOR SUCH FACILITIES; TO DEFINE CLINIC
137 SERVICES AS IT RELATES TO THE REIMBURSEMENTS BY MEDICAID FOR THOSE
138 SERVICES; TO AUTHORIZE MEDICAID REIMBURSEMENT FOR THERAPEUTIC AND
139 CASE MANAGEMENT MENTAL HEALTH SERVICES PROVIDED BY SERVICE
140 PROVIDERS ACCREDITED BY THE JOINT COMMISSION OR CERTAIN OTHER
141 ACCREDITING AGENCIES; TO PROVIDE THAT MEDICAID MAY ESTABLISH AN
142 UPPER PAYMENT LIMITS PROGRAM FOR AMBULANCE TRANSPORTATION AND
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144 MEDICAID TO RECOGNIZE FEDERALLY QUALIFIED HEALTH CENTERS (FQHC),
145 RURAL HEALTH CLINICS (RHC) AND COMMUNITY MENTAL HEALTH CENTERS
146 (CMHC) AS BOTH AN ORIGINATING AND DISTANT SITE PROVIDER FOR THE
147 PURPOSES OF TELEHEALTH REIMBURSEMENT; TO DELETE THE PROVISIONS
148 RELATING TO MEDICAID'S DEVELOPMENT OF AN ALTERNATIVE MODEL FOR
149 DISTRIBUTION OF MEDICAL CLAIMS AND SUPPLEMENTAL PAYMENTS FOR



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172 RECEIVING PAYMENTS UNDER A MANAGED CARE DELIVERY SYSTEM TO
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192 SUPPORT OF THE MEDICAID PROGRAM, TO DELETE CERTAIN TECHNICAL
193 PROVISIONS RELATING TO THE ASSESSMENT AND COLLECTION OF THE
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217 No. 40 are suspended for the purpose of the further consideration
218 and passage of House Bill No. 1008, 2021 Regular Session, entitled
219 "AN ACT TO AMEND SECTION 43-13-117, MISSISSIPPI CODE OF 1972, TO
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224 TO THE MEDICAID ASSESSMENT PROVISIONS; TO DELETE THE DATE OF THE



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