		ssippi Secretary of State	DE 0136			
ADMINISTRATIVE PROCEDURES NOTICE F		O. Box 136, Jackson, MS 3920	15-0136			
AGENCY NAME		CONTACT PERSON		TELEPHONE NUMBER		
Division of Medicaid		1		(601) 359-5		
ADDRESS 550 High Street, Suite 1000		CITY Jackson		STATE MS	ZIP 39201	
EMAIL SUBMIT DATE		Name or number of rule(s): Title 23: Medicaid, Part 203: Physician Services,				
Margaret.Wilson@medicaid.ms.gov	9/30/2014	Chapter 1: General, New Rule 1.11: Global Packaging WITHDRAWN				
Short explanation of rule/amendment/ru Administrative Code final filing is to establ which includes all necessary services normal management (E&M) visits related to a proc	ish policies for Globa ally furnished by the "	Package coverage. Global Pac same physician" before, during	kage is an edit t and after a proc	that allows for edure and all e	lump sum payment valuation and	
Specific legal authority authorizing th 6507, 124 Stat. 119 (2010), as amended			Affordable C	are Act, Pub	. L. No. 111-148, §	
List all rules repealed, amended, or sus General, New Rule 1.11: Global Packa		osed rule: Title 23: Medicaid	, Part 203: Phy	sician Servic	es, Chapter 1:	
ORAL PROCEEDING:					74	
An oral proceeding is scheduled for this	rule on Date:	Time: Place:				
Presently, an oral proceeding is not scho	eduled on this rule.					
subdivision, an agency or ten (10) or more within twenty (20) days after the filing of the telephone number of the person(s) making number of the party or parties you represed arguments, data, and views on the propose ECONOMIC IMPACT STATEMENT: Economic impact statement not require	is notice of proposed the request; and, if yo nt. At any time within d rule/amendment/re	rule adoption and should incluou are an agent or attorney, the the twenty-five (25) day public peal may be submitted to the least to the least may be submitted to the least may be submitted.	de the name, ac e name, address c comment peri filing agency.	ddress, email a , email addres od, written sub	ddress, and s, and telephone	
TEMPORARY RULES	PROPO	OSED ACTION ON RULES	T F	INAL ACTION	ON RULES	
	, incresses in the second of		Date Proposed Rule Filed: 06/25/2014			
Original filing	Action propos		Action taken:			
Renewal of effectiveness To be in effect in days	New rule	e(s) ment to existing rule(s)		Adopted with no changes in text		
Effective date:	Repeal	of existing rule(s)	Adopted with changes Adopted by reference			
Immediately upon filing		n by reference	Withdrawn			
Other (specify):		effective date:	Repeal adopted as proposed			
30 days a			Effective date:			
	Other (s	ресіту):		ays after filing er (specify):	09/30/2014	
Printed name and Title of person authorized Signature of person authorized to file rules:	to file rules: Day	rid, J. Dzielak, Ph.D. Executive D		er (speeny)	03/30/2014	
	DO NOT	WRITE BELOW THIS LINE	T			
OFFICIAL FILING STAMP	OFF	OFFICIAL FILING STAMP		OFFICIAL FILING STAMP		
			SECF	SEP 3 0 MISSISS	2014 DIPPLOF STATE	

Accepted for filing by

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

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