

## **Title 23: Division of Medicaid**

### **Part 202: Hospital Services**

#### **Chapter 2: Outpatient Services**

##### *Rule 2.10: Phase II Cardiac Rehabilitation Services*

- A. The Division of Medicaid defines Phase II Cardiac Rehabilitation services as a physician supervised program designed to recondition the cardiovascular system and restore beneficiaries with cardiovascular heart disease to their optimal functional status including their physiological, psychological, social, vocational and emotional status including, but not limited to:
1. Formal exercise sessions with continuous electrocardiographic (ECG) monitoring,
  2. Risk factor education, and
  3. Behavior modification counseling.
- B. Providers must comply with all requirements set forth in Part 200, Chapter 4, Rule 4.8 in addition to:
1. Being a current Mississippi Division of Medicaid provider,
  2. Being located in the state of Mississippi, and
  3. Holding a current certification from the American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR).
- C. The Division of Medicaid covers Phase II Cardiac Rehabilitation services for beneficiaries eighteen (18) and older for one (1) of the qualifying episodes:
1. Acute myocardial infarction within the preceding twelve (12) months,
  2. Coronary artery bypass graft within six (6) months,
  3. Percutaneous transluminal coronary angioplasty or percutaneous coronary intervention within six (6) months,
  4. Heart valve repair/replacement within six (6) months,
  5. Heart transplant within one (1) year, or
  6. Stable angina positive stress test within six (6) months.

- D. The Division of Medicaid covers up to thirty-six (36) Phase II Cardiac Rehabilitation sessions per twelve (12) months regardless of the number of qualifying episodes.
1. The twelve (12) month period begins with the initiation of Phase II Cardiac Rehabilitation.
  2. Phase II Cardiac Rehabilitation is covered for only one (1) qualifying episode during the twelve (12) month period.
  3. The thirty-six (36) Phase II Cardiac Rehabilitation sessions must occur within twelve (12) weeks from initiation of services unless a medical condition prevents the beneficiary from completing the thirty-six (36) sessions. Prior authorization for the extension must be obtained from the Utilization Management and Quality Improvement Organization (UM/QIO) up to an additional twelve (12) weeks.
- E. Phase II Cardiac Rehabilitation Services must be:
1. Furnished in the outpatient hospital setting with physician supervision as required in compliance with AACVPR guidelines, and
  2. Prior authorized by the Utilization Management and Quality Improvement Organization (UM/QIO).
- F. The Division of Medicaid pays for all medically necessary services for EPSDT-eligible beneficiaries in accordance with Part 223 of Title 23, without regard to service limitations and with prior authorization.

Source: 42 CFR § 410.49; Miss. Code Ann. § 43-13-121.

History: New Rule eff. 02/01/2014.