

Title 23: Division of Medicaid

Part 202: Hospital Services

Part 202 Chapter 2: Outpatient Services

Rule 2.2: Outpatient Hospital Services

- A. The Division of Medicaid covers outpatient hospital services provided by a licensed hospital in hospital outpatient departments to a beneficiary by or under the direction of a physician or dentist which are preventive, diagnostic, therapeutic, rehabilitative or palliative and include, but are not limited to:
1. Emergency department services,
 2. Observation services,
 3. Outpatient department services including same-day surgery,
 4. Laboratory tests,
 5. X-ray and other radiology services, and
 6. Medical supplies
- B. The Division of Medicaid does not cover partial hospitalization programs or day treatment programs in an outpatient hospital setting. The Division of Medicaid defines partial hospitalization or day treatment programs as those that are:
1. Clearly billed as partial hospitalization/day treatment,
 2. Represented to the community as partial hospitalization programs or day treatment programs, or
 3. Billed to the Division of Medicaid using revenue and procedure codes reflecting multiple units or daily services.

Source: 42 C.F.R. § 440.20; Miss. Code Ann. §§ 43-13-117, 43-13-121.

History: Revised eff. 01/01/2019.

Rule 2.8: Outpatient Hospital Rates

The Division of Medicaid reimburses all outpatient hospital services except for Indian Health Service Facilities, using the outpatient prospective payment system (OPPS) methodology.

Source: 42 C.F.R. § 447.321; Miss. Code Ann. §§ 43-13-117, 43-13-121.

History: Revised eff. 01/01/2019; 09/01/2012.

Rule 2.12: Hospital-Based Physician Clinics

- A. The Division of Medicaid defines a provider-based entity as a hospital-based physician clinic that meets the Centers for Medicare and Medicaid Services (CMS) requirements to be considered provider-based.
- B. A hospital cannot bill a hospital clinic evaluation and management code for hospital-based physician clinic services unless the hospital meets all of the following:
 - 1. Is a teaching hospital within the state of Mississippi,
 - 2. Has a medical resident-to-bed ratio of 0.25 or greater as derived from a calculation from the hospital provider's cost report, Worksheet E, Part A, Line 19,
 - 3. Is located:
 - a) On the campus of the main provider's hospital facility, or
 - b) Within thirty-five (35) miles of the physician clinic if the physician clinic is located off campus.
 - 4. Meets the hospital-based determination as outlined in 42 C.F.R. § 413.65 (b) , and
 - 5. Meets and follows all Division of Medicaid rules and State and Federal regulations.

Source: 42 C.F.R. § 413.65; Miss. Code Ann. §§ 43-13-117, 43-13-121.

History: New Rule eff. 01/01/2019.

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 - 3. Is located:
 - a) On the campus of the main provider's hospital facility, or
 - b) Within thirty-five (35) miles of the physician clinic if the physician clinic is located off campus.~~, or~~
 - ~~b) Within two hundred fifty (250) yards of the physician clinic if the physician clinic is on a part of the provider's campus.~~
 - 4. Meets Has the hospital-based received a determination as outlined in 42 C.F.R. § 413.65 (b) to whether the physician clinic is provider based from CMS, and
 - 5. Meets and follows all Division of Medicaid rules and State and Federal regulations.

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