Mississippi Secretary of State

ADMINISTRATIVE PROCEDURES N		P. O. Box 136, Jackson, MS 3	9205-0136		
AGENCY NAME Division of Medicaid		CONTACT PERSON Margaret Wilson		TELEPHONE NUMBER 601-359-5248	
ADDRESS 550 High Street, Suite 1000		CITY Jackson		STATE MS	ZIP 39201
EMAIL Margaret. Wilson@medicaid.ms.gov	SUBMIT DATE DEC 2 0 2019	Name or number of rule(s); Medicaid, Part 223; Early and Peric (EPSDT), Chapter 3; Prescribed Pe Rules 3,1 - 3,6			
Short explanation of rule/amendment/rule filed to include coverage and reimburse Administrative Code, Title 23 under Part 1, 2019, to correspond with SPA 19-0002 Specific legal authority authorizing the part 121 List all rules repealed, amended, or susponse ORAL PROCEEDING:	ement language for 203: Early and Po Prescribed Pedia promulgation of re	or Prescribed Pediatric Extenderiodic Screening, Diagnosis, tric Extended Care (PPEC) Seule: 42 U.S.C § 1396d; Miss.	ded Care (PP and Treatmen rvices, effect	PEC) services nt (EPSDT), ive October I	in the Mississippi effective November , 2019.
An oral proceeding is scheduled for the Presently, an oral proceeding is not s					
If an oral proceeding is not scheduled, an oral proceed ten (10) or more persons. The written request sho notice of proposed rule adoption and should include agent or attorney, the name, address, email address comment period, written submissions including are ECONOMIC IMPACT STATEMENT:	uld be submitted to the the name, address, is, and telephone num guments, data, and vie	e agency contact person at the above email address, and telephone numbe ber of the party or parties you repres ws on the proposed rule/amendmen	e address within or of the person(s sent. At any timo t/repeal may be	twenty (20) day s) making the re- e within the twe submitted to th	s after the filing of this quest; and, if you are an nty-five (25) day public e filing agency.
Economic impact statement not requ	ired for this rule.	Concise summary of e	conomic impa	act statemen	t attached.
Original filing Renewal of effectiveness New To be in effect in days Ame Effective date: Immediately upon filing Adop Other (specify): Proposed file 30 day		Action taken.			nanges in text ges nce proposed
Printed name and Title of person aut Signature of person authorized to file		les: Nrew L. Snyder, Exe	cutive Direc	tor	CD V 1 2020
	DO NOT	WRITE BELOW THIS LINE			
OFFICIAL FILING STAMP		ICIAL FILING STAMP	SEC		0 2019 D
Accepted for filing by Accepted for		filing by	Accepted for filing by		

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