

Mississippi Secretary of State
125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Division of Medicaid		CONTACT PERSON Robin Bradshaw		TELEPHONE NUMBER 601-359-3984	
ADDRESS 550 High Street, Suite 1000		CITY Jackson		STATE MS	ZIP 39201
EMAIL DOMPolicy@medicaid.ms.gov	SUBMIT DATE NOV 03 2022	Name or number of rule(s): Title 23: Medicaid, Part 209: Durable Medical Equipment, Medical Appliances and Medical Supplies, Chapter 1 and 2, Rules 1.4 and 2.2.			

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: This Administrative Code is being filed to correspond with MS SPA 22-0027, effective October 1, 2022, to update the rates for DME and Medical Supplies October 1, 2022 and July 1 of each year thereafter based on the Medicare Rural Rate in effect January 1 of that year, in compliance with Miss. Code § 43-13-117, as amended by MS House Bill 657.

Specific legal authority authorizing the promulgation of rule: Miss. Code §§ 43-13-117, 43-13-121.

List all rules repealed, amended, or suspended by the proposed rule: 1.4, 2.2

ORAL PROCEEDING:

☐ An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

☒ Presently, an oral proceeding is not scheduled on this rule.

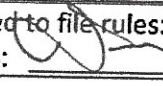
If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

☐ Economic impact statement not required for this rule. ☒ Concise summary of economic impact statement attached.

TEMPORARY RULES	PROPOSED ACTION ON RULES	FINAL ACTION ON RULES
☐ Original filing ☐ Renewal of effectiveness To be in effect in _____ days Effective date: ☐ Immediately upon filing ☐ Other (specify): _____	Action proposed: ☐ New rule(s) ☒ Amendment to existing rule(s) ☐ Repeal of existing rule(s) ☐ Adoption by reference Proposed final effective date: ☐ 30 days after filing ☒ Other (specify): JAN 01 2023	Date Proposed Rule Filed: _____ Action taken: ☐ Adopted with no changes in text ☐ Adopted with changes ☐ Adopted by reference ☐ Withdrawn ☐ Repeal adopted as proposed Effective date: ☐ 30 days after filing ☐ Other (specify): _____

Printed name and Title of person authorized to file rules: Drew L. Snyder, Executive Director

Signature of person authorized to file rules: 

OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
Accepted for filing by _____	 NOV 03 2022 MISSISSIPPI SECRETARY OF STATE Accepted for filing by <u>26632 Bm</u>	Accepted for filing by _____

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



Michael Watson

SECRETARY OF STATE

CONCISE SUMMARY OF ECONOMIC IMPACT STATEMENT

An Economic Impact Statement is required for this proposed rule by Section 25-43-3.105 of the Administrative Procedures Act. This is a Concise Summary of the Economic Impact Statement which must be filed with the Secretary of State's Office.

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ADDRESS 550 High Street, Suite 1000	CITY Jackson	STATE MS
EMAIL DOMPolicy@medicaid.ms.gov	ZIP 39201	
DESCRIPTIVE TITLE OF PROPOSED RULE This Administrative Code is being filed to correspond with MS SPA 22-0027, effective October 1, 2022, to update the rates for DME and Medical Supplies October 1, 2022 and July 1 of each year thereafter based on the Medicare Rural Rate in effect January 1 of that year, in compliance with Miss. Code § 43-13-117, as amended by MS House Bill 657.		
Specific Legal Authority Authorizing the promulgation of Rule: Miss. Code §§ 43-13-117, 43-13-121.	Reference to Rules repealed, amended or suspended by the Proposed Rule: 1.4, 2.2	

A. Estimated Costs and Benefits

1. Briefly summarize the benefits that may result from this regulation and who will benefit:
This Administrative Code is being filed to correspond with MS SPA 22-0027, effective October 1, 2022, to update the rates for DME and Medical Supplies October 1, 2022 and July 1 of each year thereafter based on the Medicare Rural Rate in effect January 1 of that year, in compliance with Miss. Code § 43-13-117, as amended by MS House Bill 657.
2. Briefly describe the need for the proposed rule: *The rule is being filed in compliance with Miss. Code § 43-13-117, amended by MS House Bill 657, effective July 1, 2022.*
3. Briefly describe the effect the proposed action will have on the public health, safety, and welfare:
This rule will allow Division of Medicaid to update the rates for DME and Medical Supplies October 1, 2022 and July 1 of each year thereafter based on the Medicare Rural Rate in effect January 1 of that year.
4. Estimated Cost of implementing proposed action:
 - a. To the agency
☐ Nothing ☒ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
 - b. To other state or local government entities
☒ Nothing ☐ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
5. Estimated Cost and/or economic benefit to all persons directly affected by the proposed rule:
 - c. Cost:
☐ Nothing ☐ Minimal ☒ Moderate ☐ Substantial ☐ Excessive
 - d. Economic Benefit:
☐ Nothing ☐ Minimal ☒ Moderate ☐ Substantial ☐ Excessive

6. Estimated impact on small businesses:

☐ Nothing ☐ Minimal ☒ Moderate ☐ Substantial ☐ Excessive

- a. Estimate of the number of small businesses subject to the proposed regulation: *N/A*
b. Projected costs for small businesses to comply: *N/A*
c. Statement of probable effect on impacted small businesses: *N/A*

7. The cost of adopting the rule compared to not adopting the rule or significantly amending the existing rule (check option):

☐ substantially less than ☐ moderately less than ☐ minimally less than
☐ the same as ☒ minimally more than ☐ moderately more than
☐ substantially more than ☐ excessively more than

8. The benefit of adopting the rule compared to not adopting the rule or significantly amending the existing rule (check option):

☐ substantially less than ☐ moderately less than ☐ minimally less than
☐ the same as ☒ minimally more than ☐ moderately more than
☐ substantially more than ☐ excessively more than

B. Reasonable Alternative Methods

1. Other than adopting this rule, are there less costly or less intrusive methods for achieving the purpose of the proposed rule?
☐ yes ☒ no

2. If yes, please briefly describe available, reasonable alternative(s) and the reasons for rejecting those alternatives in favor of the proposed rule. (Please see §25-43-4.104 for factors you must consider.) *N/A*

C. Data and Methodology

1. Please briefly describe the data and methodology you used in making the estimates required by this form. *The expected increase in annual aggregate expenditures in federal dollars is \$436,054 for Federal Fiscal Year 2023 (FFY23) and \$436,054 for FFY24. The expected increase in annual aggregate expenditures in state dollars is \$92,996 for State Fiscal Year 2023 (SFY23) and \$123,995 for SFY 24. This economic estimate was calculated by applying the proposed rates to the actual utilization data for State Fiscal Year 2021(SFY21).*

D. Public Notice

Where, when, and how may someone present their views on the proposed rule and request an oral proceeding on the proposed rule if one is not already scheduled? *Written comments will be received by the Division of Medicaid, Office of the Governor, Office of Policy, Walter Sillers Building, Suite 1000, 550 High Street, Jackson, Mississippi 39201, or DOMPolicy@medicaid.ms.gov. Comments will be available for public review at the above address and on the Division of Medicaid's website at www.medicaid.ms.gov.*

SIGNATURE



DATE

NOV 03 2022

TITLE

Executive Director

PROPOSED EFFECTIVE DATE OF RULE

JAN 01 2023