

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 210: Ambulatory Surgical Centers, Chapter 1: General, Rule 1.6: Reimbursement	

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 22-0026, effective October 1, 2022, to update the rates for Ambulatory Surgical Centers (ASCs) October 1 of each year, based on the Medicare rate in effect July 1 of that year, effective January 1, 2023.

Specific legal authority authorizing the promulgation of rule: 42 C.F.R. Part 416; Miss. Code § 43-13-117

List all rules repealed, amended, or suspended by the proposed rule: 1.6

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): <u>JAN 01 2023</u>	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: [Signature]

OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
Accepted for filing by	FILED NOV 03 2022 MISSISSIPPI SECRETARY OF STATE Accepted for filing by <u>26632 Pom</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 Title 23: Medicaid, Part 210: Ambulatory Surgical Centers, Chapter 1: General, Rule 1.6: Reimbursement		
Specific Legal Authority Authorizing the promulgation of Rule: 42 C.F.R. Part 416; Miss. Code Ann. §§ 43-13-117		Reference to Rules repealed, amended or suspended by the Proposed Rule: 1.6

A. Estimated Costs and Benefits

- 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 22-0026, effective October 1, 2022, to update the rates for Ambulatory Surgical Centers (ASCs) October 1 of each year, based on the Medicare rate in effect July 1 of that year, effective January 1, 2023.
- Briefly describe the need for the proposed rule: *This rule is being filed in compliance with Miss. Code § 43-13-117, as amended by MS House Bill 657.*
- Briefly describe the effect the proposed action will have on the public health, safety, and welfare: *This Administrative Code is being filed to correspond with MS SPA 22-0026, effective October 1, 2022, to update the rates for Ambulatory Surgical Centers (ASCs) October 1 of each year, based on the Medicare rate in effect July 1 of that year, effective January 1, 2023.*
- Estimated Cost of implementing proposed action:
 - To the agency
☐ Nothing ☒ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
 - To other state or local government entities
☒ Nothing ☐ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
- Estimated Cost and/or economic benefit to all persons directly affected by the proposed rule:
 - Cost:
☐ Nothing ☒ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
 - Economic Benefit:
☐ Nothing ☒ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
- 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 \$80,235 for Federal Fiscal Year 2023 (FFY23) and \$80,235 for FFY24. The expected increase in annual aggregate expenditures in state dollars is \$17,111 for State Fiscal Year 2023 (SFY23) and \$22,815 for SFY 24.*

D. Public Notice

1. 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

TITLE

Executive Director

DATE

NOV 3 2022

PROPOSED EFFECTIVE DATE OF RULE

JAN 01 2023