Title 23: Division of Medicaid

Part 202: Hospital Services

Part 202 Chapter 2: Outpatient Services

Rule 2.12: Hospital-Based Physician Clinics

The Division of Medicaid does not reimburse facility fees for hospital-based clinics.

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

History: Revised eff. 01/01/2026; New Rule eff. 01/01/2019.

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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.~~

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