## Mississippi Secretary of State

125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

| ADMINISTR | ATIVE | DOUCED | HDEC | MOTICE | FILING |
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| AGENCY NAME<br>Division of Medicaid   |                 | CONTACT PERSON<br>Robin Bradshaw      |   |   | NE NUMBER<br>1984 |  |  |  |  |  |
|---|-----------------|---------------------------------------|---|---|-------------------|--|--|--|--|--|
| ADDRESS<br>550 High Street, Suite 1000  | CITY<br>Jackson |                                       | STATE<br>MS                                     | ZIP<br>39201  |                   |  |  |  |  |  |
| EMAIL<br>DOMPolicy@medicald.ms.gov  | DEC 1 1 202     |                                       |   |   |                   |  |  |  |  |  |
| Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: This administrative   |                 |                                       |   |   |                   |  |  |  |  |  |
| code is being filed to update the reference to the non-psychiatric physician visit limit to correspond with the limits  |                 |                                       |   |   |                   |  |  |  |  |  |
| specified in Miss. Administrative Code Title, 23, Part 203, Rule 1;4 and the current Mississippi Medicaid State Plan.   |                 |                                       |   |   |                   |  |  |  |  |  |
| Specific legal authority authorizing the promulgation of rule: Miss. Code Ann. §§ 43-13-117, 43-13-121  |                 |                                       |   |   |                   |  |  |  |  |  |
| List all rules repealed, amended, or suspended by the proposed rule: 5.3  |                 |                                       |   |   |                   |  |  |  |  |  |
| ORAL PROCEEDING:  |                 |                                       |   |   |                   |  |  |  |  |  |
| An oral proceeding is scheduled for this rule on Date: 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 filling 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 filling agency.  ECONOMIC IMPACT STATEMENT: |                 |                                       |   |   |                   |  |  |  |  |  |
| Economic impact statement not required for this rule.   Concise summary of economic impact statement attached.  |                 |                                       |   |   |                   |  |  |  |  |  |
| TEMPORARY RULES PROPO   |                 | SED ACTION ON RULES                   | FINAL ACTION ON RULES Date Proposed Rule Filed: |   | · -               |  |  |  |  |  |
| Original filing   |                 |                                       | Action taken:                                   |   |                   |  |  |  |  |  |
| Renewal of effectiveness New ro   |                 |                                       |   | _ Adopted with no changes in text<br>_ Adopted with changes |                   |  |  |  |  |  |
| Effective date:   | Repeal          | of existing rule(s)                   | Adop  | Adopted by reference  |                   |  |  |  |  |  |
|   |                 | on by reference<br>1 effective date:  | Withdrawn Repeal adopted as proposed            |   |                   |  |  |  |  |  |
|   | 30 day          | s after filing (specify) MAR 0 1 2026 | Effective da                                    |   | _                 |  |  |  |  |  |
| - ×   | X_ Other        | specify)31AIL 0 1 2020                |   | ays after filin<br>er (specify): _                          | g<br>             |  |  |  |  |  |
| Printed name and Title of person authorized to file rules: Cindy H. Bradshaw, Executive Director  |                 |                                       |   |   |                   |  |  |  |  |  |
| Signature of person authorized to file rules:   |                 |                                       |   |   |                   |  |  |  |  |  |
|   |                 | WRITE BELOW THIS LINE                 | 0   | FFICIAL FILII   | NG STAMP          |  |  |  |  |  |
| OFFICIAL FEITH STANF  |                 |                                       | OTTERAL TENOSTAM                                |   |                   |  |  |  |  |  |
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|   | 17              |                                       |   |   |                   |  |  |  |  |  |
|   | ••• [           | DEC 11 2025                           |   |   |                   |  |  |  |  |  |
|   |                 | MISSISSIPPI                           |   |   |                   |  |  |  |  |  |
|   |                 | ETARY OF STATE                        |   |   |                   |  |  |  |  |  |
| Beauta d for filtra l   |                 |                                       | Aggregate 1 f                                   | an Cilian bee   |                   |  |  |  |  |  |
| Accepted for filing by  Accepted for $3943$   |                 |                                       | Accepted  | or filing by  |                   |  |  |  |  |  |

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