

Mississippi Medicaid Update

HFMA

August 25, 2026

Agenda



Medicaid Spending



Enrollment Trend



Medicaid Payment Structures



Grants



WFTC/Rural Health Transformation



Policy Changes

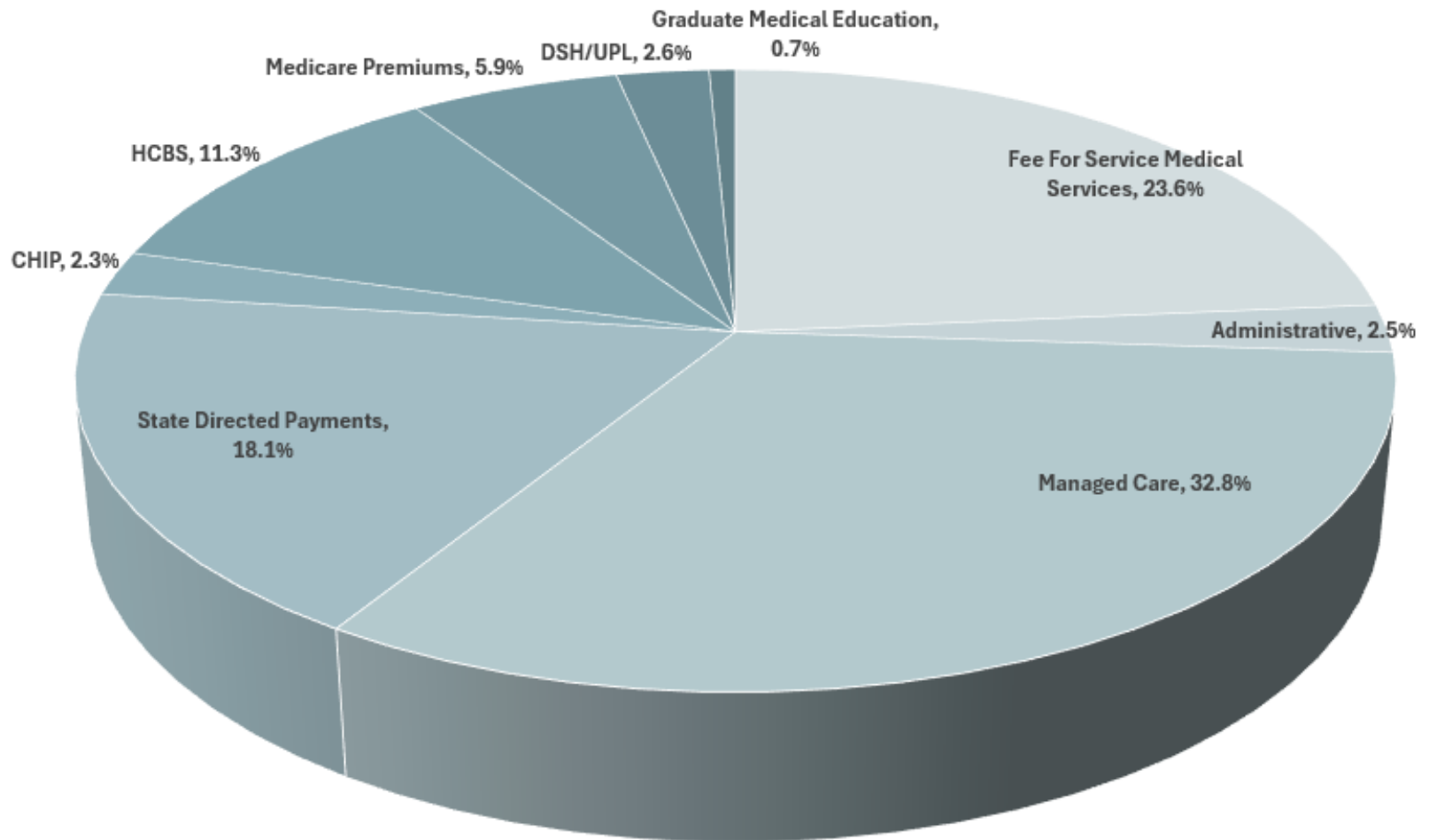


MHAP

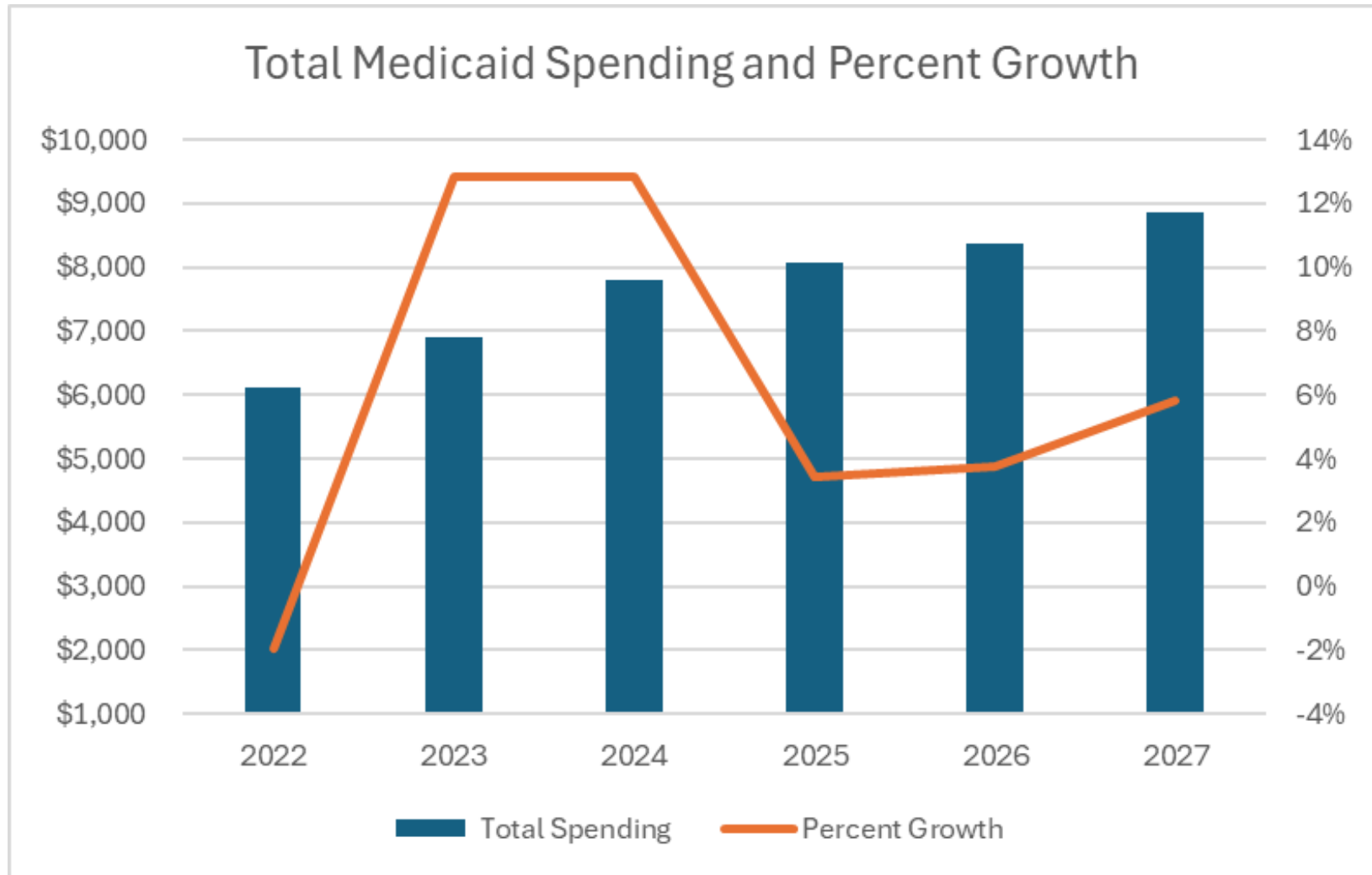


Contact Information

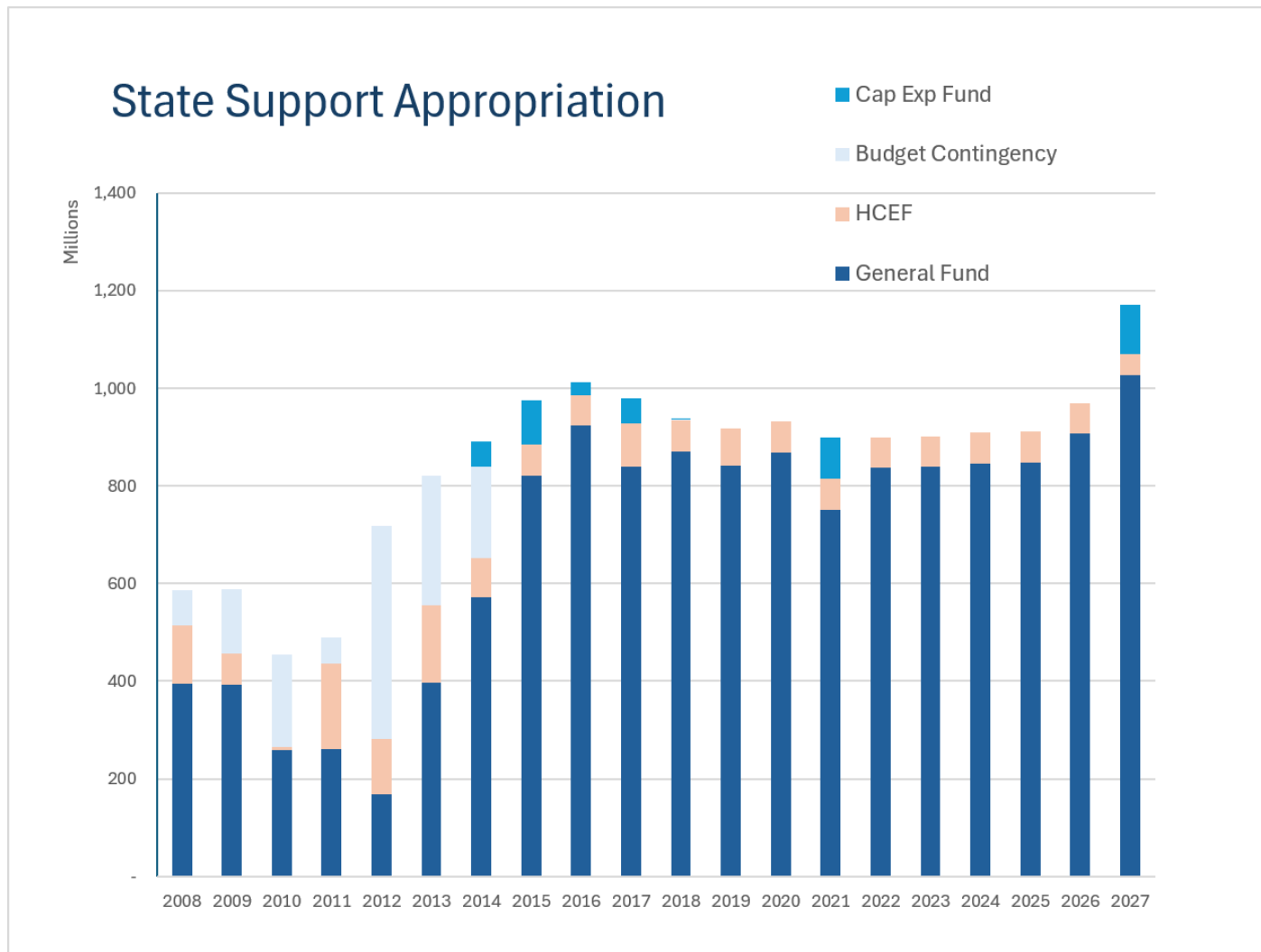
SFY 2026 Medicaid Spending



Spending Growth

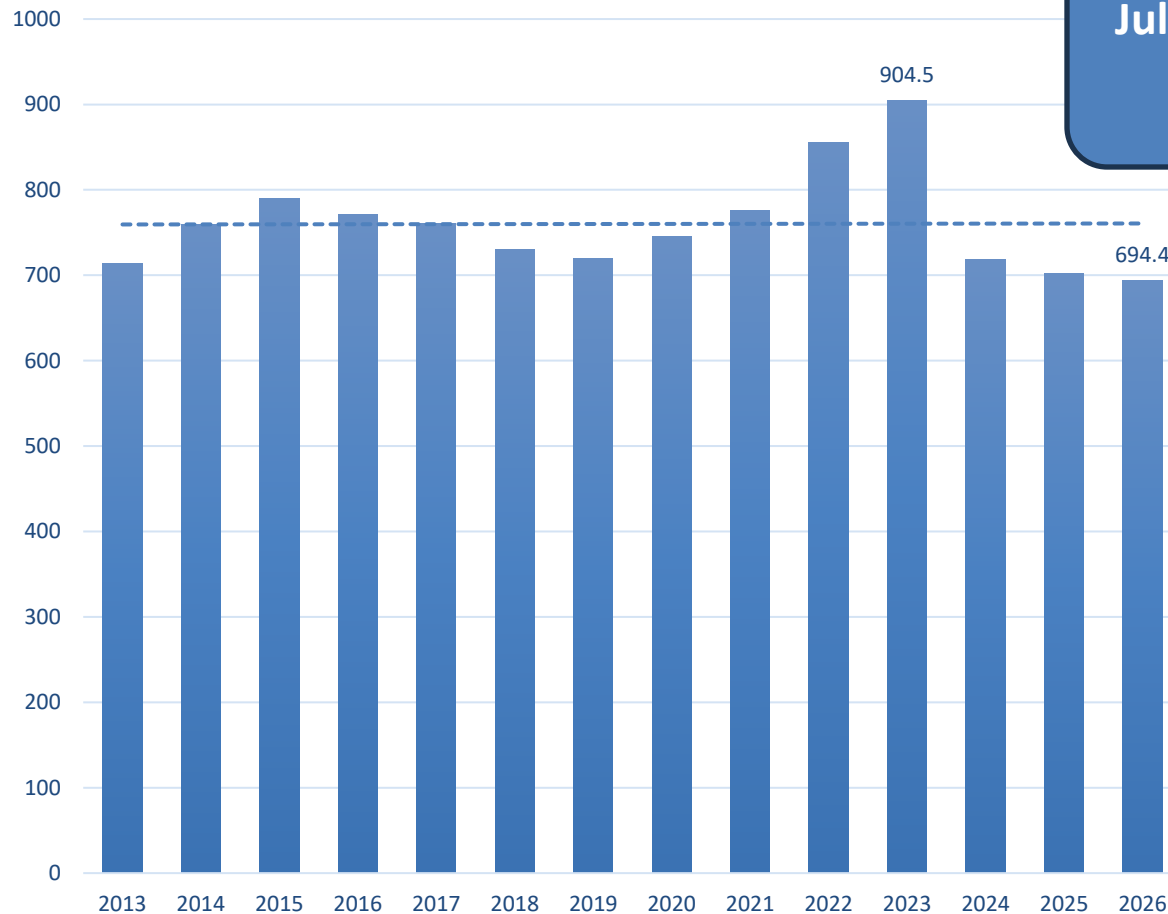


State Share



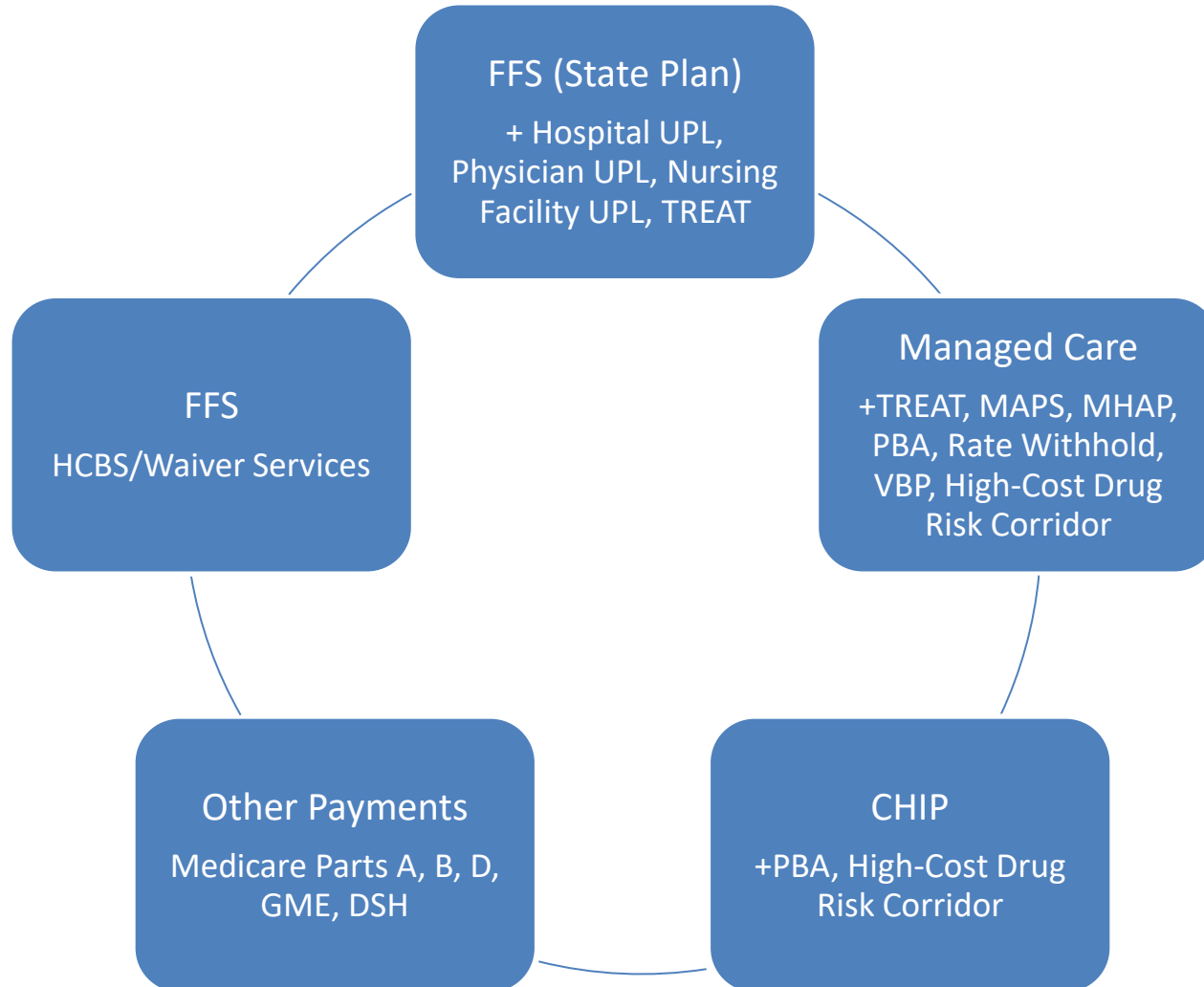
2013-2026 Medicaid Enrollment

(in thousands)



July 2026 Enrollment
694,247

Medicaid Payment Structures



New Grants



→ Cell and Gene Therapy (CGT) Access Model

→ Nursing Home Staffing Campaign

Links to more info:

[Transforming Maternal Health Model - Mississippi Division of Medicaid](#)

[Cell and Gene Therapy \(CGT\) Access Model - Mississippi Division of Medicaid](#)

[Nursing Home Careers | CMStps://](#)

Transforming Maternal Health



CMS Transforming Maternal Health (TMaH) Model
Transforming Maternal Care: Mississippi MOMentum Initiative

TMaH Goals:

- Decrease low-risk cesarean births
- Decrease severe maternal morbidity
- Decrease low birthweight infants
- Elevate the experience of care for those who are pregnant, giving birth, or postpartum
- Streamline Medicaid and CHIP program expenditures

Transforming Maternal Health



CMS Transforming Maternal Health (TMaH) Model
Transforming Maternal Care: Mississippi MOMentum Initiative

- VBP Incentive Program – MOMS -- July 1, 2024 – June 30, 2026
- Remote Patient Monitoring Program for High-Risk Pregnancies coming soon!
- Helpful Links:
 - [General Interest Form](#)
 - [TMaH Participation Interest Form](#)
 - [MSPQC Patient Reporting Experience Measure \(PREM\) Survey](#)
 - [Job Aid: Directions on how to become an Accountable Entity](#)



Working Families Tax Cut

Impact to Medicaid

- No work requirement/Community Engagement
- Minimal impact to membership (<1,000)
- No reduction in provider taxes percentages on current taxes
- State Directed Payments to Hospitals, UMMC and Emergency Ambulance will be reduced beginning in FY2029
- Rural Health Transformation funding

Rural Health Transformation

[Link:](#)
[Resources -](#)
[Mississippi](#)
[RHT Program](#)

DOES YOUR AREA QUALIFY?



MISSISSIPPI
RURAL HEALTH TRANSFORMATION

Defining Rural

For the purposes of this program, an area is considered rural if it is in:

- a county with fewer than 50,000 residents, OR
- a county with fewer than 500 people per square mile, OR
- a municipality of 15,000 residents or fewer.

All counties in Mississippi have a population density fewer than 500 people per square mile.

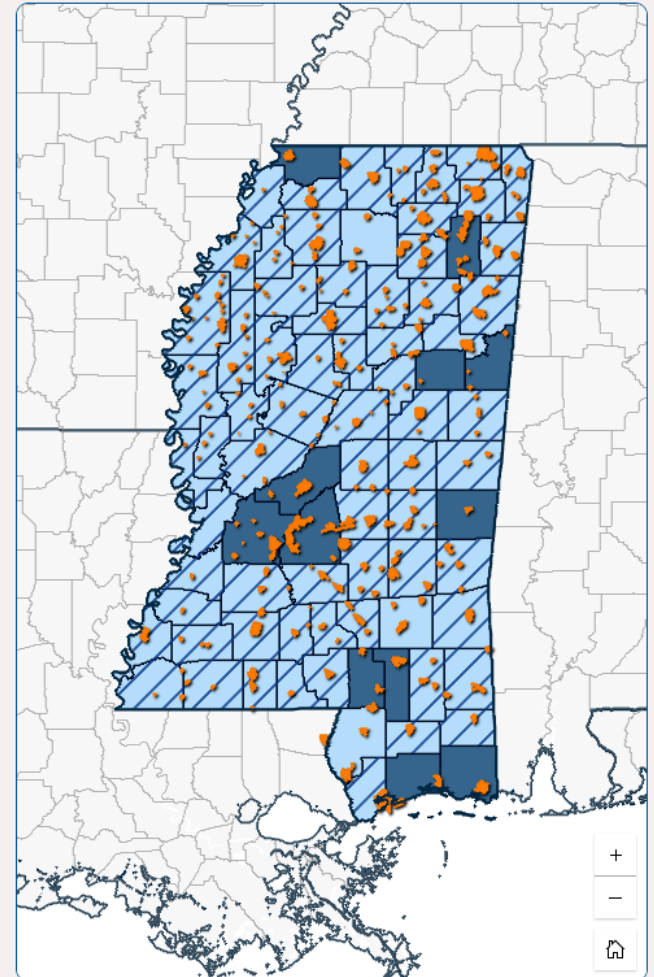
☒ Municipalities with Populations Under 15,000



☒ Counties with Fewer than 50,000 Residents



☒ Counties with Fewer than 500 People per Square Mile



Rural Health Transformation

Mississippi has secured \$205 million for the first budget period of a five-year grant through the Rural Health Transformation (RHT) Program, part of a historic \$50 billion federal investment authorized by the Working Families Tax Cut legislation. The intention of this program is to create a sustainable healthcare landscape that supports rural communities. The State's application included requests for funding for initiatives in six categories:

- **Statewide Rural Health Assessment:** a comprehensive statewide assessment of rural healthcare needs, both today and looking forward ten years
- **The Coordinated Regional Integrated Systems Initiative:** create a connected, data-driven network of emergency, clinical and community-based services
- **The Workforce Expansion Initiative:** strengthen the healthcare workforce in rural areas, improving access, continuity, and quality of care; targeted programs will address recruitment, retention, training, and career pathway development for all healthcare professionals.

Rural Health Transformation (cont.)

- **The Health Technology Advancement and Modernization Initiative:** modernize rural healthcare systems by strengthening the digital backbone that supports high-quality, coordinated, and secure care.
- **The Telehealth Adoption and Provider Support Initiative:** strengthen rural healthcare by increasing virtual care access, supporting providers in adopting telehealth, and exploring innovative payment models. Investments will enhance connectivity, technology, and diagnostic tools to enable real-time remote care.
- **The Building Rural Infrastructure for Delivery, Growth and Efficiency Initiative:** strengthen rural healthcare infrastructure by improving access to specialized care, closing care gaps, and supporting innovative pilot programs that enhance healthcare delivery and improve outcomes. The initiative focuses on building physical, operational, and programmatic capacity to address unmet needs, improve care coordination and foster sustainable rural healthcare systems.

Link for more information:

[Mississippi Rural Health Transformation Program -
Mississippi RHT Program](#)

NEW at Medicaid

Upcoming State Directed Payment changes (MHAP, TREAT, MAPS)

- A CMS final rule issued in the spring of 2024 will require DOM to stop making interim payments and will instead require MHAP and other state directed payments (SDP) to be made by the MCOs with the payment of claims.
- During 2026, attestations that no agreements exist between providers that would hold any other provider harmless from the impact of provider taxes.
- Other CMS regulations for calculation of State Directed Payments still apply – calculation of ACR, updates of data, amount of tax room, etc. – so that amount is subject to change.
- Further CMS rule making in May 2026 includes additional regulations around SDPs [CMS-2449-P].

Hospital Returns Policy

A hospital returns policy will be effective on October 1, 2026. The policy will include reductions for the initial claim beginning in July 2027 if the hospital did not at a minimum follow the discharge planning protocol in DOM's administrative code. Performance metrics in MHAP will be sunset on June 30, 2027.

NEW at Medicaid (cont.)

Presumptive Eligibility

Register to become a qualified provider/entity for Presumptive Eligibility Determinations:

Process: [Presumptive Eligibility for Pregnant Women - Mississippi Division of Medicaid](#)

Form: [Presumptive-Eligibility-Pregnant-Women-Provider-Application.pdf](#)

Interoperability and Patient Access

Members can now access their clinical records, claim determinations(paid and denied), and provider directories using third party applications. Two applications have been approved in MS. More information on these options is posted on DOM's website: [Interoperability and Patient Access - Mississippi Division of Medicaid](#)

Provider Tax Invoices and Payments

DOM will have a new system to deliver provider tax invoices and to allow providers to submit electronic payments for those taxes.

NEW at Medicaid (cont.)

New Quick Reference Guides for Claim Denials

QRG Instruction Documents and Videos have been posted to the link to DOM's Provider Portal. [MESA Portal for Providers - Mississippi Division of Medicaid](#)

These QRGs are focused on specific error codes received on claim denials and provides information on how to address those errors. DOM/Gainwell has used the list of most prevalent error codes to create the topics for the QRGs.

Example: Error 2503 – Member is Enrolled in Medicare Part C on Date(s) of Service ([Document](#) and [Video](#))

Provider Off-Cycle Revalidation

The Mississippi Division of Medicaid (DOM) is conducting off-cycle provider revalidations in accordance with guidance from the Centers for Medicare and Medicaid Services (CMS). Providers who have not completed revalidation since April 22, 2025, will be required to complete an off-cycle revalidation to maintain compliance with federal enrollment requirements. To support efficient processing, revalidation notices will be issued in phases over the coming months. More information is posted in the Late Breaking News article dated 8/18/2026.

MS Hospital Access Program

MHAP BY SFY				
SFY	MHAP-TPP	MHAP-FSA	MHAP-QIPP	TOTAL MHAP
2016	\$533,110,956	\$	\$	\$533,110,956
2017	\$533,110,956	\$	\$	\$533,110,956
2018	\$422,241,632	\$110,869,324	\$	\$533,110,956
2019	\$380,017,469	\$153,093,487	\$	\$533,110,956
2020	\$215,886,793	\$275,000,000	\$42,224,163	\$533,110,956
2021	\$0	\$317,886,793	\$215,224,163	\$533,110,956
2022	\$0	\$285,603,168	\$247,507,788	\$533,110,956
2023	\$0	\$313,053,124	\$288,100,478	\$601,153,602
2024	\$0	\$733,317,426	\$788,996,459	\$1,522,313,885
2025 (submitted to CMS)	\$0	\$719,679,373	\$820,744,321	\$1,540,423,694
2026 (Submitted to CMS)	\$0	\$719,679,373	\$820,744,321	\$1,540,423,694
2027 (Estimate)	\$0	\$770,211,847	\$770,211,847	\$1,540,423,694

MHAP – FSA \$770,211,847

Subject to
CMS
Approval

Fee Schedule Adjustment Payment Table - FY2027

Payment Type	Allocation for Interim Payments
Inpatient (non-REH)	\$9,664.13 per discharge
Outpatient (non-REH)	Increase of 80.28%
Outpatient (REH)	Increase of 39.31%

- Interim FSA payments calculated using managed care inpatient discharges and outpatient payments from the state fiscal year July 1, 2024, through June 30, 2025 (based on paid date)
- Interim payments reconciled in May 2028 to actual encounters for rating period, July 1, 2026 - June 30, 2027 (based on service date)
- Reconciliation amounts for FY2026 MHAP will be calculated in May 2027; NEW: 10% of total MHAP will be withheld and paid at the time of reconciliation

MHAP QIPP - \$770,211,847

Subject to
CMS
Approval

QIPP Payment Table			
Payment Type	Total Amount	Allocation for Interim Payments	Measurement Basis
PPHR	\$231,737,283	33.3% of QIPP Pool split by hospital based on SFY 2025 MHAP Payments	Assessed based on performance against the statewide a/e ratio
PPC	\$231,737,282	33.3% of QIPP Pool split by hospital based on SFY 2025 MHAP Payments	Assessed based on performance against the statewide a/e ratio
AM PPC	\$256,737,282	33.3% of QIPP Pool split by hospital based on SFY 2025 MHAP Payments	Assessed based on performance against the statewide a/e ratio
PPHR/PPC VBP Bonus	\$50,000,000	Prorated to hospitals meeting performance levels for each metric	Assessed based on all QIPP metrics

More information on MHAP including lots of QIPP resources like methodology supplements, previous webinars and attestations:
<https://medicaid.ms.gov/value-based-incentives/>
Email questions to: QIPP@medicaid.ms.gov

DOM Updates

If a provider or individual would like to be added to the distribution list for notification of updates to the State Plan, Administrative Code, or Waivers please notify the Division of Medicaid at

DOMPolicy@medicaid.ms.gov

Sign up to receive email alerts every time DOM posts a Late Breaking News (LBN) update: Just email a contact name, place of business and a contact number (optional) to

LateBreakingNews@medicaid.ms.gov.

See prior LBN posts:

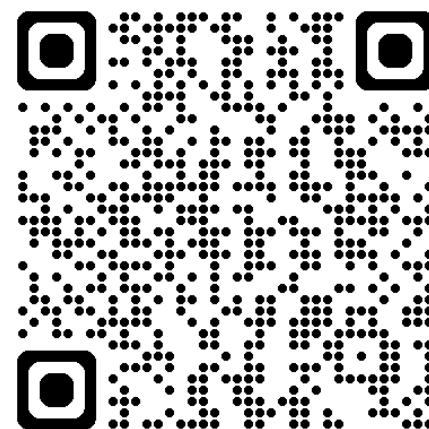
<https://medicaid.ms.gov/late-breaking-news/>



Member Workshops

- Topics:
 - Medicaid, MSCAN and CHIP benefits
 - How to find or choose your doctor
 - Special health topics
 - Transportation
 - Member rights and responsibilities

Use this code to register



Walk-ins are welcome!

August 18, 2026

Bolivar Co Extension Office
10:00am & 2:00pm
406 North MLK Dr.
Cleveland, MS 38732

August 20, 2026

M.R. Davis Public Library
11:30am & 5:30pm
8554 Northwest Dr.
Southaven, MS 38671

August 25, 2026

Lee County Library
11:00am & 3:00pm
219 N Madison St.
Tupelo, MS 38804

August 27, 2026

Willie Morris Library
11:00am & 3:00pm
4912 Old Canton Rd.
Jackson, MS 39211

September 1, 2026

Greenwood-Leflore Library
11:00am & 3:00pm
405 W Washington St.
Greenwood, MS 38930

September 9, 2026

Jackie D Sherill Community Center
10:00am & 2:00pm
220 W Front St.
Hattiesburg, MS 39401

September 10, 2026

WIN Job Center
10:00am & 2:00pm
604 Denny Avenue
Pascagoula, MS 39567

September 14, 2026

Natchez Civic Center
11:00am & 3:00pm
215 Franklin St.
Natchez, MS 39120

September 16, 2026

Meridian Public Library
11:00am & 3:00pm
2517 7th St.
Meridian, MS 39301

Contact Information



Fiscal Agent-Gainwell

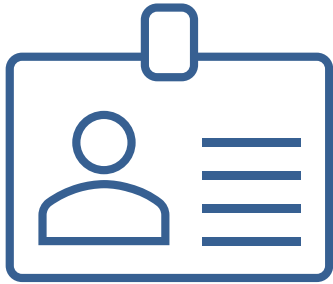
- Provider and Beneficiary Services Call Center 1-800-884-3332

DOM

- DOM Switchboard 1-800-421-2408 or 601-359-6050

MCO Issue Reporting Procedures

Managed Care Contact Information



Magnolia Health
magnoliahealthplan.com

1-866-912-6285



Molina Healthcare
MolinaHealthCare.Com

1-844-809-8438



TrueCare
<https://www.mstruecare.com/ms/plans/>

1-833-230-2110

Contract end: June 30, 2025

United Healthcare
uhcommunityplan.com

1-800-557-9933
1-877-743-8731

Questions



Jennifer.Wentworth@medicaid.ms.gov