

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI
OFFICE OF THE GOVERNOR
DIVISION OF MEDICAID

Miss. Division of Medicaid
c/o Ginnie McCardle, Spec. Proj. Officer
Robert E. Lee Building
239 N. Lamar Street
Suite 801
Jackson, MS 39201-1399
(601) 359-6310
<http://www.dom.state.ms.us>

Specific Legal Authority Authorizing the promulgation of
Rule: Miss Code Ann. §43-13-121(1972), as amended

Reference to Rules repealed, amended or suspended by the
Proposed Rule :
Provider Policy Update Sections 52.14 & 53.28 NEW

Date Rule Proposed:

Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule:
AP 2006-61. This Provider Policy Update creates two new sections for inclusion: 52.14 and 53.28
regarding Enterra Therapy under the Surgery and General Medical Policy Sections respectively.

The Agency Rule Making Record for this rule including any written comments received during the comment period and the record of any oral proceeding is available for public inspection by contacting the Agency at the above address.

An oral proceeding was held on this rule:

Date:
Time:
Place:

An oral proceeding was not held on this rule.

The Agency has considered the written comments and the presentations made in any oral proceedings, and

This rule as adopted is without variance from the proposed rule.

This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule.

The rule as adopted differs from the proposed rule. The differences however are:
Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of the Notice of Proposed Rule Adoption and the comments submitted in response thereto, and
The Notice of Proposed Rule Adoption provided fair warning that the outcome of the proposed rule adoption could be the rule in question.

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

Effective Date of Rule: December 1, 2006


Executive Director

Signature and Title of Person Submitting Rule for Filing

Division of Medicaid	New: X	Date: 12/01/06
State of Mississippi	Revised:	Date:
Provider Policy Manual	Current:	
Section: Surgery	Section: 52.14	
	Pages: 1	
Subject: Enterra Therapy	Cross Reference: 53.28 Enterra Therapy	

Refer to General Medical Policy, Section 53.28, in this manual.

Division of Medicaid	New: X	Date: 12/01/06
State of Mississippi	Revised:	Date:
Provider Policy Manual	Current:	
Section: General Medical Policy	Section: 53.28	
	Pages: 1	
Subject: Enterra Therapy	Cross Reference:	

Mississippi Medicaid's policy is that Enterra Therapy, gastric electrical stimulation (GES), or gastric pacing for any condition is considered investigational and is not eligible for coverage.