

Revision: HCFA-PM-91-4  
August 1991

(BPD)

OMB No.: 0938-

State: Mississippi

## SECTION 2 - COVERAGE AND ELIGIBILITY

Citation  
42 CFR  
435.10 and  
Subpart J

### 2.1 Application, Determination of Eligibility and Furnishing Medicaid

- (a) The Medicaid agency meets all requirements of 42 CFR Part 435, Subpart J for processing applications, determining eligibility, and furnishing Medicaid.

TN No. 92-02  
Supersedes TN No. 75-7

Effective Date January 1, 1992  
Approval Date March 16, 1992  
Date Received January 30, 1992

HCFA ID: 7982E

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March 1993

State: Mississippi

Citation

- 42 CFR  
435.914  
1902(a)(34)  
of the Act
- 2.1 (b) (1) Except as provided in items 2.1(b)(2) and (3) below, individuals are entitled to Medicaid services under the plan during the three months preceding the month of application, if they were, or on application would have been, eligible. The effective date of prospective and retroactive eligibility is specified in ATTACHMENT 2.6-A.
- 1902(e)(8) and  
1905(a) of the  
Act
- (2) For individuals who are eligible for Medicare cost-sharing expenses as qualified Medicare beneficiaries under section 1902(a)(10)(E)(i) of the Act, coverage is available for services furnished after the end of the month in which the individual is first determined to be a qualified Medicare beneficiary. ATTACHMENT 2.6-A specifies the requirements for determination of eligibility for this group.
- 1902(a)(47) and  
1920 of the Act
- (3) Pregnant women are entitled to ambulatory prenatal care under the plan during a presumptive eligibility period in accordance with section 1920 of the Act. ATTACHMENT 2.6-A specifies the requirements for determination of eligibility for this group.
- 42 CFR  
434.20
- (c) The Medicaid agency elects to enter into a risk contract with an HMO that is--
- X Qualified under title XIII of the Public Health Service Act or is provisionally qualified as an HMO pursuant to section 1903(m)(3) of the Social Security Act.
- X Not Federally qualified, but meets the requirements of 42 CFR 434.20(c) and is defined in ATTACHMENT 2.1-A.
- Not applicable.

TN No. 95-14  
Supersedes Approval Date 11-21-95 Effective Date 7-01-95  
TN No. 93-05 Date Received 9-29-95

State of Mississippi  
Section 2 – Coverage and Eligibility

1902(a)(55) 2.1(d) The Medicaid agency has procedures to take applications, assist applicants and perform initial processing of applications from those low income pregnant women, infants, and children under age 19, described in S1902(a)(10)(A)(i) (IV), (a)(10)(A)(i) (VI), (a)(10)(A)(i)(VIII), and (a)(10)(A)(ii)(IX) at locations other than those used by the title IV-A program including FQHCs and disproportionate share hospitals. Such application forms do not include the ADFC form except as permitted by HCFA instructions.

Mississippi has implemented Section 1902(a)(55) of the Act by operating regional district offices and outstationing workers or developing procedures to assure that applications are taken and clients are assisted in completion of same at sites other than the single state agency's primary place of business:

- The agency maintains thirty (30) full service regional offices throughout the state which are open from 7:30 a.m. to 5:30 p.m. (excluding holidays) during the normal business week. These offices are staffed by employees of the agency who assist clients and applicants with the processing, review and determination of applications.
- In addition to the regional offices, the agency operates a network of outstationed locations within facilities not owned, leased or operated by the agency. Such locations include county departments of health (WIC locations), FQHC's, disproportionate share hospitals and rural health clinics.
- The agency has either an outstationed location or a regional office in 81 of the state's 82 counties. The one county without an office shares many government services (including a combined school district, health department office, and human services office) with a neighboring county because both counties are so small in population. In addition, the agency has three regional offices within a thirty (30) minute drive of that county. Approximately sixty-four (64) out of eighty two (82) counties have more than one location.
- Posters and pamphlets will be placed in prominent places in all admission offices and emergency rooms of disproportionate share hospitals, as well as in all FQHCs and rural health clinics. Information describes the closest location of the full service regional offices and outstation locations and provides telephone numbers for additional assistance.

Hours of operation are posted at each outstationed location and on the agency's website and are available at each regional office. Applicants are directed to the closest outstation site or regional office to file an application. Applicants may apply or be seen or assisted in any location, regardless of regional office boundary lines. Health facilities that do not participate in the outstationing of workers have access to the outstation schedules of each regional office.

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State/Territory: Mississippi

Citation

1902(a)(55)  
of the Act

2.1(e)

The Medicaid agency has procedures to take applications, assist applicants, and perform initial processing of applications from those low income pregnant women, infants, and children under age 19, described in §1902(a)(10)(A)(i)(IV), (a)(10)(A)(i)(VI), (a)(10)(A)(i)(VII), and (a)(10)(A)(ii)(IX) at locations other than those used by the title IV-A program including FQHCs and disproportionate share hospitals. Such application forms do not include the AFDC form except as permitted by HCFA instructions.

TN No. 92-02  
Supersedes TN No. 91-25

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State: Mississippi

Citation  
42 CFR  
435.10

2.2 Coverage and Conditions of Eligibility

Medicaid is available to the groups specified in ATTACHMENT 2.2-A.

Mandatory categorically needy and other required special groups only.

Mandatory categorically needy, other required special groups, and the medically needy, but no other optional groups.

*P&I →*  *HCFA 3-16-92* Mandatory categorically needy, other required special groups, and specified optional groups.

Mandatory categorically needy, other required special groups, specified optional groups, and the medically needy.

The conditions of eligibility that must be met are specified in ATTACHMENT 2.6-A.

All applicable requirements of 42 CFR Part 435 and sections 1902(a)(10)(A)(i)(IV), (V), and (VI), 1902(a)(10)(A)(ii)(XI), 1902(a)(10)(E), 1902(l) and (m), 1905(p), (q) and (s), 1920, and 1925 of the Act are met.

TN No. 92-02  
Supersedes TN No. 87-9

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Revision: HCFA-PK-87-4 (BERC)  
MARCH 1987

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State: Mississippi

Citation  
435.10 and  
435.403, and  
1902(b) of the  
Act, P.L. 99-272  
(Section 9529)  
and P.L. 99-509  
(Section 9405)

2.3 Residence

Medicaid is furnished to eligible individuals who are residents of the State under 42 CFR 435.403, regardless of whether or not the individuals maintain the residence permanently or maintain it at a fixed address.

**Page superseded by SPA 13-0022 S88  
effective 01-01-14**

TN No. 87-9  
Supersedes  
TN No. \_\_\_\_\_

Approval Date 12/2/87

Effective Date 4/1/87

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MARCH 1987

OMB No.: 0938-0193

State: Mississippi

Citation  
42 CFR 435.530(b)  
42 CFR 435.531  
AT-78-90  
AT-79-29

2.4 Blindness

All of the requirements of 42 CFR 435.530 and 42 CFR 435.531 are met. The more restrictive definition of blindness in terms of ophthalmic measurement used in this plan is specified in ATTACHMENT 2.2-A.

TN No. 87-9  
Supersedes  
TN No. \_\_\_\_\_

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State: Mississippi

Citation  
42 CFR  
435.121,  
435.540(b)  
435.541

2.5 Disability

All of the requirements of 42 CFR 435.540 and 435.541 are met. The State uses the same definition of disability used under the SSI program unless a more restrictive definition of disability is specified in Item A.13.b. of ATTACHMENT 2.2-A of this plan.

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State: Mississippi

Citation(s)

2.6 Financial Eligibility

42 CFR  
435.10 and  
Subparts G & H  
1902(a)(10)(A)(i)  
(III), (IV), (V),  
(VI), and (VII),  
1902(a)(10)(A)(ii)  
(IX), 1902(a)(10)  
(A)(ii)(X), 1902  
(a)(10)(C),  
1902(f), 1902(l)  
and (m),  
1905(p) and (s),  
1902(r)(2),  
and 1920

(a) The financial eligibility conditions for  
Medicaid-only eligibility groups and for  
persons deemed to be cash assistance  
recipients are described in ATTACHMENT 2.6-A.

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Supersedes  
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SEPTEMBER 1986

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State/Territory: Mississippi

Citation                    2.7            Medicaid Furnished Out of State

431.52 and  
1902(b) of the  
Act, P.L. 99-272  
(Section 9529)

Medicaid is furnished under the conditions specified in 42 CFR 431.52 to an eligible individual who is a resident of the State while the individual is in another State, to the same extent that Medicaid is furnished to residents in the State.

TN NO. 86-8  
Supersedes  
TN NO. 82-14

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