

By: Senator(s) Bean

To: Public Health and
Welfare;
Appropriations

SENATE BILL NO. 2096

1 AN ACT TO AMEND SECTION 43-13-115, MISSISSIPPI CODE OF 1972,
2 TO PROVIDE MEDICAID ELIGIBILITY FOR WORKERS WITH DISABILITIES WHO
3 BUY INTO THE MEDICAID ASSISTANCE PROGRAM, IN ACCORDANCE WITH THE
4 FEDERAL BALANCED BUDGET ACT OF 1997; AND FOR RELATED PURPOSES.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

6 SECTION 1. Section 43-13-115, Mississippi Code of 1972, is
7 amended as follows:

8 43-13-115. Recipients of medical assistance shall be the
9 following persons only:

10 (1) Who are qualified for public assistance grants under
11 provisions of Title IV-A and E of the federal Social Security Act,
12 as amended, including those statutorily deemed to be IV-A as
13 determined by the State Department of Human Services and certified
14 to the Division of Medicaid, but not optional groups unless
15 otherwise specifically covered in this section. For the purposes
16 of this paragraph (1) and paragraphs (3), (4), (8), (14), (17) and
17 (18) of this section, any reference to Title IV-A or to Part A of
18 Title IV of the federal Social Security Act, as amended, or the
19 state plan under Title IV-A or Part A of Title IV, shall be
20 considered as a reference to Title IV-A of the federal Social
21 Security Act, as amended, and the state plan under Title IV-A,
22 including the income and resource standards and methodologies
23 under Title IV-A and the state plan, as they existed on July 16,
24 1996.

25 (2) Those qualified for Supplemental Security Income (SSI)
26 benefits under Title XVI of the federal Social Security Act, as
27 amended. The eligibility of individuals covered in this paragraph

28 shall be determined by the Social Security Administration and
29 certified to the Division of Medicaid.

30 (3) Qualified pregnant women as defined in Section 1905(n)
31 of the federal Social Security Act, as amended, and as determined
32 to be eligible by the State Department of Human Services and
33 certified to the Division of Medicaid, who:

34 (a) Would be eligible for assistance under Part A of
35 Title IV (or would be eligible for such assistance if coverage
36 under the state plan under Part A of Title IV included assistance
37 pursuant to Section 407 of Title IV-A of the federal Social
38 Security Act, as amended) if her child had been born and was
39 living with her in the month such assistance would be paid, and
40 such pregnancy has been medically verified; or

41 (b) Is a member of a family which would be eligible
42 for assistance under the state plan under Part A of Title IV of
43 the federal Social Security Act, as amended, pursuant to Section
44 407 if the plan required the payment of assistance pursuant to
45 such section.

46 (4) Qualified children who are under five (5) years of age,
47 who were born after September 30, 1983, and who meet the income
48 and resource requirements of the state plan under Part A of Title
49 IV of the federal Social Security Act, as amended. The
50 eligibility of individuals covered in this paragraph shall be
51 determined by the State Department of Human Services and certified
52 to the Division of Medicaid.

53 (5) A child born on or after October 1, 1984, to a woman
54 eligible for and receiving medical assistance under the state plan
55 on the date of the child's birth shall be deemed to have applied
56 for medical assistance and to have been found eligible for such
57 assistance under such plan on the date of such birth and will
58 remain eligible for such assistance for a period of one (1) year
59 so long as the child is a member of the woman's household and the
60 woman remains eligible for such assistance or would be eligible
61 for assistance if pregnant. The eligibility of individuals
62 covered in this paragraph shall be determined by the State
63 Department of Human Services and certified to the Division of
64 Medicaid.

65 (6) Children certified by the State Department of Human
66 Services to the Division of Medicaid of whom the state and county
67 human services agency has custody and financial responsibility,
68 and children who are in adoptions subsidized in full or part by
69 the Department of Human Services, who are approvable under Title
70 XIX of the Medicaid program.

71 (7) (a) Persons certified by the Division of Medicaid who
72 are patients in a medical facility (nursing home, hospital,
73 tuberculosis sanatorium or institution for treatment of mental
74 diseases), and who, except for the fact that they are patients in
75 such medical facility, would qualify for grants under Title IV,
76 Supplementary Security Income benefits under Title XVI or state
77 supplements, and those aged, blind and disabled persons who would
78 not be eligible for Supplemental Security Income benefits under
79 Title XVI or state supplements if they were not institutionalized
80 in a medical facility but whose income is below the maximum
81 standard set by the Division of Medicaid, which standard shall not
82 exceed that prescribed by federal regulation;

83 (b) Individuals who have elected to receive hospice
84 care benefits and who are eligible using the same criteria and
85 special income limits as those in institutions as described in
86 subparagraph (a) of this paragraph (7).

87 (8) Children under eighteen (18) years of age and pregnant
88 women (including those in intact families) who meet the financial
89 standards of the state plan approved under Title IV-A of the
90 federal Social Security Act, as amended. The eligibility of
91 children covered under this paragraph shall be determined by the
92 State Department of Human Services and certified to the Division
93 of Medicaid.

94 (9) Individuals who are:

95 (a) Children born after September 30, 1983, who have
96 not attained the age of nineteen (19), with family income that
97 does not exceed one hundred percent (100%) of the nonfarm official

98 poverty line;

99 (b) Pregnant women, infants and children who have not
100 attained the age of six (6), with family income that does not
101 exceed one hundred thirty-three percent (133%) of the federal
102 poverty level; and

103 (c) Pregnant women and infants who have not attained
104 the age of one (1), with family income that does not exceed one
105 hundred eighty-five percent (185%) of the federal poverty level.

106 The eligibility of individuals covered in (a), (b) and (c) of
107 this paragraph shall be determined by the Department of Human
108 Services.

109 (10) Certain disabled children age eighteen (18) or under
110 who are living at home, who would be eligible, if in a medical
111 institution, for SSI or a state supplemental payment under Title
112 XVI of the federal Social Security Act, as amended, and therefore
113 for Medicaid under the plan, and for whom the state has made a
114 determination as required under Section 1902(e)(3)(b) of the
115 federal Social Security Act, as amended. The eligibility of
116 individuals under this paragraph shall be determined by the
117 Division of Medicaid.

118 (11) Individuals who are sixty-five (65) years of age or
119 older or are disabled as determined under Section 1614(a)(3) of
120 the federal Social Security Act, as amended, and who meet the
121 following criteria:

122 (a) Whose income does not exceed one hundred percent
123 (100%) of the nonfarm official poverty line as defined by the
124 Office of Management and Budget and revised annually.

125 (b) Whose resources do not exceed those allowed under
126 the Supplemental Security Income (SSI) program.

127 The eligibility of individuals covered under this paragraph
128 shall be determined by the Division of Medicaid, and such
129 individuals determined eligible shall receive the same Medicaid
130 services as other categorical eligible individuals.

131 (12) Individuals who are qualified Medicare beneficiaries
132 (QMB) entitled to Part A Medicare as defined under Section 301,
133 Public Law 100-360, known as the Medicare Catastrophic Coverage
134 Act of 1988, and who meet the following criteria:

135 (a) Whose income does not exceed one hundred percent
136 (100%) of the nonfarm official poverty line as defined by the
137 Office of Management and Budget and revised annually.

138 (b) Whose resources do not exceed two hundred percent
139 (200%) of the amount allowed under the Supplemental Security
140 Income (SSI) program as more fully prescribed under Section 301,
141 Public Law 100-360.

142 The eligibility of individuals covered under this paragraph
143 shall be determined by the Division of Medicaid, and such
144 individuals determined eligible shall receive Medicare
145 cost-sharing expenses only as more fully defined by the Medicare
146 Catastrophic Coverage Act of 1988.

147 (13) Individuals who are entitled to Medicare Part B as
148 defined in Section 4501 of the Omnibus Budget Reconciliation Act
149 of 1990, and who meet the following criteria:

150 (a) Whose income does not exceed the percentage of the
151 nonfarm official poverty line as defined by the Office of
152 Management and Budget and revised annually which, on or after:

153 (i) January 1, 1993, is one hundred ten percent
154 (110%); and

155 (ii) January 1, 1995, is one hundred twenty
156 percent (120%).

157 (b) Whose resources do not exceed two hundred percent
158 (200%) of the amount allowed under the Supplemental Security
159 Income (SSI) program as described in Section 301 of the Medicare
160 Catastrophic Coverage Act of 1988.

161 The eligibility of individuals covered under this paragraph
162 shall be determined by the Division of Medicaid, and such
163 individuals determined eligible shall receive Medicare cost

164 sharing.

165 (14) Individuals in families who would be eligible for the
166 unemployed parent program under Section 407 of Title IV-A of the
167 federal Social Security Act, as amended, but do not receive
168 payments pursuant to that section. The eligibility of individuals
169 covered in this paragraph shall be determined by the Department of
170 Human Services.

171 (15) Disabled workers who are eligible to enroll in Part A
172 Medicare as required by Public Law 101-239, known as the Omnibus
173 Budget Reconciliation Act of 1989, and whose income does not
174 exceed two hundred percent (200%) of the federal poverty level as
175 determined in accordance with the Supplemental Security Income
176 (SSI) program. The eligibility of individuals covered under this
177 paragraph shall be determined by the Division of Medicaid and such
178 individuals shall be entitled to buy-in coverage of Medicare Part
179 A premiums only under the provisions of this paragraph (15).

180 (16) In accordance with the terms and conditions of approved
181 Title XIX waiver from the United States Department of Health and
182 Human Services, persons provided home- and community-based
183 services who are physically disabled and certified by the Division
184 of Medicaid as eligible due to applying the income and deeming
185 requirements as if they were institutionalized.

186 (17) In accordance with the terms of the federal Personal
187 Responsibility and Work Opportunity Reconciliation Act of 1996
188 (Public Law 104-193), persons who become ineligible for assistance
189 under Title IV-A of the federal Social Security Act, as amended,
190 because of increased income from or hours of employment of the
191 caretaker relative or because of the expiration of the applicable
192 earned income disregards, who were eligible for Medicaid for at
193 least three (3) of the six (6) months preceding the month in which
194 such ineligibility begins, shall be eligible for Medicaid
195 assistance for up to twenty-four (24) months; however, Medicaid
196 assistance for more than twelve (12) months may be provided only

197 if a federal waiver is obtained to provide such assistance for
198 more than twelve (12) months and federal and state funds are
199 available to provide such assistance.

200 (18) Persons who become ineligible for assistance under
201 Title IV-A of the federal Social Security Act, as amended, as a
202 result, in whole or in part, of the collection or increased
203 collection of child or spousal support under Title IV-D of the
204 federal Social Security Act, as amended, who were eligible for
205 Medicaid for at least three (3) of the six (6) months immediately
206 preceding the month in which such ineligibility begins, shall be
207 eligible for Medicaid for an additional four (4) months beginning
208 with the month in which such ineligibility begins.

209 (19) Disabled workers whose incomes are above the Medicaid
210 eligibility limits, but below two hundred fifty percent (250%) of
211 the federal poverty level, who shall be allowed to purchase
212 Medicaid assistance coverage on sliding fee scale. For purposes
213 of this paragraph (19), countable family income shall be
214 determined under the provisions set forth in Section 1612 of the
215 federal Social Security Act. Medical assistance services under
216 this paragraph (19) shall be available in the same amount,
217 duration and scope as that available for categorically needy
218 recipients of Supplemental Security Income (SSI) benefits paid
219 under Title XVI of the federal Social Security Act. Premiums
220 shall be based upon countable income, using a sliding scale as
221 income rises, with a minimum premium of Five Dollars (\$5.00) and a
222 maximum of Two Hundred Dollars (\$200.00) monthly.

223 SECTION 2. This act shall take effect and be in force from
224 and after July 1, 1999.