

By: Representatives Espy, Holland, Scott
(80th)

To: Public Health and
Welfare; Appropriations

HOUSE BILL NO. 939

1 AN ACT TO CREATE NEW SECTION 43-13-115.1, MISSISSIPPI CODE OF
2 1972, AND TO AMEND SECTION 41-86-15, MISSISSIPPI CODE OF 1972, TO
3 PROVIDE FOR PRESUMPTIVE ELIGIBILITY FOR CHILDREN FOR COVERED
4 SERVICES AND BENEFITS UNDER THE MEDICAID PROGRAM AND THE
5 CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP); TO PROVIDE THAT A
6 CHILD WILL BE PRESUMPTIVELY ELIGIBLE IF A QUALIFIED ENTITY
7 DETERMINES THAT THE FAMILY INCOME OF THE CHILD DOES NOT EXCEED THE
8 APPLICABLE LEVEL OF ELIGIBILITY UNDER THE MEDICAID OR CHIP PLAN;
9 TO SPECIFY THE PERIOD DURING WHICH A CHILD WILL BE PRESUMPTIVELY
10 ELIGIBLE; TO PROVIDE THAT A CHILD WILL BE ELIGIBLE TO RECEIVE ALL
11 COVERED BENEFITS AND SERVICES UNDER THE APPLICABLE PROGRAM FOR THE
12 PERIOD DURING WHICH THE CHILD IS PRESUMPTIVELY ELIGIBLE; TO
13 PROVIDE THAT IF A CHILD IS DETERMINED TO BE PRESUMPTIVELY
14 ELIGIBLE, THE CHILD'S PARENT, GUARDIAN OR CARETAKER RELATIVE MUST
15 SUBMIT A COMPLETED APPLICATION FOR ASSISTANCE UNDER THE APPLICABLE
16 PROGRAM NO LATER THAN THE LAST DAY OF THE MONTH FOLLOWING THE
17 MONTH IN WHICH PRESUMPTIVE ELIGIBILITY IS DETERMINED; TO REQUIRE
18 THE DIVISION OF MEDICAID AND THE CHIP ADMINISTERING AGENCY TO
19 PROVIDE QUALIFIED ENTITIES WITH SUCH FORMS AS ARE NECESSARY FOR AN
20 APPLICATION TO BE MADE ON BEHALF OF A CHILD FOR ELIGIBILITY FOR
21 THE APPLICABLE PROGRAM, AND TO MAKE THOSE APPLICATION FORMS AND
22 THE APPLICATION PROCESS ITSELF AS SIMPLE AS POSSIBLE; AND FOR
23 RELATED PURPOSES.

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

25 SECTION 1. The following shall be codified as Section
26 43-13-115.1, Mississippi Code of 1972:

27 43-13-115.1. (1) There will be presumptive eligibility
28 under this article for children under nineteen (19) years of age,
29 in accordance with the following provisions:

30 (a) A child will be deemed to be presumptively eligible
31 for covered benefits and services under this article if a
32 qualified entity as defined under federal law (42 USCS Section
33 1396r-1a) determines, on the basis of preliminary information,
34 that the family income of the child does not exceed the applicable
35 income level of eligibility under the state Medicaid plan.

36 (b) A child will be presumptively eligible under this
37 article from the date that the qualified entity determines that
38 the child is presumptively eligible until the earlier of either:

39 (i) The date on which a determination is made with
40 respect to the eligibility of the child for covered benefits and
41 services under this article, or

42 (ii) The last day of the month following the month
43 in which presumptive eligibility is determined, if an application
44 has not been filed on behalf of the child by that day.

45 (c) For the period during which a child is
46 presumptively eligible under this article, the child will be
47 eligible to receive all covered benefits and services under this
48 article.

49 (d) If a child is determined to be presumptively
50 eligible under this article, the child's parent, guardian or
51 caretaker relative must submit a completed application for
52 Medicaid assistance no later than the last day of the month
53 following the month in which presumptive eligibility is
54 determined. The qualified entity shall inform the parent,
55 guardian or caretaker relative of this requirement at the time the
56 qualified entity makes the determination of presumptive
57 eligibility.

58 (e) The qualified entity shall notify the Division of
59 Medicaid of the determination of presumptive eligibility within
60 five (5) working days after the date on which the determination is
61 made.

62 (f) The Division of Medicaid shall provide qualified
63 entities with such forms as are necessary for an application to be
64 made on behalf of a child for eligibility under this article. The
65 Division of Medicaid shall make those application forms and the
66 application process itself as simple as possible. The Division of
67 Medicaid shall coordinate its forms and application process with
68 those of the administering agency for the Children's Health

69 Insurance Program (Section 41-86-1 et seq.) so that they will be
70 as uniform as possible.

71 SECTION 2. Section 41-86-15, Mississippi Code of 1972, is
72 amended as follows:

73 41-86-15. (1) Persons eligible to receive covered benefits
74 under Sections 41-86-5 through 41-86-17 shall be low-income
75 children who meet the eligibility standards set forth in the plan.
76 Any person who is eligible for benefits under the Mississippi
77 Medicaid Law, Section 43-13-101 et seq., shall not be eligible to
78 receive benefits under Sections 41-86-5 through 41-86-17. A
79 person who is without insurance coverage at the time of
80 application for the program and who meets the other eligibility
81 criteria in the plan shall be eligible to receive covered benefits
82 under the program, if federal approval is obtained to allow
83 eligibility with no waiting period of being without insurance
84 coverage. If federal approval is not obtained for the preceding
85 provision, the Division of Medicaid shall seek federal approval to
86 allow eligibility after the shortest waiting period of being
87 without insurance coverage for which approval can be obtained.
88 After federal approval is obtained to allow eligibility after a
89 certain waiting period of being without insurance coverage, a
90 person who has been without insurance coverage for the approved
91 waiting period and who meets the other eligibility criteria in the
92 plan shall be eligible to receive covered benefits under the
93 program. If the plan includes any waiting period of being without
94 insurance coverage before eligibility, the State and School
95 Employees Health Insurance Management Board shall adopt
96 regulations to provide exceptions to the waiting period for
97 families who have lost insurance coverage for good cause or
98 through no fault of their own.

99 (2) The eligibility of children for covered benefits under
100 the program shall be determined annually by the same agency or

101 entity that determines eligibility under Section 43-13-115(9) and
102 shall cover twelve (12) continuous months under the program.

103 (3) There will be presumptive eligibility under this chapter
104 for children under nineteen (19) years of age, in accordance with
105 the following provisions:

106 (a) A child will be deemed to be presumptively eligible
107 for covered benefits and services under this chapter if a
108 qualified entity as defined under federal law (42 USCS Section
109 1396r-1a) determines, on the basis of preliminary information,
110 that the family income of the child does not exceed the applicable
111 income level of eligibility under the plan.

112 (b) A child will be presumptively eligible under this
113 chapter from the date that the qualified entity determines that
114 the child is presumptively eligible until the earlier of either:

115 (i) The date on which a determination is made with
116 respect to the eligibility of the child for covered benefits and
117 services under this chapter, or

118 (ii) The last day of the month following the month
119 in which presumptive eligibility is determined, if an application
120 has not been filed on behalf of the child by that day.

121 (c) For the period during which a child is
122 presumptively eligible under this chapter, the child will be
123 eligible to receive all covered benefits and services under this
124 chapter.

125 (d) If a child is determined to be presumptively
126 eligible under this chapter, the child's parent, guardian or
127 caretaker relative must submit a completed application for
128 assistance under the program no later than the last day of the
129 month following the month in which presumptive eligibility is
130 determined. The qualified entity shall inform the parent,
131 guardian or caretaker relative of this requirement at the time the
132 qualified entity makes the determination of presumptive
133 eligibility.

134 (e) The qualified entity shall notify the administering
135 agency of the determination of presumptive eligibility within five
136 (5) working days after the date on which the determination is
137 made.

138 (f) The administering agency shall provide qualified
139 entities with such forms as are necessary for an application to be
140 made on behalf of a child for eligibility under this chapter. The
141 administering agency shall make those application forms and the
142 application process itself as simple as possible. The
143 administering agency shall coordinate its forms and application
144 process with those of the Division of Medicaid so that they will
145 be as uniform as possible.

146 SECTION 3. This act shall take effect and be in force from
147 and after July 1, 2001.