

By: Representatives Scott (80th), Bailey,  
Banks, Blackmon, Evans, Middleton, Myers,  
Thomas, Thornton, Wallace, Watson

To: Public Health and  
Welfare;  
Appropriations

HOUSE BILL NO. 1392

1 AN ACT TO AMEND SECTION 43-13-115, MISSISSIPPI CODE OF 1972,  
2 TO EXPAND MEDICAID ELIGIBILITY TO ALL PERSONS UNDER THE AGE OF  
3 NINETEEN WITH FAMILY INCOME THAT DOES NOT EXCEED 200% OF THE  
4 POVERTY LEVEL; 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 \* \* \* who have not attained the age of  
96 nineteen (19), with family income that does not exceed two hundred  
97 percent (200%) of the nonfarm official poverty line;

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

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

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

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

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

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

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

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

130           (12) Individuals who are qualified Medicare beneficiaries

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

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

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

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

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

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

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

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

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

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

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

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

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

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

197 more than twelve (12) months and federal and state funds are  
198 available to provide such assistance.

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

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