

By: Representative Flaggs

To: Public Health and  
Welfare; Appropriations

HOUSE BILL NO. 41

1 AN ACT TO AMEND SECTION 41-86-15, MISSISSIPPI CODE OF 1972,  
2 TO PROVIDE THAT THE PARENTS OR CARETAKER RELATIVES OF CHILDREN AND  
3 PREGNANT WOMEN WHOSE FAMILY INCOME DOES NOT EXCEED 200% OF THE  
4 POVERTY LEVEL WILL BE ELIGIBLE TO RECEIVE BENEFITS UNDER THE CHIP  
5 PROGRAM IF A FEDERAL WAIVER IS OBTAINED THAT ALLOWS THOSE PERSONS  
6 TO BE ELIGIBLE AND ALLOWS FEDERAL MATCHING CHIP FUNDS TO BE USED  
7 TO PAY FOR COVERAGE OF THOSE PERSONS; TO DIRECT THE DIVISION OF  
8 MEDICAID TO APPLY FOR A FEDERAL WAIVER FOR THAT PURPOSE; AND FOR  
9 RELATED PURPOSES.

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

11 **SECTION 1.** Section 41-86-15, Mississippi Code of 1972, is  
12 amended as follows:

13 41-86-15. (1) Persons eligible to receive covered benefits  
14 under Sections 41-86-5 through 41-86-17 shall be low-income  
15 children who meet the eligibility standards set forth in the plan.  
16 In addition, the parents or caretaker relatives of low-income  
17 children, and pregnant women whose family income does not exceed  
18 two hundred percent (200%) of the federal poverty level, will be  
19 eligible to receive covered benefits under Sections 41-86-5  
20 through 41-86-17 if a federal waiver is obtained that allows those  
21 persons to be eligible for covered benefits and allows federal  
22 matching funds under Title XXI of the federal Social Security Act,  
23 as amended, to be used to pay for coverage of those persons.

24 The Division of Medicaid shall apply to the United States  
25 Secretary of Health and Human Services for a federal waiver of the  
26 applicable provisions of Title XXI and any other applicable  
27 provisions of federal law as necessary to allow the parents or  
28 caretaker relatives of low-income children, and pregnant women  
29 whose family income does not exceed two hundred percent (200%) of  
30 the federal poverty level, to be eligible to receive covered



31 benefits under Sections 41-86-5 through 41-86-17 and to allow  
32 Title XXI federal matching funds to be used to pay for coverage of  
33 those persons. After the date that the Division of Medicaid  
34 obtains that federal waiver, then the parents or caretaker  
35 relatives of low-income children, and pregnant women whose family  
36 income does not exceed two hundred percent (200%) of the federal  
37 poverty level, will be eligible to receive covered benefits under  
38 Sections 41-86-5 through 41-86-17.

39       (2) Any person who is eligible for benefits under the  
40 Mississippi Medicaid Law, Section 43-13-101 et seq., shall not be  
41 eligible to receive benefits under Sections 41-86-5 through  
42 41-86-17.

43       (3) A person who is without insurance coverage at the time  
44 of application for the program and who meets the other eligibility  
45 criteria in the plan shall be eligible to receive covered benefits  
46 under the program \* \* \*.

47       (4) The eligibility of persons for covered benefits under  
48 the program shall be determined annually by the same agency or  
49 entity that determines eligibility under Section 43-13-115(9) and  
50 shall cover twelve (12) continuous months under the program.

51       (5) There will be presumptive eligibility under this chapter  
52 for children under nineteen (19) years of age, in accordance with  
53 the following provisions:

54               (a) A child will be deemed to be presumptively eligible  
55 for covered benefits and services under this chapter if a  
56 qualified entity as defined under federal law (42 USCS Section  
57 1396r-1a) determines, on the basis of preliminary information,  
58 that the family income of the child does not exceed the applicable  
59 income level of eligibility under the plan.

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

63                       (i) The date on which a determination is made with



64 respect to the eligibility of the child for covered benefits and  
65 services under this chapter, or

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

69 (c) For the period during which a child is  
70 presumptively eligible under this chapter, the child will be  
71 eligible to receive all covered benefits and services under this  
72 chapter.

73 (d) If a child is determined to be presumptively  
74 eligible under this chapter, the child's parent, guardian or  
75 caretaker relative must submit a completed application for  
76 assistance under the program no later than the last day of the  
77 month following the month in which presumptive eligibility is  
78 determined. The qualified entity shall inform the parent,  
79 guardian or caretaker relative of this requirement at the time the  
80 qualified entity makes the determination of presumptive  
81 eligibility.

82 (e) The qualified entity shall notify the Division of  
83 Medicaid of the determination of presumptive eligibility within  
84 five (5) working days after the date on which the determination is  
85 made.

86 (f) The Division of Medicaid shall provide qualified  
87 entities with such forms as are necessary for an application to be  
88 made on behalf of a child for eligibility under this chapter. The  
89 Division of Medicaid shall make those application forms and the  
90 application process itself as simple as possible.

91 **SECTION 2.** This act shall take effect and be in force from  
92 and after July 1, 2002.

