

MISSISSIPPI DIVISION OF MEDICAID

Eligibility Policy and Procedures Manual

100.03.04A RELEASE OF INFORMATION WITHOUT CLIENT CONSENT

As previously indicated, the Division of Medicaid has established the following criteria for release and use of eligibility and financial information about applicants and recipients. Except as provided below, no information regarding applicants or recipients may be released without consent unless prior approval of the Executive Director or the Deputy Administrator of the Division of Medicaid is obtained.

1. Disclosure to Other Agencies

Information concerning Medicaid applicants or recipients is subject to disclosure to agencies authorized under Titles IV-A (TANF), IV-B (Child and Family Services), IV-D (Child Support), XX (Social Services) XVI (SSI) of the Social Security Act and other agencies which are Federal or Federally assisted programs and provide assistance, in cash or in-kind, or services, directly to individuals on the basis of need, pursuant to appropriately executed data exchange agreements and other cooperative agreements between the Division of Medicaid and the applicable agency. Access is restricted to those persons or agency representatives who are subject to standards of confidentiality that are comparable to those of the Division of Medicaid.

Some agencies which have standards of confidentiality comparable to those of Medicaid and which provide assistance or services to applicants and recipients, and with whom information is exchanged for the purpose of administration of the Medicaid Program are listed below.

- Department of Human Services;
- Social Security Administration and District Offices;
- Mississippi State Department of Health and County Health Departments, only if they are a provider of Medicaid services for which the information is requested;
- State Department of Mental Health and Regional Mental Health Centers, only if they are a provider of medical services for which the information is requested;
- State Mental Hospitals and general hospitals, the Social Service Department and the reimbursement offices for providers, only as to services each provider rendered to a specific Medicaid recipient;
- Veteran's Administration, only if they are a provider of services and then only for those recipients for whom they provided the service or to confirm benefits.

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- Medicaid program staff in other states, when a client moves or when there is a question of dual participation or to verify the status of Medicaid in MS for an applicant in the other state.

The release of information is based on a request from the other agency and must relate to the function of the Division of Medicaid's programs and the function of the agency requesting the information. When an agency makes a request for information which that agency normally would be ascertaining for itself and which is not in behalf of the applicant or recipient, the request will be denied. Lists of information on applicants or recipients are not released to other agencies unless the release is specified in an interagency agreement.

2. Disclosure to Division of Medicaid's Fiscal Agent

Information concerning applicants and recipients may also be disclosed to the Division of Medicaid's fiscal agent for purposes of eligibility verification, claims processing and claims payment pursuant to the contract between the Division of Medicaid and the fiscal agent which provides that the fiscal agent shall be bound by the same standards of confidentiality as the Division of Medicaid.

3. Disclosure Related to Third Party Liability

Information necessary to identify third party liability (TPL) and to pursue reimbursement of Medicaid lien amounts from legally liable third parties may be made available to the recipient upon written request, to the recipient's insurance carrier upon a release of information signed by the recipient or to providers of medical services for the recipient. Any other release for TPL purposes should be cleared through the Legal Unit of the Division of Medicaid. (See NOTE below for the procedure regional offices will follow in obtaining clearance from Legal)

4. Disclosure to Prosecuting Attorneys

Information shall be provided to county and district attorneys, the US prosecuting attorney, the Office of Inspector General (OIG), Medicaid Fraud Control Unit of the Attorney General's Office or other investigative boards and agencies duly authorized by state and federal law related to abuse, suspected fraud or fraudulent receipt of Medicaid and to obtaining or enforcing medical support. **NOTE:** Before releasing any case record information to a county, district or US prosecuting attorney, the regional office will notify the Bureau of Enrollment and a manager will obtain clearance from the Legal Unit of the Division of Medicaid on the release.

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5. Disclosure of Subpoenaed Information

Subpoenas for recipient or applicant information may be answered as directed by the Legal Unit of the Division of Medicaid only if the recipient or applicant gives written permission for the information to be released or upon court order. The regional office will notify the Bureau of Enrollment immediately upon receipt of a subpoena and a manager will contact the Legal Unit for clearance on answering the subpoena.

6. Disclosure to Providers

Eligibility and availability of benefits may be verified for Medicaid or CHIP providers.

7. Release of Information in an Emergency Situation

If release of information is deemed necessary by the agency due to an emergency situation and time does not permit obtaining written consent before the release, the agency must notify the family or individual immediately after supplying the information.

Requests for Information from Non-Custodial Parents or Relatives

Information must not be released to a child's non-custodial parent or other relative without a court order that has been cleared by state office. When a non-custodial parent/relative is seeking information and presents a court order, the regional office will notify the Bureau of Enrollment. A manager will contact Legal for clearance.