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102.03 STATE RESIDENCY

Medicaid must be available to eligible residents of the state. A resident is someone who voluntarily lives in Mississippi with the intention to remain permanently or for an indefinite period of time, or someone living in Mississippi, having entered with a job commitment or for the purpose of seeking employment, whether or not the individual is currently employed.

102.03.01 RESIDENCY REQUIREMENTS

The individual must live in Mississippi and meet all other eligibility requirements in order to receive Medicaid benefits. A spouse and children living in the same household with the individual are also considered MS residents.

No Permanent MS Address

An individual, including someone with no permanent address, is a resident of MS if he lives in the state and is capable of stating and does state intent to remain here permanently or for an indefinite period of time. Indefinite indicates the individual does not have a date in mind when he will no longer be a resident of the state.

Residing in Another State

An individual who claims to be a resident of MS, but is residing in another state, must show an established address or place of residence in MS before he can be considered temporarily absent from MS for Medicaid purposes.

Incapable of Stating Intent

An individual who is incapable of stating intent to reside is a resident of the state in which he is physically located. No statement of intent is needed. Refer to Section 102.03.07.

Stating Intent to Reside

A person is considered capable of stating intent to reside unless he has an IQ of 49 or less or has a mental age of seven or less based on tests acceptable to the Department of Education; or is judged legally incompetent; or is found incapable of indicating intent based on medical documentation obtained from a physician, psychologist or other individual licensed by the state in the field of mental retardation.

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102.03.02 SPECIFIC RESIDENCY PROHIBITIONS

An individual cannot be denied Medicaid based on residency for the following reasons:

- The individual has not resided in MS for a specified period of time. There is no durational requirement for residency.
- The individual is temporarily absent from MS and intends to return when the purpose of the absence has been accomplished. However, if another state has accepted him as a resident for Medicaid purposes, the individual cannot be considered a MS resident.

102.03.03 TEMPORARY ABSENCE FROM THE STATE

The recipient is responsible for reporting a temporary absence from Mississippi and for giving information on his purpose, plans and dates of departure and return. The recipient's eligibility must be reviewed every three (3) months to determine the recipient's continued intent to reside in MS.

No limit is place on the length of the out-of-state visit.; however, if it is determined that an individual has left the state with no declared intention to return, the individual will be deemed to have given up MS residency and his eligibility will be terminated. Refer to 102.03.10 for further discussion.

102.03.04 INDIVIDUALS RECEIVING A STATE SUPPLEMENTARY PAYMENT

An individual receiving a state supplementary payment (optional or mandatory), such as state adoption assistance or state foster care payment, is a resident of the state making the supplementary payment. However, if the state making the payment is a member of the Interstate Compact on Adoption and Medical Assistance (ICAMA) and an agreement is in effect, the child is a resident of the state in which he is living.

Mississippi is a member of ICAMA; however, Medicaid eligibility through the Mississippi Department of Human Services (MDHS) is not automatic. The placing state must coordinate with MDHS to authorize Medicaid eligibility through an ICAMA agreement for the child to be covered through MDHS.

If the family files an application for the child with the regional office, supplementary payments made by another state must be counted as income. In addition, parental income must be included along with the income of any siblings included in the application, if applicable.

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102.03.05 INDIVIDUALS RECEIVING A TITLE IV-E PAYMENT

An individual, who is receiving a Title IV-E foster care or adoption assistance payment, is a resident of the state in which the child is currently residing.

When a child receiving a Title IV-E payment moves to MS from another state, Medicaid eligibility is possible through the Mississippi Department of Human Services (MDHS); however, it is not automatic. The placing state must coordinate with MDHS for Medicaid eligibility through the foster care or adoption assistance programs to be authorized by MDHS.

If the family files an application for the child with the regional office, parental income must be included along with the income of any siblings included in the application, if applicable. Title IV-E foster care and adoption assistance payments are federal payments which are disregarded income in determining Medicaid and CHIP eligibility.

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102.03.06 DETERMINATION OF RESIDENCY (UNDER AGE 21)

Use the instructions in this section to determine residency for persons under age 21:

Not in an Institution or Under Parental Care and Control

If a non-institutionalized individual under age 21 is emancipated from his/her parents or is married and capable of stating intent, the state of residence is where the individual is living with the intent to remain permanently or for an indefinite period.

Blind or Disabled Not in an Institution

An individual, under age 21 and in a private living arrangement, whose eligibility is based on blindness or disability, is a resident of the state where the individual is actually living.

Others Under 21 Not Living in an Institution

The state of residence is the state in which the parent(s) resides if the individual is still considered a minor.

Under 21, In an Institution and Under Parental Care and Control

The state of residence is:

- The parent's state of residence at the time of placement; however, if a legal guardian has been appointed and parental rights have been terminated, the state of residence of the legal guardian is used instead of the parents; or.
- The current state of residence of the parent who files the application, if the individual is residing in an institution in that state. However, if a legal guardian has been appointed and parental rights have been terminated, the state of residence of the guardian is used instead of the parents; or
- The state of residence of the individual or party that files an application if the individual:
 - (1) Has been abandoned by his parent(s),
 - (2) Does not have a legal guardian and
 - (3) Is residing in an institution in that state.

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102.03.07 DETERMINATION OF RESIDENCY (AGE 21 AND OLDER)

Use the instructions in this section to determine residency for individuals age 21 and older.

Not in an Institution

The state of residence is where the individual is living with the intent to remain there permanently or for an indefinite period, or the state where the individual is living because the individual had a job commitment or is seeking employment, either currently employed or not. If the individual is incapable of stating intent, the state of residence is where the individual is living.

In an Institution and Became Incapable of Stating Intent before Age 21

The state of residence is:

- The state of residence of the parent who is applying for Medicaid on the individual's behalf. If a legal guardian has been appointed and parental rights have been terminated, the state of residence of the legal guardian is used instead of the parent.
- The state of residence of the parent at the time of placement. If a legal guardian has been appointed and parental rights have been terminated, the state of residence of the guardian is used instead of the parents.
- The current state of residence of the parent or legal guardian who files the application, if the individual is residing in an institution in that state. If a legal guardian has been appointed and parental rights have been terminated, the state of residence of the guardian is used instead of the parents.
- The state of residence of the individual or party that files an application if the individual:
 - (1) has been abandoned by his parent(s),
 - (2) does not have a legal guardian and
 - (3) is residing in an institution in that state.

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In an Institution and Became Incapable of Stating Intent at or After 21

The state of residence is where the individual is physically present, except in instances where another state made the placement.

Any Other Individual in an Institution

The state of residence is where the individual is living permanently or for an indefinite period of time.

NOTE: When a competent individual leaves the facility in which he was placed, his residence becomes the state where he is physically located.

102.03.08 STATE PLACEMENT IN AN OUT-OF-STATE INSTITUTION

If a state agency arranges for an individual to be placed in an institution in another state, the state arranging or making the placement is the individual's state of residence. For purposes of state placement, the term "institution" also includes licensed foster care homes that provide food, shelter, and supportive services for one or more individuals unrelated to the proprietor.

The following actions are not considered state placement:

- Providing basic information to individuals about another state's Medicaid program and information about healthcare services and facilities in another state or
- Providing information regarding institutions in another state if the individual is capable of indicating intent and decides to move.

102.03.09 OUT-OF-STATE PLACEMENTS

There are two circumstances under which Mississippi will pay for placement in an out-of-state nursing facility.

(1) If the agency has a part in the placement or otherwise approves or authorizes an out-of-state placement, regional offices will be notified on an individual case basis.

(2) When a MS resident moves to a nursing facility in another state, only the partial month of the move can be paid if the facility enrolls as a MS provider. The individual is considered a resident of the new state effective with the first full month of residence and has to qualify for Medicaid eligibility and vendor payment in the new state.

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OUT-OF-STATE PLACEMENTS (Continued)

If an individual moves to Mississippi, he would apply for benefits here and meet all eligibility requirements. If he is transferred directly from one medical facility to another, the time spent in the out-of-state facility can be used to meet the 30 consecutive day requirement.

102.03.10 RESIDENCY ISSUES

Termination of Benefits in the Former State of Residence

An individual coming to MS from another state may be considered a resident of MS in the month of the move, provided the individual intends to reside in MS. However, individuals are not entitled to duplication of Medicaid services from both the former state and Mississippi. When a Medicaid recipient moves from one state to another, the former state initiates the change effective the first month in which it can administratively terminate the case in accordance with timely and adequate notice regulations.

Request for MS Medicaid Prior to Termination in Former State

There will be occasions when a recipient requests that eligibility in Mississippi begin prior to the effective date of closure in the former state. Neither state can deny coverage because of administrative requirements or time constraints needed to take action to terminate benefits in the former state.

However, when an individual is no longer a resident of a state, that state is not required to pay for any services incurred in Mississippi. If the former state will pay out of state claims, Mississippi cannot approve eligibility until the former state has terminated services. If the former state will not pay out of state claims, duplication of services is not an issue and Medicaid eligibility in Mississippi can potentially begin with the month of the move.

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102.03.11 OUT-OF-STATE RECIPIENT MOVING TO MS

If an applicant who was receiving Medicaid in another state before moving to MS does not have verification of termination of benefits in the other state, the Medicaid Specialist is responsible for contacting the previous state to:

- Notify the state of the individual's move to MS;
- Request that eligibility in the other state be terminated so eligibility for MS Medicaid can be determined; and
- Follow up with the out-of-state agency until a response is received.

The Medicaid Specialist will include any letters/documents or telephone contact information with the out-of-state agency in the case record to verify the eligibility status of the applicant.

MS Coverage Requested Prior to Effective Date of Closure in Other State

When the individual requests coverage in MS prior to the effective date of closure in the former state, the Medicaid Specialist must determine if the other state will pay out of state claims. If the former state will **not** pay out-of-state claims, MS Medicaid benefits can be authorized beginning with the month of the move, if the applicant is otherwise eligible.

If the former state **will** pay out of state claims, MS Medicaid will not be authorized even if a MS provider refuses to file the client's claims with the other state. If the former state will pay for partial months or any subsequent months for nursing home recipients, eligibility for MS Medicaid cannot begin until the former state specifies their payment(s) will stop.

The case record must be documented to support the action taken.

NOTE: When two or more states cannot agree on residence, the state where the individual is physically located is his residence. Coordination efforts should ensure that an eligible person does not experience a discontinuation of benefits.

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102.03.12 MS RECIPIENT MOVING TO ANOTHER STATE

A Mississippi recipient who moves to another state with the intent to remain is no longer eligible to receive benefits from MS. Changes in residency may be received from the recipient, head of household, authorized representative, out-of-state agencies, post office, providers and other community sources.

The type of action needed in response to the report depends in large part upon the source of the information. Follow the procedures below to take action on the change.

Procedures When a Mississippi Recipient has Moved from the State

- Change Reported by Recipient or Representative

When the loss of residency is reported by the recipient, the head of household, responsible adult or authorized representative, the information is verified.

- Change Reported by Out of State Agency

When an out-of-state agency reports a MS recipient has applied for benefits in that state, loss of MS residency is verified.

- Taking Action on Verified Change

The specialist will document the contact and obtain the new address. When multiple family members are involved, the specialist must determine whether all members have left the state. Action will be taken to terminate the eligibility of the recipients who are no longer state residents.

- The closure notice will be sent to the primary person for the case at the appropriate address.
- A child who remains in MS has continuous eligibility and will not be terminated when he moves from one household to another within the state.
- If an adult recipient continues to reside in MS, a review may be needed to determine the adult's continued eligibility apart from the non-resident spouse and/or children.

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Procedures When a Mississippi Recipient has Moved from the State (Continued)

- Unverified Change Reported by Other Sources

When loss of residency is reported by other sources, the specialist must first verify the accuracy of the information prior to taking action on the case:

- Attempt a telephone contact using the telephone number in the case record to verify the information received.
- If telephone contact cannot be made, send a 307 to the address on file in the record and to the out-of-state address, if one is known.
- If it is subsequently verified some or all recipients have moved from the state, take action to terminate eligibility for the appropriate individuals and send the termination notice to the primary person for the case at the appropriate address.
 - A child who remains in MS has continuous eligibility and will not be terminated when he moves from one household to another within the state.
 - If an adult recipient continues to reside in MS, a review may be needed to determine the adult's continued eligibility apart from the non-resident spouse and/or children
- If there is no response to the 307 and the information cannot be verified or reasonable attempts to locate the household have failed, take action to close the case.
 - The closure notice should be sent to the primary person for the case at the in-state address and the out-of-state address, if one is known.

102.03.13 MIGRANT/SEASONAL FARM WORKERS

An individual involved in work of a transient nature or someone who goes to another state seeking employment as a migrant or seasonal worker can choose to either:

- Establish residence in the state where he is employed or seeking employment, or
- Claim one state as his domicile or state of residence.

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102.03.14 HOMELESS INDIVIDUALS

If otherwise eligible, a person who is homeless or who frequently moves from one address to another can qualify for Medicaid. Medicaid cards must be available to individuals with no fixed home or mailing address.

Medicaid cards for homeless individuals can be mailed to a specific shelter, facility or the Regional Medicaid Office based upon the mutual agreement of the parties. The recipient should be advised of the time and place the card will be available.

102.03.15 VERIFICATION OF STATE RESIDENCY

State residency is generally verified by self-declaration. Only if the self-declaration is questionable, should documents such as those listed below be used to verify residency (Refer to 102.01.01):

- Current driver's license
- State ID card
- Mortgage or rent receipts
- Utility bills
- Employer's statement