

State: Mississippi

Citation	Condition or Requirement
	<p>3. Place a check mark to affirm state compliance.</p> <p><u>X</u> The state assures that beneficiary requests for disenrollment (with and without cause) will be permitted in accordance with 42 CFR § 438.56(c).</p>
	<p>4. Describe any additional circumstances of “cause” for disenrollment (if any).</p> <p>A beneficiary may request to disenroll from the CCO “with cause” if:</p> <ul style="list-style-type: none">• The CCO, because of moral or religious objections, does not offer the service the beneficiary seeks,• The beneficiary needs related services to be performed at the same time, but not all related services are available within the network; or, the beneficiary’s primary care provider or another provider determines receiving the services separately would subject the beneficiary to unnecessary risk,• Poor quality of care,• There is a lack of access to services covered under the CCO, or• There is a lack of access to providers experienced in dealing with the beneficiary’s health care needs.
	<p>K. Information requirements for beneficiaries</p> <p>Place a check mark to affirm state compliance.</p> <p><u>X</u> The state assures that its state plan program is in compliance with 42 CFR § 42 438.10(i) for information requirements specific to MCOs and PCCM programs operated under section 1932(a)(1)(A)(i) state plan amendments.</p>
1932(a)(5) CFR § 438.50 42 CFR § 438.10	
1932(a)(5)(D) 1905(t)	<p>L. List all services that are excluded for each model (MCO & PCCM)</p> <p>Excluded services include:</p> <ul style="list-style-type: none">• Long-term care services, including nursing facility and ICF/IID,• Any waiver services, and• Hemophilia services.
