

**State of Mississippi**

**REQUIREMENTS FOR THIRD PARTY LIABILITY IDENTIFYING LIABLE RESOURCES**

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42 C.F.R. § 433.138(f)

The designated state agency, Department of Human Services (DHS), performs the required data exchanges specified in Section 433.138(d)(1) during application period and at least on a quarterly basis. The exception to this time frame is the institutionalized individuals for which exchanges of data are conducted as specified in Sec. 435.948(d).

Data exchange agreements have been executed with Workers' Compensation Commission and the Department of Public Safety.

The Medicaid Management Information System (MMIS) identifies on a weekly basis those paid claims that contain diagnosis codes 800-999 (ICD10CM) for the purpose of identifying the legal liabilities of third parties.

42 C.F.R. §§ 433.138(e), 433.138(g)(1)(i), 433.138(g)(1)(ii) and (2)(ii)

The Division of Medicaid receives health insurance information from DHS who performs the State wage information collection agency (SWICA) and Social Security Administration (SSA) wage and earnings files data exchanges. DHS maintains a copy of the information in the eligibility file and the information to the Division of Medicaid. The Division of Medicaid completes any necessary research, enters the data into the MMIS Third Party Liability (TPL) files within forty-five (45) days.

The Division of Medicaid receives insurance information from the Department of Human Services (DHS), the SSA, and the Medicaid Regional Offices from application and redetermination procedures for Medicaid eligibility. The sources of eligibility maintain the third party information in the eligibility case file and send the information to the Division of Medicaid as part of the agreement with DHS. This information is uploaded into the MMIS TPL files.

42 C.F.R. § 433.138(q)(2)(i)

The required data exchange takes place weekly with the Mississippi Workers' Compensation Commission. In order to incorporate TPL data within sixty (60) days as specified in section 433.139(g)(2)(i), prior to producing the final report of "hits," the MMIS cross references the data received back from worker's compensation with the trauma code claims which appeared on the Trauma Code edit reports to avoid duplication of effort. Inquiries containing Medicaid's subrogation rights to insurance companies, employers or attorneys are generated by the MMIS. Upon receipt of response, a TPL recovery case is established.

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42 C.F.R. § 433.138(g) (3) (i) and (iii)

A required data exchange takes place with the Department of Public Safety (DPS) annually. A questionnaire will be sent to the beneficiaries found in data match. Upon receipt of a response indicating a liable third party, a recovery case is established.

42 C.F.R. § 433.138(g)(4)(i) through (iii)

The MMIS identifies on a weekly basis those paid claims that contain diagnosis codes 800-999 (ICD-10-CM.) An accident questionnaire is system generated and mailed to each recipient whose accumulated monthly paid amount equals or exceeds \$250. Responses received by the Division of Medicaid that identify a liable third party, attorney, or insurance carrier require a notice and inquiry to that party advising of Medicaid's subrogation statute (section 43-13-125 of the Mississippi Code of 1972, annotated as amended) within 30 days. In order to incorporate third party information within 50 days, the sources of eligibility are notified to include third party information in the eligibility case record. The Division of Medicaid will make any necessary updates to the MMIS files and maintain related hard copy files. A detailed amount of the state's subrogation claim is provided to the third party upon request and updated immediately prior to settlement. Should Medicaid's potential recovery be less than the total subrogation interest, the case is referred to the staff attorney for a comprise determination (Section 43-13-125(2)(b), Mississippi Code of 1972, annotated amended). Additionally, the right of subrogation by the state to the recipient's right to recovery shall be subject to ordinary and reasonable attorney fees (Section 43-13-125(2)(a), Mississippi Code of 1972, annotated as amended).

42 C.F.R. § 433.138(e)

Priority for follow-up will be given to the trauma codes, which yield the highest recovery as evidenced by the quarterly report produced by the DOM TPL Unit in-house computer program.