State of Mississippi

4.31

<u>Citation</u>
42 CFR § 455.104455.107
1902(a) (38)
1128{b) (9)

Disclosure of Information by Providers and Fiscal Agent

The Medicaid agency has established procedures for the disclosure of information by providers and fiscal agents as specified in 42 CFR 455.1 04 through 455.1 07 and sections 1128 (b) (9) and 1902 (a) (38) of the Act.

Upon request by the State, a provider that is not enrolled in Medicare but is initially enrolling in Medicaid or CHIP (or is revalidating its Medicaid or CHIP enrollment information) must disclose any and all affiliations that it or any of its owning or managing employees or organizations (consistent with the terms "person with an ownership or control interest" and "managing employee" as defined in § 455.101) has or, within the previous 5 years, had with a currently or formerly enrolled Medicare, Medicaid, or CHIP provider or supplier that has a disclosable event (as defined in § 455.101). The State will request such disclosures when it, in consultation with CMS, has determined that the initially enrolling or revalidating provider may have at least one such affiliation.

42 CFR §§ 435.940-435.960; QI Program Supplemental Funding Act of 2008, Pub. L. No. 110-379, 122 Stat. 4075

4.32 <u>Income and Eligibility Verification System</u>

- (a) The Medicaid agency has established a system for income and eligibility verification in accordance with the requirements of 42 CFR 435.940 through 435.960.(Section 1137 of the Act and 42 CFR 435.940 through 435.960.)
- (b) Attachment 4.32-A describes, in accordance with 42 CFR 435.948 (a) (6). the information that will be requested in order to verify eligibility or the correct payment amount and the agencies and the State(s) from which that information will be requested.
- (c) The State has an eligibility determination system that provides for data matching through the Public Assistance Reporting Information System (PARIS). or any successor system. including matching with medical assistance programs operated by other States. The information that is requested will be exchanged with States and other entities legally entitled to verify Title XIX applicants and individuals eligible for covered Title XIX services consistent with applicable PARIS Agreements.

TN No. <u>24-0011</u> Supersedes TN No. <u>14-021</u>

Date Received:
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State of Mississippi

4.31

<u>Citation</u>
42 CFR § 455.104455.10<u>76</u>
1902(a) (38)
1128{b) (9)

Disclosure of Information by Providers and Fiscal Agent

The Medicaid agency has established procedures for the disclosure of information by providers and fiscal agents as specified in 42 CFR 455.1 04 through 455.1 076 and sections 1128 (b) (9) and 1902 (a) (38) of the Act.

Upon request by the State, a provider that is not enrolled in Medicare but is initially enrolling in Medicaid or CHIP (or is revalidating its Medicaid or CHIP enrollment information) must disclose any and all affiliations that it or any of its owning or managing employees or organizations (consistent with the terms "person with an ownership or control interest" and "managing employee" as defined in § 455.101) has or, within the previous 5 years, had with a currently or formerly enrolled Medicare, Medicaid, or CHIP provider or supplier that has a disclosable event (as defined in § 455.101). The State will request such disclosures when it, in consultation with CMS, has determined that the initially enrolling or revalidating provider may have at least one such affiliation.

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TN No. <u>14-021</u>24-0011

Supersedes

TN No. <u>88-1</u>14-021 _

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