

# MISSISSIPPI DIVISION OF MEDICAID

## Eligibility Policy and Procedures Manual

### **When to Begin Processing a Review**

It is permissible to begin the review process as early as the 10<sup>th</sup> month of a 12-month eligibility period or no more than 2 months early. However to ensure timeliness, the review process must begin no later than the month prior to the review month. This means for a case with a review due date of August, the redetermination process may begin as early as June, but must begin no later than July.

### **101.11.04 TIMELY AUTHORIZATION**

The approval of a Medicaid redetermination is timely if it is authorized by the last day of the month in which the review is due. If Medicaid benefits are terminated, the action must be authorized no later than the adverse action deadline in the review month to be effective the following month. A CHIP approval is timely if it is authorized by the CHIP deadline in the month in which the review is due. A CHIP termination must be authorized no later than the adverse action deadline in the review month to be effective the following month.

When a redetermination closure is not authorized by the adverse action deadline in the review month, the case or individual is out of certification. However, an improper payment report is not required for the untimely closure. Ineligibility must exist for another reason for an improper payment report to be prepared.

### **Adverse Action Deadlines**

In MEDS, the adverse action deadline is 12 days from the end of the month. Action must be taken by the adverse action deadline in the review month if coverage is to be terminated at the end of the review month.

In MEDSX if the Medicaid or CHIP termination action is authorized by the 19<sup>th</sup> of the month in which the review is due, the termination is effective at the end of the review month. An exception is February when the adverse action deadline in MEDSX is the 17<sup>th</sup>.

**NOTE:** Adults are not guaranteed 12 months of coverage. If termination is appropriate, the specialist will take action to terminate an adult's eligibility for the earliest possible month. However, coverage must be terminated no later than the adverse action deadline in the last month of the review period for the redetermination closure to be timely.