

Eligibility Hearings

For Cases Involving Aged, Blind,
or Disabled Persons



What are my rights before, during, and after a hearing?

You, or the person you choose to represent you, have the following rights:

- ☒ You have the right to read everything in your case record which is kept on file at your Medicaid Regional Office. The case record has all the documents which relate to your Medicaid eligibility. You may look at this file anytime during the hearing process.
- ☒ You have the right to have a lawyer help you during the hearing.
- ☒ You have the right to have witnesses testify for you.
- ☒ You have the right to present evidence, which may help your case, at the hearing and discuss the facts about your situation.
- ☒ You have the right to explain your case without any interference.
- ☒ You have the right to question or refute any testimony or evidence and to question any witness.

The Office of the Governor Division of Medicaid complies with all state and federal policies which prohibit discrimination on the basis of race, age, sex, national origin, handicap or disability-as defined through the Americans for Disabilities Act of 1990.

What is an Eligibility Hearing?

An eligibility hearing is a legal process that you may ask for if you do not agree with a decision that has been made about your Medicaid eligibility.

How do I ask for a Eligibility Hearing?

After you have been mailed a notice telling you of any action(s) taken on your Medicaid case, you will have 30 days in which to ask for a hearing. You may do this by either writing your Medicaid Regional Office, the Medicaid State office, or by completing the "Hearing Request" form, available in your Medicaid Regional Office.

If you are already getting Medicaid and you ask for a hearing within 10 days after getting the notice, your Medicaid will not stop until your case has been decided; however, if the agency's action is upheld by the hearing decision, the Division of Medicaid has the right to initiate action for recovering benefits you receive during the hearing process.

All telephone requests must be put in writing before they can be processed.

You can request either a local hearing or a state hearing.

Local and/or state level hearings are held by telephone unless, at the hearing officer's discretion, an in-person hearing is deemed necessary.



What is the difference between local hearings and state hearings?

Local Hearings

A local hearing is an informal review of your case, usually conducted by the Supervisor in a Medicaid Regional Office. (If your case was originally processed by the Supervisor, the hearing will be handled by someone else in the Medicaid office.)

At a local hearing you will be able to present additional and/or new information that could affect your Medicaid case, ask questions about actions taken on your case, and have the eligibility rules fully explained to you. While you do not have to, you may have a friend, relative, or lawyer help you.

Once the local hearing has been held, the Regional Office Supervisor or other staff person who heard the case will make a decision based on the facts talked about during the hearing. You will be notified in writing of this decision. If you do not agree with the local hearing decision, you can then request a state hearing.

The exception to requesting a local hearing is when the issue involves either:

- ☒ disability or blindness denial or termination, or
- ☒ a level of care denial or termination for a disabled child living at home.

These types of hearings must be held as state level hearings since both involve medical decisions.

State Hearings

A state hearing is very much like a local hearing except that your case will be reviewed by a State Hearing Officer from the Medicaid State Office in Jackson who has not been involved with your case before the review, and the hearing will be recorded. After the state hearing has been held, the Medicaid Director will make a decision based on the facts of the case and any recommendations that have been made by the State Hearing Officer. The decision made by the Medicaid Director is final within the Division of Medicaid. You cannot ask for any more agency hearings on the same issue; however, you can seek a judicial review in a court of appropriate jurisdiction.

How will I know when my hearing has been scheduled?

After you have asked for a hearing, you will get a letter in the mail telling you the time and date of the hearing. If you, or the person you choose to represent you, are not able to talk on that date, you should call the Medicaid office as soon as possible and set another date.

The Division of Medicaid has 90 days (approximately three months) to make a decision about your case.

Regional Offices

If you have questions about eligibility or if you want to apply for Medicaid, call toll-free 1-800-421-2408 or contact your nearest Medicaid office:

Brandon 601-825-0477
Brookhaven 601-835-2020
Canton 601-859-3230
Clarksdale 662-627-1493
Cleveland 662-843-7753
Columbia 601-731-2271
Columbus 662-329-2190
Corinth 662-286-8091
Greenville 662-332-9370
Greenwood 662-455-1053

Grenada 662-226-4406
Gulfport 228-863-3328
Hattiesburg 601-264-5386
Holly Springs 662-252-3439
Jackson 601-961- 4361
Kosciusko 662-289-4477
Laurel 601-425-3175
McComb 601-249-2071
Meridian 601- 483-9944
Natchez 601-445-4971

New Albany 662-534-0441
Newton 601-683-2581
Pascagoula 228-762-9591
Philadelphia 601-656-3131
Picayune 601-798-0831
Senatobia 662-562-0147
Starkville 662-323-3688
Tupelo 662-844-5304
Vicksburg 601-638-6137
Yazoo City 662-746-2309