

MISSISSIPPI DIVISION OF MEDICAID

Eligibility Policy and Procedures Manual

102.08.04A UTILIZATION OF OTHER BENEFITS

❖ Aged, Blind and Disabled Programs

If the ABD client has not provided the verification that the application has been filed or proof of ineligibility within the 30 days, the DOM-309 will be issued allowing 10 additional days (plus 2 days mail time) to provide the information. If the client still has not provided either evidence that an application has been filed or proof that the client is not eligible, the specialist will contact the agency in question to attempt to determine whether an application has been filed and the usual processing time involved for the application in question.

Action When Application Has Been Filed

If the application for other benefits has been filed, eligibility for Medicaid can continue or a Medicaid application may be approved while the application for other benefits is in process. A tickler will be set for the end of the usual processing time for the other benefits so the specialist can contact the individual or the other agency to determine the final decision.

The regional office must keep a control in this manner to make a determination at any point in time that the individual has taken all appropriate steps in pursuing the claim for other benefits.

Action When Final Decision is Reached

When the regional office is notified of the final decision, the record must be documented with the outcome of the application. A copy of the decision letter or other verification must be filed in the case record. If the specialist contacted the other agency to determine the final decision, the case should be documented appropriately.

The specialist will then determine the effect of the decision on the individual's Medicaid eligibility. If the individual was approved for the other benefit, the payment must be included in the budget and the client notified of the resulting effect on Medicaid eligibility.

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Failure to Comply without Good Cause

If the ABD individual has failed without good cause to take all steps to obtain the other benefits, the specialist will take action to deny or terminate benefits until the requirement is fulfilled. An agreement to comply does not negate any prior action to deny or terminate benefits.

The effective month of eligibility is the month in which the individual takes the steps necessary to obtain benefits from the other agency or provides proof of ineligibility for the benefit.