

## State of Mississippi

---

### 1.4 State Medical Care Advisory Committee

There is an advisory committee to the Medicaid agency on health and medical care services established in accordance with and meeting all the requirements of 42 CFR 431.12.

The Mississippi Division of Medicaid complies with Section 1902(a)(73) and Section 2107(e)(I) of the Social Security Act by seeking advice on a regular, ongoing basis from a designee of the Indian health programs concerning Medicaid and Children's Health Insurance Program (CHIP) matters having a direct impact on Indian health programs and Urban Indian organizations. Mississippi has only one federally recognized tribe and that is the Mississippi Band of Choctaw Indians (MBCI).

The Mississippi Division of Medicaid consults with the tribe by notifying the Mississippi Band of Choctaw Indians designee, in writing with a description of the proposed change and direct impact, at least sixty (60) days prior to each submission by the State of any Medicaid State Plan Amendment, waiver proposals, waiver extensions, waiver amendments, waiver renewals and proposals for demonstration projects likely to have a direct effect on Indians, Indian Health programs, or Urban Indian Organizations (I/T/U) at the address noted below and by email. Direct impact is defined as any Medicaid or CHIP program changes that are more restrictive for eligibility determinations, changes that reduce payment rates or payment methodologies to Indian Health Programs, Tribal Organizations, or Urban Indian Organization providers, reductions in covered services, changes in consultation policies, and proposals for demonstrations or waivers that may impact I/T/U providers. If no response is received from the Tribe within thirty (30) days, the Division of Medicaid will proceed with the submission to the Centers for Medicare and Medicaid Services (CMS).

MS Band of Choctaw Indians designee: Donita R. Stephens, Director of Financial Services  
Choctaw Health Center  
210 Hospital Circle  
Choctaw, MS 39350  
Email: [DRStephens@choctaw.org](mailto:DRStephens@choctaw.org)

If the Mississippi Division of Medicaid is not be able to consult with the Tribe sixty (60) days prior to a submission, a copy of the proposed submission along with the reason for the urgency will be forwarded to the MBCI designee. A conference call with the designee and/or other tribal representatives will be requested to review the submission and its impact on the tribe. The Division of Medicaid will then confirm the discussion via email and request a response from the designee to ensure agreement on the submission. This documentation will be provided as part of the submission information to CMS.

Staff from the Division of Medicaid (Phyllis Williams, Deputy Administrator for Health Services and Richard Roberson, Special Assistant to the Executive Director for the Division of Medicaid) first consulted with the Mississippi Band of Choctaw Indians in a meeting on June 28, 2010, at the Choctaw Health Center with Mr. Joshua Breedlove, Interim Health Director, Merry Irons, Medicare/Medicaid Billing Technician, and Darnene Farmer. The purpose of the meeting was to discuss the agency's proposed State Plan Amendment regarding a care coordination program and the new federal tribal consultation requirements. Mr. Breedlove noted he was aware of the federal requirements and when asked what method he preferred be used for the consultation he indicated a letter to him would be sufficient. On November 30, 2010, Mr. Breedlove was sent an email seeking input and comments on how best to work with the tribe on Medicaid and CHIP program consultations. There was no response from the email. On December 14, 2010, Phyllis Williams called to talk with Mr. Breedlove and was told he was no longer with the Choctaw Health Center and was referred to Mr. Gary Ben as the new Interim Health Director. The federal tribal consultation requirements were discussed and he advised that the Director of Financial Services had been selected as the tribe's designee to work with the Medicaid agency on these issues. The agency then contacted Ms Stephens who acknowledged that a letter from the agency would be acceptable and we could email and /or mail it. The agency elected to do both.

**State of Mississippi**

---

---

1.4 State Medical Care Advisory Committee (42 CFR 431.12 (b))

There is an advisory committee to the Medicaid agency director on health and medical care services established in accordance with and meeting all the requirements of 42 CFR 431.12.

Tribal Consultation Requirements

Section 1902 (a) (73) of the Social Security Act requires a state in which one or more Indian Health Programs or Urban Indian Organizations furnish health care services to establish a process for the State Medicaid agency to seek advice on a regular, ongoing basis from designees of Indian health programs, whether operated by the Indian Health Service (IHS), Tribes, or Tribal organizations under the Indian Self-Determination and Education Assistance Act (ISDEAA), or Urban Indian Organizations under the Indian Health care Improvement Act (IHCA). Consultation is required concerning Medicaid matters having a direct impact on these Indian health programs:

~~\_\_\_~~ State appoints a tribal advisory committee.

~~\_\_\_~~ State appoints a designee of the IHS Tribes, or Tribal organizations operating health programs under the ISDEAA, and/or Urban Indian organizations operating health programs under the IHCA to the State medical care advisory committee.

~~X~~ State notifies the designee of the Mississippi Band of Choctaw Indians by letter of the State's submission of any Medicaid State Plan Amendment, waiver request, or proposal for a demonstration project likely to have a direct effect on Indians, Indian Health programs, or Urban Indian Organizations.

~~\_\_\_~~ Not applicable because the State does not have at least one Indian Health Program or Urban Indian Organization furnishing health care services.

**State of Mississippi**

---

1.4 State Medical Care Advisory Committee

There is an advisory committee to the Medicaid agency on health and medical care services established in accordance with and meeting all the requirements of 42 CFR 431.12.

The Mississippi Division of Medicaid complies with Section 1902(a)(73) and Section 2107(e)(I) of the Social Security Act by seeking advice on a regular, ongoing basis from a designee of the Indian health programs concerning Medicaid and Children's Health Insurance Program (CHIP) matters having a direct impact on Indian health programs and Urban Indian organizations. Mississippi has only one federally recognized tribe and that is the Mississippi Band of Choctaw Indians (MBCI).

The Mississippi Division of Medicaid consults with the tribe by notifying the Mississippi Band of Choctaw Indians designee, in writing with a description of the proposed change and direct impact, at least sixty (60) days prior to each submission by the State of any Medicaid State Plan Amendment, waiver proposals, waiver extensions, waiver amendments, waiver renewals and proposals for demonstration projects likely to have a direct effect on Indians, Indian Health programs, or Urban Indian Organizations (I/T/U) at the address noted below and by email. Direct impact is defined as any Medicaid or CHIP program changes that are more restrictive for eligibility determinations, changes that reduce payment rates or payment methodologies to Indian Health Programs, Tribal Organizations, or Urban Indian Organization providers, reductions in covered services, changes in consultation policies, and proposals for demonstrations or waivers that may impact I/T/U providers. If no response is received from the Tribe within thirty (30) days, the Division of Medicaid will proceed with the submission to the Centers for Medicare and Medicaid Services (CMS).

MS Band of Choctaw Indians designee: Donita R. Stephens, Director of Financial Services  
Choctaw Health Center  
210 Hospital Circle  
Choctaw, MS 39350  
Email: [DRStephens@choctaw.org](mailto:DRStephens@choctaw.org)

If the Mississippi Division of Medicaid is not be able to consult with the Tribe sixty (60) days prior to a submission, a copy of the proposed submission along with the reason for the urgency will be forwarded to the MBCI designee. A conference call with the designee and/or other tribal representatives will be requested to review the submission and its impact on the tribe. The Division of Medicaid will then confirm the discussion via email and request a response from the designee to ensure agreement on the submission. This documentation will be provided as part of the submission information to CMS.

Staff from the Division of Medicaid (Phyllis Williams, Deputy Administrator for Health Services and Richard Roberson, Special Assistant to the Executive Director for the Division of Medicaid) first consulted with the Mississippi Band of Choctaw Indians in a meeting on June 28, 2010, at the Choctaw Health Center with Mr. Joshua Breedlove, Interim Health Director, Merry Irons, Medicare/Medicaid Billing Technician, and Darnene Farmer. The purpose of the meeting was to discuss the agency's proposed State Plan Amendment regarding a care coordination program and the new federal tribal consultation requirements. Mr. Breedlove noted he was aware of the federal requirements and when asked what method he preferred be used for the consultation he indicated a letter to him would be sufficient. On November 30, 2010, Mr. Breedlove was sent an email seeking input and comments on how best to work with the tribe on Medicaid and CHIP program consultations. There was no response from the email. On December 14, 2010, Phyllis Williams called to talk with Mr. Breedlove and was told he was no longer with the Choctaw Health Center and was referred to Mr. Gary Ben as the new Interim Health Director. The federal tribal consultation requirements were discussed and he advised that the Director of Financial Services had been selected as the tribe's designee to work with the Medicaid agency on these issues. The agency then contacted Ms Stephens who acknowledged that a letter from the agency would be acceptable and we could email and /or mail it. The agency elected to do both.