High Level Mapping to Determine Member Eligibility

1. **Begin (Step 1)**
   - **Auto-Eligible (Alt Scenario 1)**
   - **Verify Eligibility**
     - **Verification (Steps 2-5)**
   - **Mandatory MAGI (Step 7)**
     - **Assess and Determine Non-Financial Factors of Eligibility (Step 6)**
   - **Optional MAGI (Step 8)**
     - **Screen Non-MAGI (Step 10)**
     - **Optional Internal Eligibility Screening**
     - **Assign Group & Benefit Levels (Step 14)**
   - **MSP (Step 9)**
     - **MSP Eligible**
     - **MSP Ineligible**
   - **Deny Medicaid (Step 12)**
     - **Assess Other Insurance Affordability Programs (Step 13)**

2. **Alternate Path - Emergency Medical Services**

3. **LEGEND**
   - **Non-MAGI ineligible**
   - **Optional MAGI Eligible**
   - **Non-MAGI ineligible**
   - **Optional MAGI Ineligible**
   - **MAGI Eligible**

**Steps**
- 2-5: Verification
- 6: Assess and Determine Non-Financial Factors of Eligibility
- 7: Mandatory MAGI
- 8: Optional MAGI
- 9: MSP
- 10: Screen Non-MAGI
- 11: Determine Non-MAGI
- 12: Deny Medicaid
- 13: Assess Other Insurance Affordability Programs
- 14: Assign Group & Benefit Levels

**End (proceed to Enroll Member)**
Step 7 - Mandatory MAGI

Determine individual's eligibility based on mandatory MAGI eligibility groups (Table 1)

- Is applicant an infant or a child under the age of 19?
- Is applicant a parent or other caretaker relative?
- Is applicant a pregnant woman?
- Is applicant a former foster care child?
- Is individual flagged for emergency medical services?
- Is applicant age 19 or older, under age 65, not pregnant and not receiving Medicare ("the adult group")?

Step 8 - Assessment of Eligibility for Optional Groups Based on MAGI

Step 9 - Assess MSP prior to assigning groups and benefit level

Step 10 - Assign Groups and Benefit Level (limited coverage for emergency medical services)
Step 7 - Mandatory MAGI

Assess and determine individual's eligibility based on optional MAGI groups (Table 2)

Step 8 - Optional MAGI

Verify any additional non-financial factors of eligibility (self-attestation or other) for the relevant optional group(s).

Is individual determined eligible for an optional MAGI group based on verified additional non-financial factors and income standards?

Step 10 - Screen for Potential Non-MAGI eligibility

Step 9 - Assess MSP

Is individual flagged for emergency medical services?

Step 14 - Assign Groups and Benefit Level (limited coverage for emergency medical services)

NOTE: States may choose to offer any or all of the optional groups listed in Business Rules
Step 9 - Assess and Determine MSP

Determine individual's eligibility for Medicare Savings Program (MSP) groups (Table 3).

Step 10 - Screen Potential Non-MAGI Eligibility

Step 11 - Determine Non-MAGI

Step 8 - Optional MAGI

Step 7 - Mandatory MAGI

Step 12 - Deny

Step 14 - Assign Groups and Benefit Level

Was individual previously determined eligible on another basis?

Is individual enrolled in Medicare Part A or B?

Is individual eligible for MSP?

Continue

End

Dual Paths

Process

No

Yes
Step 10 - Screen Potential Non-MAGI Eligibility

- Screen for potential non-MAGI eligibility
  - Is individual potentially eligible for non-MAGI?
    - Yes → Continue
    - No → Step 11 - Determine Non-MAGI
  - Was individual previously determined eligible based on MAGI?
    - Yes → No further action required
    - No → Step 9 - Assess MSP
  - Is individual flagged for emergency medical services?
    - Yes → Step 12 - Deny Medicaid
    - No → Continue

- Step 6 - Non-Financial
- Step 8 - Optional MAGI
- Step 14 - Assign Groups and Benefit Level
Step 11 - Determine Eligibility on Basis Other than MAGI

Step 10 - Screen Potential Non-MAGI

- Determine individual’s eligibility on basis other than MAGI (Refer to Table 4, Table 5, Table 6)

   - Determine if information is sufficient for a near real-time determination?
     - Is information sufficient to make a near real-time determination?
       - Yes
         - Request additional information, from applicant, member, or authorized representative
           - Verify additional non-financial and financial information, as appropriate
             - If necessary, transmit account to the Marketplace for interim coverage
       - No
         - Are further verifications necessary?
           - Yes
             - Continue
           - No
             - End

- Is individual previously determined eligible based on MAGI?
  - Yes
    - No further action required
  - No
    - Continue

- Was individual previously determined eligible based on MAGI?
  - Yes
    - Deny Medicaid
  - No
    - Continue

- Is individual flaggaed for emergency medical services?
  - Yes
    - Assess MSP
  - No
    - Continue

- Is individual eligible on a basis of other than MAGI (Table 4, 5, 6)?
  - Yes
    - Assess MSP prior to assigning groups and benefit level
  - No
    - Continue

- Is individual flaggaed for emergency medical services?
  - Yes
    - Deny Medicaid
  - No
    - Continue

- Dual Paths

Step 12 - Assign Groups and Benefit Level (limited coverage for emergency medical services)
Step 12 & 13 - Deny Medicaid & Assess for Other Insurance Affordability Program

NOTE: Applicant or member did not meet non-financial factors of eligibility, or emergency medical services criteria, or MAGI criteria (mandatory or optional), or non-MAGI criteria, or MSP criteria

Deny Medicaid eligibility, update account, and notify individual of determination.

Assess for potential eligibility in other insurance affordability programs.

Is individual potentially eligible for other insurance affordability program(s)?

Refer/Notify CHIP and/or Marketplace as applicable

No further action required

Process

No

Yes

Continue

End

Dual Paths
Step 14 - Assign Group(s) and Benefit Level

**NOTE:** Individual can be assigned to an MSP group and another eligibility group (i.e. MAGI or Non-MAGI). However, an individual cannot be assigned to both a MAGI and non-MAGI group simultaneously. An individual also cannot be assigned to an MSP group and receive coverage for emergency services simultaneously.

**a.** Assign Medicaid identification number if one was not previously assigned

**b.** Assign individual to one or more eligibility groups based on their eligibility determination

**c.** Set Emergency Service Flag

**d.** Was individual assigned to a MAGI group?

**e.** Step 10 - Screen for Non-MAGI eligibility

**f.** Determine benefit level the member is potentially eligible to receive (based on the eligibility group the individual was determined eligible for)

**g.** Is individual currently enrolled in CHIP or Marketplace?

- **Yes**
  - Go to Consumer Communication
  - Refer to CHIP and/or Marketplace as applicable

- **No**
  - Go to Enroll

**Go to**

- **Go to Enroll**
- **Go to Consumer Communication**

**Notify CHIP and/or Marketplace as applicable**