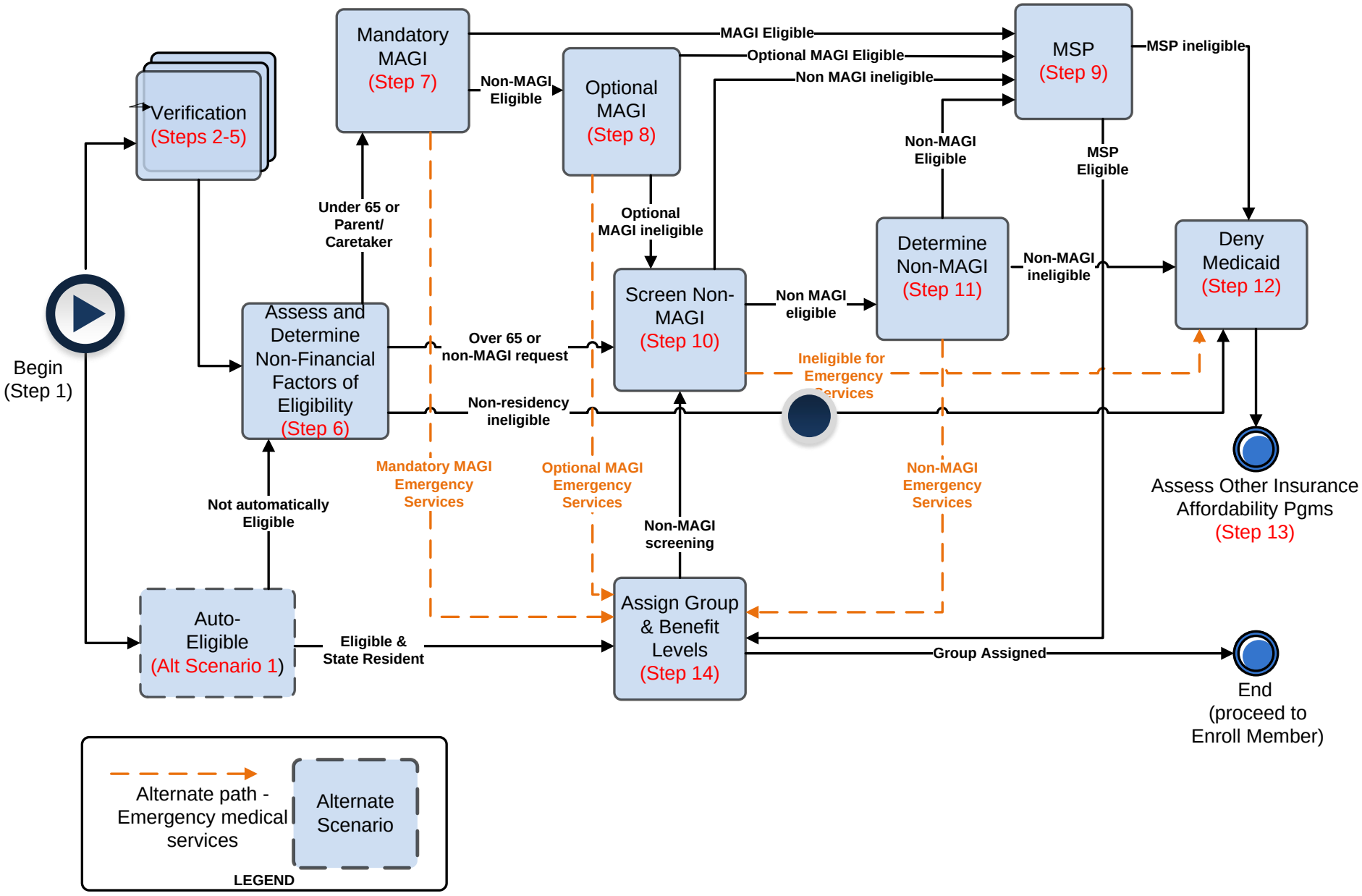
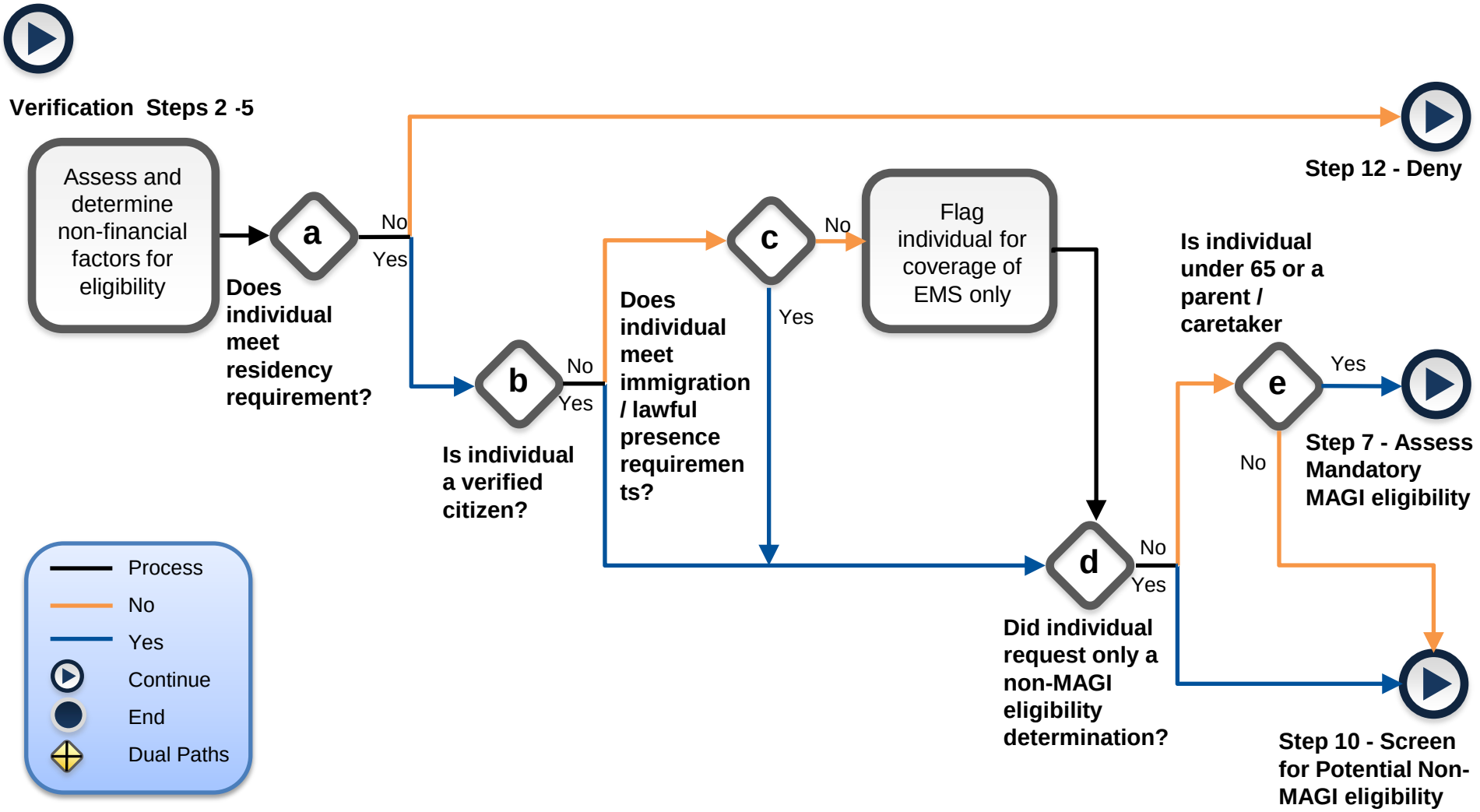
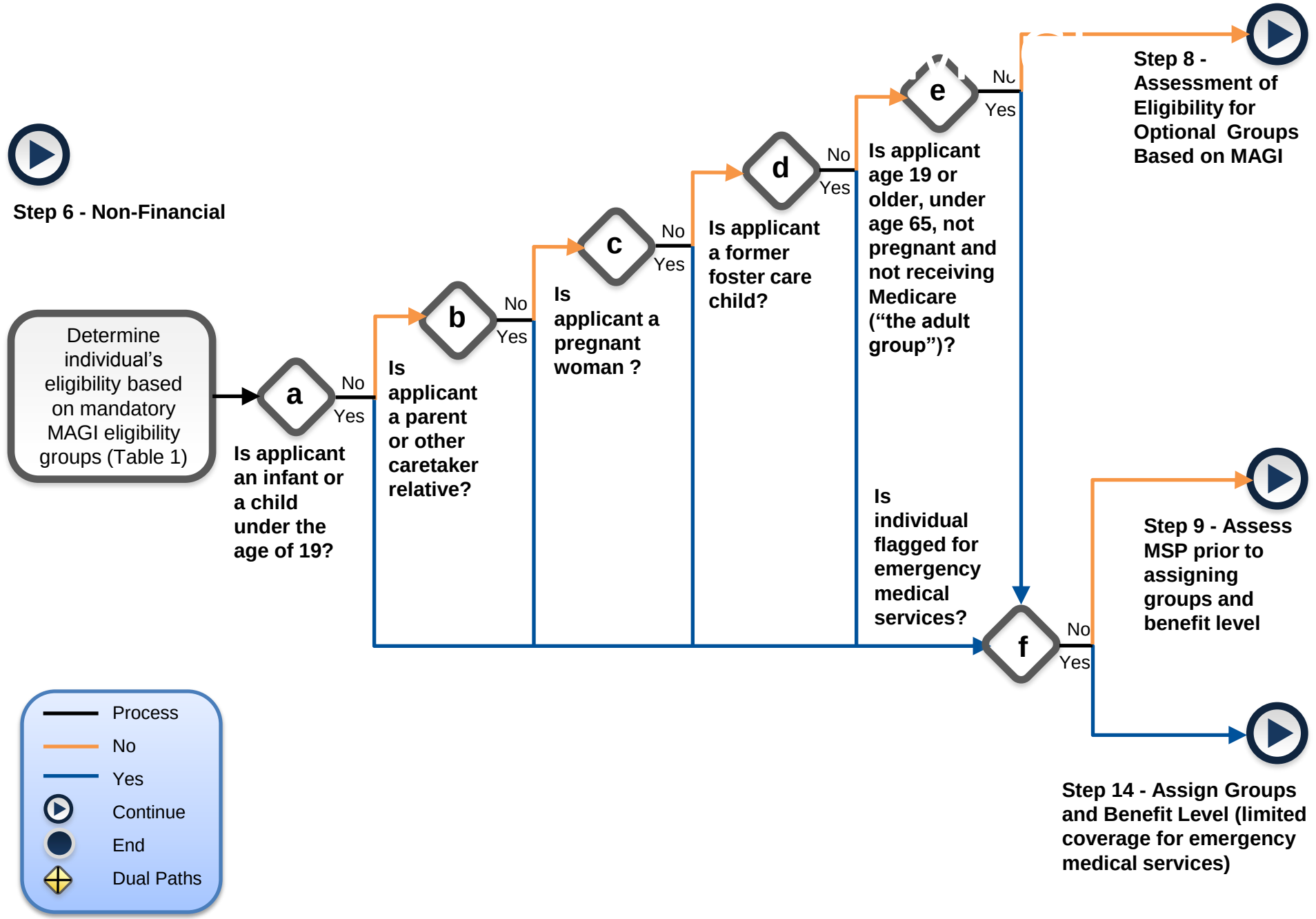
High Level Mapping to Determine Member Eligibility



Step 6 - Assess Non-Financial Factors

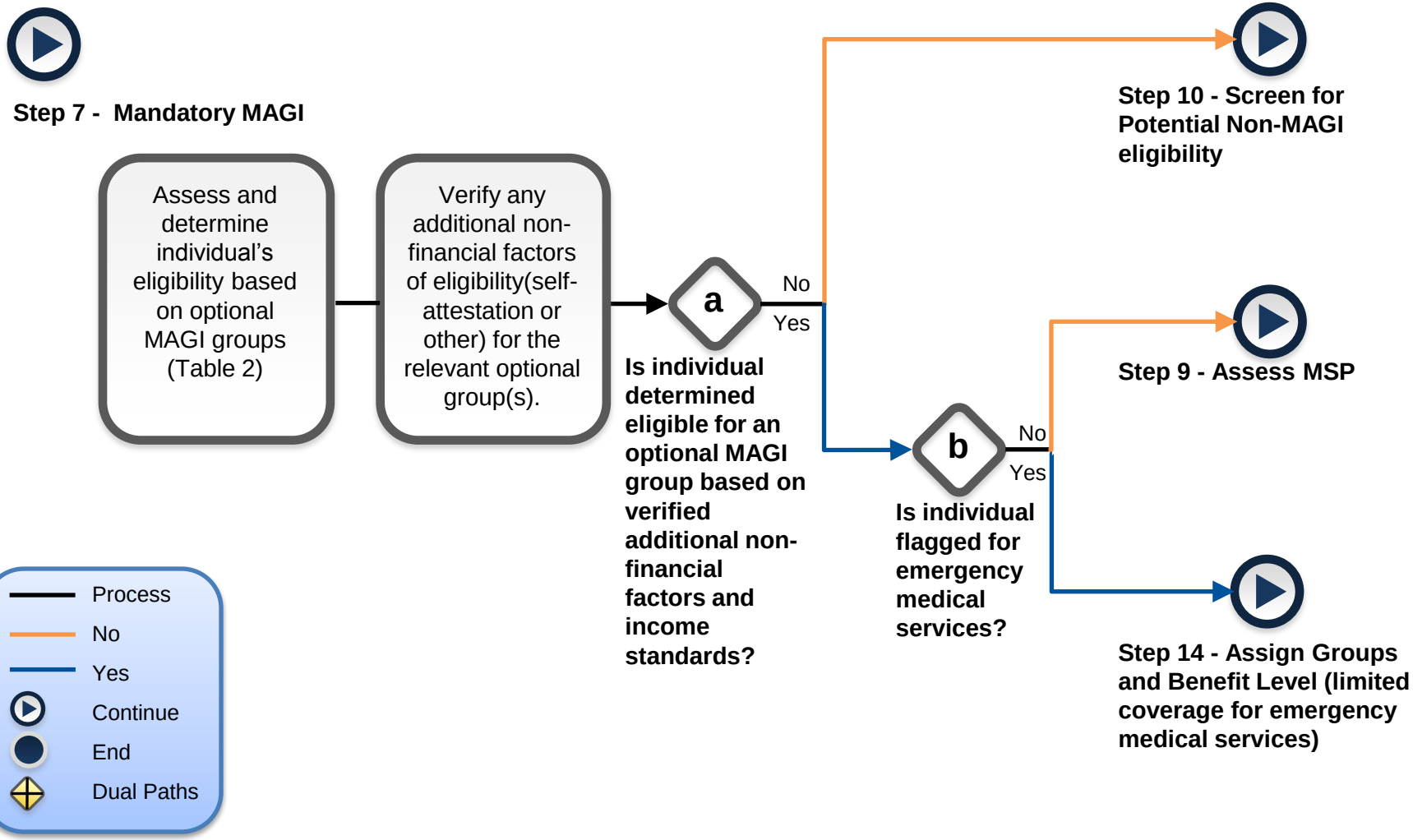


Step 7 - Mandatory MAGI

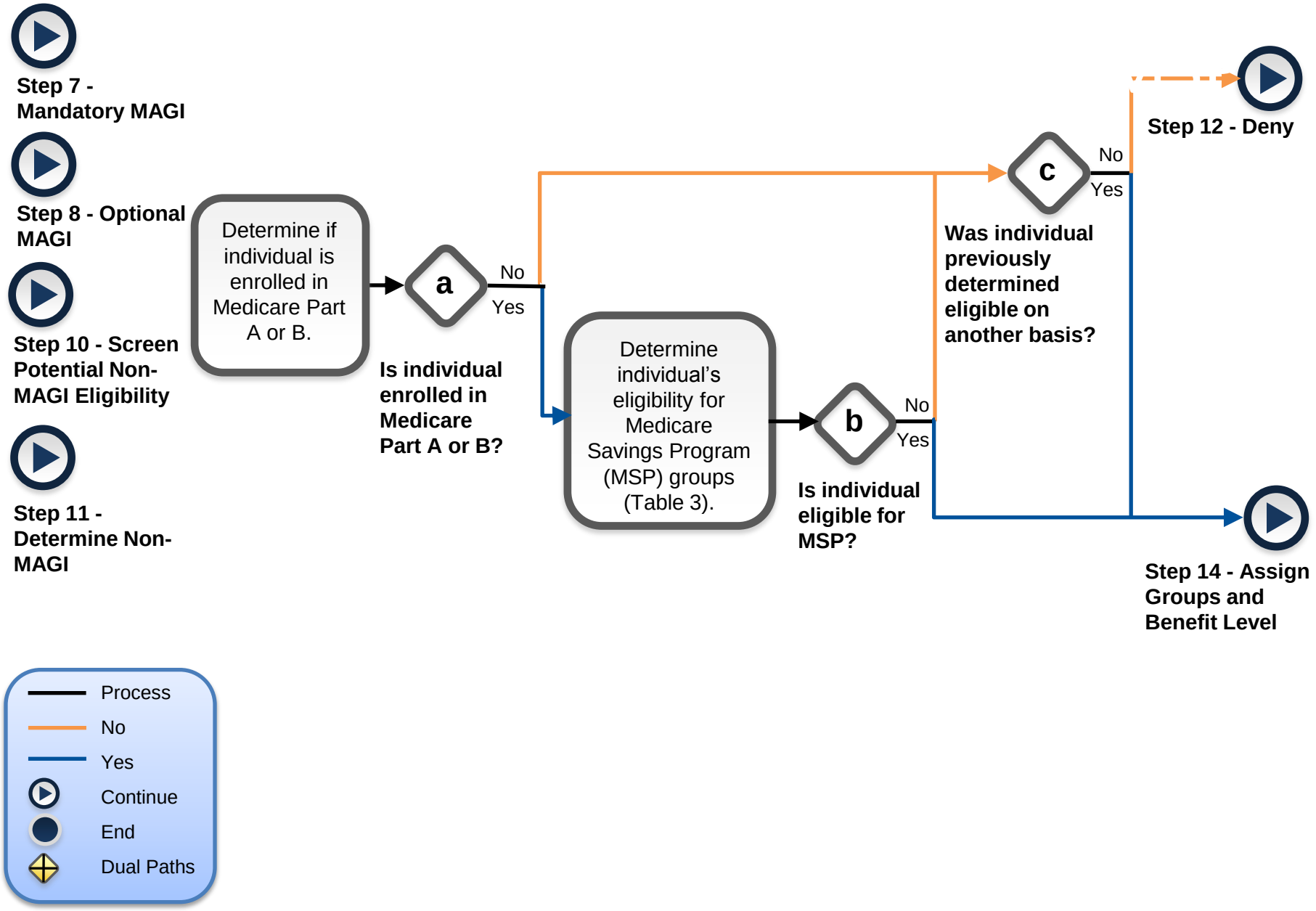


Step 8 - Optional MAGI

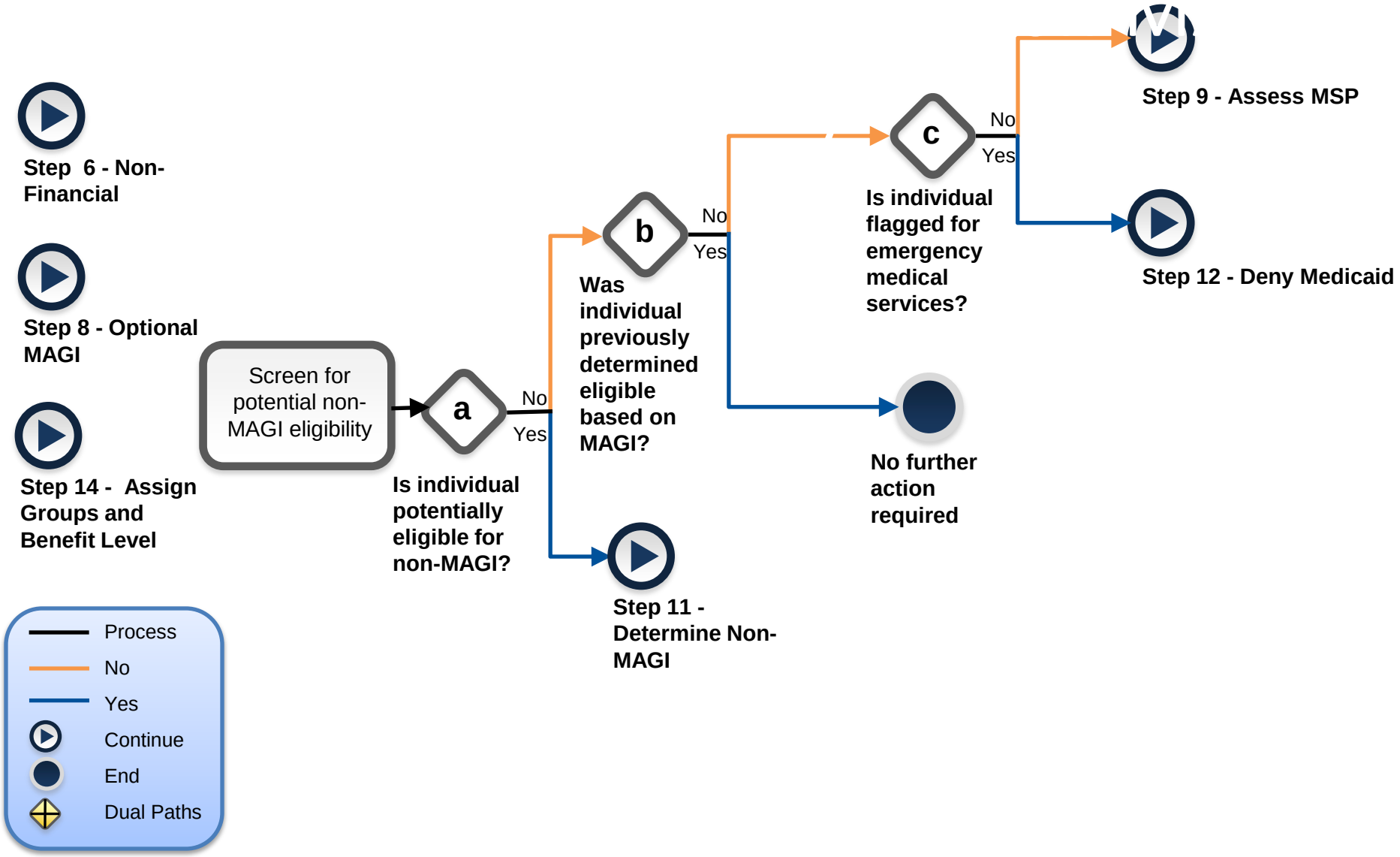
NOTE: States may choose to offer any or all of the optional groups listed in Business Rules



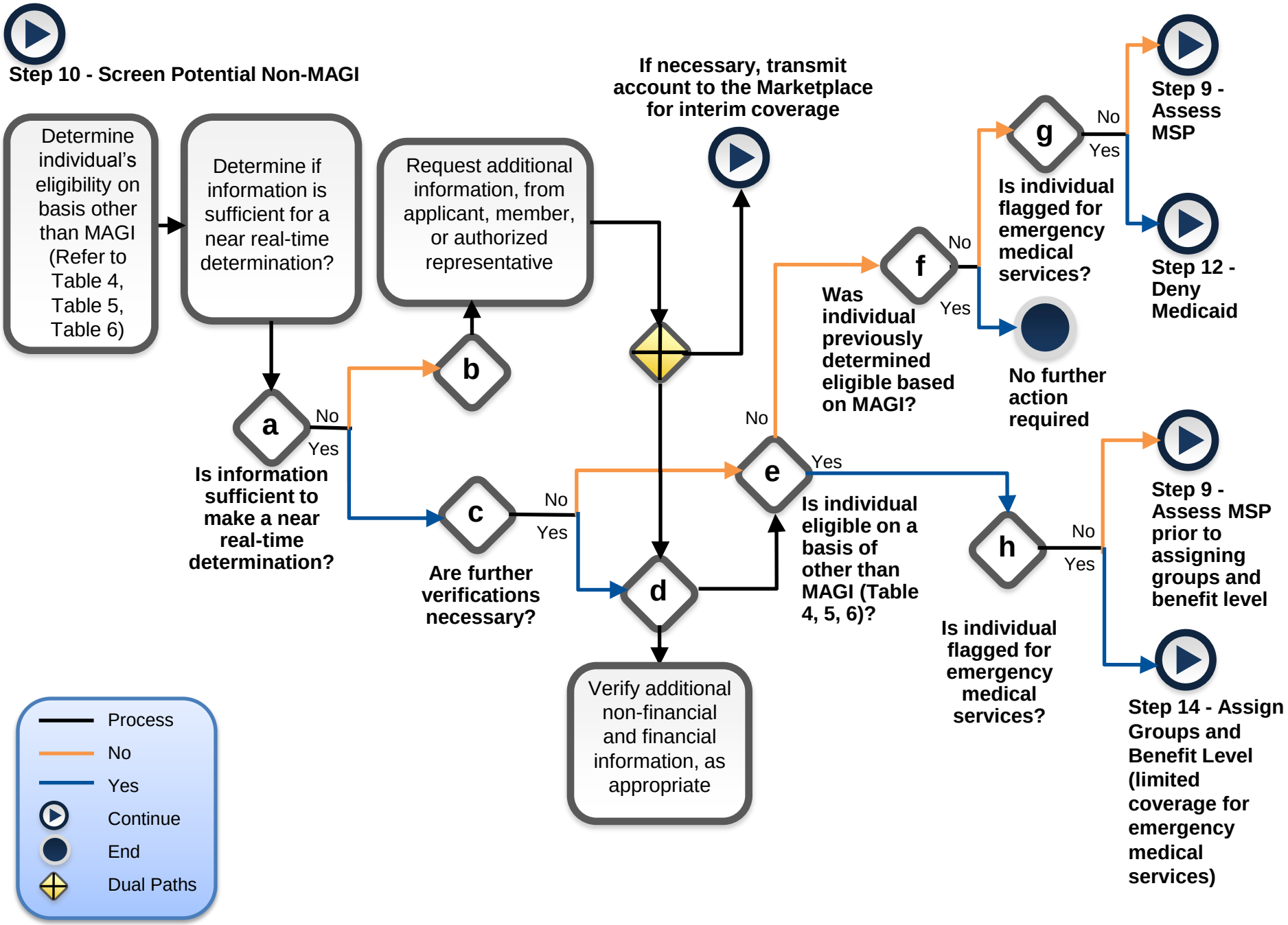
Step 9 - Assess and Determine MSP



Step 10 - Screen Potential Non-MAGI Eligibility



Step 11 - Determine Eligibility on Basis Other than MAGI



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

Step 6 – Non-Financial

Step 9 - MSP

Step 10 - Screen potential Non-MAGI

Step 11 - Determine Non-MAGI

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

Assess for potential eligibility in other insurance affordability programs.

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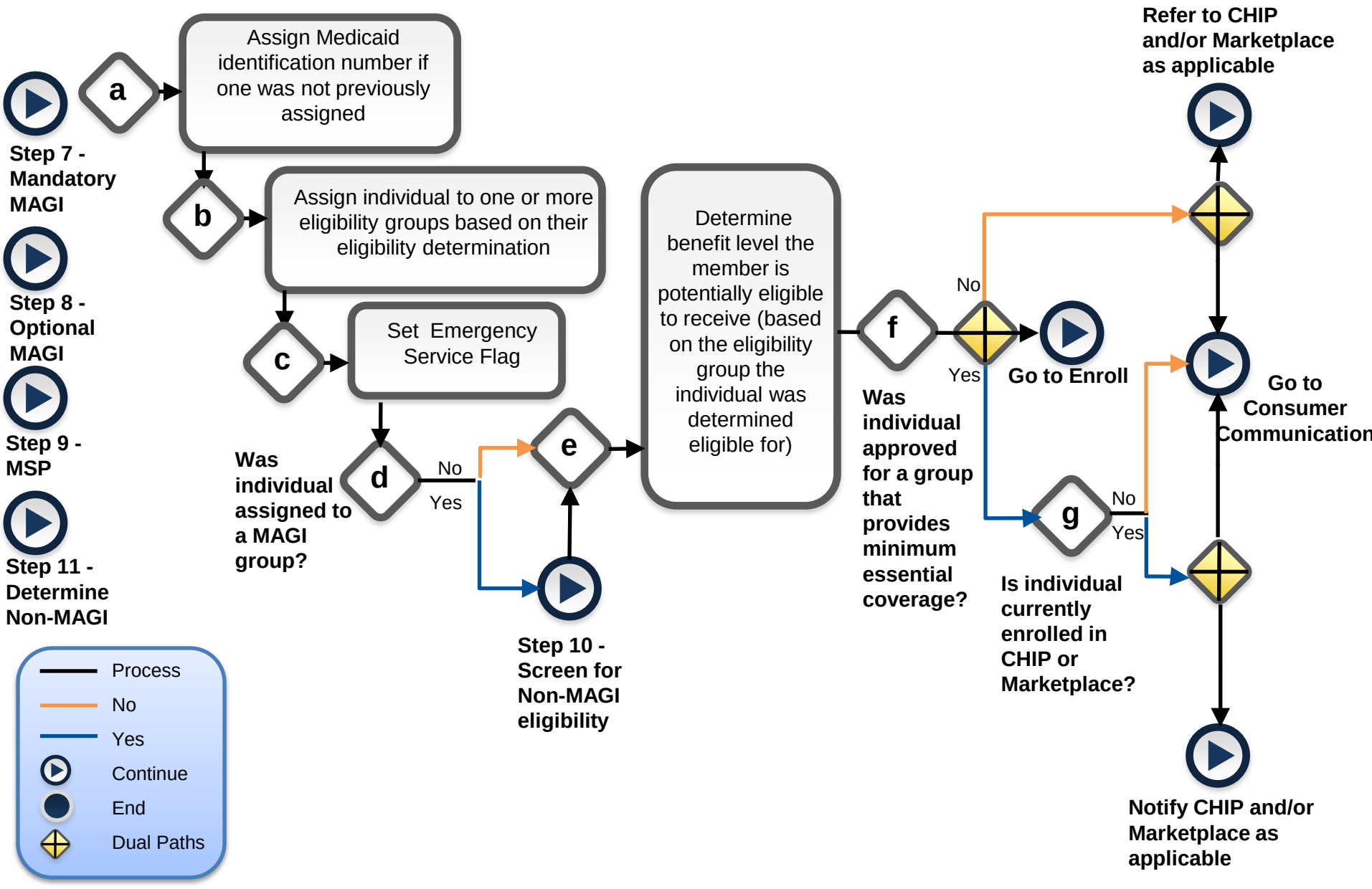
Is individual potentially eligible for other insurance affordability program(s)?

No

Yes

No further action required

Refer/Notify CHIP and/or Marketplace as applicable

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.