

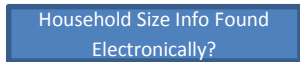
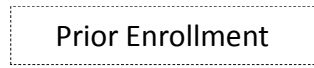
Health Insurance Exchange: MAGI Eligibility Flow Charts

October 18, 2011

Comments and questions may be submitted to info@svcinc.org.



Flow Chart LEGEND



State Specific Comment

Continued from Another Page

Process Description

Process Decision Connector

Continued on to New Page

Process End Indicator

Process Connector

Process Start Indicator



P#

*#

The Exchange must enter into agreements with Medicaid Agency to enable individual and dependents to be screened for Medicaid based on non-MAGI eligibility – example disability.

*

Detailed Process Indicator

Detailed Process Page #

State Decision Needed

Regulation Brief

5% disregard included



Coverage Option Overview

Individuals enrolled in employer sponsored coverage or eligible for minimal essential coverage through an employer are not eligible to receive advanced payments for premium tax credits provided that the coverage is affordable for the individual.

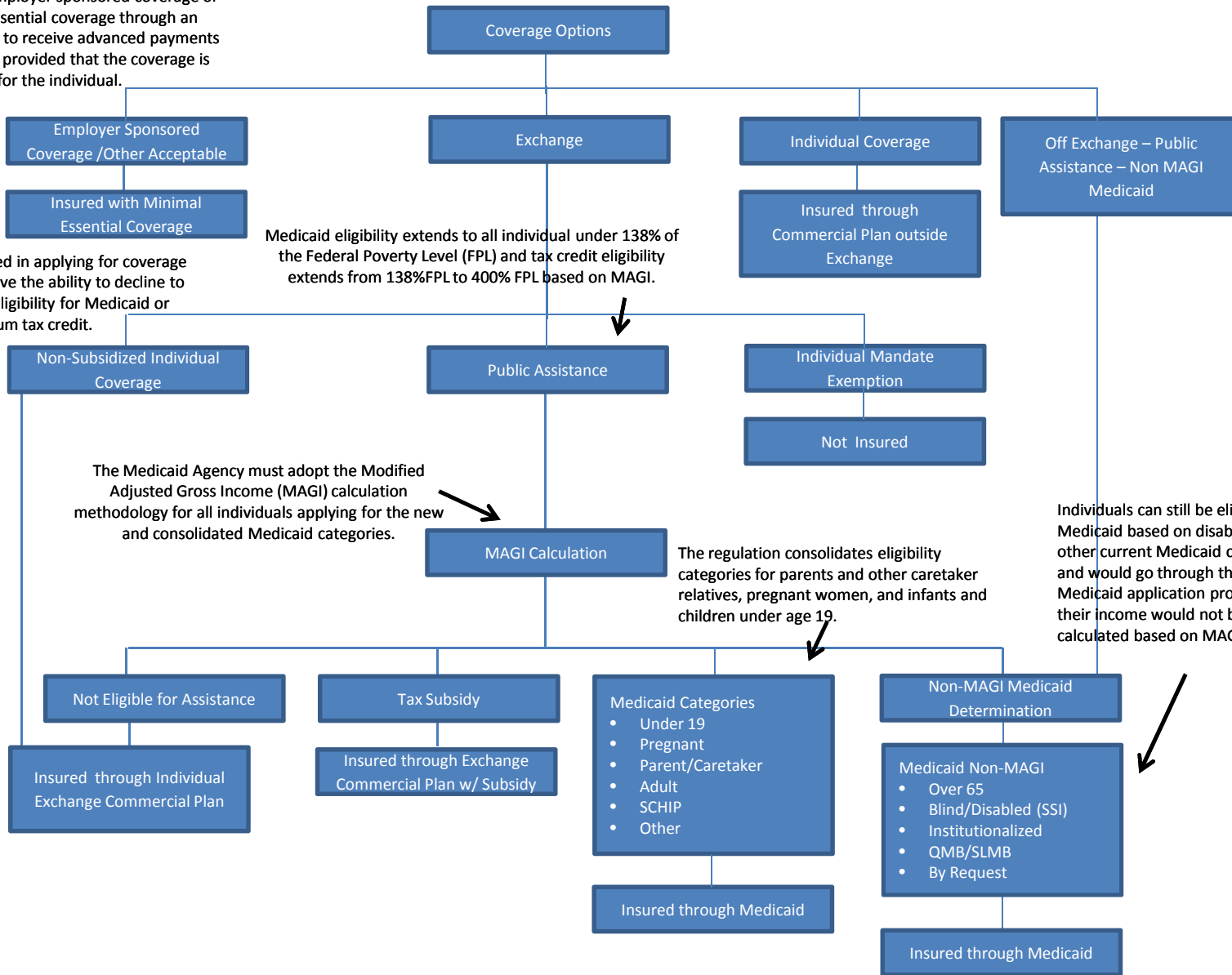
Individuals interested in applying for coverage on the Exchange have the ability to decline to be screened for eligibility for Medicaid or premium tax credit.

The Medicaid Agency must adopt the Modified Adjusted Gross Income (MAGI) calculation methodology for all individuals applying for the new and consolidated Medicaid categories.

Medicaid eligibility extends to all individual under 138% of the Federal Poverty Level (FPL) and tax credit eligibility extends from 138%FPL to 400% FPL based on MAGI.

The regulation consolidates eligibility categories for parents and other caretaker relatives, pregnant women, and infants and children under age 19.

Individuals can still be eligible for Medicaid based on disability or other current Medicaid categories and would go through the current Medicaid application process; their income would not be calculated based on MAGI.



MAGI Calculation

Eligibility must be re determined every 12 months.

For Eligibility determinations the Exchange will rely on the federal hub for income and citizenship information.

When possible the agency must complete the redetermination without requiring information from the individual.

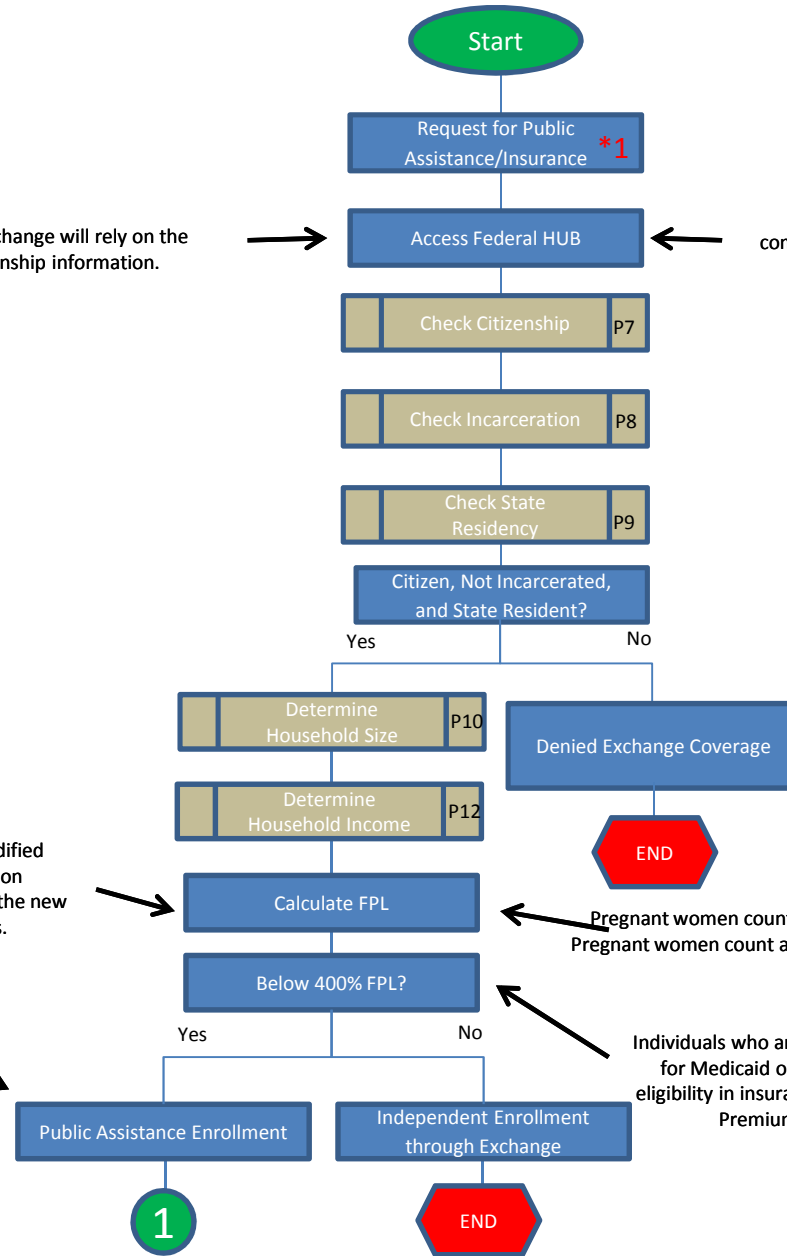
All individuals have the right to appeal any eligibility determination for Medicaid, premium tax credits, cost sharing subsidies, or QHP eligibility.

The Medicaid Agency must adopt the Modified Adjusted Gross Income (MAGI) calculation methodology for all individuals applying for the new and consolidated Medicaid categories.

Pregnant women count as two for household size in Medicaid.
Pregnant women count as one for household size for tax subsidies.

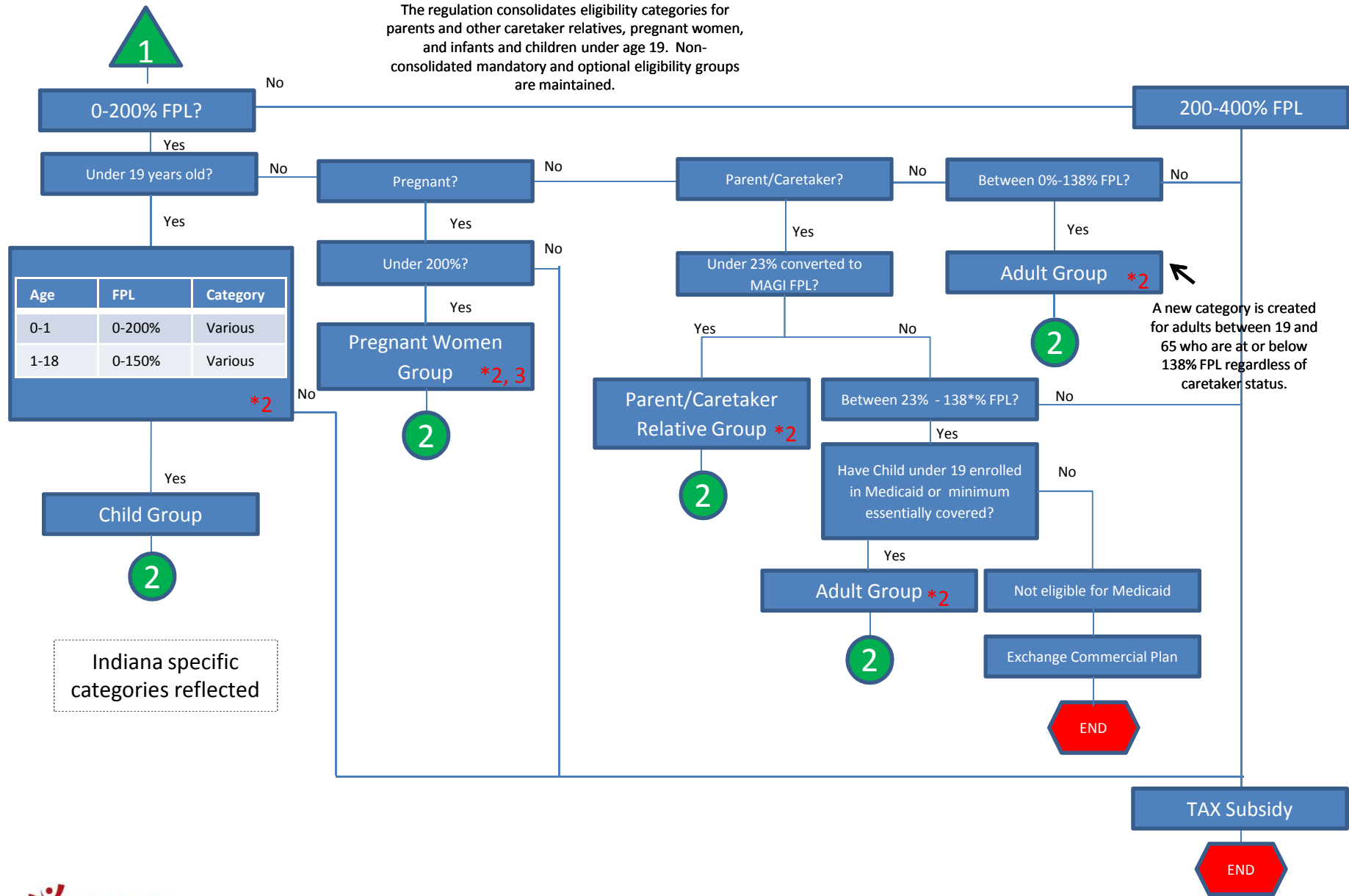
Individuals that are determined not eligible for Medicaid must be screened for premium tax credits.

Individuals who are in the process of being determined eligible for Medicaid on a categorical basis must be screened for eligibility in insurance affordability programs (MAGI Medicaid, Premium Tax Credits) for interim coverage.

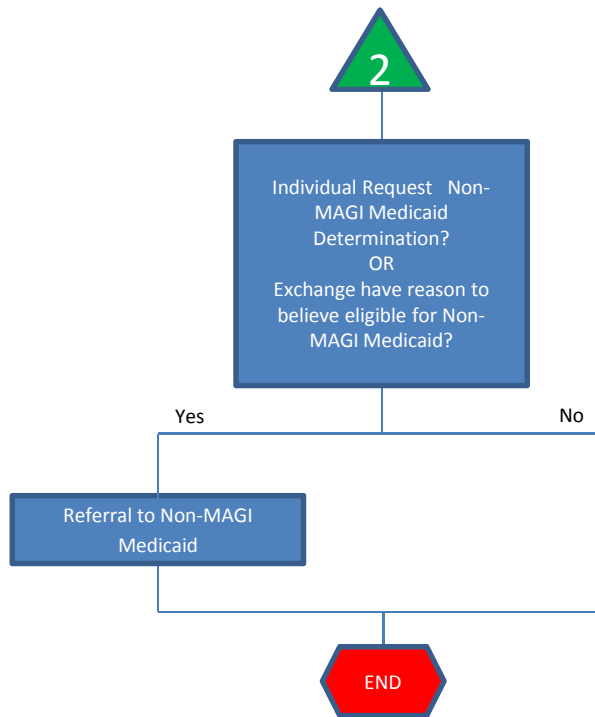


MAGI Calculated Public Assistance Categories

The regulation consolidates eligibility categories for parents and other caretaker relatives, pregnant women, and infants and children under age 19. Non-consolidated mandatory and optional eligibility groups are maintained.

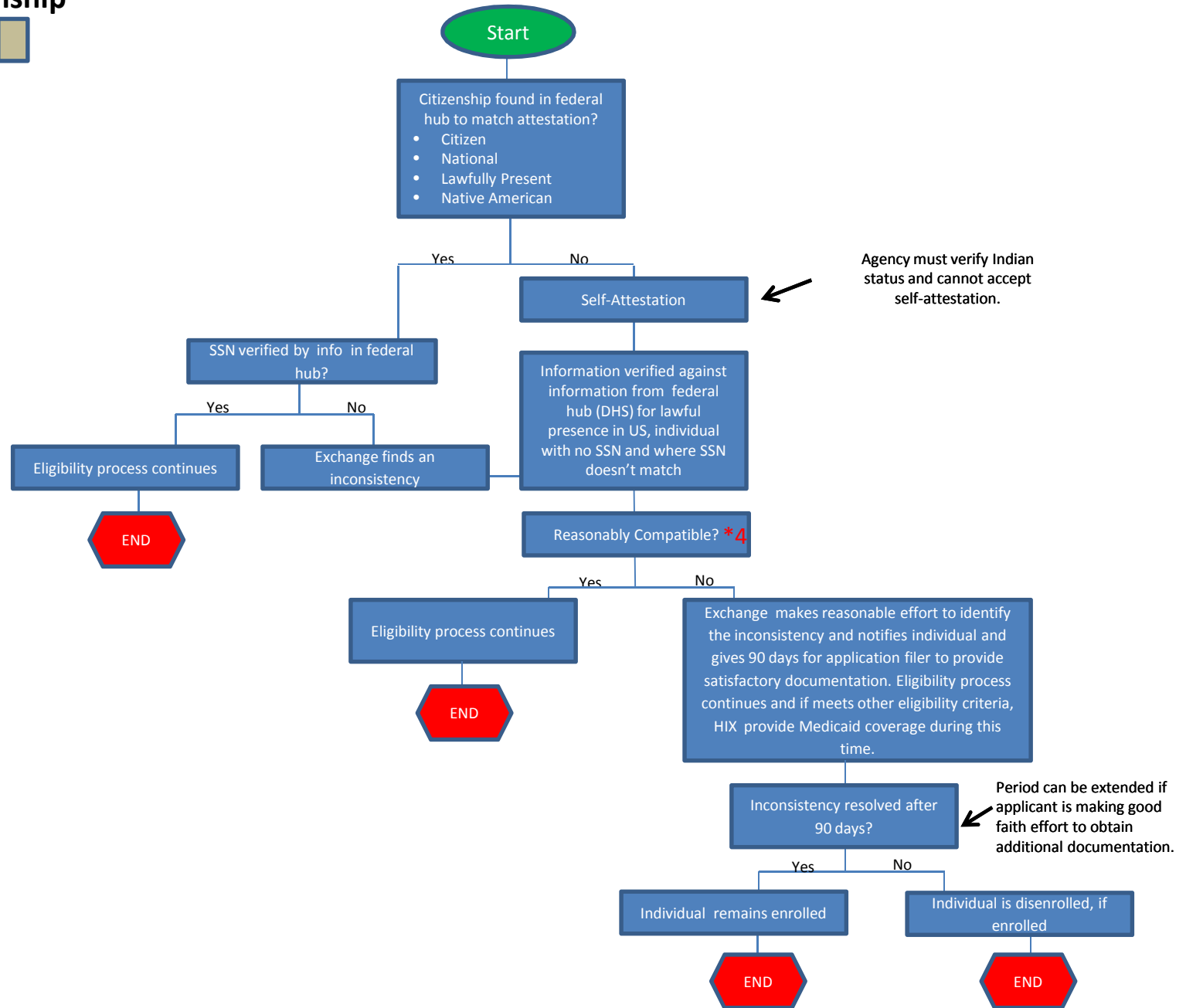


Non-MAGI Medicaid Referral



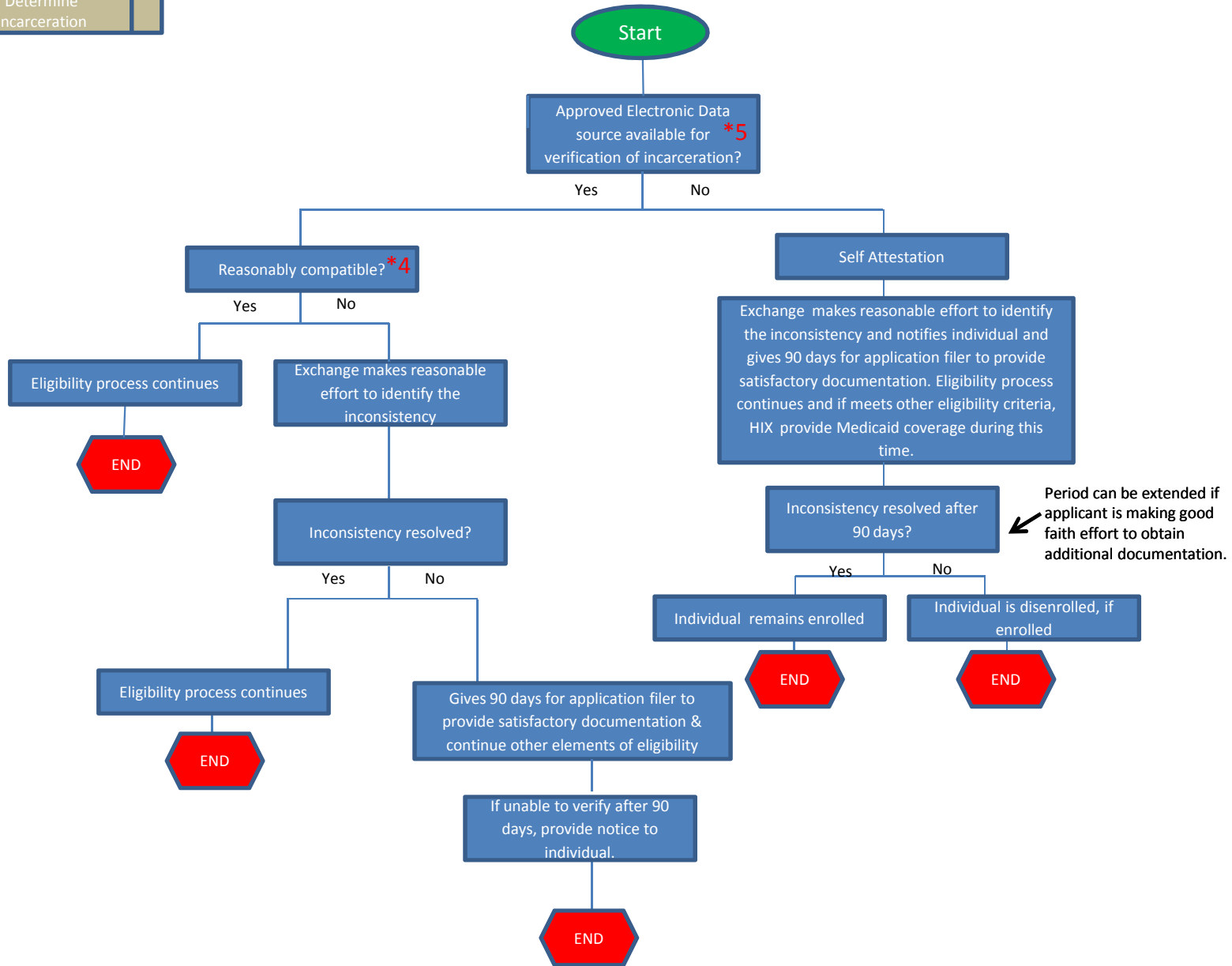
Determine Citizenship

Determine Citizenship



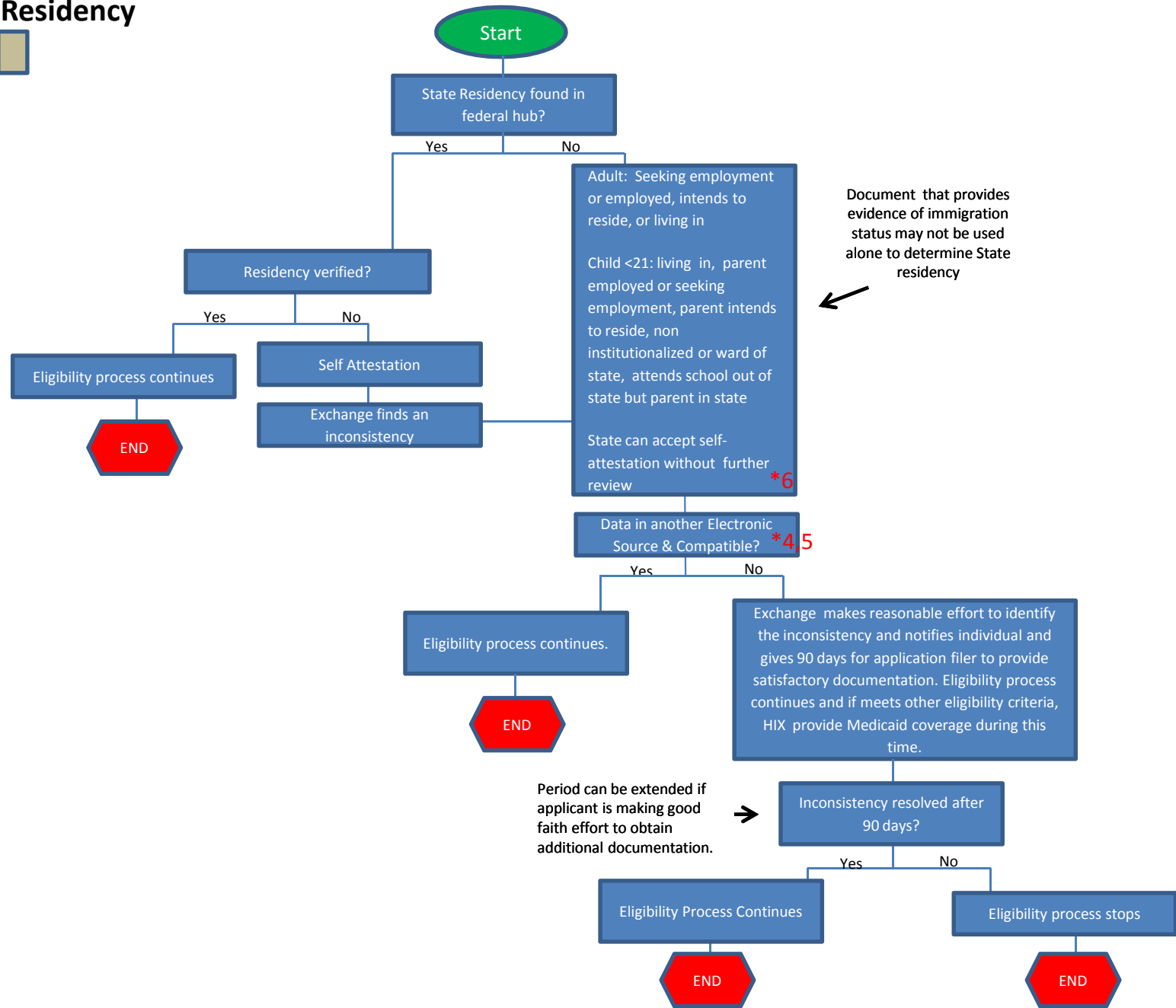
Determine Incarceration

Determine Incarceration



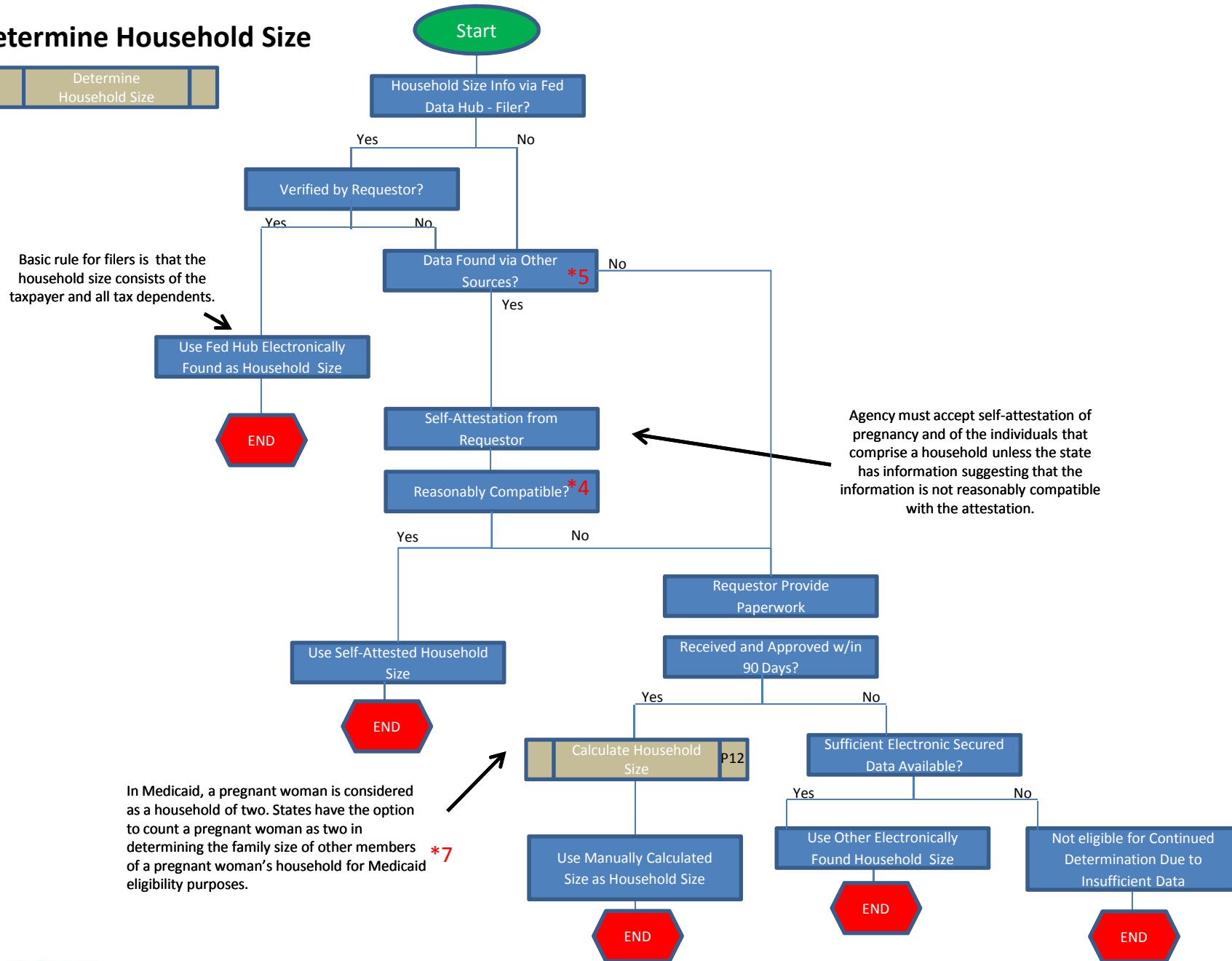
Determine State Residency

Determine State Residency



Determine Household Size

Determine Household Size



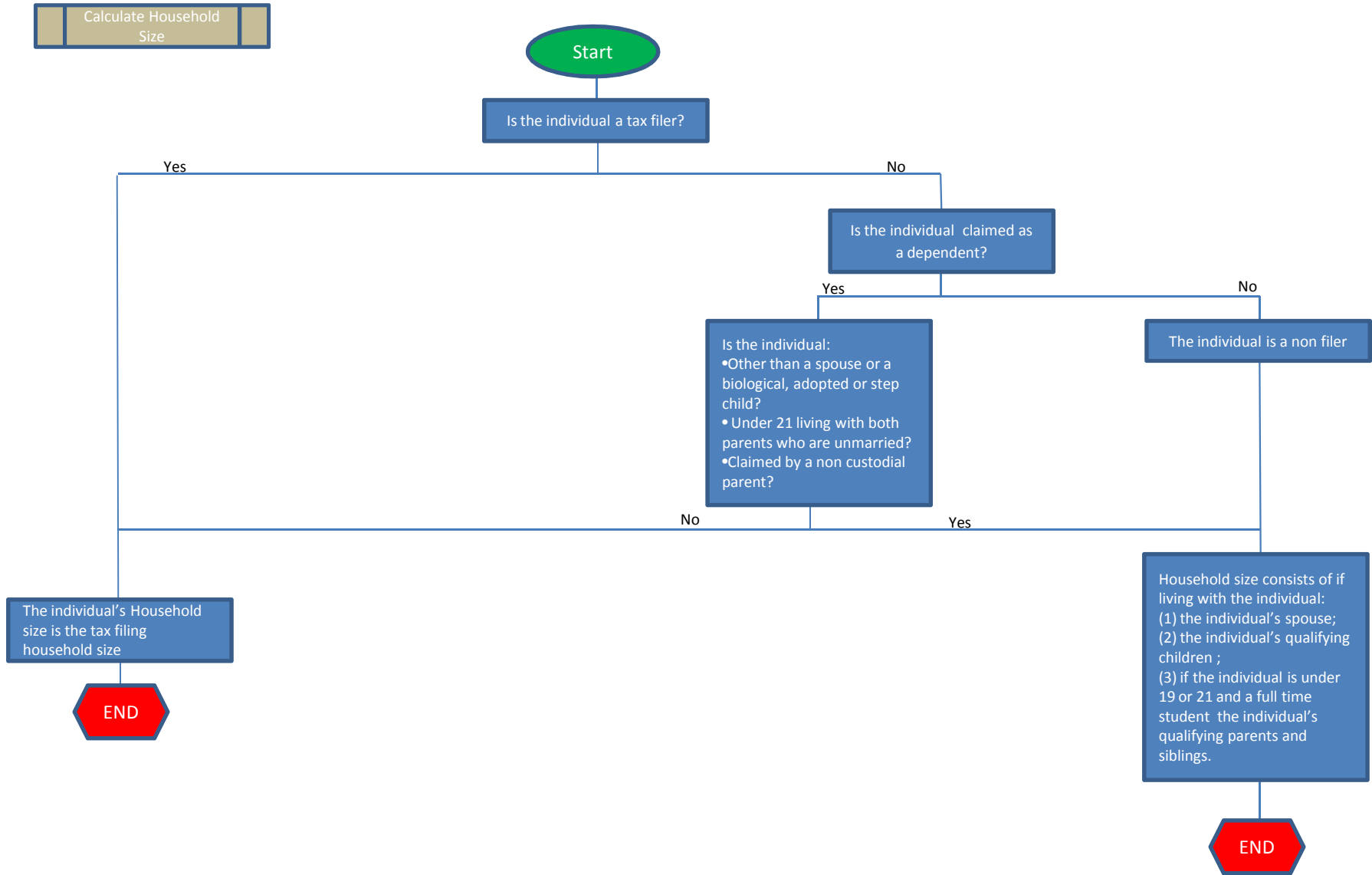
Basic rule for filers is that the household size consists of the taxpayer and all tax dependents.

Agency must accept self-attestation of pregnancy and of the individuals that comprise a household unless the state has information suggesting that the information is not reasonably compatible with the attestation.

In Medicaid, a pregnant woman is considered as a household of two. States have the option to count a pregnant woman as two in determining the family size of other members of a pregnant woman's household for Medicaid eligibility purposes. *7

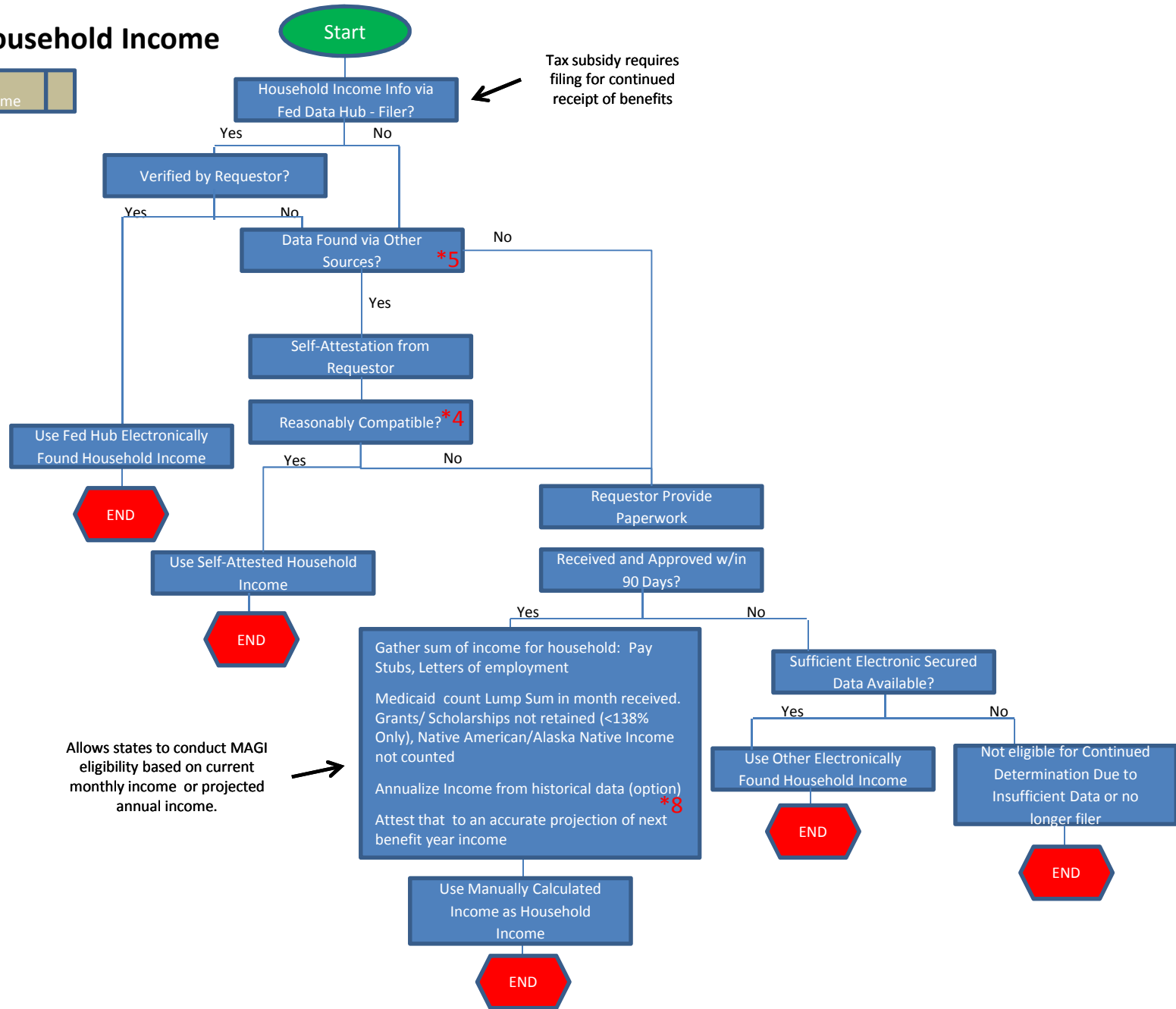


MAGI Household Size Calculation



Determine Household Income

Determine Household Income



Tax subsidy requires filing for continued receipt of benefits

Allows states to conduct MAGI eligibility based on current monthly income or projected annual income.



State Decisions Needed

1. Will the state use the CMS application or develop a state specific application form?
2. How will current aid categories feed into the new consolidated groups? What benefits packages are associated with each revised eligibility group?
3. If benefit package is different, process must be developed to transfer women from Adult Group to Pregnant Group when pregnancy is reported.
4. State to define rules for what is considered reasonably compatible when self-attestation does not match electronic data.
5. State to define other electronic data sources that will be utilized.
6. State to decide if they will accept self-attestation for residency without further review.
7. States have the option to count a pregnant woman as two in determining the household size of other members of a pregnant woman's family.
8. Will current monthly income or projected annual income be used for current beneficiaries?