Transitional Medical Scenarios

1. The Household includes the PA, SP, and CH. The PA and SP are receiving CTM with review due 05/2019. The CH is receiving PLN with review due 04/2019. The PA reports an increase in wages at the time of the CH review. There were no changes reported in the SP income.
   a. What will the determination be for PA?
   b. What will the determination be for the SP?
   c. What will the determination be for the CH?

   Answer:
   If the review is worked timely (EDBC ran for 05/19)
   PA – CTM CE (would move to TMD at review)
   SP – CTM CE (would move to TMD at review)
   CH – CHIP

   At review CH is found to be CHIP eligible. When review is processed for PA and SP, they are found to be TMD eligible. Since there is now an originating TMD eligible member in the CH’s IBU, the CH will be moved to TMD as it is before CHIP in the hierarchy and is considered a beneficial change.

2. The Household includes the PA. The PA is receiving CTM with a review due 06/2019. On the review the PA reports a pregnancy and an increase in earnings.
   a. What will the determination be for the PA?

   Answer:
   If EDBC is ran for review (after 6/19)
   PA – PLN/PW

   PA is no longer in CTM guidelines at review and is eligible for PLN/PW. Consumers are not eligible for TMD if they qualify for a Medicaid program. At the end of her PP period we would need to determine if the PA was eligible for any other coverage, if the income is still over CTM guidelines she would not be individually eligible for TMD as she did not have CTM in the month prior.

3. The Household includes the PA, SP, and CH. The PA is currently receiving CTM with a review due 06/2019. The SP is not currently receiving coverage. The CH is receiving PLN with a review due of 06/2019. On the review, it is reported that the PA has an increase in income that will put them over the CTM guidelines. The SP is requesting coverage on the review. The SP was included in the original CTM determination for the PA.
   a. What will be the determination for the PA?
   b. What will be the determination for the SP?
   c. What will be the determination for the CH?
Answer:
If EDBC is ran before review and spouse applied in an earlier month i.e. 619 or sooner
PA – CTM CE
SP – Denied
CH – PLN

When review is completed for 06/2019, (EDBC ran for 07/2019)
PA – TMD
SP – TMD
CH -- PLN
PA will be eligible for TMD at review, CH will remain PLN eligible and SP is also denied for coverage. When review is processed for 06/2019 and EDBC ran for 07/2019 the PA will be eligible for TMD, making the SP eligible for TMD.

4. The household includes the PA, CH, and UR. The PA and CH currently receive CTM with a review due of 06/2019. The UR is not currently receiving coverage. UR is parent to the CH. UR reported no income. PA reports an increase in wages that will put them over for CTM. UR is not requesting coverage on the review.
   a. What will the determination be for the PA?
   b. What will the determination be for the CH?

Answer:
If EDBC is ran for review and UR did not apply in an earlier month i.e. 6/19 or sooner
PA – TMD
CH – PLN
PA will be eligible for TMD at review, CH will move to PLN.
*If the UR had requested coverage on the application UR would be CTM eligible due to PA not being in the IBU.

5. The household includes the PA, CH, and UR. The PA and CH currently receive CTM with review due 06/2019. The UR is not receiving current coverage. On the CH’s review the PA reports an increase in wages that will put the PA over the income guidelines for CTM. PA reports claiming the CH. UR is the parent to the CH. UR is requesting coverage on CH’s the review, reports not filing taxes and income that would put them over for CTM.
   a. What will be the determination for the PA?
   b. What will be the determination for the CH?
   c. What will be the determination for the UR?

Answer:
If EDBC is ran at review and UR applied in a month after 6/19
PA – TMD
CH – PLN
UR – Denied
At review PA is eligible for TMD, CH is eligible for PLN, UR is denied for CTM and is not eligible for TMD they did not have CTM in the month prior or have an originating TMD eligible individual in their IBU.
6. The household includes the PA, SP, and CH. The PA is receiving TMD with a review due 10/2019. The CH is receiving PLN with a review due 10/2019. The SP is not currently receiving coverage. The SP was reported as being in the household in 05/2019 and is requesting coverage. SP has wages that will put him over the income guidelines for CTM.
   a. What will the determination be for the SP?
   b. Will there be any changes to the coverage for the PA and CH whose review are due in 10/2019?

Answer:
- PA – TMD
- CH – PLN
- SP – TMD

Since the PA is in the IBU and has a current TMD period, SP is TMD eligible until 10/19. The SP will not get a full 12 months as they are requesting coverage after the initial TMD determination has been made and is only eligible through the end of the existing TMD CE for the PA.

There will no changes to the PA and CH coverage due to their coverage being protected through their CE date of 10/2019.

7. The household includes PA, CH, and UR. The PA and CH are receiving CTM with review due 06/2019. UR is not receiving coverage. UR is parent to CH and is requesting coverage. The PA reports an increase in wages which will put them over for CTM and is claiming CH. UR has wages that would put them over for CTM and is not filing taxes.
   a. What will the determination be for the PA?
   b. What will the determination be for the CH?
   c. What will the determination be for the UR?

Answer :
If EDBC is ran at review and UR applied in a month after 6/19
- PA – TMD
- CH – TMD
- UR – Denied

At review PA is eligible for TMD, CH is eligible for TMD – combined income of PA & UR puts them in CHIP guidelines but since CH is not eligible for a Medicaid program and is the budget unit of PA who qualified for TMD, will receive TMD, UR is denied for CTM and is not eligible for TMD eligible due to not having the originating TMD eligible individual in their IBU.
8. The household includes the PA, a 3 year old child, and a 12 year old child with a review due 06/2019. On the review the PA reports a pregnancy and also an increase in earnings that put her over the income guidelines for CTM.
   a. What will the determination be for the PA?
   b. What will the determination be for CH 1?
   c. What will the determination be for CH 2?

Answer:
   PA – PLN/PW
   CH 1 – PLN
   CH 2 – CHIP

Since PLN/PW is a Medicaid program PA is not eligible for TMD. The income from the PA puts CH 1 in PLN guidelines. Since that is a Medicaid program they are not eligible for TMD. The income from the PA puts CH 2 in CHIP guidelines.

9. The household includes the PA, CH, and UR. The PA is receiving CTM with a review due 07/2019. The CH is receiving Chip with review due 05/2019. The UR is not currently receiving coverage. UR reports income. At PA’s review PA reports an increase in earnings that will put PA over the income guidelines for CTM. On review the PA and CH are requesting coverage. UR is not requesting coverage.
   a. What will the determination be for the PA?
   b. What will the determination be for the CH?

Answer:
At CH’s Review
   PA – CTM CE
   CH – Discontinued
   UR – Not requesting coverage.

At PA’s Review with CH requesting coverage (new application) EDBC Ran in 08/2019
   PA – TMD
   CH – TMD
   UR – Not requesting coverage.

At PA’s Review with CH requesting coverage (review reconsideration period) EDBC Ran in 05/2019, 06/2019 and 07/2019
   PA – CTM CE (05/2019-07/2019); TMD (08/2019)
   CH – Denied (05/2019-07/2019); TMD (08/2019)
   UR – Not requesting coverage.

At CH’s review they are not eligible for coverage due to being over income. When PA’s review is processed she is found to be TMD eligible. At that time the CH is processed and is eligible for TMD in 08/2019 due to the PA now being eligible and in the IBU.

10. The household includes the PA, SP, and CH. The PA, SP, and CH are receiving CTM with review due 06/2019. On the review the PA and SP both report an
increase in earnings, but do not want coverage to continue for them. They do not have other health insurance. Requesting coverage for the CH only on the review.

a. What will the determination be for CH?

Answer:
IF EDBC is ran at review
   PA – No longer covered
   SP – No longer covered
   CH – CHIP
Income puts CH CHIP eligible. CH is not eligible for TMD as the increase income did not come from them, nor is there an originating TMD individual in their IBU.

11. The household includes the PA, SP, and CH. The PA and SP are currently receiving CTM with review due 06/2019. The CH is receiving PLN with a review due 06/2019. On the review both the PA and SP report an increase in earnings. The household reports other health insurance. Both the PA and SP are no longer wanting coverage. Coverage request is for the CH only.

a. What will the determination be for the CH?

Answer:
IF EDBC is ran at review
   PA – No longer covered
   SP – No longer covered
   CH – Discontinued
Income puts CH CHIP eligible with $0 premium. CH did not have CTM in the month prior and there is no originating TMD eligible individual in their IBU. CH is not eligible for CHIP due to other HI.

12. The household includes the PA and CH. The PA is receiving TMD with a review due 12/2019. The CH is receiving PLN with a review due 05/2019. On the CH’s review the PA reports that there has been no changes in income.

a. What will be the determination for the PA?

b. What will be the determination for the CH?

Answer:
   PA-TMD (review due 12/19)
   CH – PLN (review due 06/2019-05/2020)

PA’s income puts CH over income for PLN. Since CH has the originating TMD eligible individual in their IBU they are eligible for TMD. However, since this is not the initial determination for the TMD, the CH is only eligible through the PA’s CE.

13. The household includes the PA, CH, SP, and SC. The PA and CH are receiving CTM with a review due 06/2019. The SP and SC are not receiving coverage. On the review the SP and stepchild are requesting coverage. Reports that they
joined the household in 05/2019. The PA reported no income. The SP reports working.

a. What will the determination be for the PA?
b. What will the determination be for the CH?
c. What will the determination be for the SP?
d. What will the determination be for the Stepchild?

Answer:

PA – Discontinued
CH – PLN
SP – Denied
SC – PLN

PA is not eligible for TMD as the increase in wages comes from the SP who did not have CTM in the month prior. There is also no originating TMD individual in their IBU. CH and SC are both PLN eligible. SP is not eligible for CTM due to being over income. They are not eligible for TMD as they did not have CTM in the month prior and no TMD individual in their IBU.

14. The household includes the PA and CH. The PA and CH were CTM with a review that was due 12/2018. Coverage for both the PA and CH were discontinued effective 01/2019 for failure to return review. A new application was received 04/2019 with prior medical being requested for the PA and CH. PA has an increase in earnings that puts them over the income guidelines for CTM.

a. What will the determination be for the PA?
b. What will the determination be for the CH?

Answer:

PA – TMD starting 1/19 to 12/19
CH – PLN starting 1/19 to 3/20

PA is not eligible for CTM in the month of application. PM is requested, and since PA had CTM in the month prior they will be eligible for TMD with CE ending 12/2019 based on policy. The CH is PLN eligible in PM months and current.