

APPENDIX A

GUIDE TO TRANSITIONAL MEDICAID

PHASE I

1. Ineligible for AFDC Medicaid due to hours of employment, amount of income from employment or from loss of time-limited earned income disregards (\$30 + 1/3 or \$30 disregard)
2. Received AFDC Medicaid in at least 3 of the last 6 months
3. No indication of AFDC Medicaid fraud
4. Family has a dependent child who would be eligible for AFDC Medicaid
5. Enroll + maintain enrollment in employer's free medical plan, if available

PHASE II

1. Received Phase I coverage for entire 6 months
2. All PR L3's returned
3. Family has a dependent child who would be eligible for AFDC Medicaid
4. Income less than 185% FPL. Use income of AFDC Medicaid Income Group
5. Parent continues to have earnings - unless good cause exists
6. Enroll and maintain enrollment in employer's free medical plan, if available.

TM FLOW

1st Month: Start TM

2nd Month: No Action necessary.

3rd Month: PR L3 Mailed to Client. Due 21st of 4th month.

4th Month: Alert that PR L3 is due by 21st to report earnings and day care expenses for first 3 months of Phase I. If not received send advance notice to client of ineligibility for Phase II.

5th Month: Alert that Phase I ends next month. No action necessary.

6th Month: New PR L3 mailed to client. Due 21st of 1st month of Phase II.

NOTE: No provision to discontinue Phase I for failure to continue workin

NOTE: Failure (without good cause) to return either completed PR L3 by due date results in ineligibility for Phase II. No effect on Phase I.

PHASE II

1st Month: Alert that PR L3 due by 21st of month.
(Total of Send advance notice to terminate TM if completed form is
7 mos.) not received.

2nd Month: No action necessary.
(Total of
8 mos.)

3rd Month: New PR L3 mailed to client. Due 21st of 4th months.
(Total of
9 mos.)

4th Month: Alert that PR L3 is due 21st of month. Send advance
(Total of notice to terminate TM if completed form is not received.
10 mos.)

5th Month: No action necessary.
(Total of 11 mos.)

6th month: Alert that Phase II, TM is ending.
(Total of Benefits automatically terminate. Determine eligibility
12 mos.) under other coverage groups.