

### 7.3 THE CASE MAINTENANCE PROCESS

After approval for WV CHIP, information is passed from RAPIDS to WVOT.

Although the WV CHIP Office issues the benefit to the client, action is taken on changes reported to the Department so updated information can be reported to WV CHIP through RAPIDS.

#### A. CLOSURES

The WV CHIP Office is notified of WV CHIP ineligibility through an exchange of information with RAPIDS. This notification triggers the termination of coverage by WV CHIP.

Eligibility under all Medicaid coverage groups must be explored for all children who become ineligible for WV CHIP prior to the end of the 12-month period of continuous eligibility. **This does not mean that applications for all coverage groups must be taken and processed; eligibility is determined based on case record information, see Chapter 16.3.** If the Medicaid evaluation results in an approval, the child receives a new Medicaid certification and redetermination period.

A child may be determined ineligible prior to the expiration of the 12-month period of continuous eligibility only if the child:

- Moves out of state;
- Dies;
- Reaches age 19. The child is eligible until the end of the month in which he reaches the age limit. A child who reaches age 19 on the first day of the month remains eligible until the end of that month;

**NOTE:** If a child is receiving inpatient hospital services on the date he would lose eligibility due to attainment of the maximum age, eligibility must continue until the end of that inpatient stay.

- Becomes eligible for Medicaid and the caretaker chooses Medicaid over WV CHIP.
- Obtains individual or group health insurance coverage after WV CHIP approval. See Definitions at the beginning of this Chapter.
- Begins receiving a state group health plan after WV CHIP approval.

WV CHIP

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If the OFS-M/CHIP-1 is unavailable, then the Worker may accept verbal or written confirmation from the parent requesting a change to Medicaid. Case comments must be entered to explain why the OFS-M/CHIP-1 could not be provided.

No application is required. If the parent chooses Medicaid, Medicaid is approved for a new 12 months of continuous coverage. If the parent chooses, WV CHIP, the original redetermination date remains.

The Worker must not accept the return of the WV CHIP medical card from the client for return to the claims administrator.

**NOTE:** See **Chapter 7.14** for procedures regarding WV CHIP Premium Expansion coverage.

At the annual redetermination, when income exceeds 300% FPL after the MAGI-income disregard is given and the individual(s) remain over the allowable income limit, the electronic account will be transferred to the Marketplace for an evaluation for other health coverage benefits.

**C. UPDATE IN AG INFORMATION**

The case information in RAPIDS must be updated based on changes reported by the client and by other valid sources even though benefits are not issued from RAPIDS and the client is eligible for 12 continuous months of coverage. Changes made outside of the required annual redetermination cycle are necessary so that the child may be correctly evaluated for Medicaid, should WV CHIP eligibility end.

Any change in the family's circumstances which could result in Medicaid eligibility for the child requires the Worker to reevaluate Medicaid eligibility. This includes when the Worker is notified that the WV CHIP child is pregnant and eligibility for Pregnant Woman coverage is evaluated.

When a WV CHIP child becomes eligible as a Pregnant Woman, Medicaid eligibility may be determined as of the date the pregnancy was diagnosed or as of any month within 3 months after the end of the pregnancy. Eligibility is established based on all case circumstances as they existed in the month for which Medicaid eligibility is first established; Medicaid eligibility may be established for the earliest month in which expenses not paid by WV CHIP were incurred. All case circumstances, including income, AG composition, marital status of the pregnant woman, etc. are used as they existed in the month that the pregnant woman first met all Medicaid eligibility requirements.

**NOTE:** See **Chapter 7.14** for procedures regarding WV CHIP Premium Expansion coverage.