

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.

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- Becomes eligible for SSI.
- Was approved or redetermined for WV CHIP in error and is not currently eligible.
- Becomes an inmate of a public institution.

NOTE: When one child's circumstances result in closure of the WV CHIP AG, other WV CHIP recipients, if otherwise eligible, continue to receive their 12-month period of continuous eligibility, unaffected.

A. CHANGE IN INCOME

Any change in circumstances not listed in Item A above, including a change in income, does not affect eligibility once the 12-month period of continuous eligibility is established. In addition, a reduction in the number of people included in the Needs Group of the child does not affect eligibility once the 12-month period has been established. See Item C below for instructions on updating case information.

EXAMPLE: A child is approved for WV CHIP beginning in March. His 12-month period of continuous eligibility ends in the following February. In August his father changes jobs and the income of the family now exceeds 300% FPL. The child's eligibility under WV CHIP continues through February.

EXAMPLE: A child is approved for WV CHIP Premium beginning in September and ending in the following August. The last week of September his absent father returns to the family. The father works and his income exceeds 300% FPL. The child's eligibility under WV CHIP continues through August.

EXAMPLE: A man and woman with 2 children apply for WV CHIP coverage for the children, ages 12 and 18, in April. The children are approved for coverage from April through the following March. In October, the 18-year-old attains the age of 19. His WV CHIP coverage must be stopped beginning November 1st. At the point that the 19-year-old loses coverage and is removed from the Needs Group, the income of the parents exceeds 300% FPL for a Needs Group of 3. However, the 12-year-old child's WV CHIP eligibility continues through March.

When a child who is originally income ineligible for Medicaid becomes income eligible for Medicaid during the 12-month period of WV CHIP continuous eligibility, RAPIDS sends notice OFS-M/CHIP-1 to notify the client of Medicaid eligibility and which permits him to choose Medicaid. If the client chooses Medicaid, he must sign and return the second page of the notice to the local DHHR office and the WV CHIP AG is closed and Medicaid is approved.

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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.

Deemed WV CHIP Newborn

A child born to a WV CHIP recipient is deemed WV CHIP eligible when:

- The child's mother was eligible for, and receiving, CHIP for the date of the child's birth,
- The child is not eligible for Medicaid,
- The child is deemed to have applied as of the date of the birth and is not required to submit an application.

The child receives WV CHIP continuously regardless of changes in circumstances until his first birthday, unless the child:

- Moves out of state,
- Dies,
- The adult voluntarily requests closure of the child's eligibility.

Coverage begins from the first of the month of the child's birth.

D. WV CHIP BENEFIT MAXIMUMS

In compliance with the requirements of the Patient Protection and Affordable Care Act, Public Health Service Act, effective July 1, 2011, WV CHIP recipients no longer have an Annual and/or Lifetime Benefit Maximums.