H-3050  ** LaCHIP PHASE IV **

H-3051  GENERAL INFORMATION

In May 1, 2007, the Louisiana Department of Health (LDH) implemented an expansion of the State Children’s Health Insurance Program (SCHIP).

This program, called the Louisiana Children’s Health Insurance Program (LaCHIP) Phase IV, provides prenatal care services (from conception to birth) for low income uninsured mothers and their unborn children who were not otherwise eligible for Medicaid.

This includes non-citizen women and their unborn children who do not qualify for other Medicaid programs solely because of their citizenship status.

Note:
The individuals listed in I-316 Non-Immigrants Not Eligible For Any Medicaid Program can be considered for LaCHIP Phase IV but remain ineligible for Emergency Medical Services (EMS).

The Patient Protection and Affordable Care Act of 2010 ** (ACA) combined all mandatory and optional eligibility groups, serving individuals under age 19, into one coverage group.

Eligibility for LaCHIP Phase IV is determined by using the Modified Adjusted Gross Income (MAGI) methodology.

Note:
There is no age limit for this group.

Income for LaCHIP Phase IV enrollees must not exceed 214 percent of the Federal Poverty Level (209 percent FPL, plus a 5 percent disregard).

H-3052  ELIGIBILITY DETERMINATION PROCESS

Determine eligibility by applying the following criteria. The elements have been listed in the most logical order, but work on all steps simultaneously.

H-3052.1  Determine Assistance/Benefit Unit
The assistance/benefit unit consists of the pregnant woman.

H-3052.2  Establish Categorical Requirement
A LaCHIP Phase IV pregnant woman must be pregnant for each month of eligibility.
**H-3052.3 Establish Non-Financial Eligibility**

Verify eligibility for each member of the assistance/benefit unit with regard to the following factors:

- **Assignment of Third Party Rights** I-200
- **Citizenship/Alien Status** I-300
- **Enumeration** I-600
- **Residence** I-1900
- **Creditable Health Coverage** I-2200

For LaCHIP Phase IV, citizenship/alien status and enumeration are not eligibility requirements. Attempt to obtain and document any information the applicant can offer for herself and income unit members.

Applicants must be uninsured at the time of application. Applicants are considered to be uninsured if they do not have creditable health insurance that provides coverage of prenatal care services.

For LaCHIP Phase IV, an applicant cannot have access to a state employee health benefits plan (SEHBP) that covers prenatal services. A SEHBP is defined as a plan that is offered or organized by the state government, or on behalf of state employees, or other public agency for employees within the state.

**H-3052.4 Establish Need**

Household composition and countable income for LaCHIP Phase IV Children is based on MAGI. Refer to **I-1550 MAGI Determinations**.

Compare MAGI-based income to the LaCHIP Phase IV income standard. Refer to **Z-200 Federal Poverty Income Guidelines**.

**H-3052.5 Eligibility Decision**

Evaluate all eligibility requirements and verifications received to make the eligibility decision to either reject or certify the case.

**H-3052.6 Certification Period**

The certification period shall not exceed nine (9) months, beginning with the first month of eligibility, and continuing without interruption, until the
pregnancy ends. There is no post-partum eligibility period for this program.

Retroactive medical eligibility shall be explored for the three (3) months prior to the month of application if the applicant was pregnant in the months requested. Refer to H-1800 Retroactive Medical Eligibility (RME).

**H-3052.7 Notice of Decision**

Send the notice of decision to the applicant/enrollee.

**H-3052.8 Deem Newborn**

The newborn is deemed eligible at birth if the mother is determined eligible, initially or retroactively, for the month of birth. Refer to H-3010 Deemed Eligible Children.