Scenario 2 - States treating decisions of HHS Appeals Entity as assessments of eligibility

Individual applies at the FFE and is assessed ineligible for Medicaid and determined eligible to enroll in a QHP through the Exchange and for APTC. The applicant requests a full determination of eligibility by the Medicaid agency.

- **File application at the FFE**
- **Receive application at the FFE**
- **Assessed ineligible for Medicaid and determine eligible for a QHP through the Exchange and for APTC.**
- **Request a full determination of eligibility by the Medicaid agency.**

**Federally Facilitated Exchange (FFE)**
- **Ind.**
- **Apply at the FFE**
- **Receive application**
- **Assessed ineligible for Medicaid and determine eligible for a QHP through the Exchange and for APTC.**
- **Request a full determination of eligibility by the Medicaid agency.**

**HHS Appeals Entity**
- **Receive appeal**
- **Review FFE account for new information to consider**
- **New info found for consideration**
- **Informal resolution hearing occurs and ind. found potentially eligible for Medicaid**
- **Adjudication triggers an AT#2 to the SMA**
- **Issue appeal decision**
- **Send EFT to SMA**
- **Receive eligibility determination notice**
- **Receive eligibility determination notice**

**State Medicaid Agency (SMA)**
- **Receive AT#1 for full determination**
- **Ind. is determined ineligible**
- **Review the AT#1**
- **Accept findings related to eligibility criterion**
- **Determine Eligibility**
- **Eligible**
- **Send notification to the Ind.**
- **Provide Medicaid time limited**
- **Send OUTBOUND AT#1 to FFE with eligibility determination**
- **Ineligible**
- **Send notification to the Ind.**
- **Provide Medicaid time limited**
- **Send OUTBOUND AT#1 to FFE with eligibility determination**

*If the SMA finds the ind. eligible for CHIP, the SMA must enroll the ind. with an effective date according to the State’s approved child health plan.*