

2.8 QUALIFIED CHILDREN AND POVERTY LEVEL CHILDREN

A. CLOSURES

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

- Moves out of state; or
- Dies; or
- Was approved for Medicaid in error; or
- Was approved for Medicaid because of client misrepresentation; or
- 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.

If a child is receiving inpatient 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.

- **Does not have verification of citizenship and/or identity.**
- **Is a minor parent who receives continuous Medicaid eligibility and fails to cooperate with BCSE.**
- **Is approved for SSI and is eligible for SSI Medicaid.**

B. CHANGE IN INCOME

A change in income does not affect eligibility once the 12-month CME period 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 CME period has been established.

EXAMPLE: A family is approved for AFDC Medicaid for the parents and Poverty-Level for the children in April. In August, the AFDC Medicaid is closed due to excessive earned income. The parents are approved for TM, but the children remain PL and are therefore guaranteed the 12-month CME period.

EXAMPLE: A child, age 15, is approved for QC in May. In July his mother changes jobs and the income of the family now exceeds 100% FPL. The child's QC Medicaid eligibility continues through April. QC Medicaid continues for the child, even though income is excessive and the child is not moved to WV CHIP.

C. OTHER CHANGES

A change that is not specified in item A above does not affect a child's 12-month CME period once it is established.

A Qualified Child or Poverty Level child who begins receiving SSI will change to the appropriate coverage group.

See Section 2.1,C for special instructions about the addition of newborn children to Medicaid cases.