

# Medicaid State Plan Eligibility

## General Eligibility Requirements

### Application

MEDICAID | Medicaid State Plan | Eligibility | UT2019MS00030 | UT-19-0016

### Package Header

<b>Package ID</b>	UT2019MS00030	<b>SPA ID</b>	UT-19-0016
<b>Submission Type</b>	Official	<b>Initial Submission Date</b>	9/13/2019
<b>Approval Date</b>	12/10/2019	<b>Effective Date</b>	1/1/2020
<b>Superseded SPA ID</b>	UT-16-0004		
	System-Derived		

### A. MAGI Paper Application

The state uses the following paper application(s) for individuals applying for coverage based on the applicable modified adjusted gross income (MAGI) standard.

- 1. The single, streamlined application for all insurance affordability programs, developed by the Secretary in accordance with section 1413(b)(1)(A) of the Affordable Care Act
- 2. One or more alternative single, streamlined applications developed by the state in accordance with section 1413(b)(1)(B) of the Affordable Care Act and approved by the Secretary, which may be no more burdensome than the streamlined application developed by the Secretary

#### Name

61MED

The paper application(s) has been uploaded.

Document Name	Date Created	
<a href="#">61MED CMS 2020</a>	12/9/2019 5:11 PM EST	

- 3. One or more alternative applications used to apply for multiple human service programs approved by the Secretary, provided that the agency makes readily available the single streamlined application used only for insurance affordability programs to individuals seeking assistance only through such programs

#### Name

61APP

The alternative multi-program paper application(s) has been uploaded.

Document Name	Date Created	
<a href="#">61APP CMS 2020</a>	11/26/2019 9:10 AM EST	

- 4. Other alternative applications, provided that the agency makes readily available the single streamlined application used only for insurance affordability programs to individuals seeking assistance only through such programs

# Application

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	System-Derived		

## B. MAGI Online Application

The state uses the following online application(s) for individuals applying for coverage based on the applicable MAGI standard.

- 1. The single, streamlined application for all insurance affordability programs, developed by the Secretary in accordance with section 1413(b)(1)(A) of the Affordable Care Act
- 2. One or more alternative single, streamlined application developed by the state in accordance with section 1413(b)(1)(B) of the Affordable Care Act and approved by the Secretary, which may be no more burdensome than the streamlined application developed by the Secretary

### Name

MyCase Application

**Screenshots or other documentation of the online application(s) has been uploaded.**

Document Name	Date Created	
<a href="#">Online App</a>	12/9/2019 5:21 PM EST	

- 3. One or more alternative application used to apply for multiple human service programs approved by the Secretary, provided that the agency makes readily available the single application used only for insurance affordability programs to individuals seeking assistance only through such programs
- 4. Other alternative applications, provided that the agency makes readily available the single streamlined application used only for insurance affordability programs to individuals seeking assistance only through such programs

## Application

MEDICAID | Medicaid State Plan | Eligibility | UT2019MS0003O | UT-19-0016

### Package Header

<b>Package ID</b>	UT2019MS0003O	<b>SPA ID</b>	UT-19-0016
<b>Submission Type</b>	Official	<b>Initial Submission Date</b>	9/13/2019
<b>Approval Date</b>	12/10/2019	<b>Effective Date</b>	1/1/2020
<b>Superseded SPA ID</b>	UT-16-0004		
	System-Derived		

### C. Basis Other than MAGI - Paper Application

The state uses the following paper application(s) for individuals applying for coverage on a basis other than the applicable MAGI standard:

1. The single, streamlined application developed by the Secretary or one of the alternate forms developed by the state and approved by the Secretary, and supplemental forms to collect additional information needed to determine eligibility on such other basis, submitted to the Secretary

The supplemental form(s) used to collect additional information has been uploaded.

Name	Date Created	
<a href="#">61APP CMS 2020</a>	11/26/2019 9:13 AM EST	
<a href="#">61MED CMS 2020</a>	11/26/2019 9:13 AM EST	

2. One or more applications designed specifically to determine eligibility on a basis other than the applicable MAGI standard which minimizes the burden on applicants, submitted to the Secretary
3. One or more applications used to apply for multiple human service programs
4. Other alternative applications

## Application

MEDICAID | Medicaid State Plan | Eligibility | UT2019MS00030 | UT-19-0016

### Package Header

<b>Package ID</b>	UT2019MS00030	<b>SPA ID</b>	UT-19-0016
<b>Submission Type</b>	Official	<b>Initial Submission Date</b>	9/13/2019
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<b>Superseded SPA ID</b>	UT-16-0004		
	System-Derived		

### D. Other than MAGI - Online Application

The state uses the following online application(s) for individuals applying for coverage who may be eligible on a basis other than the applicable MAGI standard:

1. The single, streamlined application developed by the Secretary or one of the alternate online forms developed by the state and approved by the Secretary, and supplemental online forms to collect additional information needed to determine eligibility on such other basis, submitted to the Secretary

Screenshots or other documentation of the online form(s) used to the collect additional information have been uploaded

Name	Date Created
<a href="#">MyCase App</a>	9/13/2019 2:39 PM EDT



2. One or more application designed specifically to determine eligibility on a basis other than the applicable MAGI standard which minimizes the burden on applicants, submitted to the Secretary
3. One or more application used to apply for multiple human service programs
4. Other alternative applications

## Application

MEDICAID | Medicaid State Plan | Eligibility | UT2019MS0003O | UT-19-0016

### Package Header

<b>Package ID</b>	UT2019MS0003O	<b>SPA ID</b>	UT-19-0016
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### E. Additional Information (optional)

The online applications will be modified once CMS approves the changes.