

# CBMS Medical Spans Guide:

Updated: 4/2015



County & AU ID/ Case #	Begin Date	End Date	Transaction Date	Non-Citizen Status
<i>Populates with the 2 digit county code, and the household or CBMS case number</i>	<i>Med Span Begin Date</i>	<i>Med Span End Date</i>	<i>The date the span was created or updated</i>	<i>Determined by Decision tables</i>

TPL (Third Party Liability) Code	
00	Medicaid Only
01	Medicare Part A
02	Medicare Part B
03	Medicare Part A and B
04	Medicare Part A, B plus Other
05	Medicare Part A + Other Ins
06	Medicare Part B + Other Ins
11	Part A, Medicare QMB
12	Part B, Medicare QMB
13	Part A and B, Med QMB
14	Part A, B, Med QMB + Other Ins
15	Part A, Med QMB + Other Ins
16	Part B, Med QMB + Other Ins
21	Medicaid, Medicare A, QMB
22	Medicaid, Medicare B, QMB
23	Medicaid, Medicare A/B, QMB
24	Medicaid, Med A/B, Other QMB
25	Medicaid, Med A, Other QMB
26	Medicaid, Med B, Other QMB
49	Commercial Insurance not BC/BS

Category Code	
00	Colorado Refugee Service Program
01	Old Age Pension- Class A Age 65+
02	Old Age Pension- Class B Age 60-64
03	Old Age Pension- Class C-CSH
04	Aid to Families w/Dependent Children
05	Aid to Needy Disabled/SSI/SSI Med
06	Aid to Blind/SSI/SSI Med Only
10	Subsidized Adoption
11	Supplemental Security Income – Foster Care
12	Child Welfare – Foster Care
13	Foster Care – Removed by Ct/AF
19	Foster Care – Out-of-State Child
20	Foster Care – Emancipated
23	Foster Care- Voluntary
24	AFDC – Both Parents Unemployed
25	Aid to Needy Disabled/State Only
41	Old Age Pension- Grandfathered 1973
44	CO Refugee Immigrant Services Program
45	Aid to Needy Disabled – Grandfathered In
46	Aid to the Blind – Grandfathered In
70	W/out Regard to Inc Eligible – FC
81	Child Health Plan Plus
97	W/out regard Inc Eligible- Indo Ref
98	AFDC Foster Care Indo Refugees
99	Other (Default)

Med Flag Code			
<b>A</b>	Adult QMB Only- No MA	<b>T</b>	Qualified Child – AFDC Standard
<b>B</b>	Adult QMB and MA	<b>U</b>	Pregnant
<b>C</b>	Adult QMB/Modified MA Program	<b>Y</b>	Parents Plus
<b>D</b>	Katie Beckett Eligible	<b>Z</b>	Category 44 Refugee Eligible
<b>E</b>	AFDC UP Eligible	<b>0</b>	Grant Code 1, 2 case not eligible QMB
<b>F</b>	Legal Immigrant Prenatal	<b>1</b>	AFDC Institutionalized
<b>G</b>	Continuous Eligibility	<b>2</b>	Adult Medicaid Only
<b>H</b>	American Indian/Alaskan Native	<b>3</b>	Transitional Cases
<b>I</b>	Legal Immigrant Eligible OAP- No Med	<b>4</b>	Aid to Families with Dependent Children
<b>J</b>	Undocumented Alien- Emergency Medical Only	<b>5</b>	Poverty Level Child 100% born > 9/83
<b>K</b>	Undocumented Alien- Emergency Medical Only	<b>6</b>	Needy Newborn- MA Mother
<b>M</b>	Poverty Level Pregnant 133%	<b>7</b>	Qualified Pregnant- AFDC Need
<b>N</b>	Poverty Level Child < 6- 133%	<b>8</b>	AFDC 113 MA- Attributed Income
<b>P</b>	BCCP- Presumptive Eligibility	<b>9</b>	Immigration Reform Control Act 1987
<b>Q</b>	BCCP- Medicaid Eligibility	<b>X</b>	SSI Eligible, Receiving
<b>R</b>	Initial Presumptive Eligibility	<b>W</b>	SSI Eligible, Not Receiving due to 1619B status
<b>S</b>	Extended Presumptive Eligibility	<b>V</b>	SSI Eligible , Not Receiving due to Appeal status

Client Status Code			
<b>1</b>	Payee	<b>5</b>	Payee Pregnant
<b>2</b>	Essential Person	<b>6</b>	Other Adult Pregnant
<b>3</b>	Other Adult	<b>7</b>	Pregnant Child
<b>4</b>	Child	<b>8</b>	SSI/FC Adult Only Payee

Asset Test	
Y	Passed Asset Test
N	Failed Asset Test

Grant Code	
1	Financial and Medical
2	Financial Only
3	Medical Only
4	Closed

## SIS (Supplemental Income Status) Code

<b>A</b>	FFP For Medicaid ONLY	<b>BX</b>	1998 Pickle
<b>B</b>	FFP For Medicaid/Medicare SMIB Premium	<b>BY</b>	1999 Pickle
<b>BA</b>	2000 Pickle	<b>B0</b>	1980 and 2009 Pickle
<b>BB</b>	1972 and 2005 Pickle	<b>B1</b>	1981 and 2010 Pickle
<b>BC</b>	2001 Pickle	<b>B2</b>	1982 and 2011 Pickle
<b>BD</b>	Disabled W/Ben Under Parents Act (DAC)	<b>B3</b>	1983 and 2012 Pickle
<b>BE</b>	2002 Pickle	<b>B4</b>	1984 and 2013 Pickle
<b>BF</b>	2003 Pickle	<b>B5</b>	1985 and 2014 Pickle
<b>BG</b>	1987 and 2016 Pickle	<b>B6</b>	1986 and 2015 Pickle
<b>BH</b>	1988 Pickle	<b>B7</b>	1977 and 2006 Pickle
<b>BI</b>	2004 Pickle	<b>B8</b>	1978 and 2007 Pickle
<b>BJ</b>	1989 Pickle	<b>B9</b>	1979 and 2008 Pickle
<b>BK</b>	1990 Pickle	<b>C</b>	No FFP – State Only
<b>BL</b>	1991 Pickle	<b>CQ</b>	Qualified Disabled Working Individual (QDWI)
<b>BN</b>	1993 Pickle	<b>CS</b>	Special Low Income Medicare Beneficiary (SLMB)
<b>BP</b>	1994 Pickle	<b>CT</b>	Qualified Individual 1 (QI-1)
<b>BT</b>	1996 Pickle	<b>E1</b>	WAWD Medicaid Buy-In
<b>BU</b>	1997 Pickle	<b>E1</b>	CBWD Medicaid Buy-In
<b>BW</b>	Disabled Widow Or Widower (QDW)		

## POC (Plan Of Care) Code

First Character		Second Character	
<b>R</b>	Developmentally Disabled (Any Age)	<b>S</b>	Categorically eligible for Nursing Facility Care
<b>L</b>	Developmentally Disabled (Any Age)	<b>T</b>	300% Eligible Nursing Facility Care
<b>U</b>	Functionally Disabled-Elderly (65 & Over)	<b>U</b>	Categorically Eligible for HCBS
<b>W</b>	Physically Disabled/Blind Adult (18 to 64)	<b>K</b>	Categorically Eligible for HCBS - CCT
<b>B</b>	Physically Disabled/Blind Adult (18 to 64)	<b>W</b>	300% Eligible HCBS Services
<b>S</b>	Mentally Ill (Any Age)	<b>Q</b>	300% Eligible HCBS Services - CCT
<b>X</b>	Denied in Level of Care Criteria	<b>X</b>	Not Applicable
<b>Y</b>	Level of Care not determined		

## Benchmark Code

First Character		Second Character	
<b>A</b>	MAGI Adult	<b>A</b>	SSDI Payment
<b>B</b>	MAGI Parent/Caretaker	<b>B</b>	Disability Confirmed
		<b>C</b>	Special Medical Needs
		<b>D</b>	< 21 Years of Age
		<b>E</b>	Emergency Medical Services
		<b>F</b>	21 - 64 Years of Age
		<b>G</b>	Benchmark Opt Out