

# Eligibility Report

| App Num | Plan Name | Status   | Benefit | Denial Reason      |
|---------|-----------|----------|---------|--------------------|
| 1001    | SNAP      | APPROVED | 350.0   | null               |
| 1002    | CCAP      | DENIED   | 0.0     | No kids under 16   |
| 1003    | Medicaid  | APPROVED | 500.0   | null               |
| 1004    | Medicaid  | DENIED   | 0.0     | Income too high    |
| 1005    | Medicare  | APPROVED | 800.0   | null               |
| 1006    | Medicare  | DENIED   | 0.0     | Applicant age less |
| 1007    | QHP       | APPROVED | 450.0   | null               |
| 1008    | QHP       | DENIED   | 0.0     | Not eligible for   |