

Department of Public Health  
and Human Services

Section:  
Presumptive Eligibility

HEALTHY MONTANA KIDS

Subject:  
Presumptive Eligibility

**Supersedes: New to HMK Manual**

**General Rule** – Presumptive Eligibility (PE) allows uninsured or under-insured children who meet eligibility criteria to access health care services on a temporary basis. A child(ren) is presumed to be eligible for Healthy Montana Kids (HMK) or HMK **Plus** coverage when a Qualifying Entity (QE) receives a completed Presumptive Eligibility Application for Children and determines the child(ren) meets HMK or HMK **Plus** eligibility criteria. The QE will base the eligibility decision solely on information from the application.

**NOTE:** When a family applies for and qualifies for PE benefits, all children within the family who meet the eligibility criteria qualify for PE benefits. Children are limited to one PE period in a twelve (12) month span.

HMK presumptive eligibility is available to children who:

1. are less than 19 years of age;
2. do not have other health care coverage; and
3. meet all other eligibility criteria.

HMK **Plus** presumptive eligibility is available to children who:

1. are less than 19 years of age; and
2. meet all other eligibility criteria.

**NOTE:** Children whose family income is within HMK **Plus** income guidelines and have other health Insurance coverage may qualify for HMK **Plus** presumptive eligibility.

**Enrollment  
Period**

The enrollment period for PE begins the day the QE determines the family meets all eligibility criteria and ends the earlier of:

1. The day a decision is made regarding on-going HMK or HMK **Plus** eligibility; or
2. The last day of the month following the month the presumptive eligibility determination was completed.

**Example 1:** The Bleu children were determined eligible for PE coverage on June 10. The family provided documentation for on-going HMK coverage on June 15. On June 30, the HMK office determined the children were eligible for on-going HMK coverage. The children's PE enrollment period started June 10 and ended June 30; their regular HMK

coverage begins June 1 and will likely continue through May 31 of the next year.

Example 2: The Greene children were determined eligible for PE coverage on June 10. Documentation for on-going coverage was not provided so the children's PE enrollment period started June 10 and ended July 31.

### Qualified Entity

HMK staff will provide training to medical provider staff. Only after training can an individual be certified as a Qualified Entity (QE). Only certified QEs can determine PE eligibility.

### Qualified Entity Responsibilities

Qualified Entities are responsible to:

1. Explain the PE process and assist families with completion of the PE Application;
2. Verify whether the child(ren):
  - a. is currently covered by HMK or HMK Plus; or

NOTE: If the child(ren) is currently covered by HMK or HMK Plus, he/she does not qualify for PE coverage.

  - b. has had PE coverage during the past 12 months:
    - i. FAX Back 1-800-714-0075;
    - ii. Web Portal [www.mtmedicaid.org](http://www.mtmedicaid.org); or
    - iii. Automated Voice Response – 1-800-714-0060.
3. Ensure all information required to determine eligibility is included on the PE Application;
4. Determine whether the child(ren) meet all eligibility criteria including whether the family's countable monthly income is within income guidelines;
5. List all eligible children on the Proof of Temporary Coverage letter and indicate which coverage (i.e., HMK or HMK Plus) they qualify for;

NOTE: PE coverage begins on the date the QE determines eligibility.

6. Within five (5) days of making a PE determination, fax the PE Application to the HMK Central Office (1-877-543-7669); and

7. Retain a copy of the PE Application.

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