



# ACA/FAMILY MEDICAID 105-1

## APPLICATION PROCESSING – Presumptive Eligibility

	FMA 105-1
<b>Supersedes:</b>	FMA 105-1 (07/01/06)
<b>References:</b>	ARM 37.82.101, .701; 42 CFR 435.1101-3; .1110
<b>Overview:</b>	<p>Presumptive eligibility (PE) allows eligible individuals to immediately receive Medicaid coverage while a full Medicaid application is processed. PE must be determined by a qualified entity.</p> <p>Pregnant women are only eligible for ambulatory prenatal care during the presumptive period while all other presumptive populations are eligible for all Medicaid services.</p> <p>Pregnant women are allowed only one PE period per pregnancy, while other presumptive populations are allowed one PE period in a 12-month period (from the most recent PE effective date).</p>
<b>PRESUMPTIVE POPULATIONS</b>	<ol style="list-style-type: none"><li>1. ACA HMK Plus (FMA 201-4)</li><li>2. ACA HMK (FMA 201-5)</li><li>3. ACA Former Foster Care Children (FMA 201-6)</li><li>4. ACA Parent/Caretaker Relative (FMA 201-1)</li><li>5. ACA Pregnant Woman (FMA 201-2)</li><li>6. MBCCTP – Breast and Cervical Cancer (FMA 201-9)</li><li>7. ACA Adult Medicaid (FMA 201-8)</li><li>8. Plan First</li></ol>
<b>QUALIFIED ENTITIES</b>	<p>Only qualified entities (QE), who have received appropriate training and certification can make presumptive eligibility determinations.</p> <p>QEs must be registered Medicaid providers, and include, but are not limited to:</p> <ol style="list-style-type: none"><li>1. Migrant Health Centers;</li><li>2. Public Health Departments;</li><li>3. Community Health Centers;</li><li>4. State Perinatal Programs;</li><li>5. WIC;</li><li>6. Indian Health Services/Tribal Health Programs; and</li><li>7. Qualified Hospitals</li></ol> <p><b>NOTE:</b> Presumptive pregnancy eligibility can be determined by any of the entities listed; however, only qualified hospitals can determine PE for the other PE populations listed above.</p>
<b>PE FINANCIAL and NONFINANCIAL REQUIREMENTS</b>	<p>Individuals may be found presumptively eligible if:</p> <ol style="list-style-type: none"><li>1. Countable income is within allowable limits for the appropriate program;</li><li>2. The individual meets US citizen or qualified alien status;</li><li>3. There has not been a PE period for either the current pregnancy or previous 12-month period; and/or</li><li>4. Pregnancy and due date are self-attested.</li></ol>

	<b>NOTE:</b> Pregnancy information is only needed for women seeking presumptive pregnancy eligibility.
<b>PRESUMPTIVE ELIGIBILITY PERIOD</b>	<p>Eligibility begins the day a qualified entity determines the individual is eligible. The QE will provide proof of eligibility that allows the individual to receive approved services.</p> <p>PE period ends the:</p> <ol style="list-style-type: none"> <li>1. Day the individual is determined ineligible for Medicaid; or</li> <li>2. Last day of the month following the month of PE (if no regular Medicaid application has been submitted); or</li> <li>3. Day a pending Medicaid application is processed (if received prior to the PE period ending).</li> </ol> <p>PE may overlap a month of regular Medicaid coverage if a Medicaid application is pending at the time a PE determination is made.</p>
<b>EFFECTIVE DATE:</b>	July 1, 2016