



Medicaid and CHP+ Presumptive Eligibility for Children and Pregnant Women: August 2011

Presumptive Eligibility

Medicaid and Child Health Plan *Plus* (CHP+) Presumptive Eligibility (PE) provide immediate temporary health care coverage for children under 19 and pregnant women who have applied for either program and appear to be eligible. PE allows children presumed eligible for Medicaid to access early and periodic screening, diagnosis and treatment services (EPSDT). Pregnant women can access important prenatal care while their Medicaid or CHP+ Prenatal application is processed.

PE Application Process

Children and pregnant women can apply for PE at designated sites throughout Colorado. PE sites are certified by the Colorado Department of Health Care Policy and Financing to determine PE eligibility and open a "PE span." To find a local PE site, a site locator tool can be accessed at: <http://www.colorado.gov/apps/maps/hcpf.map>

At the PE site, the *Application for Medical Assistance* (application for Medicaid, CHP+, and all other medical programs) will be completed. The PE site will fill out a worksheet and then enter information into a computer system to determine PE eligibility. The computer system allows the PE site to perform three functions:

- 1) Determine PE eligibility;
- 2) If eligible, establish a PE span; and
- 3) Print the client's PE card.

Eligibility for PE

Children must:

Meet family income criteria:

- For Medicaid, at or below 133% of the Federal Poverty Level (FPL) for 0-5 year olds
- For Medicaid, at or below 100% FPL for 6-18 year olds
- For CHP+, between 134- 250% FPL (refer to chart)
- Be a Colorado resident
- Be a U.S. citizen or permanent resident with an Alien Registration Number for at least 5 years

Pregnant women must:

- Meet income criteria at or below 250% FPL (refer to chart)
- Be a Colorado resident
- Be a U.S. citizen or permanent resident with an Alien Registration Number for at least 5 years
- Have a medical statement from a licensed medical professional verifying the pregnancy

| Family Size* | Approximate Maximum Household Income (Monthly) | | |
|--------------|--|---------------------|-----------------|
| | Medicaid (100% FPL) | Medicaid (133% FPL) | CHP+ (250% FPL) |
| 1 | \$908 | \$1,207 | \$2,269 |
| 2 | \$1,226 | \$1,631 | \$3,065 |
| 3 | \$1,545 | \$2,054 | \$3,861 |
| 4 | \$1,863 | \$2,478 | \$4,657 |
| 5 | \$2,181 | \$2,901 | \$5,453 |
| 6 | \$2,500 | \$3,324 | \$6,248 |

*include the unborn baby or babies in the family size

Length of PE Span

The PE period will last a minimum of 45 days. The PE period ends on the last day of the month following the 45th day after the eligibility determination site received the application.

Services Covered During PE

Medicaid PE for children covers all services allowed on Medicaid, including EPSDT services. EPSDT services include coordination of care as well as comprehensive health screenings and assessments.

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Services Covered During PE, Continued

Medicaid PE for pregnant women includes outpatient services and prenatal care. It does not cover inpatient care or labor and delivery unless the woman is subsequently deemed eligible for Medicaid and enrolls in the program.

CHP+ PE for children includes all services covered by CHP+ **except dental**. Children deemed eligible for and enrolled in CHP+ will be able to receive dental services once they receive their Delta Dental card.

As of July 1, 2011, CHP+ for pregnant women will not cover inpatient services, including labor and delivery, during the PE period. All other services provided under the CHP+ Prenatal Program are covered during the PE period.

For pregnant women who are subsequently deemed eligible for the CHP+ Prenatal Program, hospital services provided by CHP+ participating providers during the PE period will be paid. Dental services are not covered for pregnant women on CHP+ Prenatal.

PE Providers for Pregnant Women

Before the PE site can print a PE card, the eligible woman is required to choose a Primary Care Provider (PCP). The computer system that PE sites use includes a provider search that will list PCPs within the CHP+ network that accept adults. The woman will use this PCP for all covered services *not* related to her pregnancy.

Medicaid and CHP+ Applications

PE sites are required to forward the *Application for Medical Assistance* to local county departments of human/social services or Medical Assistance (MA) sites to process the application and determine eligibility.

Completed applications must be submitted to the county or MA site within 5 business days. Incomplete applications must be sent in after 10 business days.

The county or MA site has 45 days to process the application. Eligibility will begin on the date of application. Applicants will be notified by mail regarding their eligibility.

Children eligible for CHP+ are enrolled in the State Managed Care Network during a pre-Health Maintenance Organization (HMO) period, until they are enrolled in their HMO. Pregnant women stay in the State Managed Care Network while they are covered by CHP+ Prenatal.

The county cannot extend a PE span past the last day of the month following the 45th day after receipt of application. Any application delay past 45 days of the date of application, as well as the denial of an application, can be appealed.

Appeals

An applicant for Medicaid or CHP+ may submit a written appeal if:

- The county does not process the application within 45 days; or
- The applicant was incorrectly denied Medicaid or CHP+.

All appeals must be submitted within 30 days of the eligibility decision. Click [here](#) for Covering Kids and Families' CHP+ Appeals Process fact sheet.

Questions

For questions on Medicaid or CHP+ PE please contact pe.eligibility@hcpf.state.co.us.

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