



Presumptive Eligibility for Pregnant Women Medicaid and CHP+ Prenatal: August 2005

Presumptive Eligibility

Medicaid and Child Health Plan *Plus* (CHP+) Presumptive Eligibility (PE) provides immediate temporary healthcare coverage for pregnant women who have applied for either program and appear to be eligible. PE allows a pregnant woman access to important prenatal care while her Medicaid or CHP+ Prenatal Program application is processed. Access to early and regular prenatal care has many benefits for the pregnant woman and her unborn baby. Infants that do not receive prenatal care are at a much higher risk for disabilities such as cerebral palsy, deafness, blindness, epilepsy, chronic lung disease, learning disabilities, and attention deficit disorder.

Eligibility for PE

To be eligible, a woman must:

- Have a pregnancy that has been verified by a medical statement from a licensed medical professional;
- Be a Colorado resident;
- Be a U.S. citizen or a documented immigrant and
- Meet income criteria (see chart below).

To qualify for a 14 day provisional PE card, income and immigration status can be self-declared.

There are no resource limits (asset test) for either PE program.

CHP+ PE is for adult women ages 19 and over. Children ages 18 and under are not eligible for PE, but may be eligible for CHP+ which includes prenatal benefits.

PE Application Process

Pregnant women can apply for PE at designated sites throughout Colorado. PE sites work with the Colorado Department of Health Care Policy and Financing (HCPF) to determine and grant PE enrollment, also known as a “PE span.” To find a local PE site, call the Family Healthline at 303-692-2229 (Metro Denver area) or 1-800-688-7777.

At the PE site, the woman will complete an *Application for Colorado Health Care* (joint application for Medicaid and CHP+). The PE site will enter information into a web-based computer system to determine PE eligibility. The web-based computer system allows the PE site to perform three functions:

- 1) Determine PE eligibility
- 2) If eligible, establish a PE span
- 3) Print the client’s PE card

Length of PE Span

PE begins the day that the pregnant woman applies at the PE site and can continue up to 60 days. PE cards state the dates for PE eligibility. If a woman completes the *Application for Colorado Health Care* and provides all required verification, she will receive a PE card for 60 days of coverage.

Provisional PE card- If a woman is unable to provide the necessary verification on the day she applies, she will receive a provisional PE card for 14 days of health coverage. During this time, she must return to the PE site with the required verification to receive a new PE card for the balance of the 60 days. If she does not return with the verification, her PE span will expire on the 15th day.

Approximate Maximum Household Income (Monthly)		
Family Size*	Medicaid (133%FPL)	CHP+ (200% FPL)
1	\$1,061	\$1,595
2	\$1,422	\$2,138
3	\$1,783	\$2,682
4	\$2,145	\$3,225
5	\$2,506	\$3,768
6	\$2,867	\$4,312

Effective July 1, 2005

*include the unborn baby or babies

contacts

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Services Covered during PE

Medicaid PE covers all outpatient services. Labor and delivery are not included in Medicaid PE. The full Medicaid benefit or Emergency Medicaid cover labor and delivery.

CHP+ PE includes all CHP+ Prenatal medical benefits including labor and delivery, prenatal care, hospitalization, mental health services as well as glasses and hearing aids. Dental benefits are not included in CHP+ PE or CHP+ Prenatal Program for women ages 19 and over.

PE Providers

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

Medicaid and CHP+ Prenatal Applications

PE sites are required to forward all *Application for Colorado Health Care* forms to the appropriate location to complete eligibility determination. The local county department of human/social services processes Medicaid applications and ACS (CHP+ vendor) is responsible for CHP+ Prenatal applications.

Complete applications must be submitted to the appropriate location within 5 business days. Incomplete applications must be sent to the county or ACS immediately after the temporary, 14-day PE span expires (on the 15th day). The county or ACS has 45 days to process the application. Applicants will be notified by mail regarding their eligibility.

The county cannot extend a PE span past 60 days even if a woman's PE card expires before her application is processed. She may submit an appeal if her PE span ends before her Medicaid or CHP+ Prenatal eligibility is determined. If applications are not processed in a timely manner (45 days), pregnant women may experience a gap in services.

Appeals

A woman may submit an appeal if:

- The county does not process her application within 45 days or
- She was incorrectly denied Medicaid or CHP+ Prenatal

All appeals must be submitted within 30 days of the eligibility decision.

Emergency Medicaid for Pregnant Women

Pregnant women who meet all Medicaid eligibility criteria except immigration status are eligible for Emergency Medicaid.

PE sites must forward all PE-denied applications to the local county. If a woman was denied PE due to her immigration status, the county will process the application for Emergency Medical Services Only.

Emergency Medicaid will cover labor and delivery. Post partum care is not included.

Questions

For questions on Medicaid PE or Medicaid contact:
Ann Clemens
Colorado State Medicaid/Department of Health Care Policy and Financing:
303-866-6115

For questions on CHP+ PE or CHP+ Prenatal, contact:
CHP+ Customer Service:
1-800-359-1991

PE sites with questions on the PE Website maintained by PSI, contact the CHP+ Provider Network Administration:
1-800-234-5147