



**Centers for Medicare & Medicaid  
Services  
CMS eXpedited Life Cycle (XLC)**

## **Medicaid and CHIP Program (MACPro)**

# **S16 - Presumptive Eligibility for Children under Age 19 RU PRA Document**

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**Version 1.0**

**08/16/2017**

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**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014

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# 1. S16 - Presumptive Eligibility for Children under Age 19 Screenshots

## 1.1 Package Header

News Tasks **Records** Reports Actions Appian

Records / Submission Packages  
**NV - Submission Package - NV2017MS0026D**

Summary Reviewable Units News **Related Actions**

### Medicaid State Plan Eligibility

#### Presumptive Eligibility

#### Presumptive Eligibility for Children under Age 19

MEDICAID | Medicaid State Plan | Eligibility | NV2017MS0026D

The state provides Medicaid coverage to children when determined presumptively eligible by a qualified entity. [Request System Help](#)

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

#### Package Header

<b>Package ID</b> NV2017MS0026D	<b>SPA ID</b> N/A
<b>Submission Type</b> Draft	<b>Initial Submission Date</b> N/A
<b>Approval Date</b> N/A	<b>Effective Date</b> N/A
<b>Superseded SPA ID</b> NV-17-0420-420G System-Derived	

[View Implementation Guide](#)

[VIEW ALL RESPONSES](#)

Figure 1: Package Header

## 1.2 A. Presumptive Eligibility Income Standard, B. Presumptive Eligibility Age Limit and C. Presumptive Eligibility Period

News Tasks **Records** Reports Actions Applan

[VIEW ALL RESPONSES](#)

**Presumptive eligibility for children is determined under the following provisions:**

**A. Presumptive Eligibility Income Standard** +/-

2. The income standard for presumptive eligibility is the higher of the standard used for Targeted Low-income Children (42 CFR 435.229) or the standard used for Infants and Children under 19 (42 CFR 435.118), for that child's age.

[View approved version of the Infants and Children under Age 19 eligibility group](#)  
[View approved version of Optional Targeted Low Income Children](#)

**B. Presumptive Eligibility Age Limit** +/-

Children under the following age may be determined presumptively eligible:

**Under age:**

**C. Presumptive Eligibility Period** +/-

1. The presumptive period begins on the date the determination is made.

2. The end date of the presumptive period is the earlier of:

- a. The date the eligibility determination for regular Medicaid is made, if an application for Medicaid is filed by the last day of the month following the month in which the determination of presumptive eligibility is made; or
- b. The last day of the month following the month in which the determination of presumptive eligibility is made, if no application for Medicaid is filed by that date.

3. Periods of presumptive eligibility are limited as follows:

- a. No more than one period within a calendar year.
- b. No more than one period within two calendar years.
- c. No more than one period within a six-month period, starting with the effective date of the initial presumptive eligibility period.
- d. No more than one period within a twelve-month period, starting with the effective date of the initial presumptive eligibility period.
- e. Other reasonable limitation:

Name of limitation	Description

✕

[+ Add Limitation](#)

Figure 2: Section A, Section B and Section C

# 1.3 D. Application for Presumptive Eligibility–Part 1

**D. Application for Presumptive Eligibility**

- 1. The state uses a standardized screening process for determining presumptive eligibility.
- 2. The state uses a single application form for Medicaid and presumptive eligibility, approved by CMS. A copy of the single streamlined application with questions necessary for a PE determination highlighted or denoted is included.
- 3. The state uses a separate application form for presumptive eligibility, approved by CMS. A copy of the application form is included.
- 4. The state uses an online portal or electronic screening tool for presumptive eligibility approved by CMS. Screenshots of the tool included.

**Saved Documents**

- Maximum file size : 2MB
- Valid file extensions: pdf; ppt; doc; docx; xls; xlsx; pptx

<input type="checkbox"/>	Name	Date Created	Type
No items available			

A document is required

UPLOAD

DELETE DOCUMENT(S) SAVE DOCUMENT(S)

**Saved Documents**

- Maximum file size : 2MB
- Valid file extensions: pdf; ppt; doc; docx; xls; xlsx; pptx

<input checked="" type="checkbox"/>	Name	Date Created	Type
<input checked="" type="checkbox"/>	AQM 2016- Field SpecificationsDocument	6/21/2017 11:07 PM EDT	

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DELETE DOCUMENT(S) SAVE DOCUMENT(S)

**Saved Documents**

- Maximum file size : 2MB
- Valid file extensions: pdf; ppt; doc; docx; xls; xlsx; pptx

<input checked="" type="checkbox"/>	Name	Date Created	Type
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Figure 3: Section D-Part 1

# 1.4 D. Application for Presumptive Eligibility–Part 2 and E. Presumptive Eligibility Determination

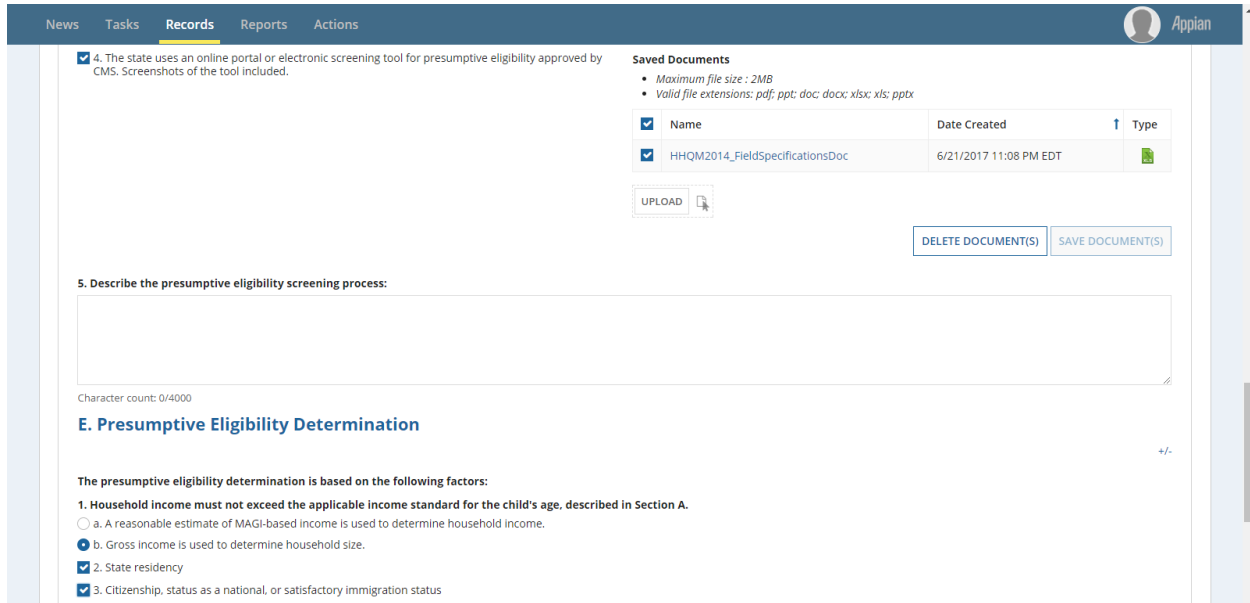


Figure 4: Section D-Part 2 and Section E

# 1.5 F. Qualified Entities

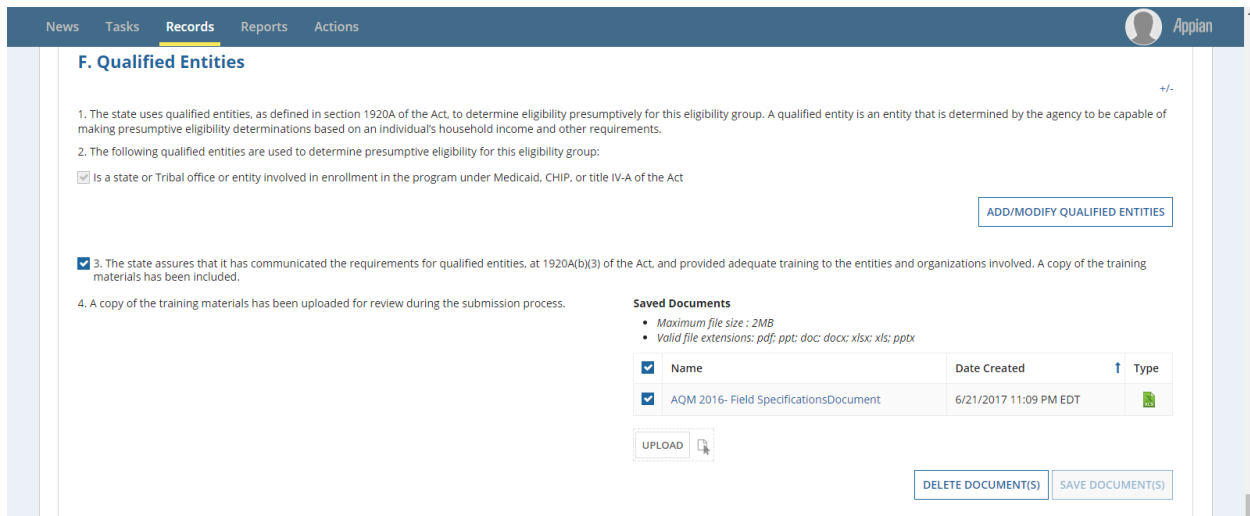


Figure 5: Section F

## 1.6 G. Additional Information (optional)

### G. Additional Information (optional)

Character count: 0/4000

**Validation & Navigation**

Would you like to validate the reviewable unit data?  
 Yes  No

Warning: Any field containing more than 4000 characters will be truncated when saved.

Navigate to Reviewable Unit  
-- Select Reviewable Unit --

Not Started      In Progress      Complete

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Figure 6: Section G