



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

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

# **S32T-Adult Group - Presumptive Eligibility PRA document**

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**Version 1.0**

**08/21/2017**

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# 1. S32T-Adult Group - Presumptive Eligibility – Screenshots

## 1.1 Adult Group - Presumptive Eligibility

### Medicaid State Plan Eligibility

#### Presumptive Eligibility

#### Adult Group - Presumptive Eligibility

MEDICAID | Medicaid State Plan | Eligibility | GU2017MS0033D

The state covers individuals under the Adult Group when determined presumptively eligible by a qualified entity.

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CMS-10434 OMB 0938-1188

Not Started

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Complete

#### Package Header

|                          |                                   |                                |     |
|--------------------------|-----------------------------------|--------------------------------|-----|
| <b>Package ID</b>        | GU2017MS0033D                     | <b>SPA ID</b>                  | N/A |
| <b>Submission Type</b>   | Draft                             | <b>Initial Submission Date</b> | N/A |
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| <b>Superseded SPA ID</b> | GU-17-0525-0001<br>System-Derived |                                |     |

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#### A. 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.

**Figure 1: Adult Group - Presumptive Eligibility – 1**

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 |
|--------------------|-------------|
| No items available |             |

**A value is required**

+ Add Limitation

### B. 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.

**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**

**Figure 2: Adult Group - Presumptive Eligibility – 2**

3. The state uses a separate application form for presumptive eligibility, approved by CMS. A copy of the application form is included.

**Saved Documents**

- Maximum file size : 2MB
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| <input type="checkbox"/> | Name | Date Created | ↑ | Type |
|--------------------------|------|--------------|---|------|
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**A document is required**

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

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**A document is required**

5. Describe the presumptive eligibility screening process:

**Figure 3: Adult Group - Presumptive Eligibility – 3**

5. Describe the presumptive eligibility screening process:

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### C. Presumptive Eligibility Determination

The presumptive eligibility determination is based on the following factors:

- The individual must meet the categorical requirements of 42 CFR 435.119.
- Household income must not exceed the applicable income standard described at 42 CFR 435.119.
  - a. A reasonable estimate of MAGI-based income is used to determine household income.
  - b. Gross income is used to determine household income.
- State residency
- Citizenship, status as a national, or satisfactory immigration status

### D. Qualified Entities

Figure 4: Adult Group - Presumptive Eligibility – 4

### D. Qualified Entities

- The state uses qualified entities, as defined in section 1920A of the Act, to determine eligibility presumptively for this eligibility group. A qualified entity is an entity that is determined by the agency to be capable of making presumptive eligibility determinations based on an individual's household income and other requirements.
- The following qualified entities are used to determine presumptive eligibility for this eligibility group:

[ADD/MODIFY QUALIFIED ENTITIES](#)
- The state assures that it has communicated the requirements for qualified entities, at 1920A(b)(3) of the Act, and has provided adequate training to the entities and organizations involved.
- A copy of the training materials has been uploaded for review during the submission process.

**Saved Documents**

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

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### E. Additional Information (optional)

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Figure 5: Adult Group - Presumptive Eligibility – 5