

Revision:

CMS-PM-

ATTACHMENT 2.2-A

Page 23e

OMB NO.:

Montana

Citation

Groups Covered

**B. Optional Coverage Other Than the Medically Needy  
(Continued)**

1902(a)(47)  
and 1920A of the Act  
42 CFR 435.1100-1102

**\_X\_ 26. Presumptive Eligibility for Children**

Children under age 19 (no more than age 19) who are determined by a "qualified entity" (as defined in §1920A(b)(3)(A) of the Act) based on preliminary information, to meet the highest applicable income criteria specified in this plan under ATTACHMENT 2.6-A and are therefore determined to be presumptively eligible during a presumptive eligibility period in accordance with §1920A of the Act.

The presumptive period begins on the day that the determination is made. If an application for Medicaid is filed on the child's behalf by the last day of the month following the month in which the determination of presumptive eligibility was made, the presumptive period ends on the day that the State agency makes a determination of eligibility based on that application. If an application is not filed on the child's behalf by the last day of the month following the month the determination of presumptive eligibility was made, the presumptive period ends on that last day.

The following types of "qualified entities" are used to determine presumptive eligibility: Enrolled Medicaid providers

The State requires that a written application be completed and signed by the child's parent or other

representative: **X** Yes    ☐ No

The written application requests the following identifying information: Self declaration of Household Information for example: address, city and state.

Family Information for example: name, relationship, date of birth. Income for example: earned and unearned. Signature of applicant.

TN No. 11-013 Approval Date 12/19/11 Effective Date 1-1-11

Supersedes

TN No. NEW