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State/Territory Name: West Virginia

State Plan Amendment (SPA) #: 23-0001

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Companion letter
- 3) Summary Form (with 179-like data)
- 4) Approved SPA Pages

WV - Submission Package - WV2022MS0002O - (WV-23-0001) - Eligibility

Sum mary

Reviewable Units Versions Correspondence Log Analyst Notes

Approval Letter

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Related Actions

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services CAHPG

601 E. 12th St., Room 355 Kansas City, MO 64106



Center for Medicaid & CHIP Services

December 19, 2024

Cynthia Beane Commissioner WV Bureau for Medical Services 350 Capitel Street, Reem 251 Charleston, WV 25301

Re: Approval of State Plan Amendment WV-23-0001

Dear Commissioner Beane,

On March 08, 2023, the Centers for Medicare & Medicaid Services (CMS) received West Virginia State Plan Amendment (SPA) WV-230001 to conduct Medicaid presumptive eligibility determinations.

We approve West Virginia State Plan Amendment (SPA) WV-23-4001 with an effective date(s) of

Reviewable Unit	Effective Date
Optional Eligibility Groups	May 12, 2023
Presumptive Eligibility	May 12, 2€23
Presumptive Eligibility for Children under Age 19	May 12, 2023
Parents and Other Caretaker Relatives - Presumptive Eligibility	May 12, 2023
Presumptive Eligibility for Pregnant Women	May 12, 2023
Adult Group - Presumptive Eligibility	May 12, 2023
Former Foster Care Children - Presumptive Eligibility	May 12, 2023
Individuals Needing Treatment for Greast or Cervical Cancer - Presumptive Eligibility	January ● 1, 2023

Please note that accompanying the approval of SPA 23-001 is the enclosed companion letter regarding the need for West Virginia to make modifications to its online PE application (on line portal), provider training materials, and policy manual. West Virginia will provide dates for completion of outstanding changes within 60 days of approval of this SPA and will implement revised online PE, provider training materials, and policy manual addressing CMS concerns by the dates listed in the companion letter.

Name	DateCreated
WV-23-0001 companion letter signed	12/19/2024 10:24 AM EST

If you have any questions regarding this amendment, please contact Nicole Guess at nicole.guess@cms.hhs.gov.

Sincerely,

Ruth A. Hughes

Acting Director, Division of Program Operations

Center for Medicaid & CHIP Services

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 601 E. 12th St., Room 355 Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

December 18, 2024

Cynthia Beane Commissioner WV Bureau for Medical Services 350 Capitol Street, Room 251 Charleston, WV 25301

Re: West Virginia State Plan Amendment (SPA) 23-0001 - Companion Letter

Dear Commissioner Beane:

This letter is being sent as a companion to the Centers for Medicare & Medicaid Services (CMS) approval of State Plan Amendment (SPA) WV 23-0001, which was submitted to CMS on March 8, 2023.

Approval of SPA WV 23-0001 includes approval of the provider training materials, the online Presumptive Eligibility (PE) application, WV policy manual 400.8 Presumptive Eligibility Policy, and other materials used for the following PE groups: children under age 19, parents and other caretaker relatives, pregnant women, adults, former foster care children, and individuals needing treatment for breast or cervical cancer. This approval of all PE Reviewable Units (RU) will be effective as of May 12, 2023, except that the individuals needing treatment for breast or cervical cancer PE RU is effective as of January 1, 2023.

Pending implementation of the changes described below, West Virigina will use an interim online PE application and provider training materials. The state will revise the online PE application, provider training materials, and policy manual as described below.

	Necessary Change	Date by which
		the change will
		be completed:
1.	Online PE Application and Provider Training Materials	
	WV will remove "Other" and "Administrative reason" as denial	
	reasons in the Job Aid, online PE application, and denial notices.	
	The state will provide a date by which these changes will be made,	
	along with screenshots and/or copies of all updated PE materials.	
2.	Online PE Application and Provider Training Materials	
	WV will revise the Job Aid, online PE application, and denial	
	notices to include the following denial reasons in PE:	

	a. Already received PE during this pregnancy	
	b. Over income	
	c. Currently receiving Medicaid	
	d. Already received PE in the past 12 months	
	e. Ineligible due to citizenship or immigration status	
	f. Does not meet required criteria for any PE coverage	
	group	
	g. Not a resident of West Virginia	
	g. 110t a resident of west virginia	
	The state will provide a date by which these changes will be made,	
	along with screenshots and/or copies of all updated PE materials,	
	including the PE denial notice(s), Job Aid, and PE application/	
	portal screenshots.	
3.	Online PE Application and Provider Training Materials	
	WV will revise the PE application and any other PE materials to	
	remove "past experience or any facility policies in place in	
	determining PE" from the state's PE policies.	
	The state will provide a date by which these changes will be made,	
	along with screenshots and/or copies of all updated PE materials.	
4.	Online PE Application and Provider Training Materials	
٦.	WV will revise all provider training materials to reflect that a	
	reasonable estimate of MAGI-based income is used to determine	
	household income. The state will provide a date by which these	
	changes will be made, along with screenshots and/or copies of all	
-	updated PE materials.	
5.	Online PE Application and Provider Training Materials	
	WV will revise the online PE application and provider training	
	materials regarding how to count an unborn fetus in the household	
	to explain that:	
	a. An unborn fetus is to be counted in a PE applicant's	
	household.	
	b. Any unborn fetus of any household member is to be	
	included in a PE applicant's household, if this is the	
	state's policy.	
	The state will provide training to PE providers to include this	
	information in determining household size until the PE system can	
	be enhanced to include this information. The state will also provide	
	a date by which these changes will be made, along with screenshots	
	and/or copies of all updated PE materials.	
6.	Online PE Application and Provider Training Materials	
	WV will implement reasonable estimate of MAGI based on the	
	following tax filing criteria:	
	rana ning tak ning tanana.	

- a. If a PE applicant files taxes, the household will include all individuals included on the tax form (in addition to the unborn fetus, if applicable).
- b. The state will include instructions on all PE provider training materials and the online PE application, if applicable, to explain that individuals are not required to file taxes to be eligible for PE.
- c. For individuals who do not file taxes, the state will implement the non-filer rules and revise the online PE application and provider training materials to provide instructions on who to include in the PE applicant's household in the following way:
 - i. List yourself and the members of your immediate family who live with you. Include your spouse and your children under [State policy: Applicable age] if they live with you. Do not list other relatives or friends even if they live with you.
 - ii. If you are pregnant and age 19 or older, include your unborn fetus(es) in the household.
 - iii. Please include only the PE applicant in the household with no income test if:
 - 1. You are pregnant and under age 19, only count yourself in your household
 - 2. Former Foster Care Group
 - 3. Breast and Cervical Cancer Group

The state will provide a date by which these changes will be made, along with screenshots and/or copies of all updated PE materials.

- 7. Online PE Application and Provider Training Materials
 WV to revise the online PE application and provider training
 materials to provide instructions on what types of income to include
 and not include:
 - a. The total income before taxes are taken out for all family members. Include any job income, for example, wages, salaries, and self-employment income. Also include other income, for example, unemployment checks, or disability payments from the Social Security Administration ("SSDI").
 - b. Do *not* include Supplemental Security Income ("SSI payments"), any child support you receive, or alimony for divorce decrees or separation agreements finalized or modified after Dec. 31, 2018.

The state will provide a date by which these changes will be made, along with screenshots and/or copies of all updated PE materials.

-	W	
8.	400.8 Presumptive Eligibility Policy WV will update the list of qualified entities to include Pharmacies and First Choice Service. The state will provide a date by which this change will be made, along with copies of the updated PE policy manual.	
9.	400.8 Presumptive Eligibility Policy	
	WV will update the policy manual to include the Parent and	
	Caretaker Relatives group and reflect eligibility for Former Foster	
	Care Children under age 26 from a state other than West Virginia.	
	The state will provide a date by which these changes will be made,	
	along with copies of the updated PE policy manual.	
10.	400.8 Presumptive Eligibility Policy	
	WV will revise the instructions that say "PE will be assessed using	
	the rules outlined in the state's Income Maintenance Manual" to	
	reflect the state's election to apply a reasonable estimate of MAGI-	
	based income is used to determine household income. The training	
	materials will clearly define what this means based on the state's	
	elections. The state will provide a date by which this change will be	
	made, along with copies of the updated PE policy manual.	
11.	400.8 Presumptive Eligibility Policy	
	WV will revise the policy that "Applicants are allowed only one PE	
	determination per 12-month period or, per pregnancy" to say "PE	
	period" instead of "PE determination." The state will provide a date	
	by which this change will be made, along with copies of the	
	updated PE policy manual.	
12.	400.8 Presumptive Eligibility Policy	
	WV will revise the policy regarding how to count an unborn fetus	
	in the household to explain that:	
	c. An unborn fetus is to be counted in a PE applicant's	
	household.	
	d. Any unborn fetus of any household member is to be	
	included in a PE applicant's household, if this is the	
	state's policy.	
	The state will provide training to PE providers to include this	
	information until the PE system can be enhanced to include this	
	information. The state will also provide a date by which this change	
	will be made, along with copies of the updated PE policy manual.	
13.	400.8 Presumptive Eligibility Policy	
	The state will remove the use of "past experience or any facility	
	policies in place in determining PE" from the state's policy. The	
	state will provide a date by which this change will be made, along	
	with copies of the updated PE policy manual.	

Please submit the revised online PE application screenshots and copies of all provider training materials and the policy manual to CMS for review upon completion of each change identified above. We will continue to be available to provide technical assistance. Should you have any questions about this letter, please contact Nicole Guess at <u>nicole.guess@cms.hhs.gov</u> or Sarah O'Connor at <u>Sarah.Oconnor@cms.hhs.gov</u>.

Sincerely,

James G. Scott, Director Division of Program Operations

cc: Sarah Young Anita Hayes Riley Romeo

WV - Submission Package - WV2022MS0002O - (WV-23-0001) - Eligibility

Summary

Reviewable Units Versions Correspondence Log Analyst Notes Approval Letter RAI Transaction Logs News

Related Actions

Submission - Summary

MEDICAID | Medicald State Plan | Eligibility | WV2022MS00020 | WV-23-0001

CM5-16434 OMB 0938-1188

Package Header

Package ID WV2022MS0002O

Submission Type Official Approval Date 12/19/2024

Superseded SPA iD N/A

SPA ID WV-23-0001

Initial Submission Date 3/8/2023

Effective Date N/A

State Information

State/Territory Name: West Virginia

Medicald Agency Name: WV Bureau for Medical Services

Submission Component

State Plan Amendment

Medicai d

CHIP

Submission - Summary

MEDICAID | Medicald State Plan | Eligibility | WV2022MS00020 | WV-23-0001

Package Header

Package ID WV2022MS0002O

Submission Type Official

Approval Date 12/19/2024

Superseded SPA ID N/A

SPA ID WV-23-0001

Initial Submission Date 3/8/2023

Effective Date N/A

SPA ID and Effective Date

SPA ID WV-23-0001

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Optional Eligibility Greups	5/12/2023	New
Presumptive Eligibility	5/12/2023	New
Presumptive Eligibility for Children under Age 19	5/12/2023	WV-15-0006
Parents and Other Caretaker Relatives - Presumptive Eligibility	5/12/2023	WV-15-0006
Presumptive Eligibility for Pregnant Women	5/12/2023	WV-15-0006
Adult Group - Presumptive Eligibility	5/12/2023	WV-15-0006
Former Foster Care Children - Presumptive Eligibility	5/12/2@23	WV45 400 6
Individuals Needing Treatment for Breast or Cervical Cancer - Presumptive Eligibility	1/1/2023	New

 $\label{thm:page_problem} \textbf{Page Number of the Superseded Plan Section or Attachment (If Applicable):}$

Submission - Summary

MEDICAID | Medicald State Plan | Eligibility | WV2022MS90029 | WV-23-0001

Package Header

Package ID WV2022MS0002O

Submission Type Official

Approval Date 12/19/2#24

Superseded SPA ID N/A

SPA ID WV-23-0001

Initial Submission Date 3/8/2023

Effective Date N/A

Executive Summary

Summary Description Including West Virginia is adding Local Health Departments, Medicaid enrolled pharmacies and First Choice Services as qualified Goals and Objectives entities to conduct Medicaid presumptive eligibility determinations. Amendments were made to provide Medicaid coverage to Children Under Age 19, Pregnant Women, Parents/Caretaker Relatives, Adult Group, Breast and Cervical Cancer group, and Former Foster Children when determined presumptively eligible by additional qualified entities as identified.

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First	2023	\$0
Second	2024	\$0

Federal Statute / Regulation Citation

Sections 1920, 1920A, 1920B, and 1920C of the Act and 42 CFR Part 435 Subpart L

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created	
No items available		

Submission - Summary

MEDICAID | Medicald State Plan | Eligibility | WV2022MS00020 | WV-23-0001

Package Header

Package ID WV2 • 22MS • 0020
Submission Type Official
Approval Date 12/19/2 • 24

Superseded SPA ID N/A

SPA ID WV-23-0001

Initial Submission Date 3/8/2023

Effective Date N/A

Governor's Office Review

 No comment
○ Comments received
O No response within 45 days
Other

PRA Disclosure Statement, Centers for Medicare & Medicaid Services (CMS) collects this mandatory Information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in effects to boost program Integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid DMG control number. The valid DMG control number for this information collection is estimated to range from 1 hours 80 hours per response(see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection, if you have comments concerning the accuracy of the time estimate(s) or suggestions for Improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimere, Maryland 21244-1850.

This view was generated on 12/26/2024 11:25 AM EST

Records Submission Packages - View All

WV - Submission Package - WV2022MS0002O - (WV-23-0001) - Eligibility

VIEW PRINT PREVIEW

Summary Reviewable Units Versions Correspondence Log Analyst Notes Review Assessment Report Approval Letter RAI

Transaction Logs News Related Actions

CAll Reviewable Units

Former Foster Care Children - Presumptive Eligibility

View Compare Doc

Medicaid State Plan Eligibility

Presumptive Eligibility

Individuals Needing Treatment for Breast or Cervical Cancer - Presumptive Eligibility

MEDICAID | Medicaid State Plan | Eligibility | WV2022MS0002 | WV-23-0001

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

PackageID WV2022MS0002O
SubmissionType Official
Approval Date 12/19/2024
Superseded SPA ID New

User-Entered

SPA ID WV-23-0001 Initial Submission Date 3/8/2023

Effective Date 1/1/2023

View Implementation Guide

VIEW ALL RESPONSES

The state covers the individuals needing treatment for breast or cervical cancer group when determined presumptively eligible by a qualified entity.

A. Presumptive Eligibility Period

Collapse

- 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 filled 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,
 - ② 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
One PE period per CDC BCCEDP enrollment	PE may be provided for each time the woman is screened under the Centers for Disease Control and Prevention (CDC) breast and cervical cancer early detection program

Name of Limitation	Description
	(BCCEDP) and found to need treatment for breast or cervical cancer.

B. Application for Presumptive Eligibility

Collapse

- 1. The state uses a standardized screening process for determining presumptive eligibility.
- 2. The state uses the single streamlined paper and/or online application for Medicaid and Presumptive Eligibility, approved by CMS. A copy of the single streamlined paper and/or online application with questions necessary for a PE determination highlighted or denoted is attached.
- 3. The state uses a separate paper application form for presumptive eligibility, approved by CMS. A copy of the application form is included.

Name	Date Created	
CDC_Certificate_Diagnosis_Medical d_Referral_FForm	10/6/2022 4:18 PM EDT	Į.
8 CC-I-Rev-8-17-23 2-Approved-CC-8-8-23	9/26/2024 5:42 PM EDT	Į
Name	Date Created	
WV SPA 23 0001 Presumptive Eligibility Application screenshots	9/26/2024 5:42 PM EDT	c

4. The state uses an online portal or electronic screening tool for presumptive eligibility approved by CMS. Screenshots of the tool included.

5. Describe the presumptive eligibility screening process:

Breast and Cervical Cancer Screening Providers (BCCSP): A woman is screened at a BCCSP site, If diagnosed with breast or cervical cancer, she is given a CDC Certificate of Diagnosis and completes form DFA-BCC-1. If the woman is determined presumptively eligible, the DFA-BCC-1 form is forwarded by the CDC facility to the DHHR office in the county in which the applicant resides. The Worker enters the information in the eligibility system to issue a Medical ID card.

Other entities: Authorized presumptive eligibility (PE) employees will gather data from the individual using the presumptive eligibility determination portion of the on-line system. The employee may obtain information relating to the individual such as name, address, phone number, and social security number from other facility personnel such as registrars; however, this information must be confirmed by the individual or another person with reasonable knowledge of the individual's needs status. The individual or another person with reasonable knowledge of the individual's status seeking PE must attest to the information provided on the application. Authorized employees may not request any documentation or require verification of information provided.

The authorized employee must make the final determination of whether or not the individual may be eligible for Medicaid. This decision is made based on the criteria in section 400.8,3 of the policy manual and the results of the online system. Once a final decision is made by the authorized worker he/she will provide the patient with either a temporary Medicaid card or a document stating why he/she was not determined presumptively eligible.

The Authorized Employee must assist the applicant or his authorized representative in completing the single streamlined application (SLA) for Medicaid and forward the application to the Department.

C. Presumptive Eligibility Determination

Collapse

The presumptive eligibility determination is based on the following factors:

- 1. The individual must meet the categorical requirements of 42 CFR 435.213.
- 2. State residency
- 3. Citizenship, status as a national, or satisfactory immigration status

D. Qualified Entities

Collapse

- 1. The state uses qualified entities, as defined in section 1920® of the Act, to determine eligibility presumptively for this eligibility group. These entities must be eligible to receive payment for services under the state's approved Medicald state plan and determined by the state to be capable of determining presumptive eligibility for this group.
- 2. The types of entities used to determine presumptive eligibility for this eligibility group are;
 - a. Providers who conduct screenings for breast and cervical cancer under the state's Centers for Disease Control and Prevention's National Breast and Cervical Cancer Early Detection Program.
 - b. Other entity

Type of entity	Description
Federally Qualified Health Centers	Federally Qualified Health Centers (FQHC) receiving a grant under

are defined as: in an outpatient clinic. RHC services services that are typically furnished are engaged primarily in providing Security Act (the Act) as facilities that section 1861 (aa)(2) of the Social Rural Health Clinics are defined in Rural Health Clinics (RHC) specialty or prescription health care. have limited or no access to primary, uninsured, underinsured and/or services to individuals who are clinics restrict eligibility for their ability to pay. Free or charitable delivered regardless of the patient's Clinics provided essential services are still be considered Free or Charitable nominal/sliding fee to patients, may above definition, but charge a Entities that otherwise meet the Free Clinis 501(c)(3) organization. program component or affiliate of a organizations, or operate as a clinics are 501 (c)(3) tax-exempt disadvantaged individuals. Such health services to economically pharmacy, vision and/or behavioral provide a range of medical, dental, • J lebom î¹sat/seaff model t• net health care organizations that Free and Charitable Clinics are safetystate's comprehensive mental health secretary in accordance with the state that are determined by the health centers at locations within the health centers comprehensive community mental to establish, maintain and operate Comprehensive community mental Resources is authorized and directed Department of Health and Human Virginia Code \$27-24-1, The health centers as identified in West Comprehensive community mental 1661 1 Care Improvement Act as of October under Title V of the Indian Health Indian organization receiving funds Determination Act or as an urban organization under the Indian Selfprogram or facility of a tribe or tribal is operating as an outpatient health health center as of January 1, 1990; as a comprehensive Federally funded HHS for purposes of Medicare Part B the Secretary of the Department of Administration; or, was treated by Resources and Services recommendation of the Health look-alike) based on the Such a grant (i.e., qualifies as a FQHC meet the requirements for receiving Health & Human Services (HHS) to Secretary of the Department of Act but is determined by the grant under Section 330 of the PHS the PHS Act: • (is not receiving a receive a grant under Section 330 of and meets the requirements to contract with the recipient of a grant funding from a grant under a Service (PHS) Act; or, receiving Section 330 of the Public Health Type of entity Describtion

Type of entity

Description

- · Physician services;
- Services and supplies furnished incident to a physician's services;
- Nurse Practitioner (NP), Physician Assistants (PA), certified nurse midwife (CNM), clinical psychologist (CP); and clinical social worker (CSW)
- Services and supplies furnished incident to an NP, PA, CNM, CP, or CSW services

To be eligible for certification as a RHC, a clinic must be located in a non-urbanized area, as determined by the U.S. Census Bureau, and in an area designated or certified within the previous 4 years by the Secretary, Health and Human Services (HHS), in any one of the fourtypes of shortage area designations that are accepted for RHC certification.

RHCs can be either independent or provider based, Independent RHCs are stand-alone or freestanding clinics and submit claims to a Medicare Administrative Contractor (A/B MAC). The statutory requirements for RHCs are found in section 1861(aa)(2) of the Act. Many of the regulations pertaining to RHCs can be found at 42 CFR 405,2400 Subpart X and following, and 42 CFR 491 Subpart A and following.

Local Health Departments

West Virginia's 55 counties are served by 49 local boards of health charged with protecting the health and safety of the citizens of West Virginia. Local boards of health provide services through local health departments located in all 55 counties including communicable and reportable disease prevention and control.

First Choice Services

First Choice Services - ACA Navigators and HELP4WV Helpline Specialists

First Choice Services operates several programs and helplines with the common goal of promoting wellbeing and facilitating access to behavioral health and social services. First Choice began as a collaborative effort among West Virginia's comprehensive behavioral health care centers. First Choice also operates the ACA Navigator program which is funded by a grant from the Center for Medicare and Medicaid Services,

ACA Navigators provides free health coverage enrollment assistance to people who are uninsured. Certifiled Navigators help consumers enroll in qualified health plans through the Health Insurance Marketplace or, if eligible, Medicaid. HELP4WV offers a 24/7 call, chat, and text line that provides immediate help for any West Virginian struggling with an addiction or mental health

Type of entity	Description
	issue. The helpline staff offers confidential support and resource referrals, including self-help groups, out-patient counseling, medication-assisted treatment, psychiatric care, emergency care, and residential treatment.
Medicaid enrolled pharmacies	Licensed pharmacists and pharmacy technicians employed by Medicaid enrolled pharmacies.

- 3. The state assures that it has communicated the requirements for entities, at 1920B 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.

Name	Date Created	
SL_Presumptive Eligibility (PE) Worker - MR9.docx	9/26/2024 5:44 PM EDT	Į
PP_JobAid- Presumptive_Eligibility_Worker	9/26/2024 5:44 PM EDT	

E. Additional Information (optional)

Collapse

PRA Disclosure Statement: Centers for Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of Improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program Integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law, According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is \$938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the Information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

WV - Submission Package - WV2022MS0002O - (WV-23-0001) - Eligibility

Summary Reviewable Units Versions Correspondence Log Analyst Notes Approval Letter RAI Transaction Logs News Related Actions

Medicaid	State	Plan	Eligibil	ity
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Optional Eligibility Groups

MEDICAID | Medicald State Plan | Eligibility | WV2022MS00020 | WV=23-0001

CMS-I 0434 OMB 0938-1188

Package Header

Package ID WV2022MS00020

Submission Type Official

Approval Date 12/19/2024

Superseded SPAID New

User-Entered

SPA ID WV 23 6601

Initial Submission Date 3/8/2023

Effective Date 5/12/2023

A. Options for Coverage

The state provides Medicaid to specified optional groups of individuals.

Yes ONG

The optional eligibility groups covered in the state plan are (elections made in this screen may not be comprehensive during the transition period from the paper-based state plan to MACPro):

Families and Adults

Eligibility Group Name		Covered in State Plan	Include RU In Package	Included in Another Submission Package	Source Type @
Optional Coverage of Parents and Other Caretaker Relatives	P			0	NEW
Reasonable Classifications of Individuals under Age 21	P			0	NEW
Children with Non-IV-E Adoption Assistance	P	С		0	CONVERTED
Independent Foster Care Adolescents	P			0	NEW
Optional Targeted Low Income Children	P			0	NEW
Individuals above 133% FPL under Age 65	P			0	NEW
Individuals Needing Treatment for Breast or Cervical Cancer	P	Г		0	NEW
Individuals Eligible for Family Planning Services	•			0	NEW
Individuals with Tuberculosis	P			0	NEW
Individuals Electing COBRA Continuation Coverage	•	E		0	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕝
ndividuals Eligible for out Not Receiving Cash assistance	P			0	NEW
ndividuals Eligible for Eash Except for nstitutionalization	P			0	NEW
ndividuals Receiving Home and Community- Based Waiver Services under Institutional Rules	P	С		0	NEW
Optional State Supplement Beneficiaries	P			0	NEW
ndividuals in nstitutions Eligible under a Special Income Level	P	С		0	NEW
PACE Participants	P			0	NEW
ndividuals Receiving Hospice	P	⊏		0	NEW
Children under Age 19 with a Disability	P	C		0	NEW
Age and Disability- Related Poverty Level	•			0	NEW
Work Incentives	P			0	NEW
ricket to Work Basic	P			0	NEW
Ficket to Work Medical mprovements	P	С		0	NEW
Family Opportunity Act Children with a Disability	P			0	NEW
ndividuals Receiving State Plan Home and Community-Based Services	P			0	NEW
ndividuals Receiving state Plan Home and Community-Based Services Who Are Otherwise Eligible for HCBS Waivers	9			0	NÉW

Optional Eligibility Groups MEDICAID | Medicald State Plan | Eligibility | WV2022MS00020 | WV-23-0001 **Package Header**

Package ID WV2022MS0002O

Submission Type Official

Approval Date 12/19/2€24

Superseded SPA ID New

User-Entered

SPA ID WV-23-0001

Initial Submission Date 3/8/2023

Effective Date 5/12/2023

B. Medically Needy Options for Coverage

The state provides Medicaid to specified groups of individuals who are medical	ly needy.
--	-----------

Yes ONo

The medically needy eligibility groups covered in the state plan are:

1. Mandatory Medically Needy:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU in Package	Included in Another Submission Package	Source Type 🚱
Medically Needy Pregnant Women	P	С		0	NEW
Medically Needy Children under Age 18	P	С		0	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered in State Plan	include RU in Package	Included in Another Submission Package	Source Type 🚱
Protected Medically Needy Individuals Who Were Eligible in 1973	ø	Œ		0	NEW

2. Optional Medically Needy:

Families and Adults

Eligibility Group Name		Covered In State Plan	include RU in Package	Included in Another Submission Package	Source Type 😯
Medically Needy Reasonable Classifications of Individuals under Age 21	P	Е		0	NEW
Medically Needy Parents and Other Caretaker Relatives	P	С		0	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU in Package	Included in Another Submission Package	Source Type 😉
Medically Needy Populations Based on Age, Blindness or Disability	P	Е		0	NEW

Optional Eligibility Groups

MEDICAID | Medicald State Plan | Eligibility | WV2022MS90029 | WV-23-0001

Package Header

Package ID WV2022MS00020

Submission Type Official

Approval Date 12/19/2024

Superseded SPA ID New

User-Entered

SPA ID WV-23-0001

Initial Submission Date 3/8/2023

Effective Date 5/12/2023

C. Additional Information (optional)

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered (n the source approved version of the state plan and deselected from coverage as part of this submission package:

N/A

PRA Disclosure Statement, Centers for Medicare & Medicaid Services (CMS) collects this mandatory Information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and feeler alreview processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in effects to boost program Integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally Identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid DMD control number. The valid DMD control number for this information collection is estimated to range from 1 hours 30 hours per response (see below), including the time to review Instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for Improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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WV - Submission Package - WV2022MS0002O - (WV-23-0001) - Eligibility

Summary Reviewable Units Versions Correspondence Log Analyst Notes Approval Letter RAI Transaction Logs News Related Actions

Medicaid	State	Plan	Eligibi	lity
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Eligibility and Enrollment Processes

Presumptive Eligibility

MEDICAID | Medicald State Plan | Eligibility | WV2022MS00020 | WV-23-0001

CM5-I-434OME -938-1188

Package Header

PackageID WV2022MS0002O

5PA ID WV-23-0001

Submission Type Official

Initial Submission Date 3/8/2023

Approval Date 12/19/2024

Effective Date 5/12/2023

Superseded SPAID New

User-Entered

The state provides Medicaid services to individuals during a presumptive eligibility period following a determination by a qualified entity.

Presumptive eligibility covered in the state plan includes:

Eligibility Groups

Eligibility Group Name	Covered In State Plan	Include RU In Package 🛭	Included in Another Submission Package	Source Type 🛭
Presumptive Eligibility for Children under Age 19	Ē		0	APPROVED
Parents and Other Caretaker Relatives - Presumptive Ellgibility	⊏	E	0	APPROVED
Presumptive Eligibility for Pregnant Women		С	0	APPROVED
Adult Group - Presumptive Eligibility	⊏	Г	0	APPROVED
Individuals above 133 % FPL under Age 65 - Presumptive Eligibility			0	NEW
Individuals Eligible for Family Planning Services - Pr esumptive Eligibility			0	NEW
Former Foster Care Children Presumptive Eligibility		Е	0	APPROVED
Individuals Needing Treat ment for Breast or Cervical Cancer - Presumptive Eligibility			0	APPROVED

Hospitals

Eligibility Group Name	Covered In State Plan	Include RU in Package 😯	Included in Another Submission Package	Source Type 🛭
Presumptive Eligibility by Hespitals	Е		0	CONVERTED

Presumptive Eligibility

MEDICAID | Medicald State Plan | Eligibility | WV2022MS00020 | WV-23-0001

Package Header

Package ID WV2022MS 00020

Submission Type Official

Approval Date 12/19/2#24

Superseded SPAID New

User-Entered

SPAID WV-23-0001

Initial Submission Date 3/8/2023

Effective Date 5/12/2023

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

N/A

PRA Disclosure Statement; Centers for Medicaire & Medicaid Services (CMS) collects this mandatory Information in accordance with (42 U.S.C. 1396a) and (42 CFR 450.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program. Health Insurance Program attains and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performancemetrics related to the Medicaid and Children's Health Insurance Program in effects to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 90 hours per response(see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection, if you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard. Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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Records Submission Packages - View All

WV - Submission Package - WV2022MS0002O - (WV-23-0001) -Eligibility





View Compare Doc

Medicaid State Plan Eligibility

Presumptive Eligibility

Presumptive Eligibility for Children under Age 19

MEDICAID | Medicaid State Plan | Eligibility | WV2022MS00020 | WV-23-0001

The state provides Medicaid coverageto children when determined presumptively eligible by a qualified entity,

🚣 Spell Check Instructions | 🥹 Request System Help

SPA ID WV-23-0001

Effective Date 5/12/2023

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID WV2022MS00020 Submission Type Official Initial Submission Date 3/8/2023 Approval Date 12/19/2024 Superseded SPA ID WV-15-0006

View Implementation Guide

VIEW ALL RESPONSES

Presumptive eligibility for children is determined under the following provisions:

System-Derived

A. Presumptive Eligibility Income Standard

Collapse

1. The income standard for presumptive eligibility is the standard used under the Infants and Children under Age 19 eligibility group (42 CFR 435.118), for that child's age.

Underage:

View approved version of the Infants and Children under Age 19

B. Presumptive Eligibility Age Limit

Collapse

Children under the following age may be determined presumptively eligible:

19

C. Presumptive Eligibility Period

Collapse

- 1. The presumptive period begins on the date the determination is made.
- 2. The end date of the presumptive period is the earlier of:
 - 1. 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
 - 2, 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 flied 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:

D. Application for Presumptive Eligibility

Collapse

- 1. The state uses a standardized screening process for determining presumptive eligibility.
- 2. The state uses the single streamlined paper and/or online application for Medicaid and Presumptive Eligibility, approved by CMS. A copy of the single streamlined paper and/or online application with questions necessary for a PE determination highlighted or denoted is attached.
- 🔟 3. The state uses a separate paper 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.

Name	Date Created	
WV SPA 23 0001 Presumptive Eligibility Application screenshots	9/26/2024 4:52 PM EDT	e e

5. Describe the presumptive eligibility screening process:

Author/zed presumptive eligibility (PE) employees will gather data from the individual using the presumptive eligibility determination portion of the on-line system. The employee may obtain information relating to the individual such as name, address, phone number, and social security number from other facility personnel such as registrars; however, this information must be confirmed by the individual or another person with reasonable knowledge of the individual's needs status. The individual or another person with reasonable knowledge of the individual's status seeking PE must attest to the information provided on the application, Authorized employees may not request any documentation or require verification of Information provided, Applicants are allowed only one PE period per 12 month period or, if pregnant, per pregnancy. In the absence of an automated system that can verify the applicant's past use of presumptive eligibility, the facility will rely on self-attestation.

The authorized employee must make the final determination of whether or not the individual may be eligible for Medicaid. This decision is made based on the criteria in section 400.8,3 of the policy manual and the results of the on-line system. Once a final decision is made by the authorized worker he/she will provide the patient with either a temperary Medicaid card or a document stating why he/she was not determined presumptively eligible.

The Authorized Employee must assist the applicant or his authorized representative in completing the single streamlined application (SLA) for Medicaid and forward the application to the Department.

E. Presumptive Eligibility Determination

Collapse

The presumptive eligibility determination is based on the following factors:

- 1. Household income must not exceed the applicable income standard for the child's age, described in Section A.
- a. A reasonable estimate of MAGI-based income is used to determine household income.
- b. Gross income is used to determine household size.
- 2. State residency
- 3. Citizenship, status as a national, or satisfactory immigration status

F. Qualified Entities

Collapse

- 1. 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.
- 2. The following qualified entitles are used to determine presumptive eligibility for this eligibility group:
- Other entity the agency determines is capable of making presumptive eligibility determinations

Name of entity	Description
First Choice Services	First Choice Services - ACA Navigators and HELP4WV Helpline Specialists - First Choice Services operates several programs and helplines with the common goal of promoting well-being and facilitating access to behavioral health and social services
	First Choice began as a collaborative effort among West Virginia's comprehensive behavioral health care centers. First
	Choice also operates the ACA Navigator program which is
	funded by a grant from the Center for Medicare and Medicaid Services
	ACA Navigators provides free health coverage enrollment
	assistance to people who are uninsured. Certified Navigators
	help consumers enroll in qualified health plans through the Health Insurance Marketplace or, if eligible, Medicaid. HELP4WV offers a 24/7 call, chat, and text line that provides immediate help for any West Virginian struggling with an

Name of entity	Description
	addiction or mental health issue, The helpline staff offers confidential support and resource referrals, including self-help groups, out-patient counseling, medication assisted treatment, psychiatric care, emergencycare, and residential treatment.
Medicaid enrolled pharmacies	Licensed pharmacists and pharmacy technicians employed by Medicaid enrolled pharmacies
Local Health Departments	West Virginia's 55 counties are served by 49 local boards of health charged with protecting the health and safety of the citizens of West Virginia. Local boards of health provide services through local health departments located in all 55 counties including communicable and reportable disease prevention and control.
Free Clinics	Free and Charitable Clinics are safetynet health care organizations that utilize a volunteer/staff model to provide a range of medical, dental, pharmacy, vision and/or behavioral health services to economically disadvantaged Individuals. Such clinics are 501(c)(3) tax-exempt organizations, or operate as a program component or affiliate of a 501(c)(3) organization. Entities that otherwise meet the above definition, but charge a nominal/sliding fee to patients, may still be considered Free or Charitable Clinics provided essential services are delivered regardless of the patient's ability to pay. Free or charitable clinics restrict eligibility for their services to individuals who are uninsured, underInsured and/or have limited or no access to primary, specialty or prescription health care.
Rural Health Clinics (RHC)	Rural Health Clinics are defined in section 1861(aa)(2) of the Social Security Act (the Act) as facilities that are engaged primarily in providing services that are typically furnished in an outpatient clinic. RHC services are defined as: • Physician services; • Services and supplies furnished incident to a physician's services; • Nurse Practitioner (NP), Physician Assistants (PA), certified nurse midwife (CNM), clinical psychologist (CP), and clinical social worker (CSW) services; and • Services and supplies furnished incident to an NP, PA, CNM, CP, or CSW services. To be eligible for certification as a RHC, a clinic must be located in a non-urbanized area, as determined by the U.S. Census Bureau, and in an area designated or certified within the previous 4 years by the Secretary, Health and Human Services (HHS), In any one of the four types of shortage area designations that are accepted for RHC certification. RHCs can be either independent or provider-based. Independent RHCs are stand-alone or freestanding clinics and submit claims to a Medicare Administrative Contractor (A/B MAC). The statutory requirements for RHCs are found in section 1861(aa)(2) of the Act. Many of the regulations pertaining to RHCs can be found at 42 CFR 405.2400 Subpart X and following, and 42 CFR 491 Subpart A and following.
Federally Qualified Health Centers	Federally Qualified Health Centers (FQHC) receiving a grant under Section 330 of the Public Health Service (PHS) Act; or, receiving funding from a grant under a contract with the recipient of a grant and meets the requirements to receive a grant under Section 330 of the PHS Act; or, is not receiving a grant under Section 330 of the PHS Act but is determined by the Secretary of the Department of Health & Human Services (HHS) to meet the requirements for receiving such a grant (i.e., qualifies as a FQHC look-alike) based on the recommendation of the Health Resources and Services Administration; or, was treated by the Secretary of the Department of HHS for purposes of Medicare Part Sas a comprehensive Federally funded health center as of January 1, 1990; or is operating as an outpatient health program or facility of a tribe or tribal organization under the Indian Self-

Name of entity	Description
	Determination Act or as an urban Indian organization receiving funds under Title V of the Indian Health Care Improvement Act as of October 1, 1991.
Comprehensive community mental health centers	Comprehensive community mental health centers as identified in West Virginia Code §27-2A-1. The Department of Health and Human Resources is authorized and directed to establish, maintain and operate comprehensive community mental health centers at locations within the state that are determined by the secretary in accordance with the state's comprehensive mental health plan.

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

Name	Date Created	
PP_JobAid- Presumptiv e_Eligibility_Worker	9/2 6 /2024 4:54 PM EDT	
S. <u>L.</u> Presumptive Eligibility (PE) Worker - MR9.docx	9/26/2024 4:56 PM EDT	

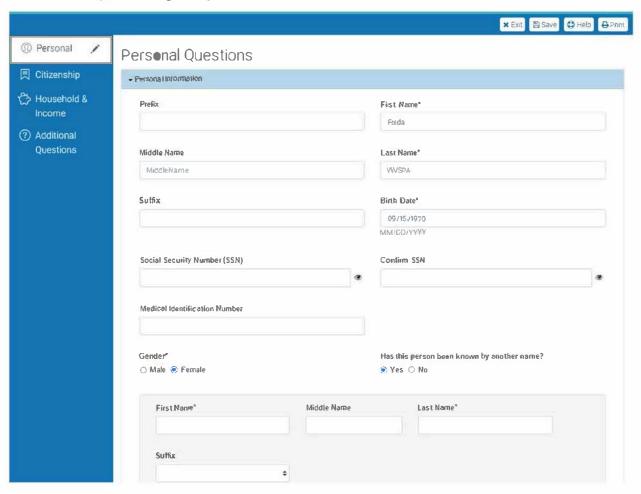
G. Additional Information (optional)

Collapse

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of Improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law, According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid MMB control number for this information collection is 9938-1188. The time required to complete this information collection is estimated to range from 1 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the Information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Atm: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

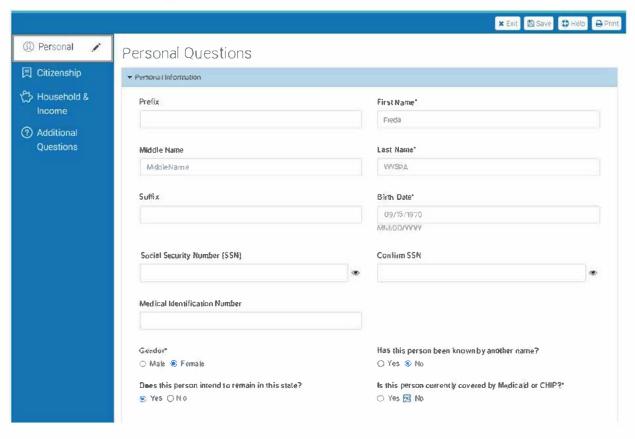


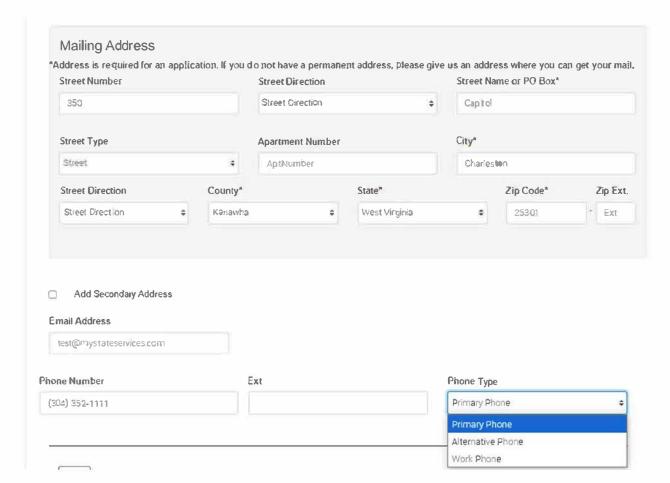
📜 Presumptive Eligibility

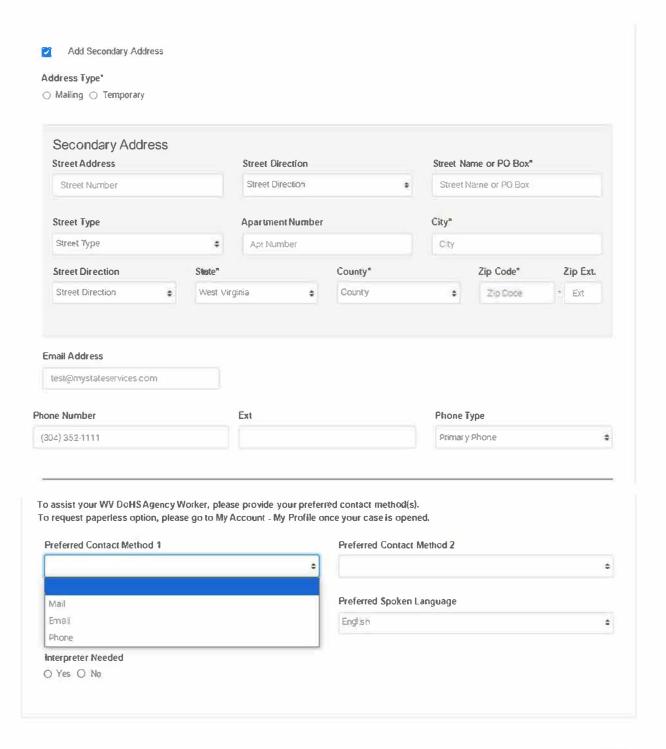




Presumptive Eligibility







To assist your WV DoHS Agency Worker, please provide your preferred contact method(s).

To request paperless option, please go to My Account - My Profile once your case is opened.

Preferred Contact Method 2

Preferred Written Language

English

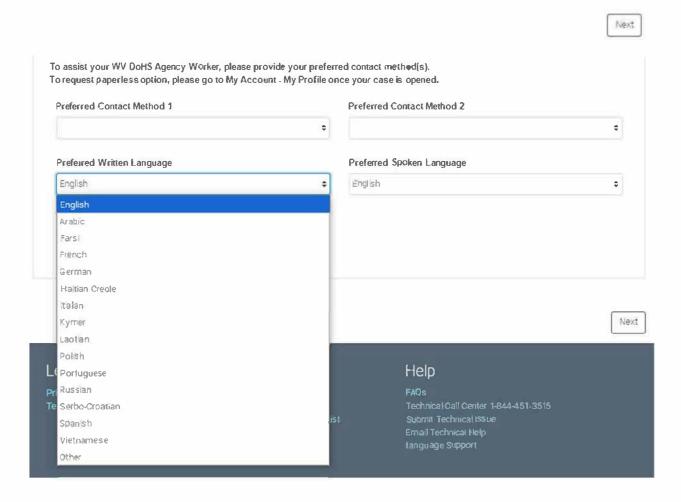
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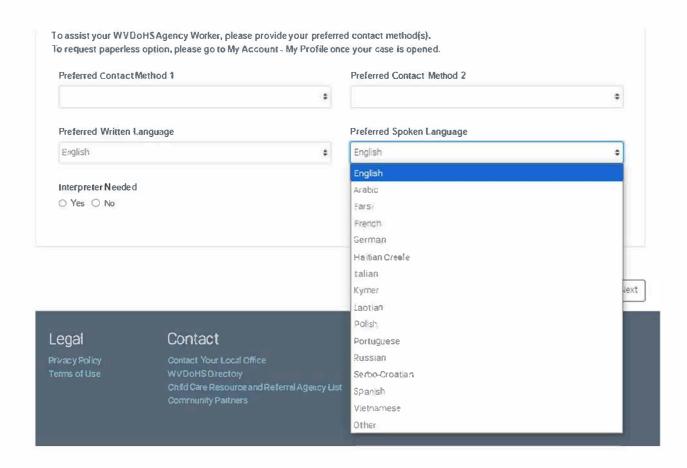
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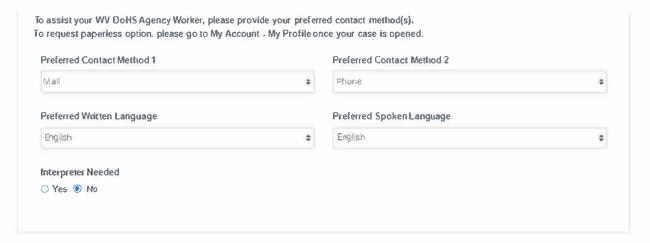
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Interpreter Needed

O Yes O No

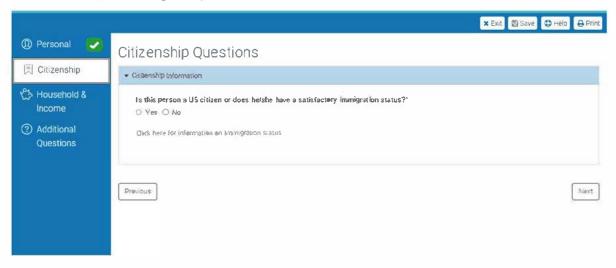








Presumptive Eligibility



West Virginia Medicaid Eligibility for Qualified Non-Citizens

Determining Satisfactory Immigration Status

immigrants who are "qualified non-citizens" are generally eligible for Medicuid coverage it they neet immine and residency requirements. To be determined presumptively eligible (PE) for Medicalid, an individual must attest to being a United States clazen or a "qualified non-citizent" with salisfaciory immigration status

The first step is to identify the non-citizen's inning allon status to determine if they are a "quadified non-airizen" as deshed below. Most non-citizens tawfully in the United States shauld have some kind of immigration document. Example documants are provided below. NOTE: Documentation is not required for a PE determination, Many qualified non-căizens (such as many Lawful Permanent Residems (LPRs) orgieen card holdes)) ave a 5-year wainig period. This means they must wait 5 years after receviting qualified "immigration status before they can get Medicaid coverage. There are exceptions, for example, refugees, expless, or LPRs who used to be refugees or asyfees don't have to wait 5 years.

A. WITHOUT A FIVE YEAR WAITING PERIOD

- 1. Crizans of the Marshall Islands, Micronesia, and Palau who are fining in one of the U.S. stales or territories (referred to as Compact of Free Association or C@FA regiants).
 2. Lavful Petinanent Residents (ite, green-card holders or LPRs wito adjissed to LPR from an immigration status that is exempt from the
- 2. Lawful Perinaneni Residenie (i.e., green-cardholders or LPRs wito adjissed to LPR from an immigration status that is exempt from the S-year bar fished atnumbers 3.10, below)
 3. Refugee admitted to the U.S. under section 2010 of the INA
 4. Granted asytum under section 208 of the INA

- 5. Withholding of deportation or removal under section 243(h) or 241(b)(3) of the INA 6. Cuban et Hallan envirant as dufined in section 501(e) of the Refugee Education As sistance Aut ef 1980
- 7. A metasian introvigrant admittied pursuant to section 584 of Public Law (Pub. L. No.) 100-202 (1211987), as anxended by Pub. L. No., 100-
 - 461 (10/1988)
 - 8 , Applicants for a wickims I trafficking/C. visa or victim of trafficking with a servification or eligibility letter from the Office of Refugee
- 9. traqi Afghan speelal Invnignani visə holder 10. Member of a fedenziliy recogniz ed Indian tribe oz Avverican Indian bøm in Canada

- B. WITHA F WE-YEAR WAITING PERIOD (from the date they received the qualitying shaius)

 11. Lawful Permanent Residents (if e., green-cardholders or LPRs), unless adjusted from a stalus that is exemplifrom the 5-year waiting period at 3.10. above

 12. Bathered inno-discussed and their didden or patents

 13. Mon-cilizans paroled into the U. S. for alteast one year Exception: Afghan and Ukrainiannabionals:

 14. Mon-cilizans paroled into the U. S. for alteast one year Exception: Afghan and Ukrainiannabionals:

 15. Afghans who are pancled between AMy 31, 2021 and September 30, 2023 are eligible for Medicaid or CHIP to the same extent as refugees, without a five year waiting period, if they meet other eligibility requirements (e.g., income) for coverage in the state, until Masch 31, 2023, or the term of parolegraned to the evactive, whichever is late; and

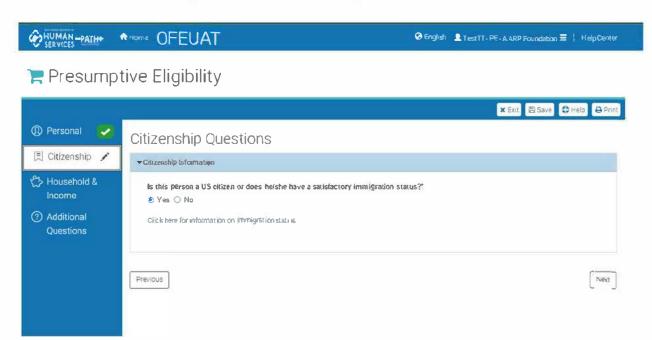
 15. Loraninan nationals who enter the United States as paroleges on or between February 24, 2022 and September 30, 2023 are eligible for Medicaid and are the spouse or chaid of a parolege described above, or who is the parent, legal guards, an emphanals or prinary caregiver of a parolege described above who is determined to be an unaccompanied chaid wall also be eligible for Medicaid and CHIP to the same extent as refugees;

 25. Eligible paroleges can also include individuals other than Ukrainian nationals (i.e., individuals who are stateless or have another nationals y).

- 14. Conditional entrants granted status prior to April 1, 1980 (Note: because of the grant date requirement, these non-citizens will already have met the 5-year waiting period)
- 15. Exception: qualified non-citizens (11-15) are exempt from the 5-year wailing period if they are:
 - a. Veterans who received an honorable discharge, or
 - bi A military service member on active duty in the armed forces of the United States (other than active duty for training-i.e., Reserves), or
 - c. A spouse or unmarried dependent child of a veteran or active duty service member as described above, or
 - d Have lived in the US since 1996
 - e. An American Indian born in Canada to whom the provisions of 8 U.S.C. 1359 apply
 - (A member of an Indian wibe, as defined in 25 U.S.C. 450b(e)
 - g Non-citizens receiving SSI

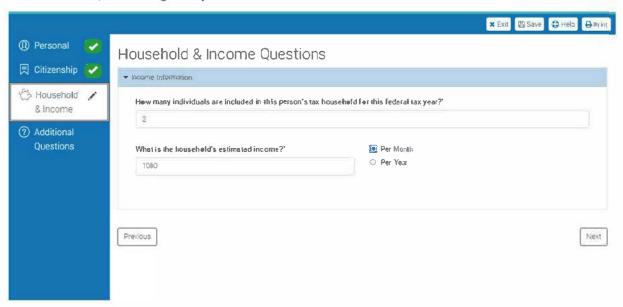
C. LAWFULLY PRESENT PREGNANT WOMEN AND CHILDREN UNDER AGE 19 The fellowing individuals are considered lawfully present and eligible for PE.if otherwise eligible

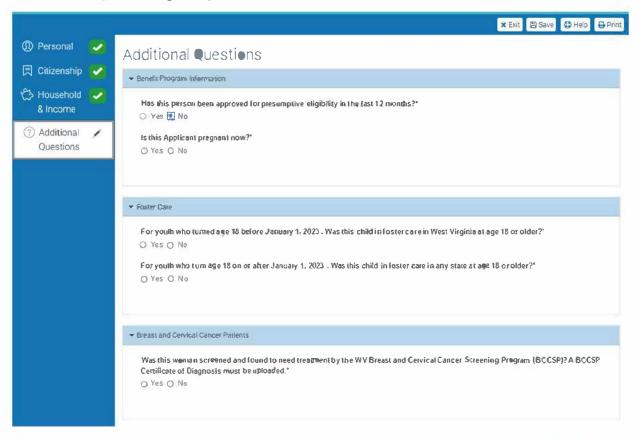
- a. All qualified non-citizens (see above)
- b A non-citizen in valid nonimmigrant status (for example, student visas, worker visas, etc.)
- c, A non-citizen who has been paroled into the United States, for less than 1 year, except for a non-citizen paroled for prosecution, deferred inspection or pending removal proceedings
- d. A noncitizen who belongs to one of the following classes!
 - i. Non-citizens currently in temporary resident status
 - ii. Noncitizens currently under Temporary Protected Status (TPS) and pending applicants for TPS who have been granted employment authorization.
 - iii. Non-eitizens who have been granted employment authorization;
 - iv. Family Unity beneficiaries
 - v. Non-citizens currently under Deferred Enforced Departure (DED) pursuant to a decision made by the President
 - vi. Noncitizens currently in deferred action status (note that this does not include individuals with DACA granted under the June 2012 DHS Policy [Deferred Action for Childhood Arrivals] status]
 - vii. Granted an administrative stay of removal
 - viii. Non-citizens whose visa petition has been approved and who have a pending application for adjustment of status;
- e. A pending applicant for asylum or for withholding of removal or under the Convention Against Torture who has been granted employment authorization, or is an applicant under the age of 14 and has had an application pending for at least 180 days
- f: A non-eitizen who has been granted withholding of removal under the Convention Against Torture
- g. A child who has a pending application for Special Immigrant Juvenile status
- h A non-citizen who is lawfully present in American Samoa under the immigration laws of American Samoa

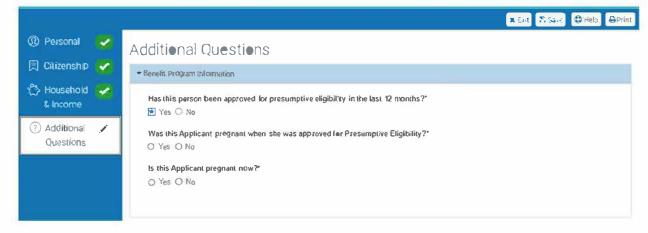


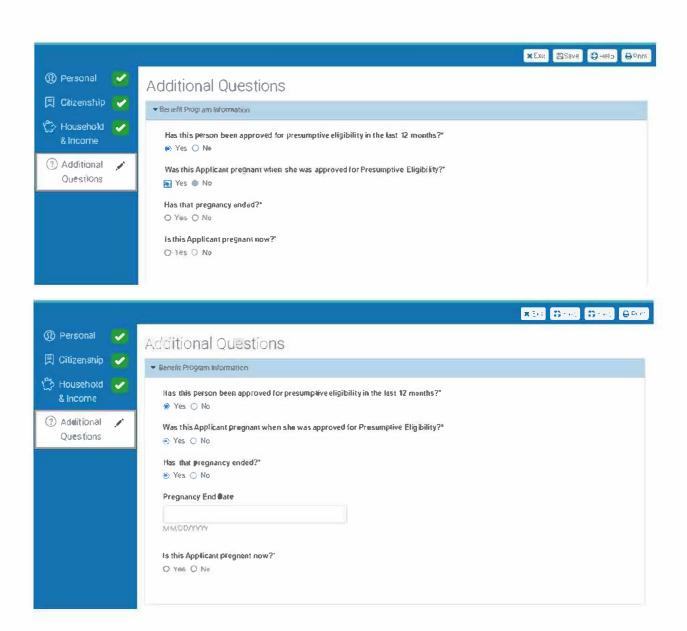


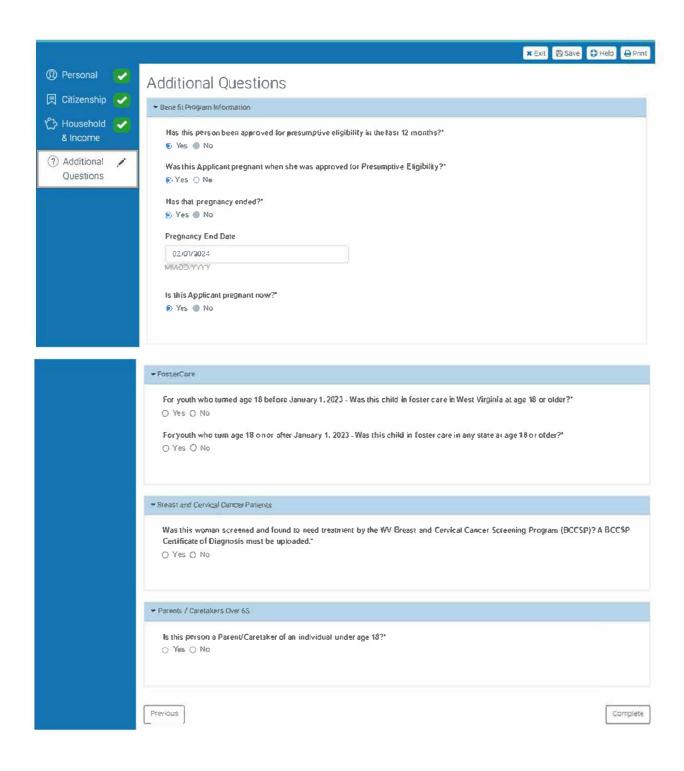
📜 Presumptive Eligibility

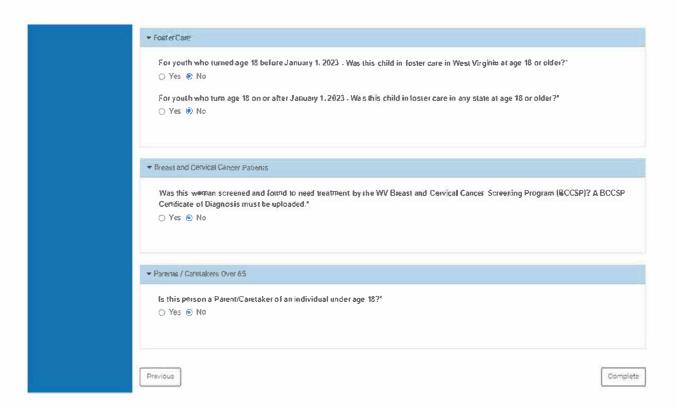


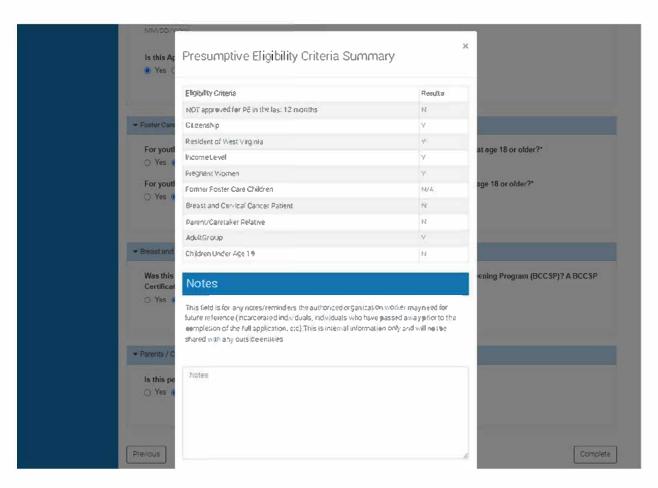


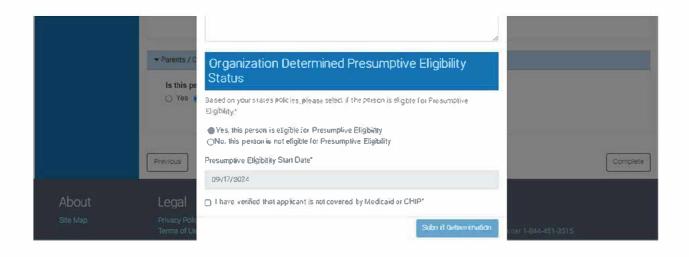


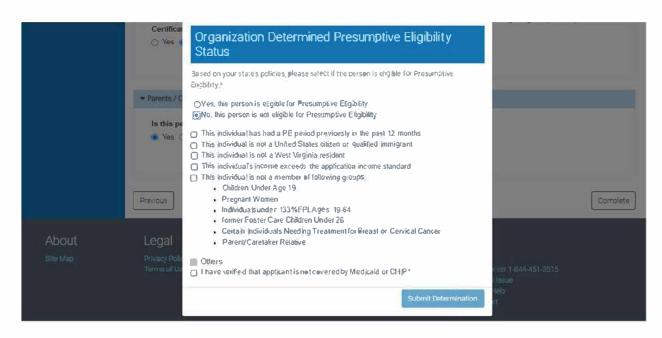


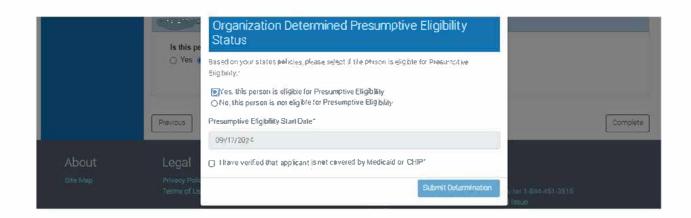


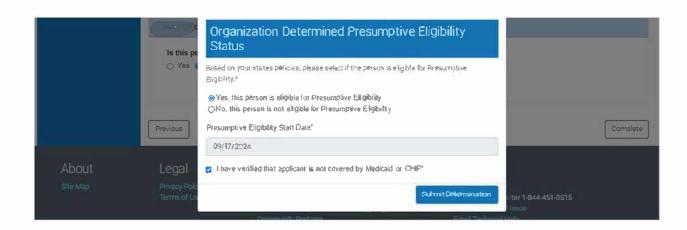












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WV - Submission Package - WV2022MS0002O - (WV-23-0001) - Eligibility

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Summary Reviewable Units Versions Correspondence Log Analyst Notes Review Assessment Report Approval Letter RAI

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← All Reviewable Units

← Presumptive Eligibility for Children under Age 19 | Presumptive Eligibility for Pregnant Women →

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Medicaid State Plan Eligibility

Presumptive Eligibility

Parents and Other Caretaker Relatives - Presumptive Eligibility

MEDICAID | Medicaid State Plan | Eligibility | WV2022MS00020 | WV-23-0001

The state covers parents and other caretaker relatives when determined presumptively eligible by a qualified entity.

♣ Spell Check Instructions | ② Request System Help

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

 Package ID
 WV2022MS0002●
 SPA ID
 WV-230001

 Submission Type
 Official
 Initial Submission Date
 3/8/2023

 Approval Date
 12/19/2024
 Effective Date
 5/12/2023

 Superseded SPA ID
 WV-15-0006
 WV-15-0006
 WV-15-0006

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VIEW ALL RESPONSES

The state covers parents and other caretaker relatives when determined presumptively eligible by a qualified entity.

A. Presumptive Eligibility Period

Collapse

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

System-Derived

- 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 filled by that date.
- 3. Periods of presumptive eligibility are limited as follows:
 - a. No more than one period within a calendar year.
 - (i) 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:

B. Application for Presumptive Eligibility

Collapse

- 1. The state uses a standardized screening process for determining presumptive eligibility.
- 2. The state uses the single streamlined paper and/or online application for Medicaid and Presumptive Eligibility, approved by CMS. A copy of the single streamlined paper and/or online application with questions necessary for a PE determination highlighted or denoted is attached.

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a Paner - A	convofthe	application fo	orm is included.
a. rapel - A	CODY OF THE	applicationing	אווווון אוועושעפע

☐ b. Online - A copy of the application form is Included,

🗐 3. The state uses a separate paper 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.

Name	Date Created	
WV SPA 23 0001 Presumptive Eligibility Application screenshots	9/26/2024 5:08 PM EDT	

5. Describe the presumptive eligibility screening process:

Authorized presumptive eligibility (PE) employees will gather data from the individual using the presumptive eligibility determination portion of the on-line system. The employee may obtain information relating to the individual such as name, address, phone number, and social security number from other facility personnel such as registrars; however, this information must be confirmed by the individual or another person with reasonable knowledge of the individual's needs status. The individual or another person with reasonable knowledge of the individual's status seeking PE mustattest to the information provided on the application. Authorized employees may not request any documentation or require verification of Information provided. Applicants are allowed only one PE period per 12-month period or, if pregnant, per pregnancy. In the absence of an automated system that can verify the applicant's past use of presumptive eligibility, the facility will rely on self-attestation.

The authorized employee must make the final determination of whether or not the individual may be eligible for Medicald. This decision is made based on the criteria in section 400.8,3 of the policy manual and the results of the online system. Once a final decision is made by the authorized worker he/she will provide the patient with either a temporary Medicaid card or a document stating why he/she was not determined presumptively eligible.

The Authorized Employee must assist the applicant or his authorized representative in completing the single streamlined application (SLA) for Medicaid and forward the application to the Department.

C. Presumptive Eligibility Determination

Collapse

The presumptive eligibility determination is based on the following factors:

- 1. The individual must be a caretaker relative, as described at 42 CFR 435.110.
- 2. Household income must not exceed the applicable income standard described at 42 CFR 435.110.
 - a. A reasonable estimate of MAGI-based income is used to determine household income.
 - ③ b. Gross income is used to determine household income.
- 3. State residency
- 4. Citizenship, status as a national, or satisfactory immigration status

D. Qualified Entities

Collapse

- 1. 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.
- 2. The following qualified entities are used to determine presumptive eligibility for this eligibility group:
- Other entity the agency determines is capable of making presumptive eligibility determinations

Name of entity	Description
First Choice Services	First Choice Services-ACA Navigators and HELP4WV Helpline Specialists First Choice Services operates several programs and helplines with the common goal of promoting well-being and facilitating access to behavioral health and social services. First Choice began as a collaborative effort among West Virginia's comprehensive behavioral health care centers, First Choice also operates the ACA Navigator program which is funded by a grant from the Center for Medicare and Medicaid Services. ACA Navigators provides free health coverage enrollment assistance to people who are uninsured. Certified Navigators help consumers enroll in qualified health plans through the Health Insurance Marketplace or, if eligible, Medicald. HELP4WV offers a 24/7 call, chat, and text line that provides Immediate help for any West Virginian struggling with an addiction or mental health Issue. The helpline staff offers confidential support and resource referrals, including self-help groups, out-patient counseling, medication-assisted

Name of entity	Description
	treatment, psychiatric care, emergency care, and residential treatment.
Medicaid enrolled pharmacies	Licensed pharmacists and pharmacy technicians employed by Medicaid enrolled pharmacies.
Local Health Departments	West Virginia's 55 counties are served by 49 local boards of health charged with protecting the health and safety of the citizens of West Virginia. Local boards of health provide services through local health departments located in all 55 counties including communicable and reportable disease prevention and control.
Free Clinics	Free and Charitable Clinics are safetynet health care organizations that utilize a volunteer/staff model to provide a range of medical, dental, pharmacy, vision and/or behavioral health services to economically disadvantaged individuals. Such clinics are 501(c)(3) tax-exempt organizations, or operate as a program component or affiliate of a 501(c)(3) organization. Entities that otherwise meet the above definition, but charge a nominal/sliding fee to patients, may still be considered Free or Charitable Clinics provided essential services are delivered regardless of the patient's ability to pay. Free or charitable clinics restrict eligibility for their services to individuals who are uninsured, underinsured and/or have limited or no acces to primary, specialty or prescription health care.
Rural Health Clinics (RHC)	Rural Health Clinics are defined in section 1861(aa)(2) of the Social Security Act (the Act) as facilities that are engaged primarily in providing services that are typically furnished in an outpatient clinic. RHC services are defined as: • Physician services; • Services and supplies furnished incident to a physician's services; • Nurse Practitioner (NP), Physician Assistants (PA), certified nurse midwife (CNM), clinical psychologist (CP), and clinical social worker (CSW) services; and • Services and supplies furnished incident to an NP, PA, CNM, CP, or CSW services. To be eligible for certification as a RHC, a clinic must be located in a non-urbanized area, as determined by the U.S. Census Bureau, and in an area designated or certified within the previous 4 years by the Secretary, Health and Human Services (HHS), in any one of the four types of shortage area designations that are accepted for RHC certification. RHCs can be either independent or provider-based. Independent RHCs are stand-alone or freestanding clinics and submit claims to a Medicare Administrative Contractor (A/B MAC). The statutory requirements for RHCs are found in section 1861(aa)(2) of the Act. Many of the regulations

municated the regulirements for qualified entities at 1920A(b)(3).	of the Act, and has provided adequate training to the entities and
Comprehensive community mental health centers	Comprehensive community mental health centers as identified in West Virginia Code \$27-24.1. The Department of Health and Human Resources is authorized and directed to establish, maintain and operate comprehensive community mental health centers at locations within the state that are determined by the secretary in accordance with the state's comprehensive mental health plan.
Federally Qualified Health Centers	Federally Qualified Health Centers (FQHC) receiving a grant under Section 330 of the Public Health Service (PHS) Act: or, receiving funding from a grant unders contract with the recipient of a grant and meets the requirements to receive a grant under Section 330 of the PHS Act: or, is not receiving a the Secretary of the Department of Health & Human Services the Secretary of the Department of Health & Human Services (HHS) to meet the requirements for receiving such a grant (i.e., qualifies as a FQHC look-alike) based on the recommendation of the Health Resources and Services Administration; or, was treated by the Secretary of the Department of HHS for purposes of Medicare Part Bas a Comprehensive Federally funded health center as of January is operating as an outpatient health program or facility of a perentine of the secretary of the secretary of the secretary of the comprehensive Federally funded Indian Deleting that are on Upder the Indian Self-tribe or tribal organization under the Indian Health Care receiving funds under 17the Indian Health Care receiving funds under 17the Indian Health Care receiving funds under 17the Indian Health Care
Name of entity	Description

3. 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.

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1	9/26/20245:10 PM EDT	SL_Presumptive Eligibility(PE) Worker - MR9.docx
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E. Additional Information (optional)

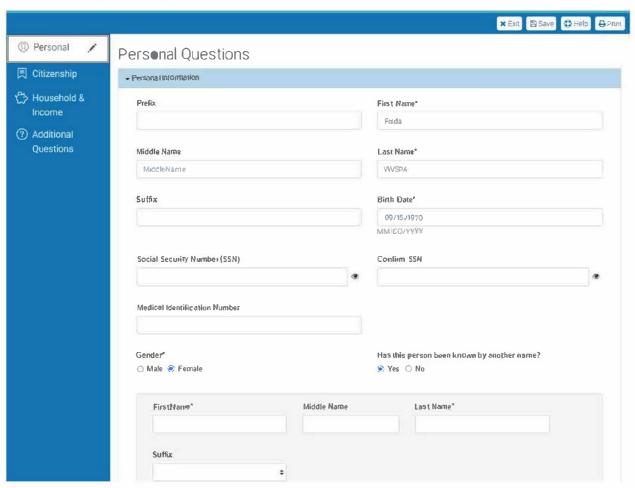
4.A copy of the training materials has been uploaded for review during the

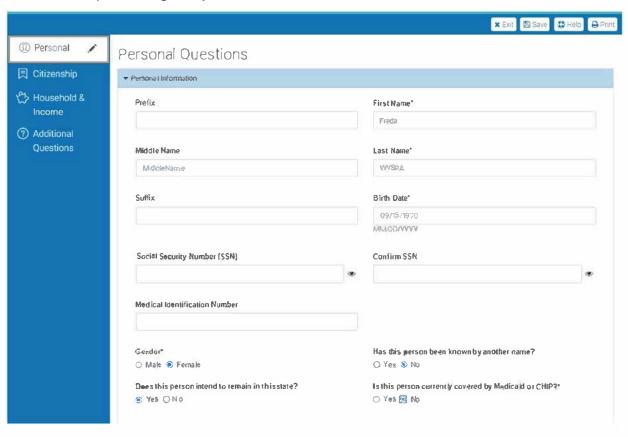
submission process.

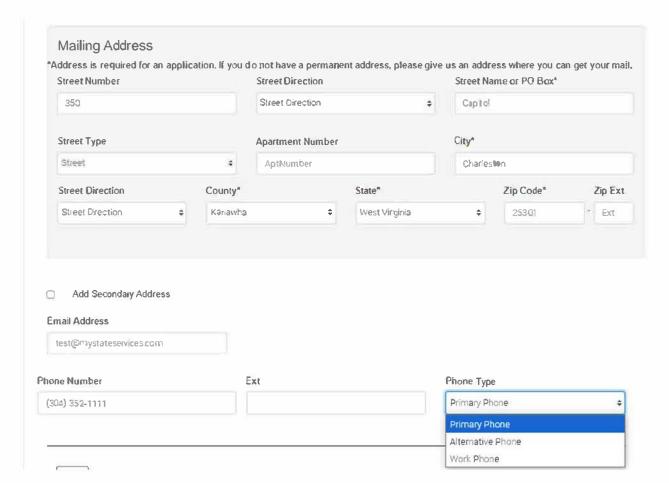
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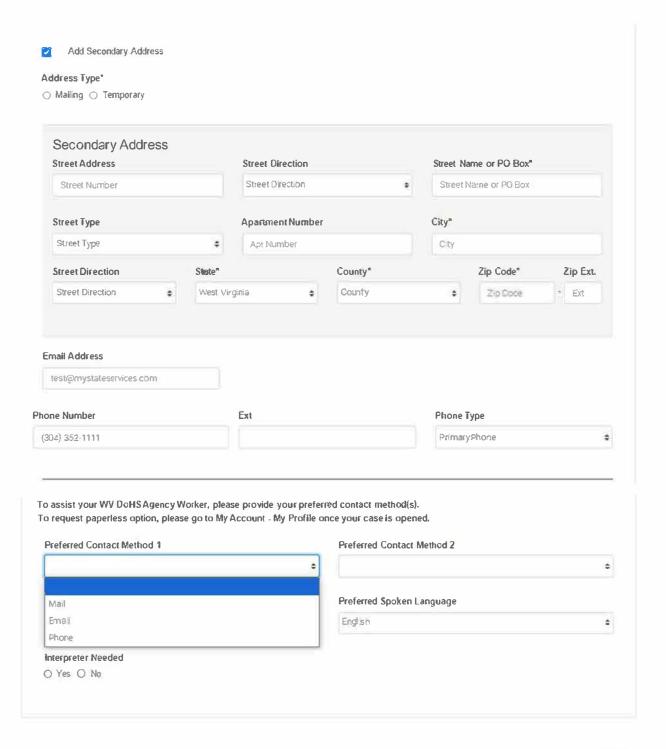
PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plans amendment information in a formate defined by CMS for the purpose of Improving the state application and to state and to standardize Medicaid program and children's Health insurance and accountable to monitor and analyse content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyse content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyse performance metrics, and individualized content that reflects the characteristics of the particular state's program, The informance and accountability across performance metrics related to the Medicaid and Children's Health insurance Program in efforts to boost program integrity efforts, improve performance and accountability across performance of the Privacy Act of 1974 any personally identifying information of information information of information of information of information information information of information information informatio











To assist your WV DoHS Agency Worker, please provide your preferred contact method(s).

To request paperless option, please go to My Account - My Profile once your case is opened.

Preferred Contact Method 1

Preferred Contact Method 2

Preferred Written Language

English

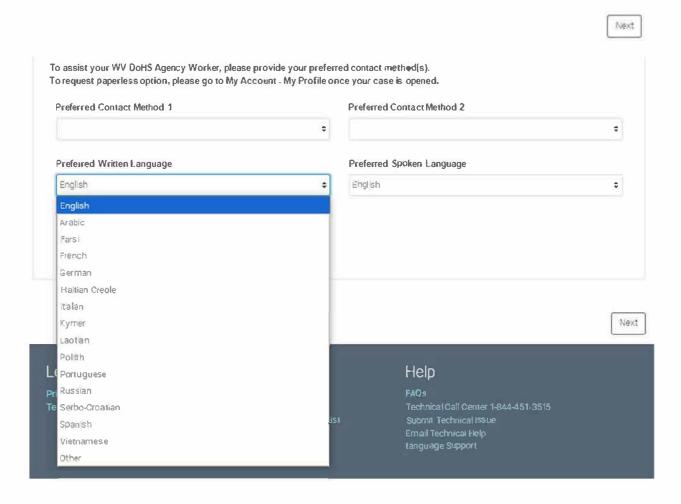
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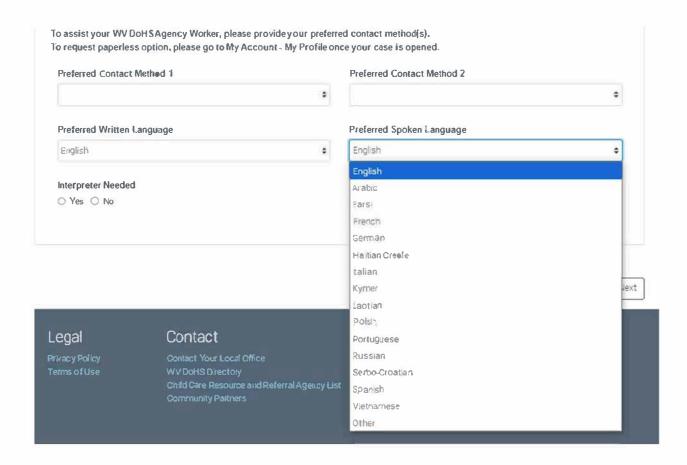
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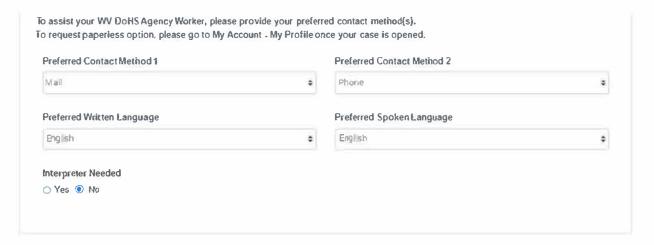
Phone

Interpreter Needed

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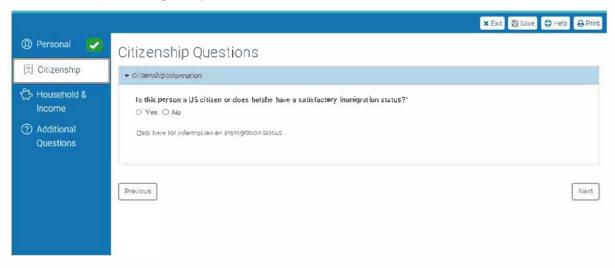






Nex





West Virginia Medicaid Eligibility for Qualified Non-Citizens

Determining Satisfactory Immigration Status

imnigrams who are "qualified non-chizens" are generally eligible for Medicaid coverage if they nees importe and residency requirements. To be determined presumptively eligible (PE) for Medicaid, an individual must attest to being a United States cluzen or a "qualified non-chizen" with satisfactory immigration status

The first step is to identify the non-citizen's immigration status to determine if they are a "quadited non-witzen" as deshied below; Most non-citizens tawfully in the United States shauld have some kind of immigration occument. Example documents are provided below; NOTE: Documentation is not required for a PE determination, Many qualified non-căizens (such as many Lawful Pemaineni Residenis (LPRs) orgieen card holders) Lave a 5-year warinig period. This means they must wait 5 years after receving qualified "imnigration status before they can get Medicaid coverage. There are exceptions, for example, relugees, asyless, or LPRs who used to be refugees or asyless don't have to wait 5 years.

A. WITHOUT A FIVE YEAR WAITING PERIOD

- 1. Citizens of the Marshall Islands, Misconesia, and Palau who are fining in one of the U.S. states or territories (referred to as Compact of Five Association on OBFA ring anis).

 2. Lawful Petinanent Residents (i.e., green-card holders or LPRs who adjivsed to LPR from an immigration status that is exempt from the Syvan bar fisted annumbers 5.10, below).
 - - 3. Rekigee admitted to the U.S. under section 207 of the INA 4. Granted asytum under section 208 of the INA

- 5, Writaho, dong of departation or removal under section 243(h) or 241(b)(3) of the INA 6. Cuban or Hallian entrant as defined in saction 501(e) of the Refrigee Education Assistance Aut of 1980 2, A merasian immigrant admitted pursuant to section 584 of Public Law (Pub. L., No.) 100202 (1211987), as amended by Pub. L., No., 100-461 (14/1988)
 - 8, Applicants for a victim of wallinding/C. visa or victim of varificking with a ocrafication or eligibility lexer from the Office of Refugee
- 9, fraqi/Afghan speelal immigrani viso holder 10. Member of a federally recognized Indian tribe or American Indian bam in Canada

- B. WITHA F WE.YEAR WAITING PERIOD (from the date they received the qualifying star us)

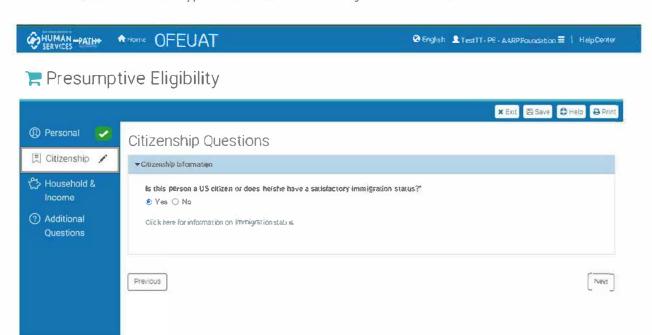
 11. Lawful Permanent Residents (6., green-card-holders or LPRs), unless adjusted from a status that is exempt from the 5-year wailing period at 3.10. above
 12. Bailiance fund-discuss and their didden or patents
 13. Mon-chizers parobed into the U.S. for atteast one year Exception. Afghen and Ukrainian nationals:
 14. Mon-chizers parobed into the U.S. for atteast one year Exception. Afghen and Ukrainian nationals:
 15. Adjanas who are paneled between July 31, 2021 and September 30, 2023 are eligible for Medicaid or CHIP to the same extent as refugees.
 16. Adjanas who are paneled between July 31, 2021 and September 30, 2023 and are the spouse or chief the status. until Maxch 31, 2023, or the term of parole granted to the evacuee, whichever is late, and
 18. Loraninan nationals who enter the United States as parolees on or between February 24, 2022 and September 30, 2023 are eligible for Medicaid or CHIP to the same extent as refugees.

 2. Usrainian nationals who are paroled into the U.S. after September 30, 2023 and are the spouse or chief of a panolee described above, or who is the parent, legal guardsa, or primaty caregiver of a panolee described above, who is determined to be an unaccompanied chief wall also be aligible for Medicaid and CHIP to the same extent as refugues;
 2. Illigible parolees can also include tirdividuals other than Ukrainian nationality who are stateless or have another nationality) with last ability resided in Ukraine.

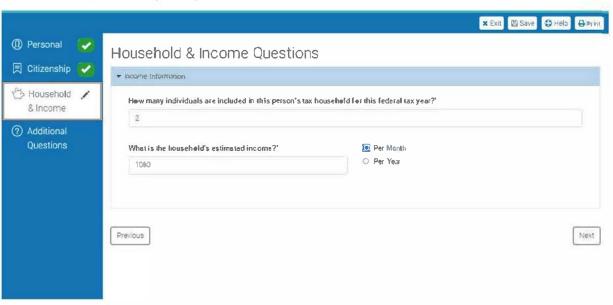
- 14. Conditional entrants granted status prior to April 1, 1980 (Note: because of the grant date requirement, these non-citizens will already have met the 5-year waiting period)
- 15. Exception: qualified non-citizens (11-15) are exempt from the 5-year wailing period if they are:
 - a. Veterans who received an honorable discharge, or
 - bitA military service member on active duty in the armed forces of the United States (other than active duty for training i.e., Reserves), or
 - c. A spouse or unmarried dependent child of a veteran or active duty service member as described above, or
 - d Have lived in the US since 1996
 - e. An American Indian born in Canada to whom the provisions of & U.S.C. 1359 apply
 - f. A member of an Indian wibe, as defined in 25 U.S.C. 450b(e)
 - g Non-citizens receiving SSI

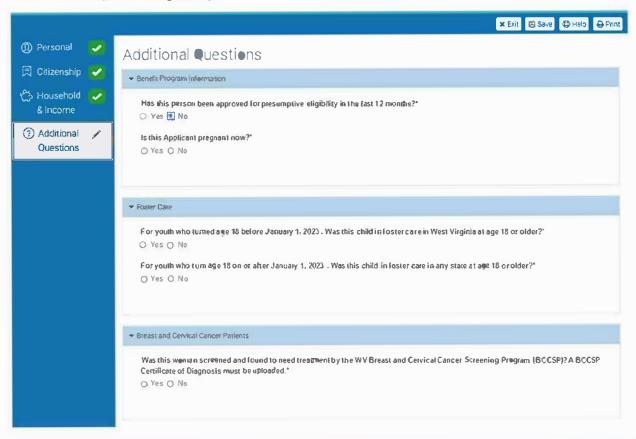
C. LAWFULLY PRESENT PREGNANT WOMEN AND CHILDREN UNDER AGE 19 The following individuals are considered lawfully present and eligible for PE. if otherwise eligible

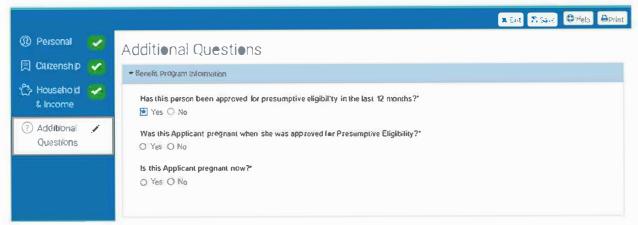
- a. All qualified non-citizens (see above)
- b A non-citizen in valid nonimmigrant status (for example, student visas, worker visas, etc.)
- c, A non-citizen who has been paroled into the United States, for less than 1 year, except for a non-citizen paroled for prosecution, deferred inspection or pending removal proceedings
- d A noncitizen who belongs to one of the following classes:
 - i. Non-citizens currently in temporary resident status
 - ii. Noncitizens currently under Temporary Protected Status (TPS) and pending applicants for TPS who have been granted employment authorization.
 - iii, Non-eitizens who have been granted employment authorization;
 - iv. Family Unity beneficiaries
 - y. Non-citizens currently under Deferred Enforced Departure (DED) pursuant to a decision made by the President
 - vi. Non-citizens currently in deferred action status (note that this does not include individuals with DACA granted under the June 2012 DHS Policy [Deferred Action for Childhood Arrivals] status)
 - vii. Granted an administrative stay of removal
 - viii. Non-citizens whose visa petition has been approved and who have a pending application for adjustment of status;
- e. A pending applicant for asylum or for withholding of removal or under the Convention Against Todure who has been granted employment authorization, or is an applicant under the age of 14 and has had an application pending for at least 180 days
- f: A non-eitizen who has been granted withholding of removal under the Convention Against Torture
- g A child who has a pending application for Special Immigrant Juvenile status
- h A non-eitizen who is lawfully present in American Samoa under the immigration laws of American Samoa

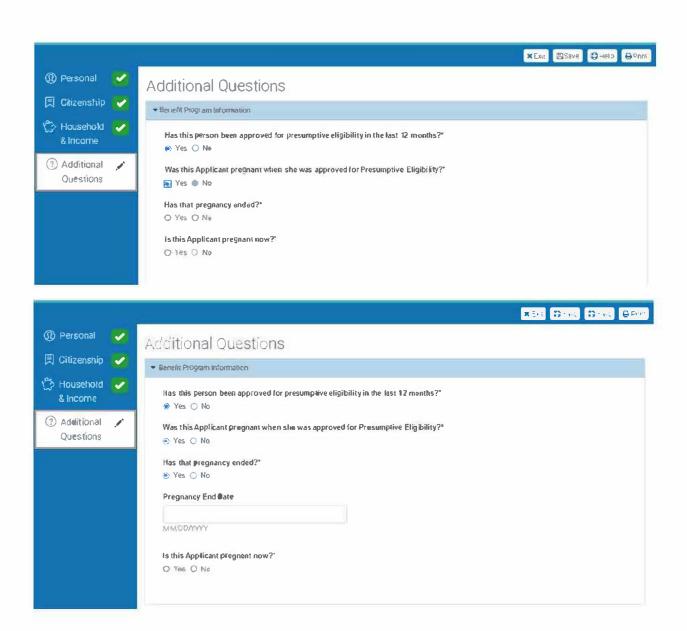


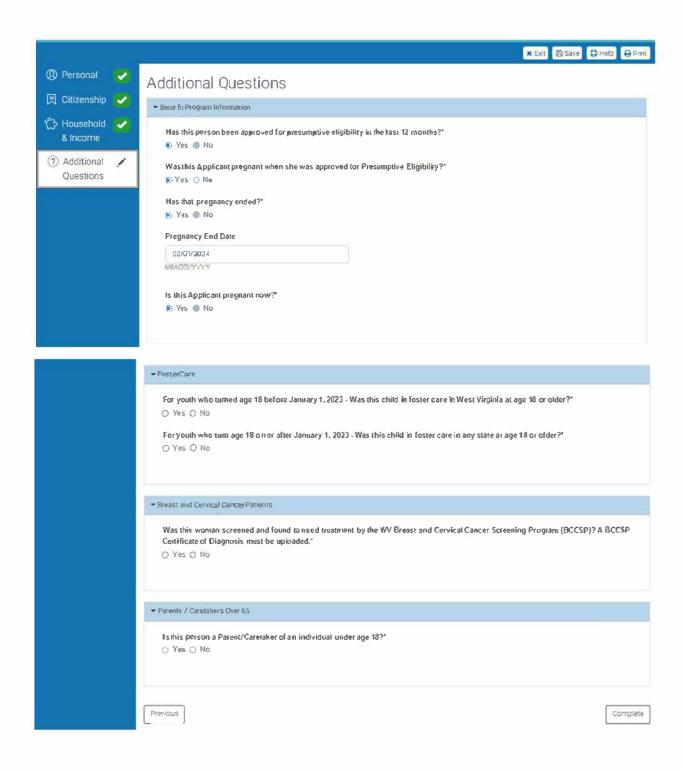


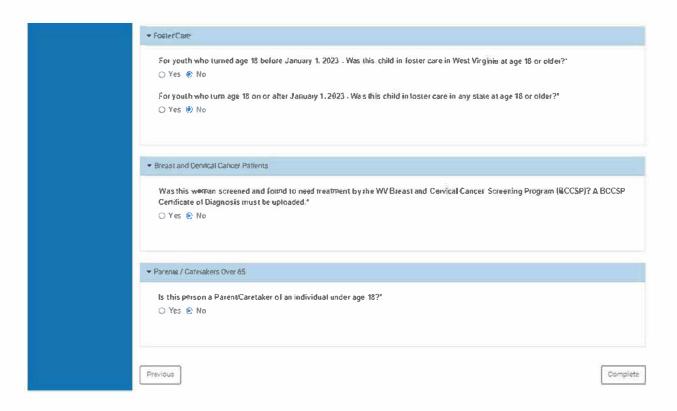


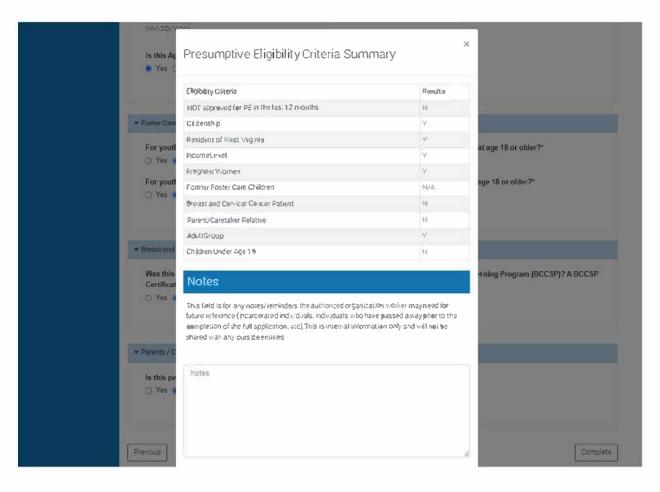


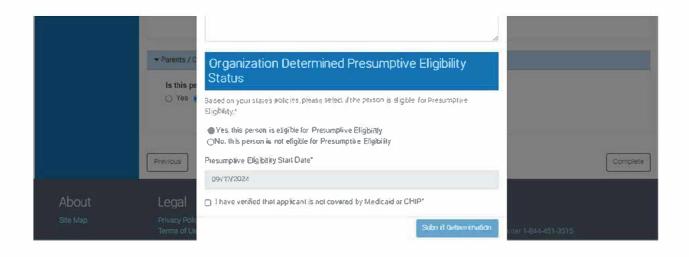


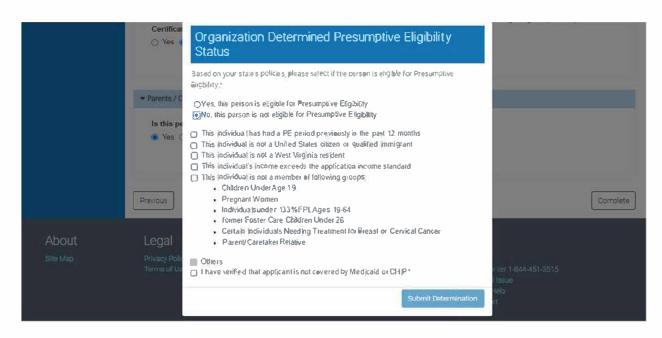


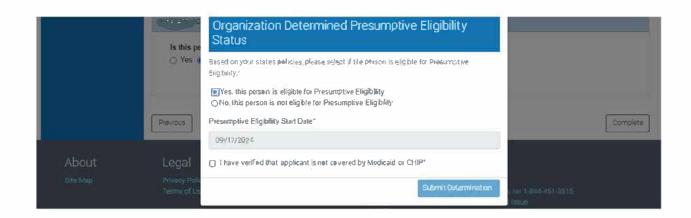


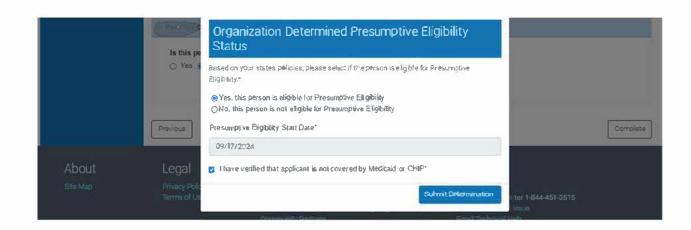












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Summary Reviewable Units Versions. Correspondence Log Analyst Notes RAI Review Assessment Report Amproval Letter Transaction Logs News Related Actions ← Parents and Other Caretaker Relatives - Presumptive Eligibility | Adult Group - Presumptive Eligibility - →

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Medicaid State Plan Eligibility

Presumptive Eligibility

Presumptive Eligibility for Pregnant Women

MEDICAID | Medicaid State Plan | Eligibility | WV2022MS00020 | WV-23-0001

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CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID WV2022MS00020 Submission Type Official Approvai Date 12/19/2024 Superseded SPAID WV-150006 System Der ved

SPAID WV-23-0001

Initial Submission Date 3/8/2023 Effective Date 5/12/2023

View Implementation Guide

VIEW ALL RESPONSES

The state covers ambulatory prenatal care for individuals qualifying as pregnant women under 42 CFR 435.116 when determined presumptively eligible by a qualified entity.

A. Presumptive Eligibility Period

Collapse

- 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 filled by that date.
- 3. There may be no more than one period of presumptive eligibility per pregnancy.

B. Application for Presumptive Eligibility

Collapse

1. The state u	ises a standardized screening process for determining presumptive eligibility.
	ises the single streamlined paper and/or Inline application for Medicaid and Presumptive Eligibility, approved by CMS. A copy of the single streamlined online application with questions necessary for a PE determination highlighted or denoted is attached.
	a. Paper - A copy of the application form is included.
	b. Online - A copy of the application form is included.

🗏 3. The state uses a separate paper 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.

Name	Date Created	
WV SPA 23 0001 Presumptive Eligibility Application screenshots	9/26/2024 5:14 PM EDT	C

S. Describe the presumptive eligibility screening process:

Authorized presumptive eligibility (PE) employees will gather data from the individual using the presumptive eligibility determination portion of the on-line system. The employee may obtain information relating to the individual such as name, address, phone number, and social security number from other facility personnel such as registrars; however, this information must be confirmed by the individual or another person with reasonable knowledge of the individual's needs status. The individual or another person with reasonable knowledge of the individual's statusseeking PE must attest to the information provided on the application. Authorized employees may not request any documentation or require verification of information provided, Applicants are allowed only one PE period per 12-month period or, if pregnant, per pregnancy. In the absence of an automated system that can verify the applicant's past use of presumptive eligibility, the facility will rely on self-attestation.

The authorized employee must make the final determination of whether or not the individual may be eligible for Medicaid. This decision is made based on the criteria in section 400,8,3 of the policy manual and the results of the online system. Once a final decision is made by the authorized worker he/she will provide the patient with either a temporary Medicaid card or a document stating why he/she was not determined presumptively eligible.

The Authorized Employee must assist the applicant or his authorized representative in completing the single streamlined application (SLA) for Medicaid and forward the application to the Department.

C. Presumptive Eligibility Determination

Collapse

The presumptive eligibility determination is based on the following factors:

- 1. The woman must be pregnant.
- 2. Household income must not exceed the applicable income standard at 42 CFR 435.116.
- a. A reasonable estimate of MAG+based income is used to determine household income.
- b. Gross income is used to determine household size.
- 3. State residency
- 4. Citizenship, status as a national, or satisfactory immigration status

D. Qualified Entities

Collapse

- 1. 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.
- 2. The following qualified entitles are used to determine presumptive eligibility for this eligibility group:
- Other entity the agency determines is capable of making presumptive eligibility determinations

Name of entity	Description
Rural Health Clinics	Rural Health Clinics are defined in section 1861(aa)(2) of the Social Security Act (the Act) as facilities that are engaged primarily in providing services that are typically furnished in an outpatient clinic. RHC services are defined as: • Physician services; • Services and supplies furnished incident to a physician's services; • Nurse Practitioner (NP), Physician Assistants (PA), certified nurse midwife (CNM), clinical psychologist (CP), and clinical social worker (CSW) services; and • Services and supplies furnished incident to an NP, PA, CNM, CP, or CSW services. To be eligible for certification as a RHC, a clinic must be located in a non-urbanized area, as determined by the U.S. Census Bureau, and in an area designated or certified within the previous 4 years by the Secretary, Healthand Human Services (HHS), in any one of the four types of shortage area designations that are accepted for RHC certification. RHCs can be either Independent or provider-based.
	Independent RHCs are stand-alone or freestanding clinics an submit claims to a Medicare Administrative Contractor (A/B MAC). The statutory requirements for RHCs are found In section 1861(aa)(2) of the Act. Many of the regulations pertaining to RHCs can be found at 42 CFR 4052400 Subpart X and following, and 42 CFR 491 Subpart A and following.

Name of entity	Description
Federally Qualified Health Centers	Federally Qualified Health Centers (FQHC) receiving a grant under Section 330 of the Public Health Service (PHS) Act; or, receiving funding from a grant under a contract with the recipient of a grant and meets the requirements to receive a grant under Section 330 of the PHS Act; or, is not receiving a grant under Section 330 of the PHS Act but is determined by the Secretary of the Department of Health & Human Services (HHS) to meet the requirements for receiving such a grant (i.e., qualifies as a FQHC look-alike) based on the recommendation of the Health Resources and Services Administration; or, was treated by the Secretary of the Department of HHS for purposes of Medicare Part Bas a comprehensive Federally funded health center as of January 1, 1990; or is operating as an outpatient health program or facility of a tribe or tribal organization under the Indian Self-Determination Act or as an urban Indian organization receiving funds Under Title V of the Indian Health Care Improvement Act as of October 1, 1991.
Comprehensive community mental health centers	Comprehensive community mental health centers as identified in West Virginia Code §27-2A1. The Department of Health and Human Resources is authorized and directed to establish, maintain and operate comprehensive community mental health centers at locations within the state that are determined by the secretary in accordance with the state's comprehensive mental health plan.
First Choice Services	First Choice Services · ACA Navigators and HELP4WV Helpline Specialists First Choice Services operates several programs and helplines with the common goal of promoting well-being and facilitating access to behavioral health and social services. First Choice began as a collaborative effort among West Virginia's comprehensive behavioral health care centers. First Choice also operates the ACA Navigator program which is funded by a grant from the Center for Medicare and Medicaid Services. ACA Navigators provides free health coverage enrollment assistance to people who are uninsured. Certified Navigators help consumers enroll in qualified health plans through the Health Insurance Marketplace or, If eligible, Medicaid. HELP4WV offers a 24/7 call, chat, and text line that provides immediate help for any West Virginian struggling with an addiction or mental health issue. The helpline staff offers confidential support and resource referrals, including self-help groups, out-patient counseling, medication-assisted treatment, psychiatric care, emergency care, and residential treatment.
Medicaid enrolled pharmacies	Licensed pharmacists and pharmacy technicians employed by Medicaid enrolled pharmacies.
Local Health Departments	West Virginia's 55 counties are served by 49 local boards of health charged with protecting the health and safety of the citizens of West Virginia, Local boards of health provide services through local health departments located in all 55 counties including communicable and reportable disease prevention and control.
Free Clinics	Free and Charitable Clinics are safety-net health care organizations that utilize a volunteer/staff model to provide a range of medical, dental, pharmacy, vision and/or behavioral health services to economically disadvantaged individuals. Such clinics are 501(c)(3) taxexempt organizations, or operate as a program component or affiliate of a 501(c)(3) organization. Entities that otherwise meet the above definition, but charge a nominal/sliding fee to patients, may still be considered Free or Charitable Clinics provided essential services are delivered regardless of the patient's ability to pay. Free or charitable clinics restrict eligibility for their services to individuals who

Name of entity	Description
	are uninsured, underinsured and/or have limited or no access to primary, specialty or prescription health care.

3. 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.

4. A copy of the training materials has been uploaded for review during the submission process.

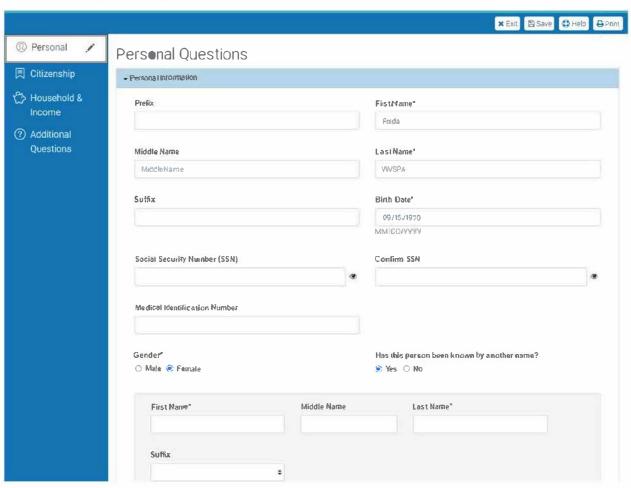
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E. Additional Information (optional)

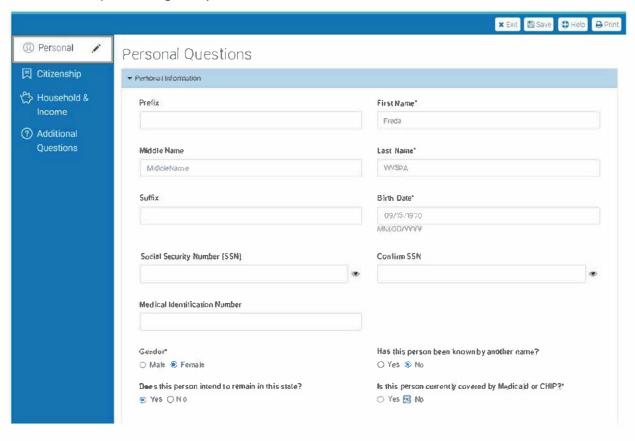
Collapse

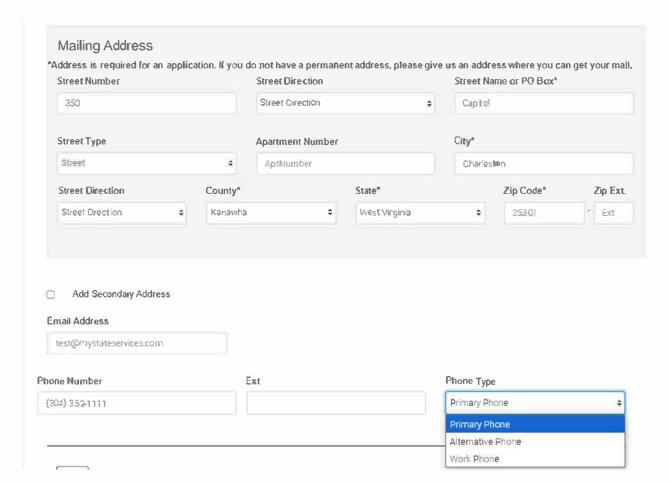
PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory Information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law, According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 9938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection, If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard. Actn: PRA Reports Clearance Officer, Mail Stop C4.26-05, Baltimore, Maryland 21244-1850.

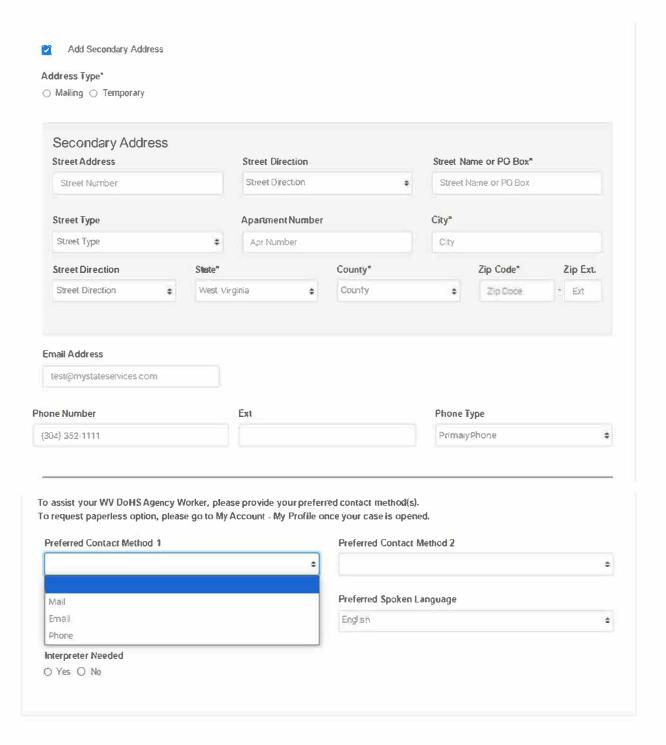












To assist your WV DoHS Agency Worker, please provide your preferred contact method(s).

To request paperliess option, please go to My Account - My Profile once your case is opened.

Preferred Contact Method 1

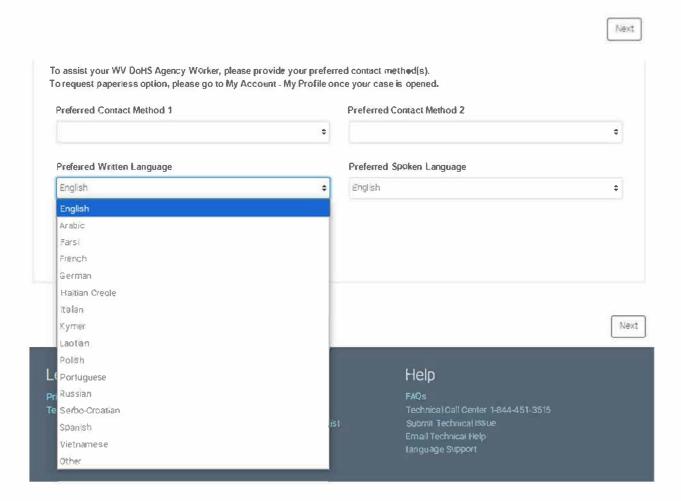
Preferred Contact Method 2

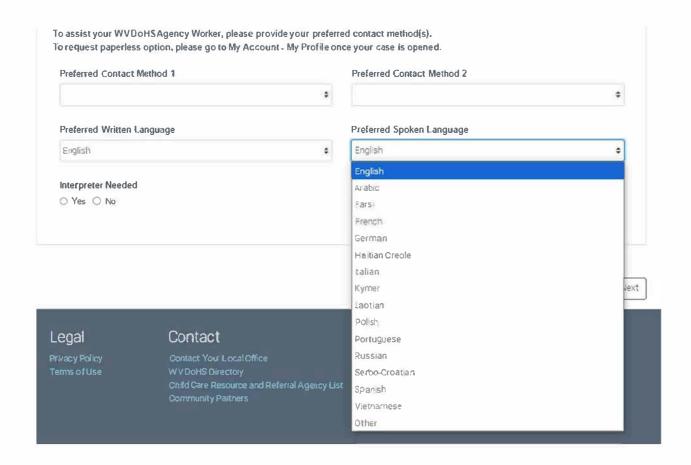
Preferred Written Language

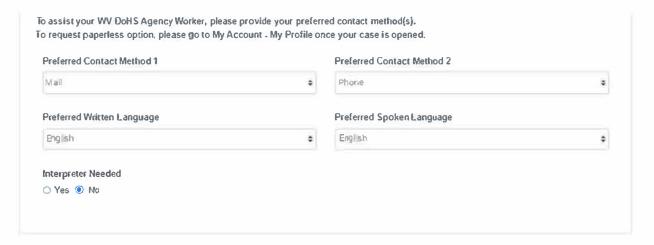
English

Interpreter Needed

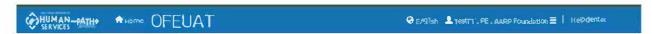
Yes O No



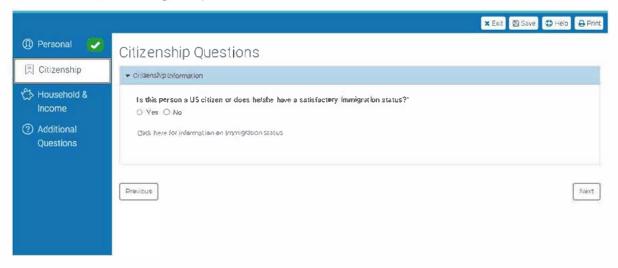




Nex



Presumptive Eligibility



West Virginia Medicaid Eligibility for Qualified Non-Citizens

Determining Satisfactory Immigration Status

immigrants who are "qualified non-citizens" are generally eligible for Medicuid coverage it they neet immine and residency requirements. To be determined presumptively eligible (PE) for Medicalid, an individual must attest to being a United States clazen or a "qualified non-citizent" with salisfaciory immigration status

The first step is to identify the non-citizen's invinigation status to determine if they are a "quadified non-witzen" as desined below. Most non-citizens tawfully in the United States shauld have some kind of immigration document. Example documants are provided below. NOTE: Documentation is not required for a PE determination, Many qualified non-calizens (such as many Lawful Permainent Residents (LPRs) orginen card holders) have a 5-year waiting period. This means they must wait 5 years after receiving qualified "immigration status before they can get Medicald coverage. There are exceptions, for example, refugees or LPRs who used to be refugees or asylees don't have to wait 5 years.

A. WITHOUT A FIVE YEAR WAITING PERIOD

- 1. Citizans of the Marshall Islands, Micronesia, and Palau who are fining in one of the U.S. stales or territories (referred to as Compact of Free Association or Cliffe Arcginals).
 2. Lavful Petinanent Residents (ite, green-card holders or LPRs wito adjissed to LPR from an immigration status that is exerted from the
- 2. Lawful Perinaneni Residenie (i.e., green-cardholders or LPRs wito adjissed to LPR from an immigration status that is exempt from the S-year bar fissed atnumbers 3.10, below)
 3. Refugee admitted to the U.S. under section 2010 of the INA
 4. Granted asytum under section 208 of the INA

- 5. Withholding of deportation or removal under section 243(h) or 241(b/3) of the INA 6. Cuban er Hallan entrant as dafined in section 501(e) of the Refugee Education Assistance Aut ef 1980
- 7. A metasian introvigrant admittied pursuant to section 584 of Public Law (Pub. L. No.) 100-202 (1211987), as anxended by Pub. L. No., 100-
- 461 (10/1988)
 - 8. Applicants for a victime I trafficking Tussa or victim of trafficking with a servification or eligibility letter from the Office of Refugee
- 9, traqi/Atghan spelial inmigrant visə holder 10. Member of a fedendily recognized Indian hibs o*t A*userican Indian bem in Canada

- B. WITHA F WE-YEAR WAITING PERIOD (from the date they received the qualitying shaius)

 11. Lawful Permanent Residents (if e., green-cardholders or LPRs), unless adjusted from a stalus that is exemplifrom the 5-year waiting period at 3.10. above

 12. Batharde hand-blackeds and their didden or patents

 13. Mon-cilizans paroled into the U.S. for alteast one year Exception: Afghan and Ukrainiannablonals:

 14. Mon-cilizans paroled into the U.S. for alteast one year Exception: Afghan and Ukrainiannablonals:

 15. And cilizans paroled into the U.S. for alteast one year waiting period; if they meet other eligibally requirements (if it is come) for coverage in the state, until Masch 31, 2023, or the term of parolegranted to the evactive, whichever is late; and

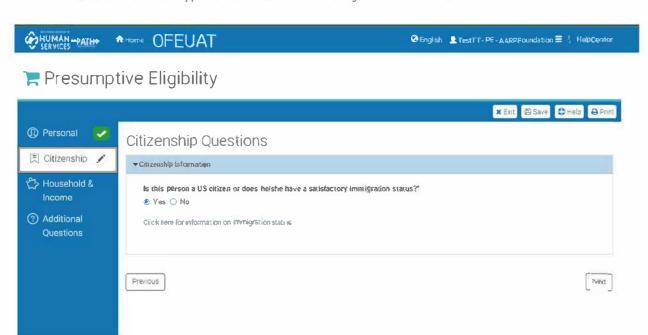
 15. Loraninan nationals who enter the United States as paroleges on or between February 24, 2022 and September 30, 2023 are eligible for Medicaid and parolege and extent as relaigned.

 25. Loraninan nationals who enter the United States as paroleges on or between February 24, 2022 and September 30, 2023 are eligible to the dearenced above evaluated to the analysis of the parollege dearenced above evaluated a parollege dearenced above evaluated to the analysis of the parollege dearenced above evaluated so the value of the dearenced above evaluated in the late of the parolleges and the parolleges of the parolleges and the parolleges of the parolleges and the parolleges of the parolleges and the parollege of the parolleges of the parolleges and the par

- 14. Conditional entrants granted status prior to April 1, 1980 (Note: because of the grant date requirement, these non-citizens will already have met the 5-year waiting period)
- 15. Exception: qualified non-citizens (11-15) are exempt from the 5-year wailing period if they are:
 - a. Veterans who received an honorable discharge, or
 - b:A military service member on active duty in the armed forces of the United States (other than active duty for training i.e., Reserves), or
 - c. A spouse or unmarried dependent child of a veteran or active duty service member as described above, or
 - d Have lived in the US since 1996
 - e. An American Indian born in Canada to whom the provisions of 8 U.S.C. 1359 apply
 - f. A member of an Indian wibe, as defined in 25 U.S.C. 450b(e)
 - g Non-citizens receiving SSI

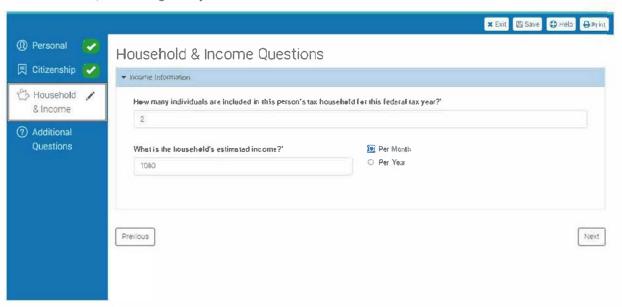
C. LAWFULLY PRESENT PREGNANT WOMEN AND CHILDREN UNDER AGE 19 The following individuals are considered lawfully present and eligible for PE. if otherwise eligible

- a. All qualified non-citizens (see above)
- b A non-otizen in valid nonimmigrant status (for example, student visas, worker visas, etc.)
- c, A non-citizen who has been paroled into the United States, for less than 1 year, except for a non-citizen paroled for prosecution, deferred inspection or pending removal proceedings
- d A noncitizen who belongs to one of the following classes:
 - i. Non-citizens currently in temporary resident status
 - ii. Noncitizens currently under Temporary Protected Status (TPS) and pending applicants for TPS who have been granted employment authorization
 - iii, Non-eitizens who have been granted employment authorization;
 - iv. Family Unity beneficiaries
 - y. Non-citizens currently under Deferred Enforced Departure (DED) pursuant to a decision made by the President
 - vi. Non-citizens currently in deferred action status (note that this does not include individuals with DACA granted under the June 2012 DHS Policy [Deferred Action for Childhood Arrivals] status)
 - vii. Granted an administrative stay of removal
 - viii. Non-citizens whose visa petition has been approved and who have a pending application for adjustment of status;
- e. A pending applicant for asylum or for withholding of removal or under the Convention Against Torture who has been granted employment authorization, or is an applicant under the age of 14 and has had an application pending for at least 180 days
- f: A non-eitizen who has been granted withholding of removal under the Convention Against Torture
- g. A child who has a pending application for Special Immigrant Juvenile status
- h A non-eitizen who is lawfully present in American Samoa under the immigration laws of American Samoa

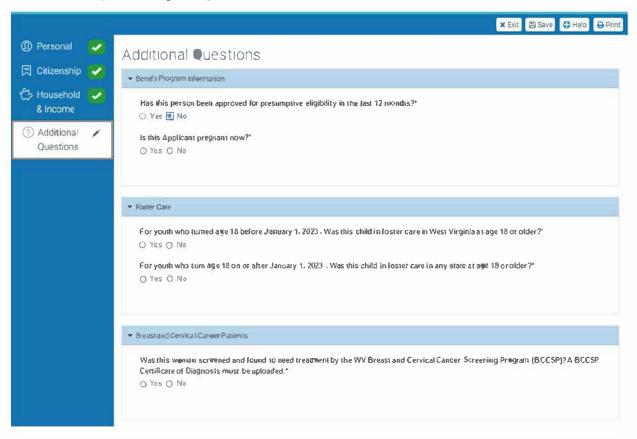


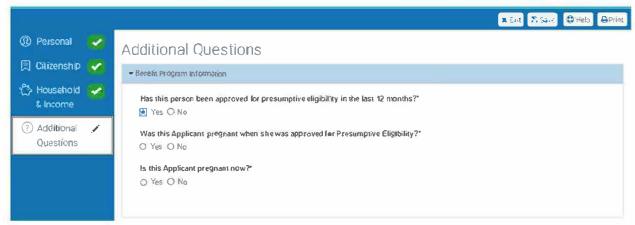


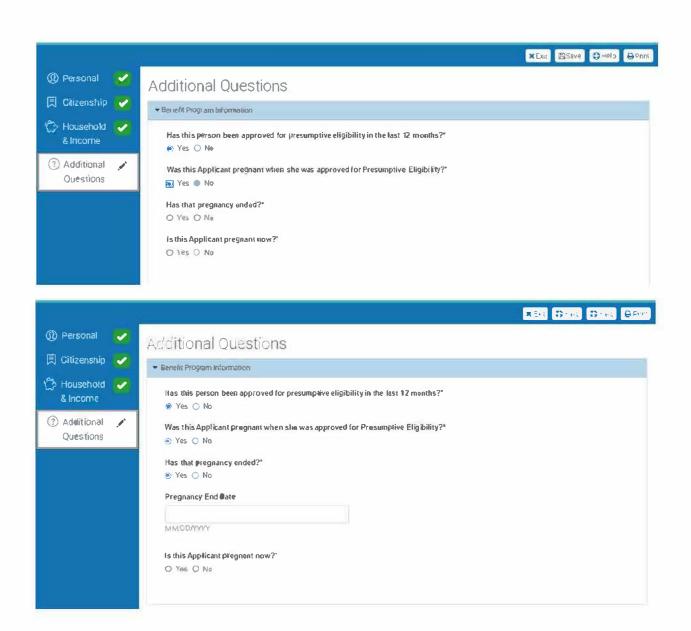
📜 Presumptive Eligibility

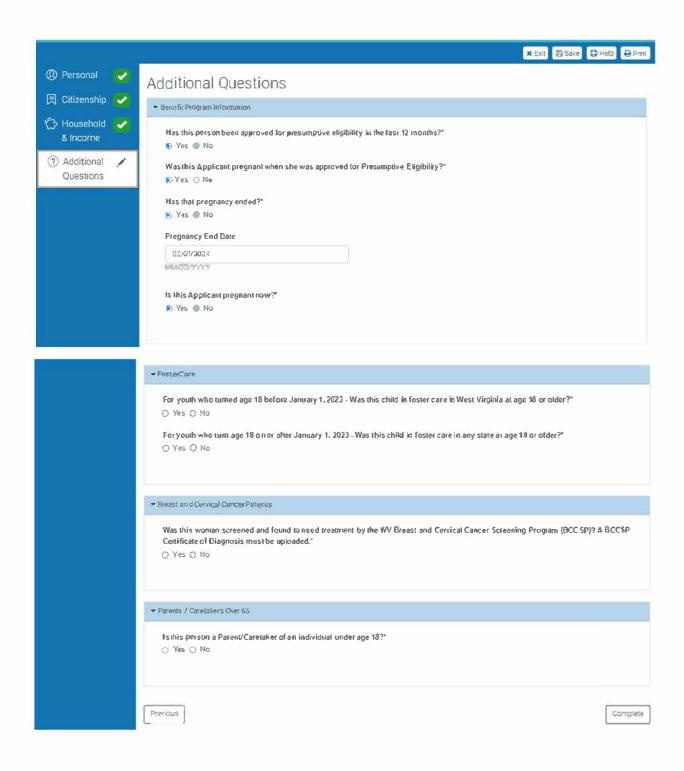


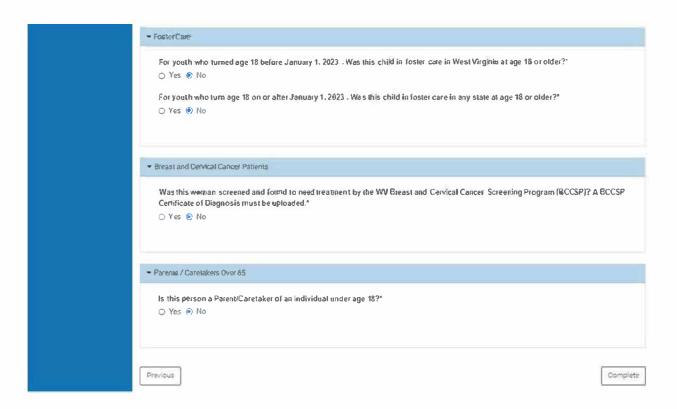
Presumptive Eligibility

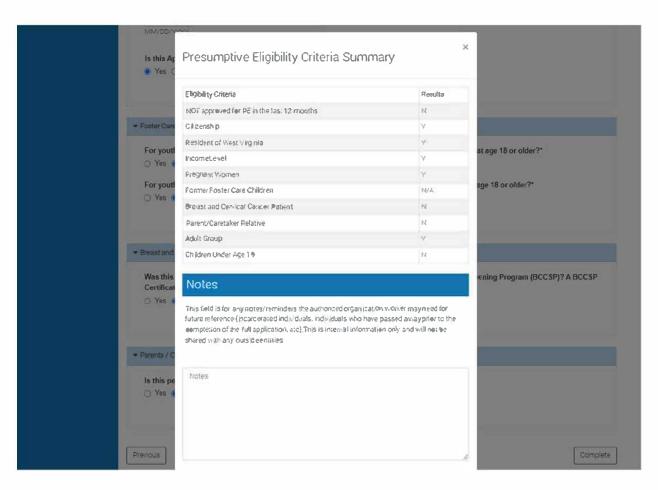


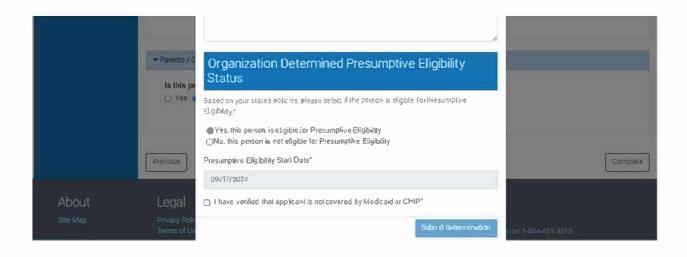




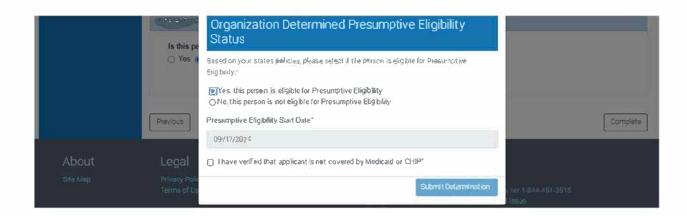


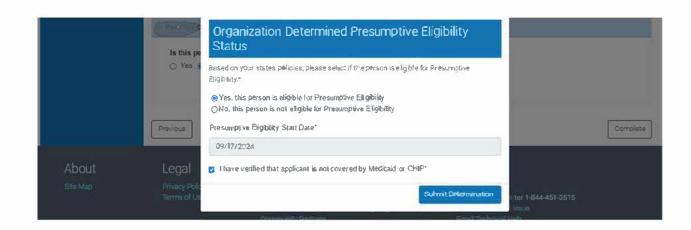












Click the following link to review the eLearning as the learner would:

https://360.articulate.com/review/content/bd40068a-7e45-47db-9616-43d68c999507/review

Presumptive Eligibility (PE) Worker

1. Welcome

1.1 Presumptive Eligibility (PE)



Notes:

Welcome to Presumptive Eligibility (PE) Worker training. This video provides self-paced training for your role as a PE Worker completing Presumptive Eligibility Determinations in the West Virginia Department of Human Services (WV DoHS) People's Access to Help (WV PATH) Public Portal.

Click Here to begin.

1.2 Key Learning Points



Notes:

Click each number to learn about what will be covered in this video. After completing these topics, you will be presented with a Knowledge Check to confirm your learning. A passing score of 80% is required for completion of this training.

Key Learning Point 1:

Learn how to complete a Presumptive Eligibility Determination in WV PATH and print a Temporary Medical Card.

Key Learning Point 2:

Learn how to complete a Full Medicaid application.

Key Learning Point 3:

Learn about other features available in WV PATH.

2. Complete PE Determination

2.1 Sign In



Notes:

Click Sign In at the top of the screen to get started.

2.2 Sign In



Notes:

Here is where you will enter your Optum GovID and Password to sign in to WV PATH. Click **SIGN IN**.

2.3 Dashboard



Notes:

The Dashboard displays. Your first name, your role as a PE, and your Organization's Name display at the top of the screen. The Dashboard is the Landing Page for your work as a PE in WV PATH. From here, you can quickly navigate to what you need, and efficiently assist your applicants.

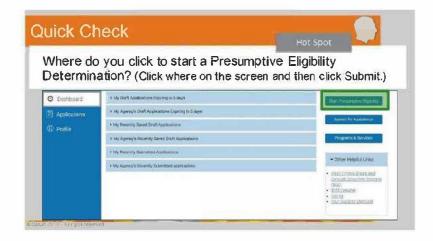
Details about each area of the Dashboard are included in *Job Aid: Presumptive Eligibility Worker*, available in the Resources menu above. Take a moment to open the Job Aid and have it available as you complete this training.

Follow along in the Job Aid as we walk through completing a Presumptive Eligibility Determination in WV PATH.

Click Next.

2.4 Where do you click?

(Hotspot, 10 points, 1 attempt permitted)



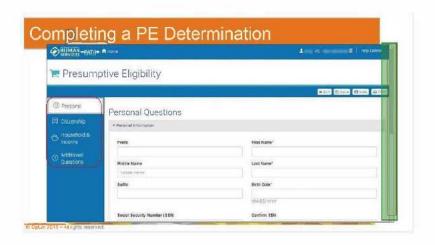
Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. To start a Presumptive Eligibility Determination, click the Start Presumptive Eligibility button.

2.5 Personal

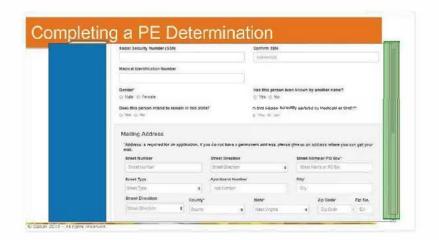


Notes:

After clicking the Start Presumptive Eligibility button, the first page of the Presumptive Eligibility Determination application displays. Information is organized into four categories on the left Navigation bar. This is the Personal category.

Click the Scroll bar on the screen to scroll down the page and review the questions.

2.6 Personal

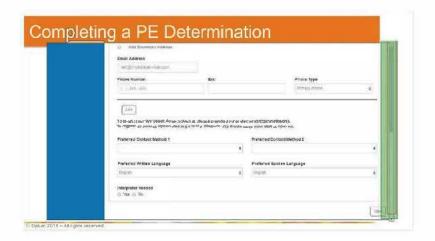


Notes:

Demographic information is entered in the Personal category.

Click the Scroll bar on the screen to continue scrolling down the page.

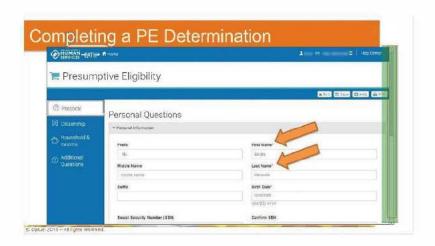
2.7 Personal



Notes:

Click the **Scroll** bar now to return to the top of the page.

2.8 Personal

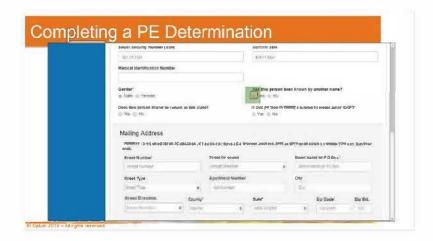


Notes:

Watch as fields in this example are completed. Notice that some fields have an asterisk ("*") indicating that they are mandatory. Mandatory fields must be completed in order to move forward in the application.

Click the Scroll bar to scroll down the page.

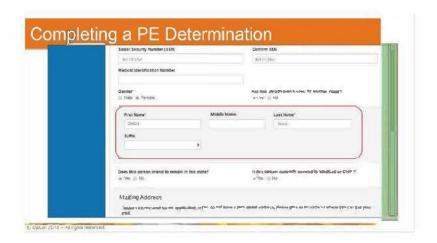
2.9 Personal



Notes:

Click Yes the applicant has been known by another name on the screen.

2.10 Personal



Notes:

A new area displays to enter the additional name. You will see this from time to time in WV PATH. The information being displayed will change based on your selection.

You continue to enter other demographic information.

Click the **Scroll bar** to continue scrolling down the page.

2.11 Personal

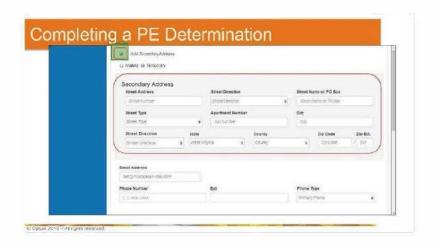


Notes:

You continue to enter the applicant's address. If the applicant has an additional address, click the **Add Secondary Address** check box.

Click the Add Secondary Address check box on the screen.

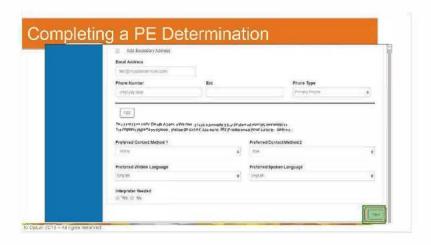
2.12 Personal



Notes:

Additional address fields display. In this case, we don't need to enter another address, so click the **Add Secondary Address** check box again to deselect it.

2.13 Personal

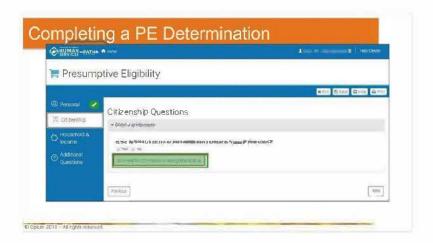


Notes:

If the applicant doesn't have an email address, you can leave that field blank. Enter the applicant's phone number and select the Preferred Contact Method, preferred language, and whether an interpreter is needed.

That completes the **Personal** category.

2.14 Citizenship

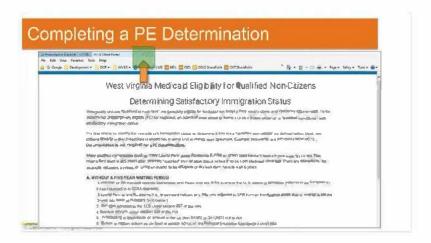


Notes:

The **Citizenship** category is next. If you require clarification of the immigration status definitions, you can click the link on the page to display further information.

Go ahead and click the link for information on immigration status.

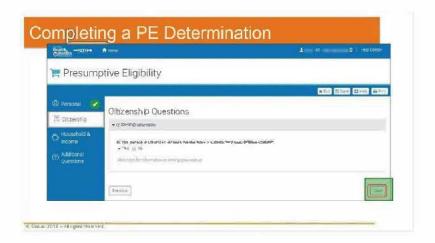
2.15 Citizenship – Looks okay!



Notes:

Details regarding satisfying immigration status requirements display. Click the **X** on the browser tab to close it and return to the application.

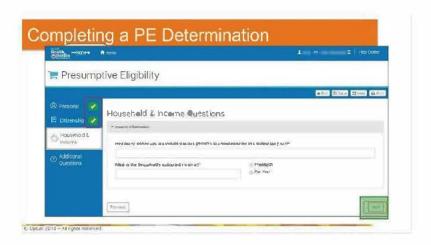
2.16 Citizenship



Notes:

The applicant is a US citizen. Click **Next** to continue through the application.

2.17 Household & Income



Notes:

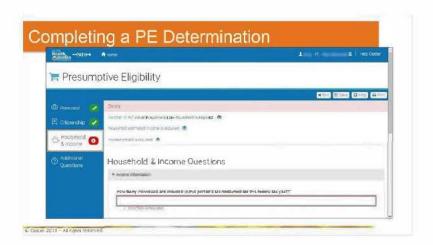
Notice green checkmarks display next to the **Personal** and **Citizenship** categories, indicating that they are complete. If you need to revisit a category, you can select it on the Navigation bar.

You are now viewing the **Household & Income** category. There are two mandatory questions to complete. You need to complete the mandatory information before you can

move to the next category.

Click the **Next** button and see what happens if you *don't* complete mandatory information.

2.18 Household & Income

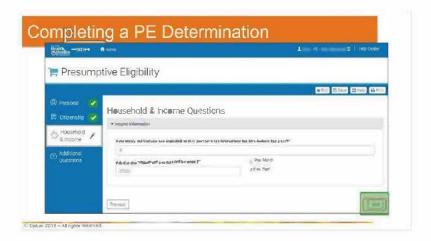


Notes:

WV PATH displays a red alert icon next to the category on the Navigation bar, and red text explains what is missing. The incomplete fields are highlighted red as well.

Click Next.

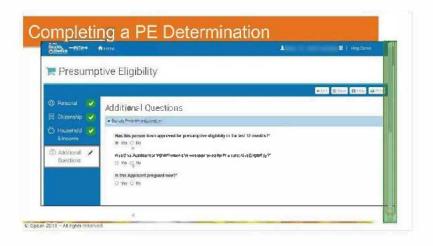
2.19 Household & Income



Notes:

Complete these fields and continue. Note that the **Household & Income** category shows a *pencil icon*, because that's the category you are working in.

2.20 Additional Questions

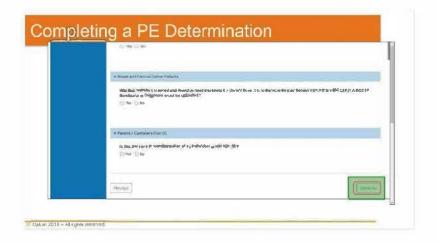


Notes:

The last category is **Additional Questions**. This category contains general questions that are needed to determine Presumptive Eligibility.

Click the **Scroll bar** on the screen to see the rest of the questions.

2.21 Additional Questions

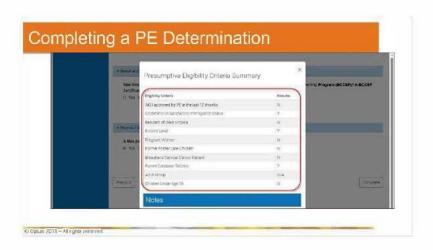


Notes:

All questions have been answered.

Click the Complete button on the screen.

2.22 Submit Determination

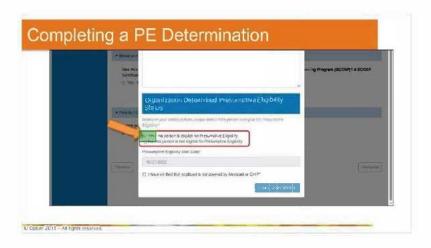


Notes:

The results of each Eligibility Criteria display at the top of the window for your review.

Click Next.

2.23 Yes Determination

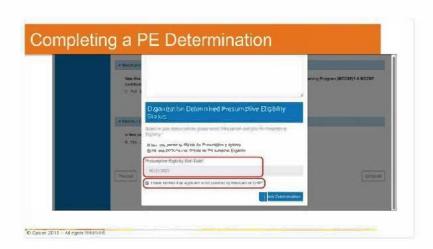


Notes:

After reviewing the results, select "Yes" or "No" to indicate whether the applicant is eligible for Presumptive Eligibility.

Click Yes to continue.

2.24 Yes Determination Date



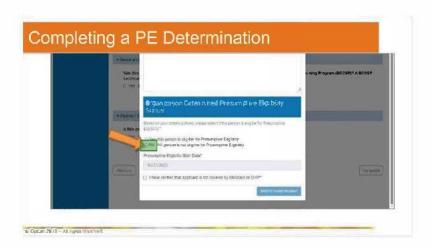
Notes:

Once you determine the applicant to be presumptively eligible, enter today's date to

begin coverage. Then select the check box to indicate that you verified the applicant is *not* covered by Medicaid or CHIP.

Click Next to learn the steps to take when you determine the applicant is not eligible.

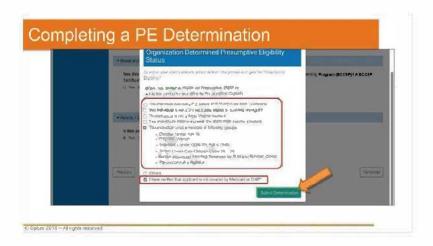
2.25 Submit Determination



Notes:

Select No to indicate the applicant is not eligible for Presumptive Eligibility.

2.26 No Determination

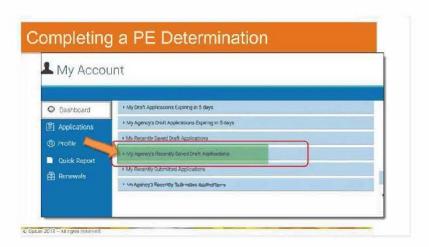


Notes:

When "No" is selected, one or more reasons must be chosen. You must also select the check box to indicate that you verified the applicant is *not* covered by Medicaid or CHIP.

Click the Submit Determination button to continue.

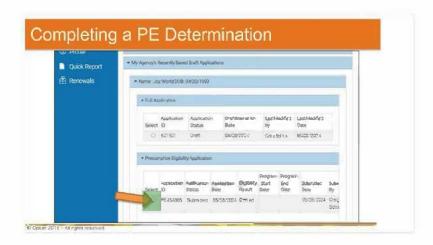
2.27 Printing Denial



Notes:

When a presumptive eligibility application is denied, you must print the eligibility notice, including the reason for the denial, and provide it to the applicant. To do this, click the My Agency's Recently Saved Draft Applications accordion.

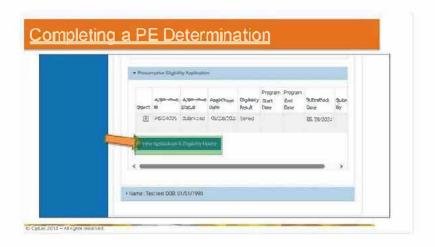
2.28 Printing Denial



Notes:

Click the radio button for the denied application in the Presumptive Eligibility Application sub-accordion.

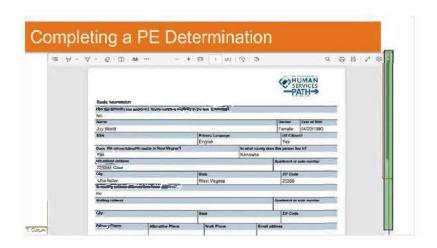
2.29 Printing Denial



Notes:

Click the View Application & Eligibility Notice button.

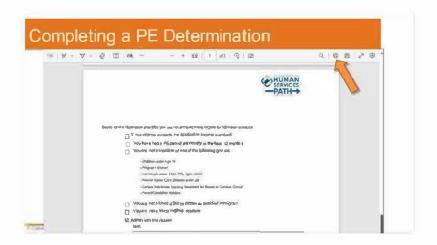
2.30 Printing Denial



Notes:

A PDF of the selected application displays in a new browser window. Click the **Scroll** bar to scroll down to the second page to view the denial.

2.31 Printing Denial



Notes:

This page of the denial must be printed and provided to the customer. Click Next to continue.

3. Printing Temporary Medical Card

3.1 Dashboard



Notes:

The application is submitted and you are returned to the Dashboard. Now you need to print the applicant's Temporary Medical Card and complete a Full Medicaid Application. To do this, click the **My Recently Saved Draft Applications** accordion.

3.2 My Recently Submitted Applications



Notes:

This is the Presumptive Eligibility Application that you just submitted. Notice that WV PATH started a Full Application for you. We'll come back to this in a bit.

Click the radio button to select the **Presumptive Eligibility Application** you want to print.

3.3 View Application & Eligibility Notice



Notes:

Then click the View Application & Eligibility Notice button.

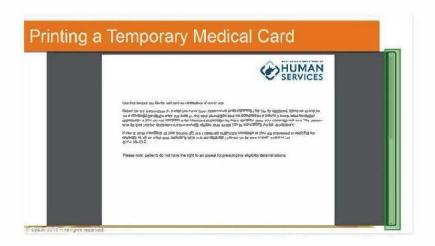
3.4 Application & Eligibility Notice



Notes:

The submitted application displays. Click the Scroll bar to scroll down the page.

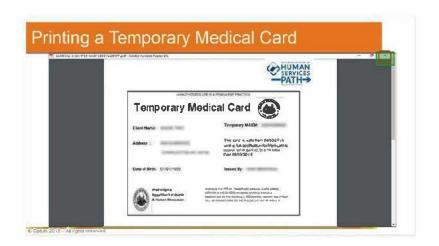
3.5 Application & Eligibility Notice



Notes:

Click the Scroll bar to continue.

3.6 Temporary Medical Card



Notes:

Here is the applicant's Temporary Medical Card for you to print.

Click the X on the screen to close the window.

3.7 My Recently Submitted Applications



Notes:

The applicant was presumptively eligible, so next, you need to complete a Full Medicaid application. Click the radio button to select the Full Application.

4. Full Application

4.1 Dashboard



Notes:

Then click the Edit Application button.

4.2 Start

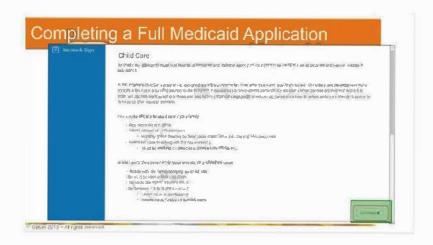


Notes:

This is the first page of the application. Notice the categories listed on the Navigation bar. WV PATH will lead you through completing the categories that are necessary. First, you need to review some information about WV PATH.

Click the Scroll bar to move down the screen.

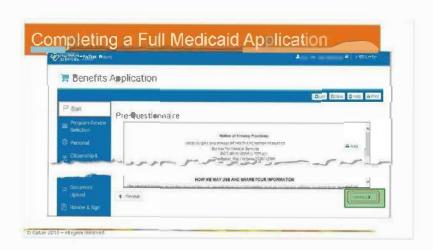
4.3 Start



Notes:

Click the Continue button.

4.4 Start



Notes:

When completing an application, review DHHR's Notice of Privacy Practices with the applicant then click the **Continue** button.

4.5 Start



Notes:

The **Start** category is a pre-questionnaire containing preliminary questions. Because you are currently signed in as a PE, WV PATH selects "I am completing this application on someone's behalf" for the question "Who is completing this application?" and indicates that you are An Authorized Representative.

Click the Scroll bar to scroll down the page.

4.6 Start



This is where you will enter *your* information when completing an application. Click the **Continue** button to continue.

4.7 Start



Notes:

WV PATH selects the Health Care program for you, because you are completing a Full Medicaid application, and only displays the pertinent categories of information on the Navigation bar. Continue through the application.

4.8 Start



Here you enter the customer's or client's information. If needed, you can click the Add Household Member button to add other household members to the application then continue.

4.9 Start



Notes:

For this example, you are completing the application at a Hospital or Doctor's Office so you select that option then click **Continue**.

4.10 Start



Indicate if the applicant has a physical, mental or emotional health condition limiting his or her activities then continue.

4.11 Start



Notes:

Select the applicant as the one needing assistance and continue.

4.12 Start



Notes:

If the applicant is female, you are asked if she is pregnant, the expected due date, expected number of babies, and when she learned she was pregnant.

4.13 Start



Notes:

If anyone in the household has unpaid medical bills in the past three months, indicate which member and how many months of expenses are unpaid. Click **Next** on the screen.

4.14 Personal



Notes:

That completes the **Start** category. Notice a green checkmark displays next to it on the Navigation bar, indicating that it is complete. You are now in the **Personal** category. At the top of the page, WV PATH lists the information you will need to complete this category. If you don't have all the required information available, you can click Save and

return to the application when ready.

In the **Personal** category, you enter contact information for each household member, as well as the preferred contact method, preferred language, whether the applicant requires an interpreter, and each member's ethnicity.

Click the Scroll bar to scroll to the bottom of the page.

4.15 Personal



Notes:

Each member of the household has an accordion at the bottom of the page. You need to complete mandatory information for each member of the household before moving to the next category. Click the **Next** button to continue.

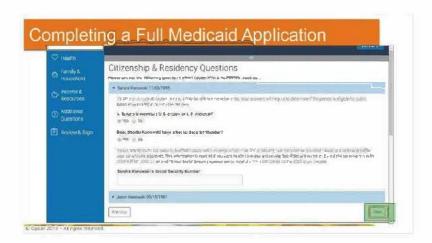
4.16 Citizenship & Residency



Notes:

This is the Citizenship & Residency category. Click the Scroll bar to scroll to the bottom of the page.

4.17 Citizenship & Residency



Notes:

In the **Citizenship & Residency** category, you indicate if the applicant is a U.S. Citizen, U.S. National, or naturalized citizen. Then, enter their Social Security Number.

4.18 Health

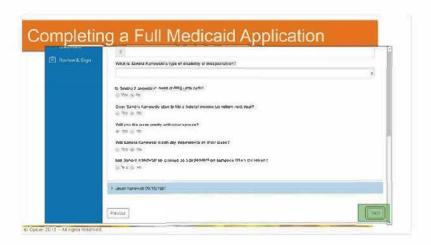


Notes:

In the **Health** category, you enter current health insurance coverage, income, and any in-home care a household member might require.

Click the Scroll bar to scroll down the page.

4.19 Health



Notes:

WV PATH also displays questions regarding the applicant's tax filing status.

4.20 Family & Household

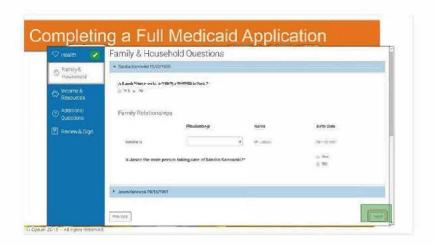


Notes:

In the Family & Household category, enter the applicant's education and household expense information.

Click the Scroll bar to scroll down the page.

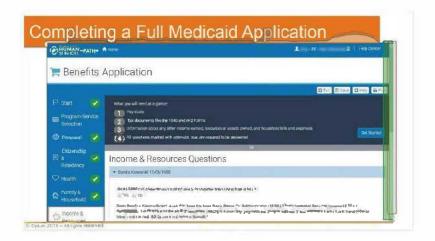
4.21 Family & Household



Notes:

Click Next to continue.

4.22 Income & Resources

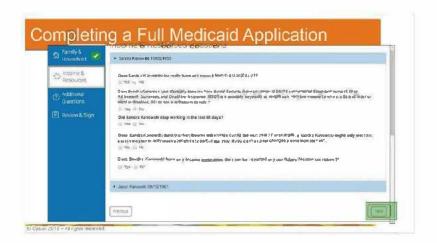


Notes:

In the Income & Resources category, enter the employment and income information.

Click the Scroll bar to scroll down the page.

4.23 Income & Resources



Notes:

Click Next to continue.

4.24 Additional Questions



Notes:

This is the Additional Questions category. Answer general questions that don't display elsewhere in this category. Questions will be answered for each household member.

4.25 Review & Sign

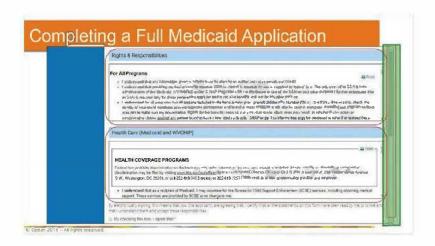


Notes:

The last category is to review and sign the application. Here, you can click on each accordion and review what you entered. If a change is needed, click the category on the left, make the change and return to Review & Sign.

Click the Scroll bar to scroll down the page.

4.26 Review & Sign

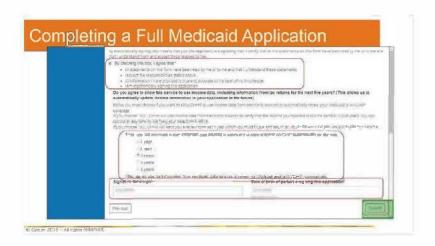


Notes:

Rights & Responsibilities are displayed for review, as well as requirements for Health Care programs.

Click the Scroll bar to scroll down the page.

4.27 Review & Sign



Notes:

After reviewing the Rights & Responsibilities, indicate that the applicant has reviewed them. Select whether he or she consents to DHHR using the income information included in their tax returns. If "Yes" is selected, indicate for how many years. Then enter the applicant's name in the e-sign field, enter his or her date of birth, and click **Submit**.

4.28 Review & Sign

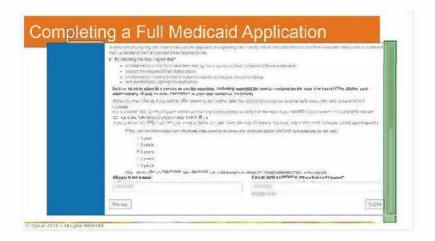


Notes:

A window displays, stating the application is being processed.

Click the **X** to close the window and return to the application.

4.29 Review & Sign



Notes:

Click the Scroll bar to scroll to the top of the page.

4.30 Review & Sign



Notes:

That is how you complete and submit a Full Medicaid application. Click **Exit** to close the application and return to the Dashboard.

5. Searching for Applications

5.1 Dashboard



Notes:

Before we move on to the next topic, take a moment to click on your name, role, and organization at the top of the screen.

5.2 Dashboard



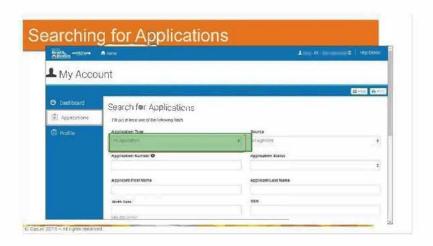
Notes:

A short menu displays here. Let's review the options available. If you perform more than one function in WV PATH such as a PE and a PE Admin, you will use Switch Role to move between them. See *Job Aid: Managing Multiple Roles* under Resources for further

information. My Account is another way to return to your Dashboard from the WV PATH Landing Page. You will select Sign Out here to leave WV PATH.

Back to the Dashboard. Let's see how you can search for applications in WV PATH. Click **Applications** on the Navigation bar.

5.3 Enter Criteria

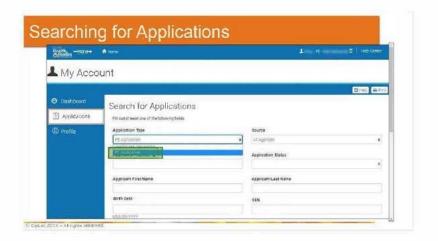


Notes:

Here, you can search for applications created by you or others in your organization. The page displays your search options. In this case, you want to find a Presumptive Eligibility application that you created.

Click Application Type.

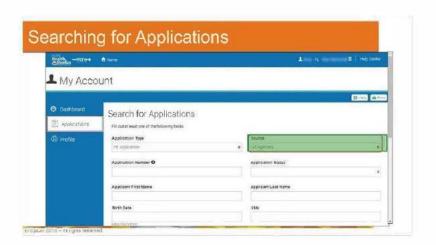
5.4 Enter Criteria



Notes:

Select PE Application.

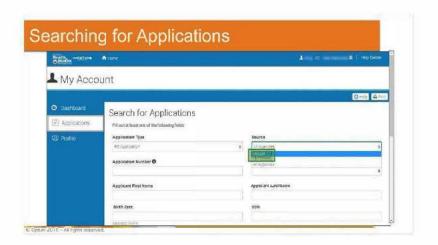
5.5 Enter Criteria



Notes:

Click Source to select who created the application.

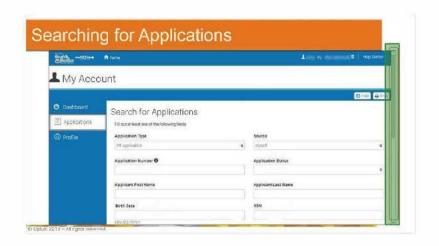
5.6 Enter Criteria



Notes:

Select Myself to find applications that you created.

5.7 Search



Notes:

Click the Scroll bar to scroll down to the Search button.

5.8 Search



Notes:

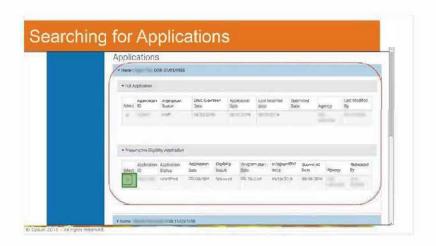
Click the Search button to run the search.

5.9 View Results



Click the Scroll bar to scroll to the bottom of the page and view the results.

5.10 PE Application

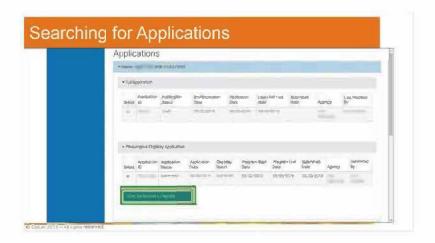


Notes:

The accordion for the first application is already expanded.

Click the radio button for the Presumptive Eligibility Application.

5.11 PE Application



Notes:

Click the View Application & Eligibility Notice button.

5.12 PE Application

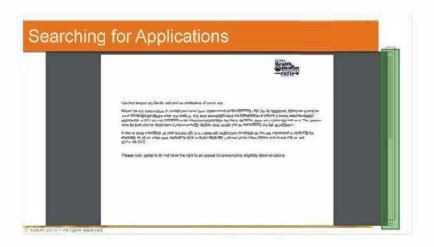


Notes:

The submitted application displays.

Click the Scroll bar to scroll down the page.

5.13 PE Application



Notes:

Click the Scroll bar to continue scrolling.

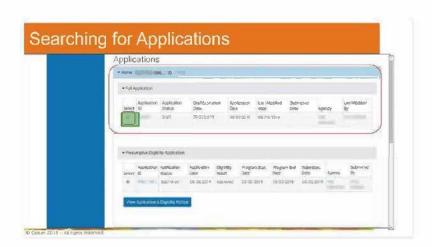
5.14 PE Application



Here is the applicant's Temporary Medical Card.

Click the **X** on the screen to close the window and return to the search results.

5.15 Medicaid Application



Notes:

From here, you can also open the Full Medicaid Application that you created.

Click the radio button for the Full Application.

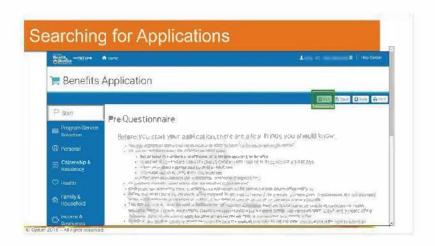
5.16 Medicaid Application



Notes:

Click the **Edit Application** button.

5.17 Exit

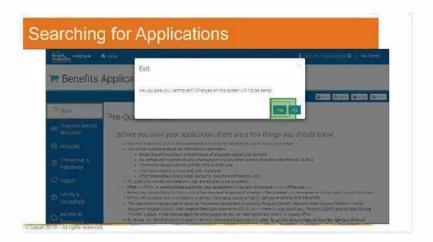


Notes:

Because the Application Status is Draft, WV PATH allows you to continue completing the application. Draft applications are automatically deleted from WV PATH after 30 days.

Click the Exit button.

5.18 Exit



Notes:

WV PATH provides a warning before the application is closed.

Click Yes.

5.19 Dashboard



Notes:

You are returned to the Dashboard.

This course is almost complete. Before completing the Knowledge Check, take a few minutes to learn about two features of WV PATH that you will find useful assisting your applicants: Programs & Services and Screen for Assistance. Let's look at Programs & Services first.

Click Programs & Services on the Dashboard.

6. Programs & Services

6.1 Programs & Services



Notes:

Programs and services offered by DHHR are organized here by category on the left Navigation bar. This is the **Health Care** information page.

To return to your Dashboard, click **Home** at the top of the screen to access the WV PATH Landing Page.

6.2 Programs & Services



Click the **Go** button under My Account to return to your Dashboard.

7. Screen for Assistance

7.1 Screen for Assistance



Notes:

Next, we will look at Screen for Assistance. Here, you can complete questions to see if an applicant may qualify for one or more DHHR programs or services.

Click the Screen for Assistance button on the Dashboard.

7.2 Core



Notes:

The first screen is where you select the programs or services the applicant is interested in.

For this brief demonstration, click Select All.

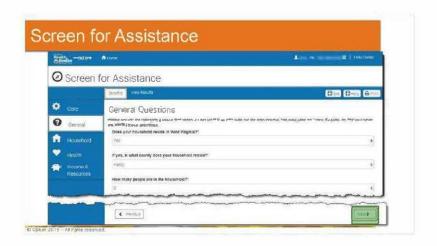
7.3 Core



Notes:

Notice additional categories display on the Navigation bar. WV PATH will walk you through completing necessary information. When you're done, WV PATH will indicate whether the applicant may be eligible for any of the selected program(s) or service(s).

7.4 General Questions



Notes:

Here, indicate the county the applicant is in, and start describing their household.

7.5 Household Questions



Notes:

More specific household information is entered here, including if any household member requires additional care, any parents of a minor child, anyone attending school, rent / mortgage expenses, heating or cooling expenses, or spousal support.

7.6 Health Questions



Notes:

Because you selected to screen for one or more health care programs, you are prompted to enter health information. In this example, you selected "No" for each option.

7.7 Income & Resources Questions

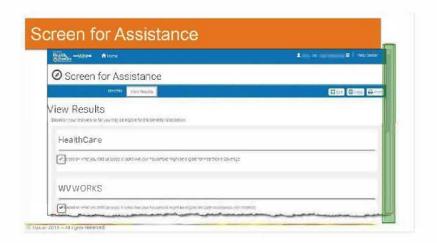


Notes:

The last step is to provide income and resource information.

Then, the screening application is complete. Click **Submit** to see if, in this example, the applicant may be eligible for any programs or services offered by DHHR.

7.8 View Results - Eligible



Notes:

Based on the information that was entered in this example scenario, the applicant *might* be eligible for Health Care and the WV WORKS program under Family Assistance.

Click the Scroll bar on the screen to scroll down the page.

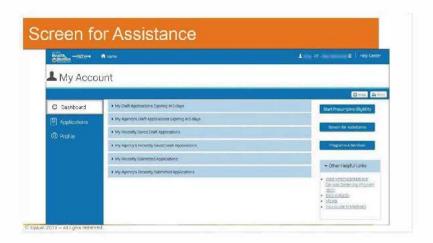
7.9 View Results - Not Eligible



Notes:

At the bottom of the page, click Return to Dashboard, to return to your Dashboard.

7.10 Screen for Assistance

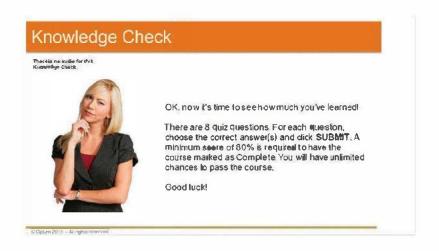


Notes:

You have now completed the Presumptive Eligibility (PE) Worker training course. Click **Next** to access the Knowledge Check. A completion score of 80% or higher is required to have this course marked as Complete in the PATH Learning Community (PLC). Good luck!

8. Knowledge Check

8.1 Quiz Intro

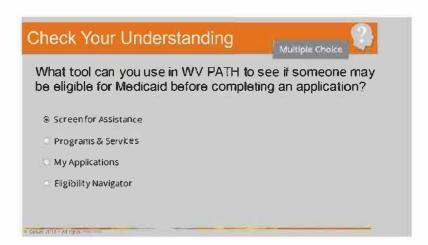


Notes:

There is no audio for this Knowledge Check.

8.2 Multiple Choice

(Multiple Choice, 10 points, 1 attempt permitted)



Correct	Choice
Х	Screen for Assistance
	Programs & Services
	My Applications
	Eligibility Navigator

Feedback when correct:

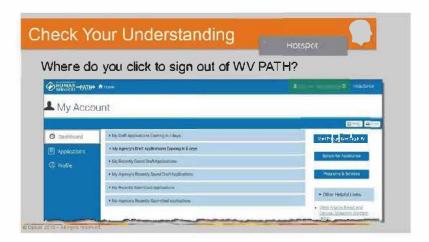
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Use the Screen for Assistance tool.

8.3 Hotspot

(Hotspot, 10 points, 1 attempt permitted)



Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Click your name and role in the banner to select Sign Out.

8.4 Multiple Choice

(Multiple Choice, 10 points, 1 attempt permitted)



Correct Choice

	15 days
	20 days
х	30 days
	45 days
	60 days

Feedback when correct:

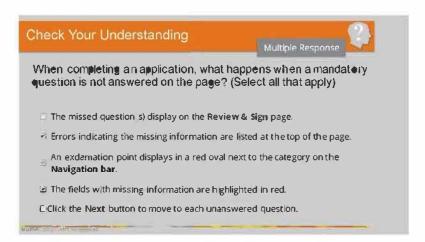
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Draft applications remain on the WV Portal for 30 days.

8.5 Multiple Response

(Multiple Response, 10 points, 1 attempt permitted)



Correct	Choice
	The missed question(s) display on the Review & Sign page.

Х	Errors indicating the missing information are listed at the top of the page.
х	An exclamation point displays in a red oval next to the category on the Navigation bar.
Х	The fields with missing information are highlighted in red.
	Click the Next button to move to each unanswered question.

Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

8.6 Matching

(Matching Drag-and-Drop, 10 points, 1 attempt permitted)



Correct	Choice
А	Indicates where you are currently entering
l	information.

В	Indicates all mandatory information has been
	entered.
С	Indicates not all mandatory information has
	been entered.

Feedback when correct:

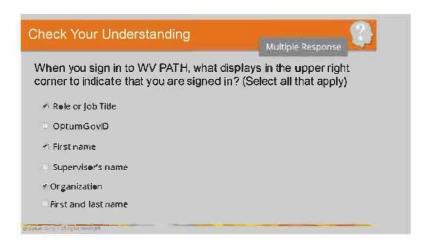
That's right! You selected the correct response.

Feedback when incorrect:

You did not correctly match one or more items.

8.7 Multiple Response

(Multiple Response, 10 points, 1 attempt permitted)



Correct	Choice
Х	Role or Job Title
	Optum GovID
х	First name

	Supervisor's name
х	Organization
	First and last name

Feedback when correct:

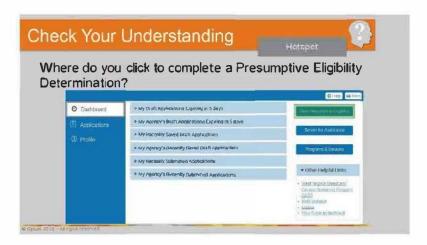
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

8.8 Hotspot

(Hotspot, 10 points, 1 attempt permitted)



Feedbackwhen correct:

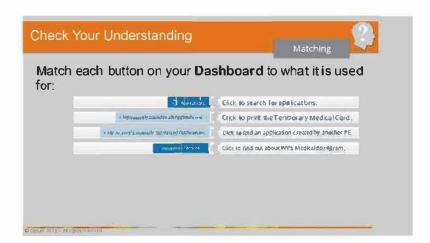
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Click the Start Presumptive Eligibility button to complete a determination.

8.9 Matching

(Matching Drag-and-Drop, 10 points, 1 attempt permitted)



Correct	Choice
А	Click to search for applications.
В	Click to print the Temporary Medical Card.
С	Click to find an application created by another PE.
D	Click to find out about WV's Medicaid program.

Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not correctly match one or more items.

8.10 Results Slide

(Results Slide, O points, 1 attempt permitted)



Results for
8.2 Multiple Choice
8.3 Hotspot
8.4 Multiple Choice
8.5 Multiple Response
8.6 Matching
8.7 Multiple Response
8.8 Hotspot
8.9 Matching

Result sinde properties	
Passing	80%
Score	
Notes:	



Presumptive Eligibility Worker

Original Effective Date: 4/1/2024 Revision Date:

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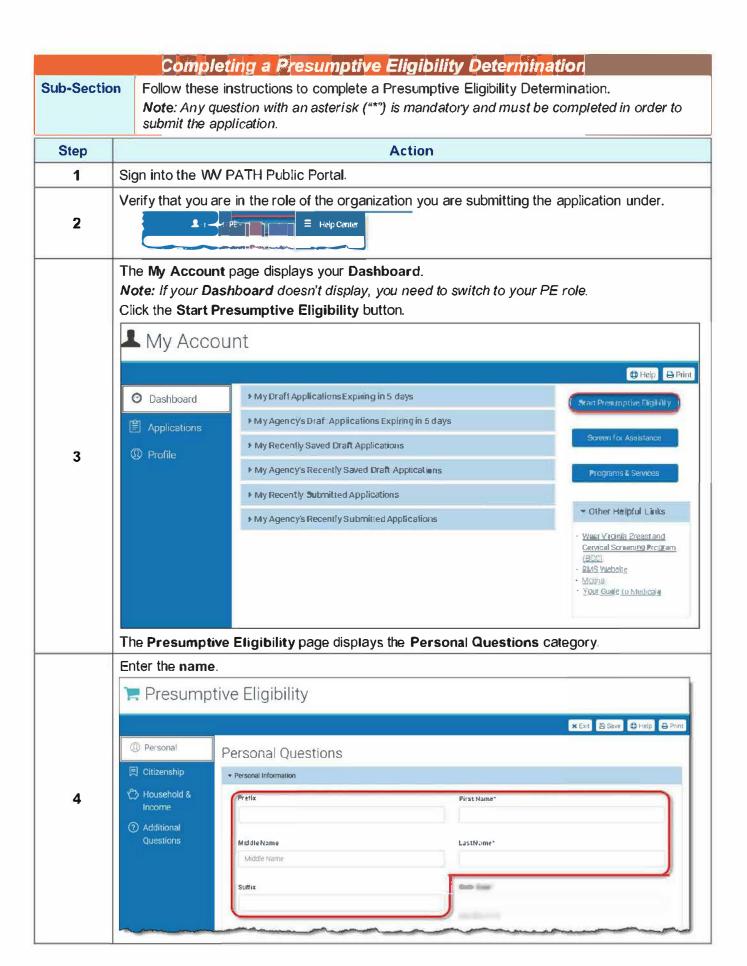
Overview	
Purpose	This Job Aid provides instructions for Presumptive Eligibility Workers (PEs) to complete Presumptive Eligibility Determinations and Full Medicaid applications in the West Virginia People's Access to Help (WV PATH) Public Portal. Re-printing a Temporary Medical Card and searching for an application are also included.

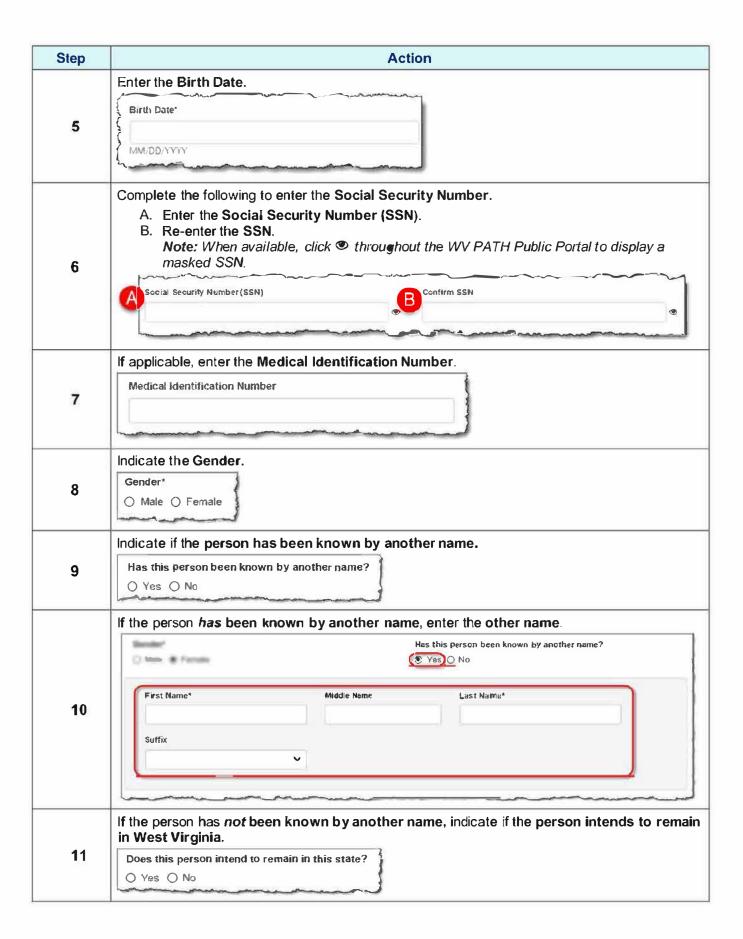
<u> Dashboard</u>	
Section	The Dashboard is the "Home Page" for your work as a PE in the WV PATH Public Portal. From here, you can quickly navigate to what you need in to efficiently assist your customers or clients.

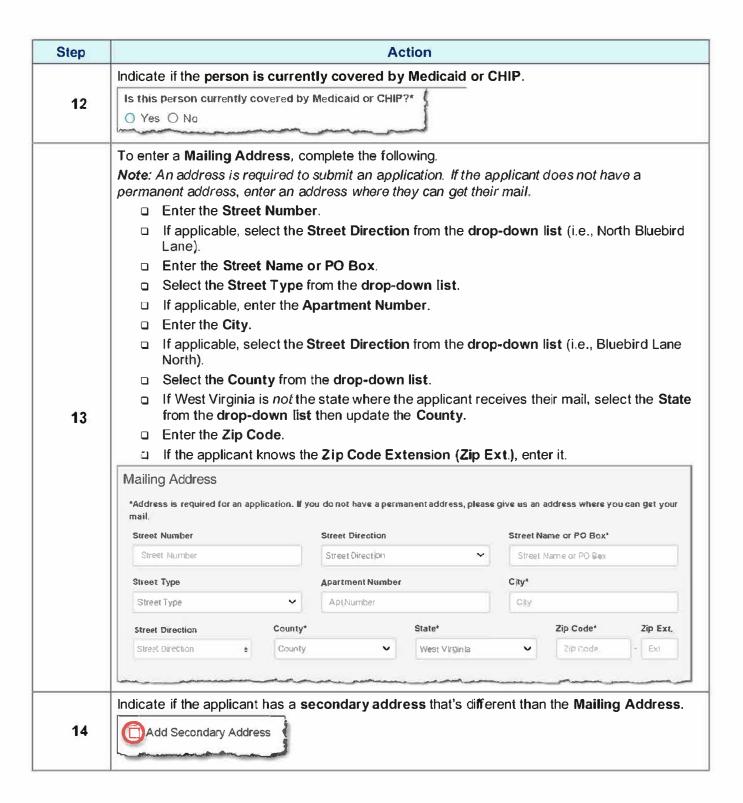
Step	Action
1	Sign into the WV PATH Public Portal.

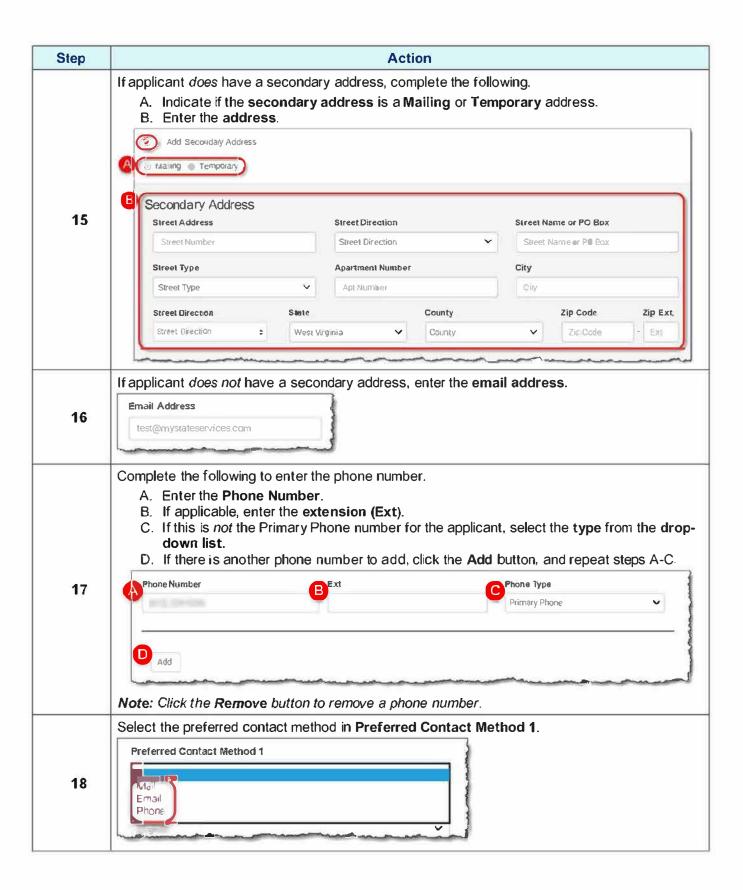


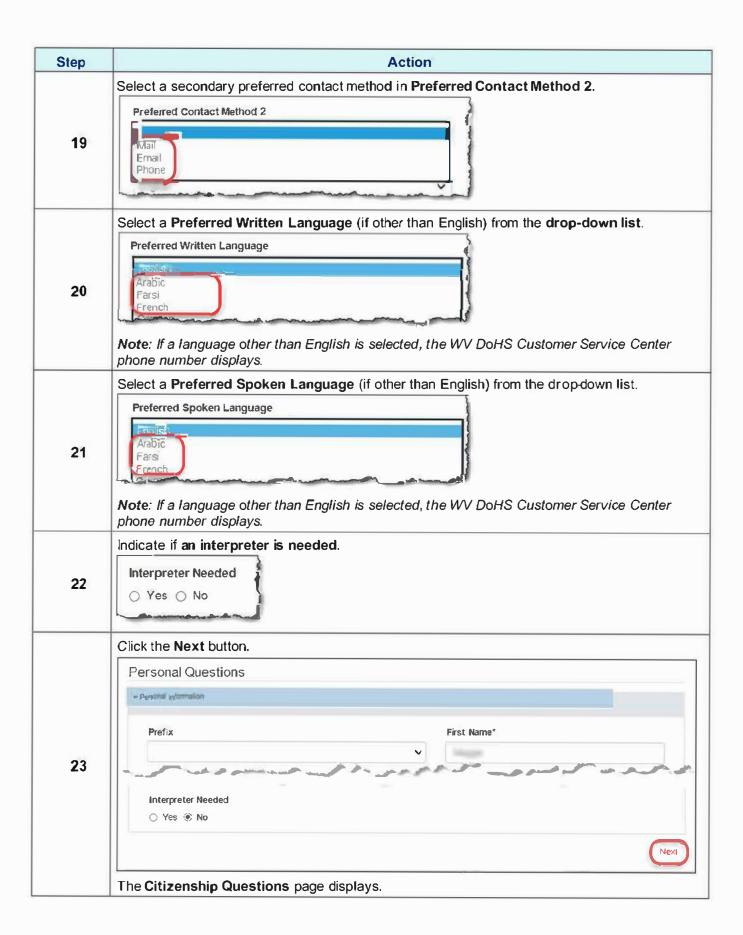
Step Action The My Account page displays your Dashboard. Note: If your Dashboard doesn't display, you need to switch to your PE role. Below is information that explains each area of your Dashboard. A. Your Name, the role you are currently signed in as, and your organization. B. Click to access online **Help**. C. Click to return to this Dashboard. D. Click to search for an application. E. Click to change your default role if you have an organization you work with most often. F. Click to access applications that have been saved but not submitted that are expiring in the next five days. Note: These applications will be removed from the WV PATH Public Portal in the next five days unless they are submitted. G. Click to access the ten most recent applications that have been saved but not submitted. Note: Draft PE applications remain in the WV PATH Public Portal for seven days and draft Full Medicaid applications remain for 30 days, after which time they are removed unless they are submitted. H. Click to access the ten most recently submitted applications. I. Click to start a Presumptive Eligibility Determination. J. Click to access Screen for Assistance to use the screening tool. K. Click to access Programs & Services to review programs and services available from the West Virginia Department of Human Services (WV DoHS). 3 Click a link under Other Helpful Links to access other resources. **☆** Home B Help Center My Account Help Prin O Dashboard ▶ My Draft Applications Expiring in 5 days My Agency's Draft Applications Expiring in 5 days Applications My Recently Saved Draft Applications Profile My Agency's Recently Saved Draft Applications Programs & Services My Recently Submitted Applications ■ Other Helpful Links My Agency's Recently Submitted Applications · West Vironia Breast and Cervical Screening Program (9CC) · BMSWebsite Mouna · Your Guide to Medicald

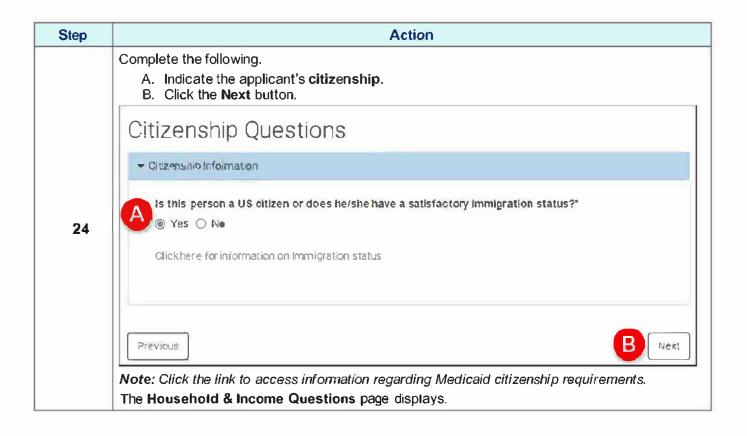


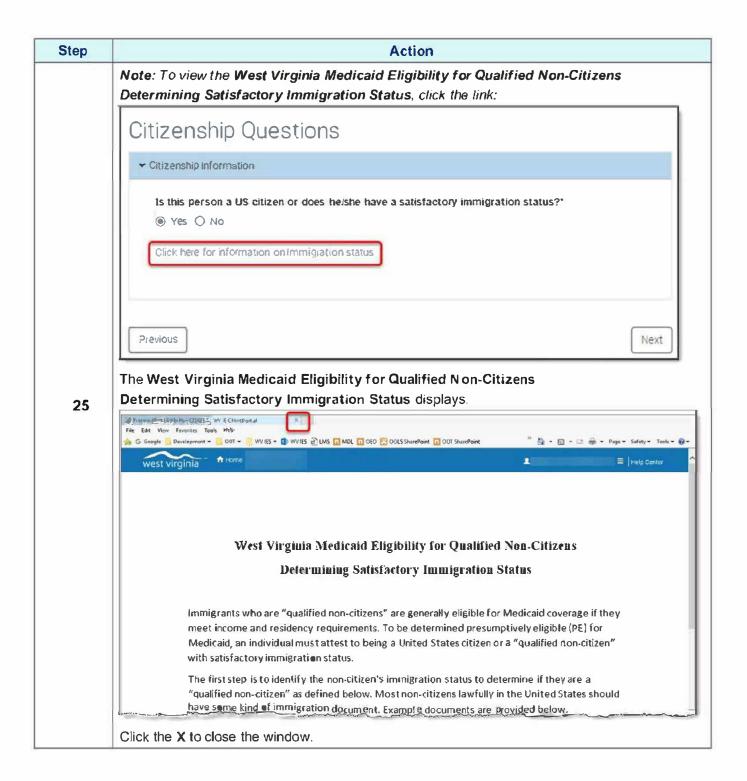


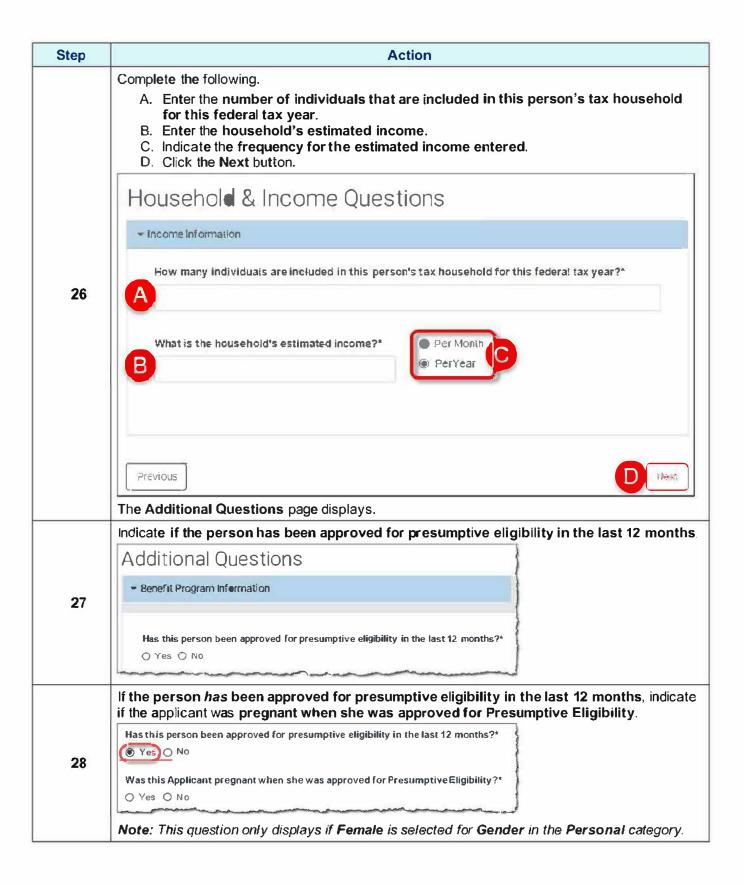




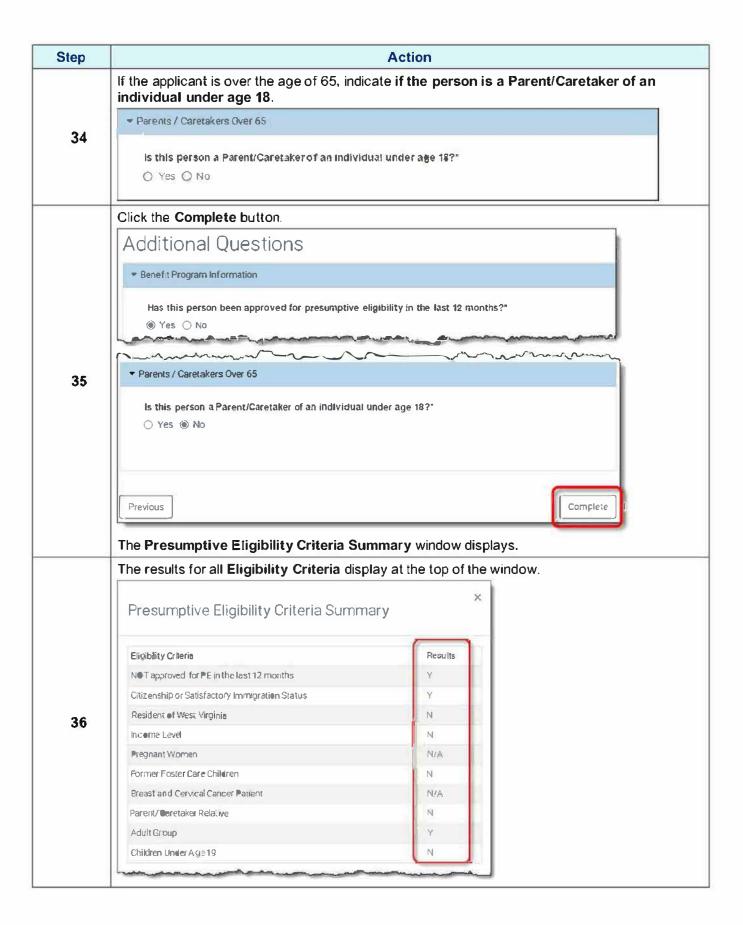


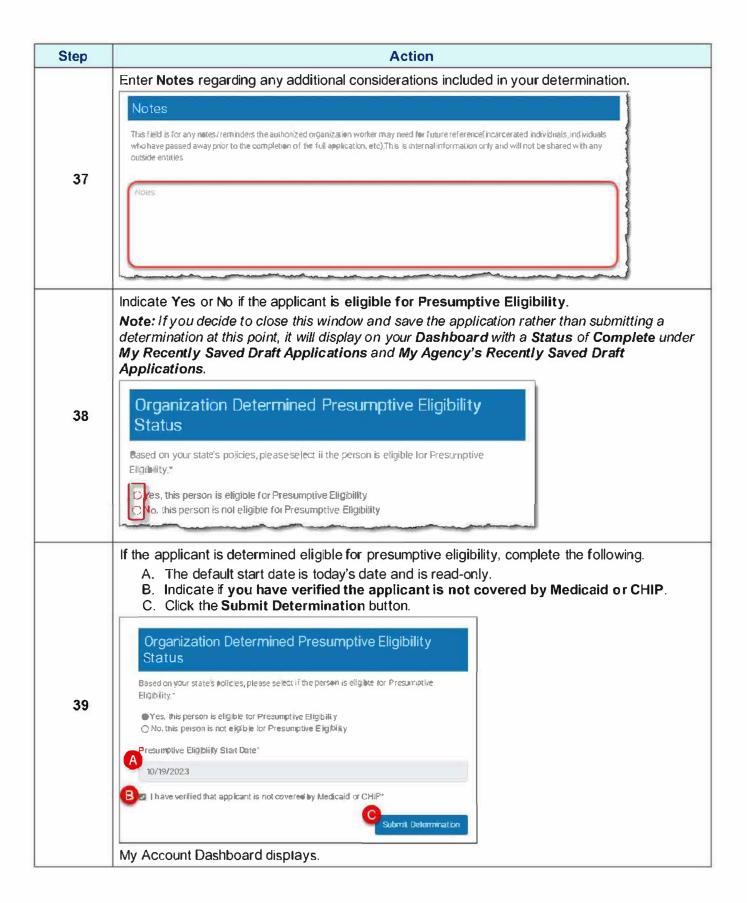


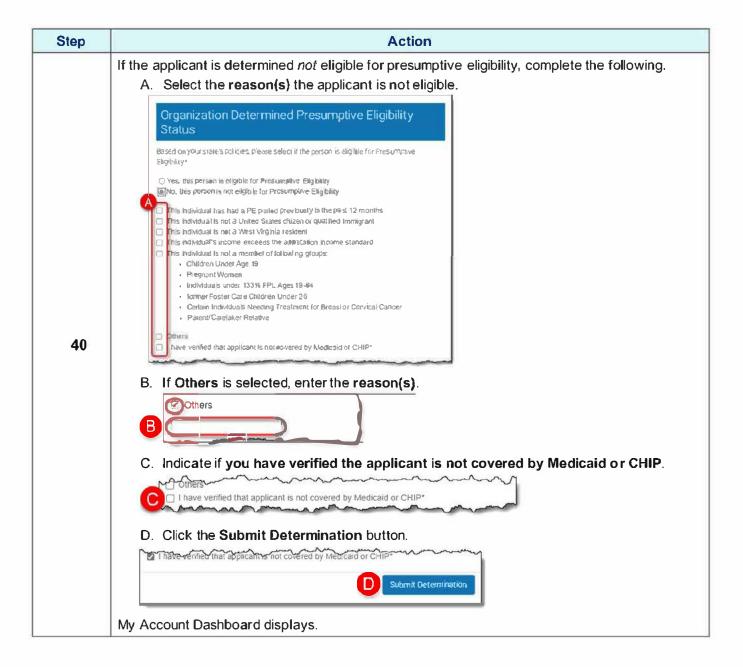


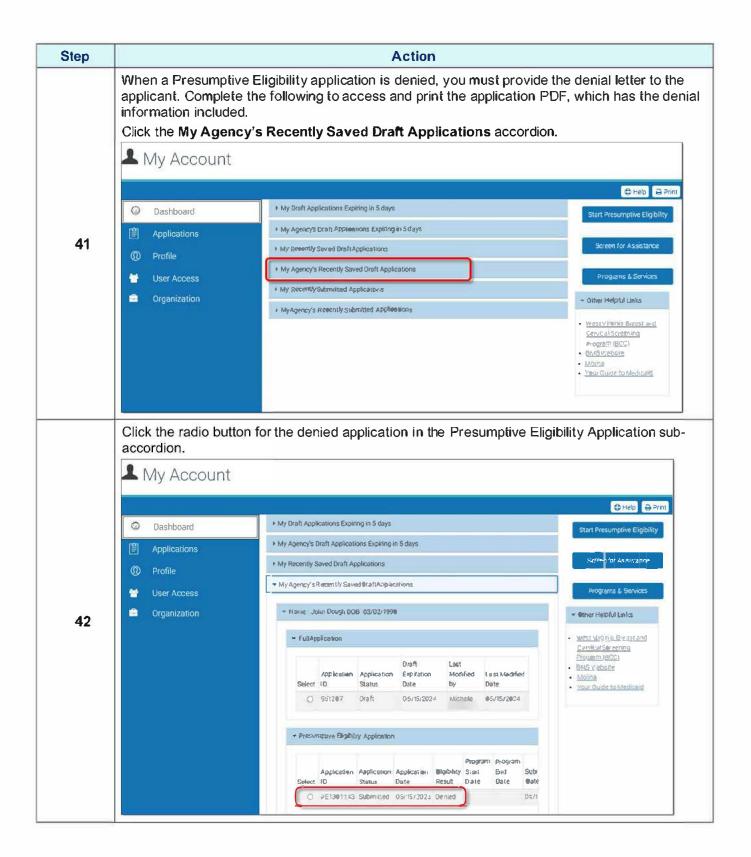


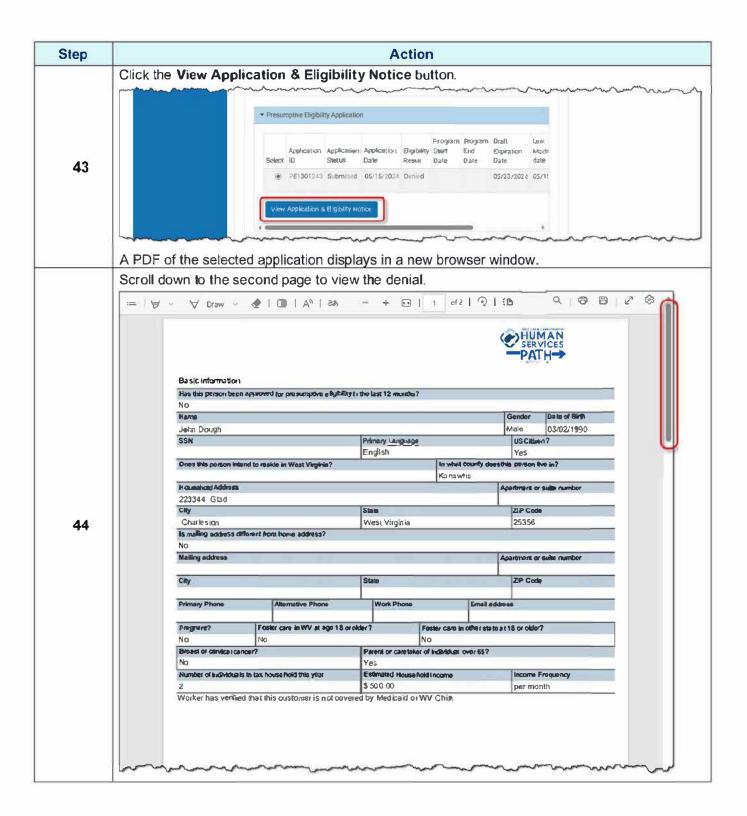
Step	Action
29	If the person has not been approved for presumptive eligibility in the last 12 months, indicate if the pregnancy has ended. Was this Applicant pregnant when she was approved for Presumptive Eligibility?** Has that pregnancy ended?** Yes O No
30	Has that pregnancy ended, enter the Pregnancy End Date. Has that pregnancy ended?* Pregnancy End Date Pregnancy End Date
3.4	Indicate if the applicant is pregnant now. Is this Applicant pregnant now?* O Yes O No Note: This question only displays if Female is selected for Gender in the Personal category.
32	For youth who turned age 18 before January 1, 2023, indicate the following. Was this child in foster care in West Virginia at age 18 or older? For youth who turned age 18 before January 1, 2023 - Was this child in foster care in West Virginia at age 18 or older? Was this child in foster care in any state at age 18 or older? For youth who turn age 18 or older? For youth was this child in foster care in any state at age 18 or older? O Yes O No To yes O No
33	Indicate if this woman was screened and found to need treatment by the WV Breast and Cervical Cancer Screening Program (BCCSP). • Breast and Cervical Cancer Patients Was this woman screened and found to need treatment by the W/V Breast and Cervical Cancer Screening Program (BCCSP)? A BCCSP Certificate of Diagnosis must be uploaded.* O yes O No Note: This question only displays if Female is selected for Gender in the Personal category.

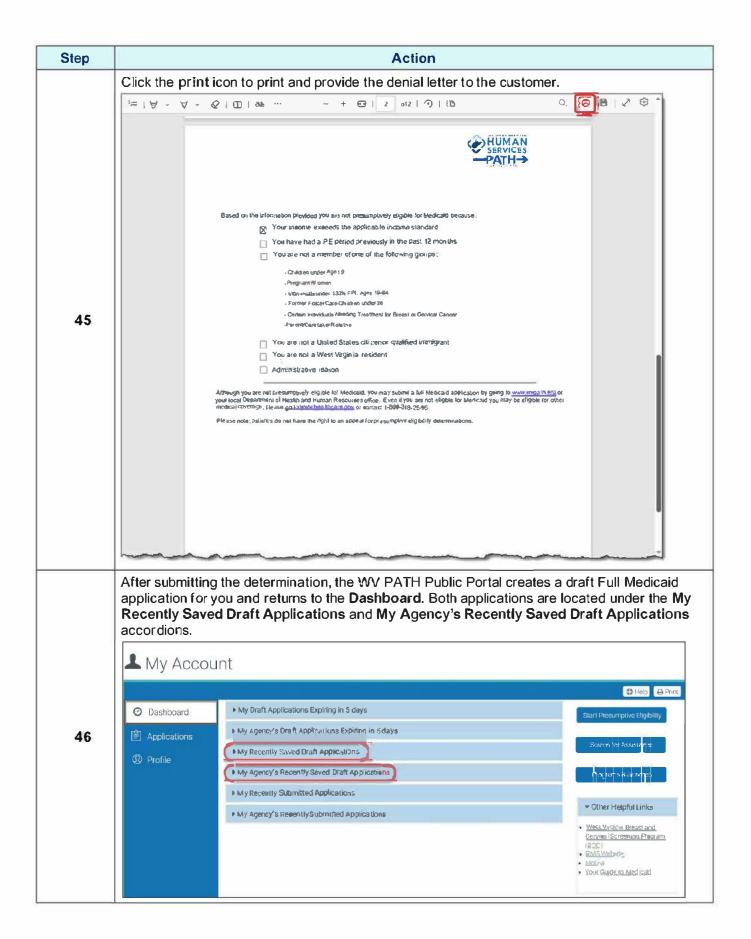


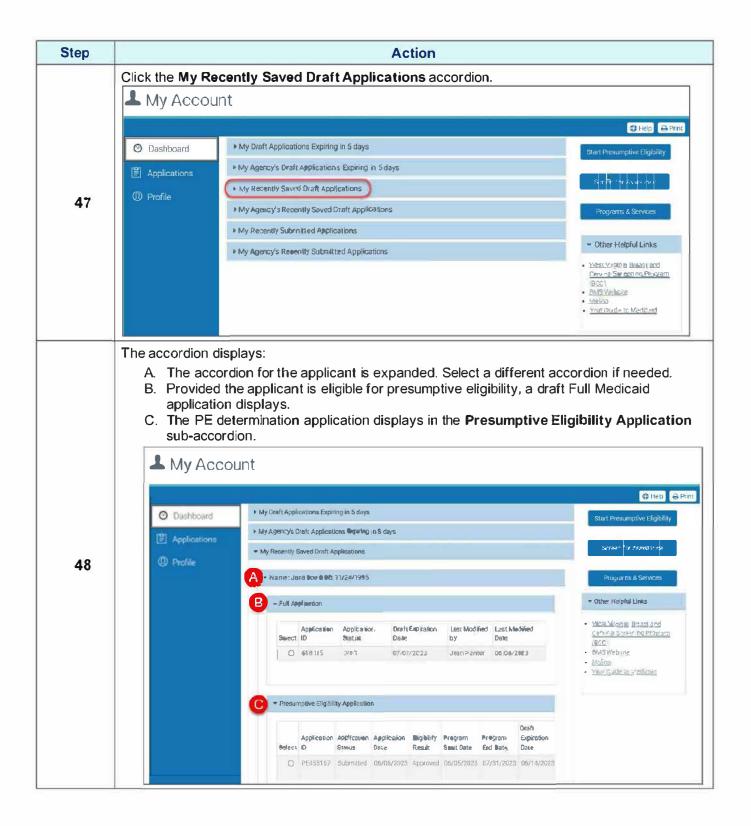










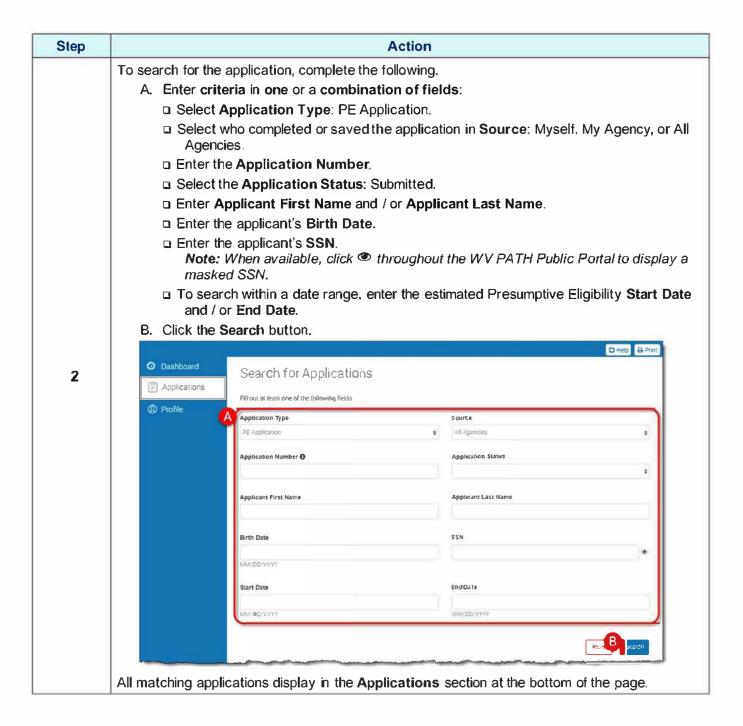


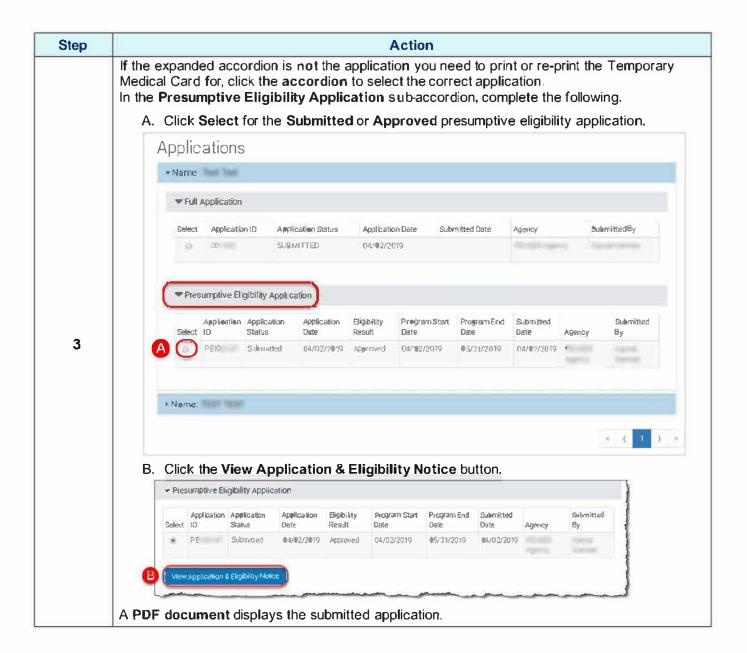
Printing or Re-Printing a Temporary Medical Card

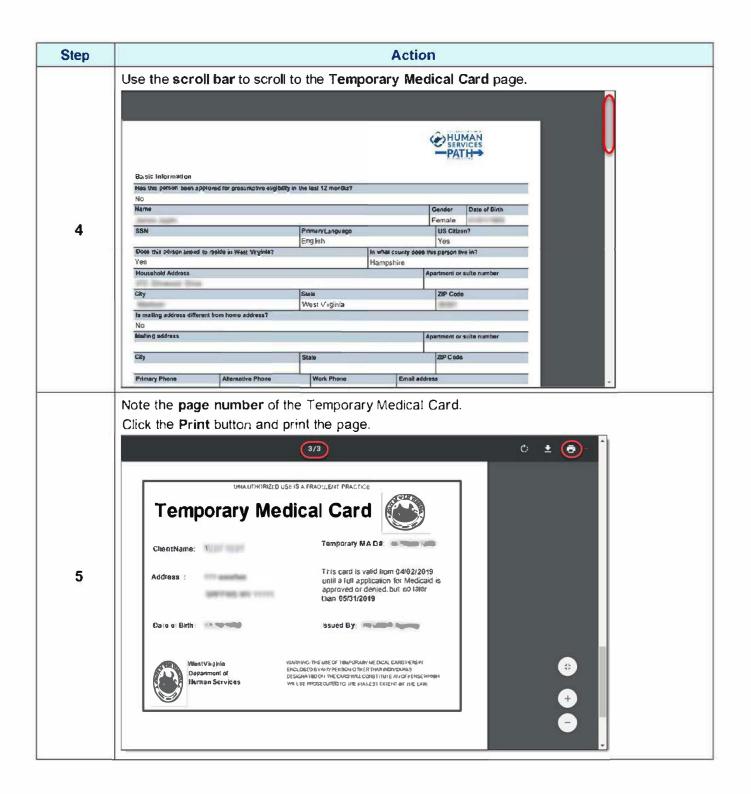
Sub-Section

Follow these instructions to print or re-print a Temporary Medical Card for an applicant who was presumptively approved by you or another PE.

Step Complete one of the following to locate the PE application. Click the accordion where the PE application is (i.e., My Recently Saved Draft Applications, My Recently Submitted Applications, etc.) and skip to step 3. Click Applications on the Navigation bar to search for the application and continue to the next step. My Account ⊕He'p 😝 Print ▶ My Draft Applications Expiring in 5 days O Dashboard 1 My Agency's Draft Applications Expiring in 5 days Applications ▶ My Recently Saved Draft Applications @ Profile ▶ My Agericy's Recently Saved Draft Applications Fregues & Sevees ▶ My Recently Submitted Applications ▼ Other Helpfu Links My Agency's Recently Submitted Applications West Vintinia Breast and Cervical Screening Program (GCC) · BAIS Website · Molina Your Gude to Medicard



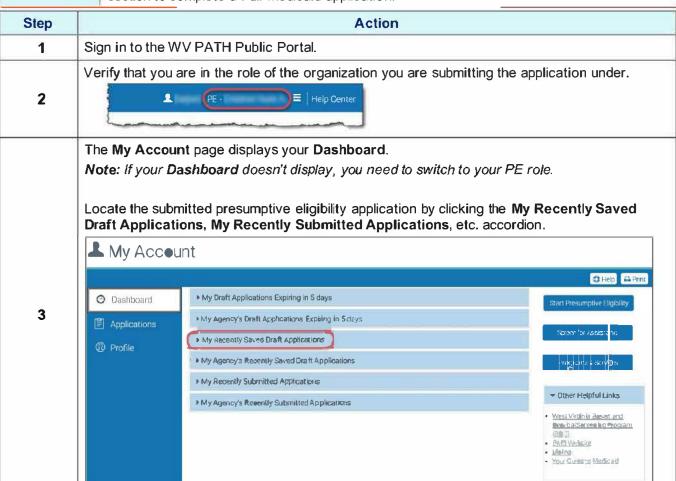


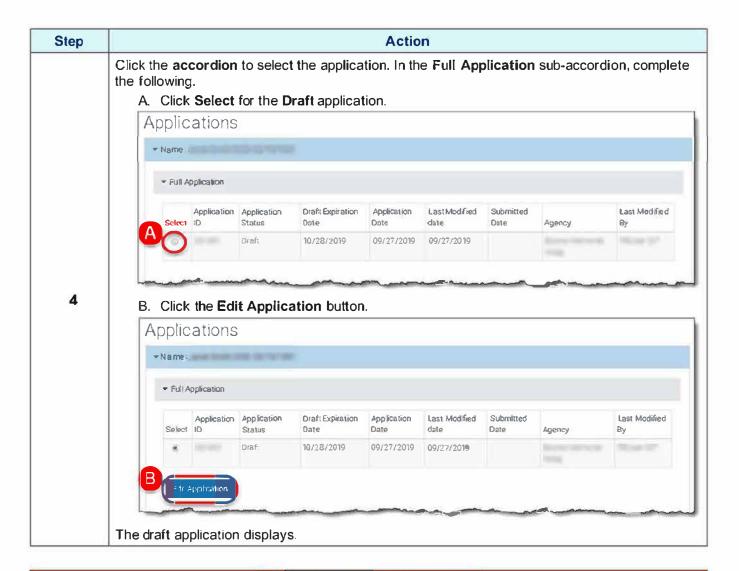


Completing a Full Medicaid Application

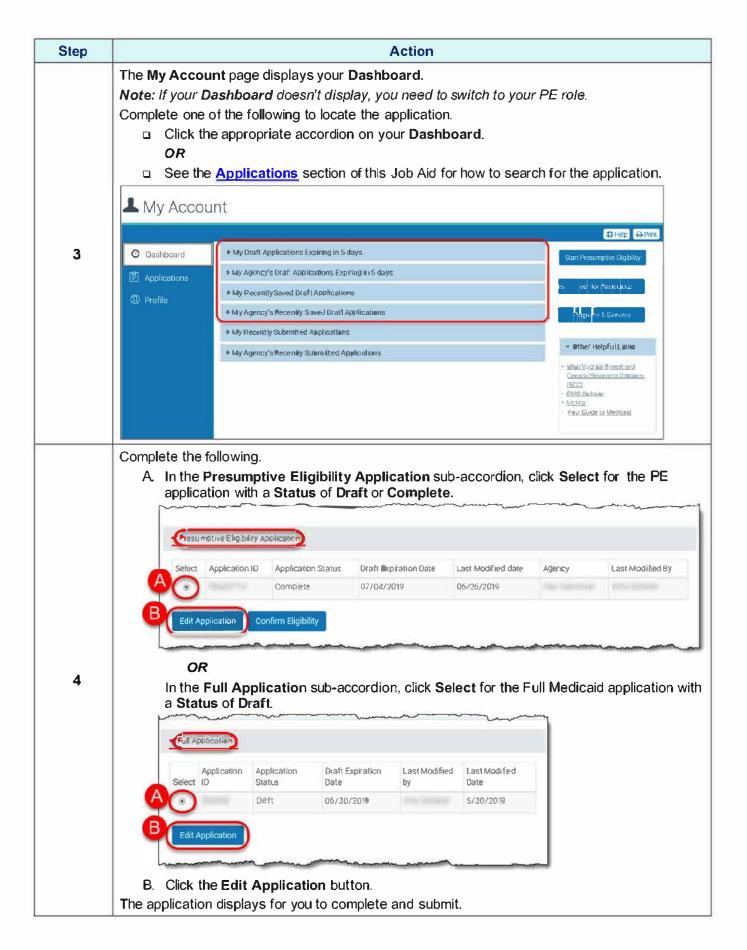
Sub-Section

After submitting an eligible Presumptive Eligibility determination, follow instructions in this section to complete a Full Medicaid application.





Editing a Draft Application Sub-Section If you begin a PE or Full Medicaid application, and save and exit before submitting, follow instructions in this sub-section to locate and complete it before it is removed from the WV PATH Public Portal. Note: Draft PE applications remain in the WV PATH Public Portal for seven days and draft Full Medicaid applications remain for 30 days, after which time they are removed unless submitted. Step Action 1 Sign into the WV PATH Public Portal. Verify that you are in the role of the organization the application was created under.

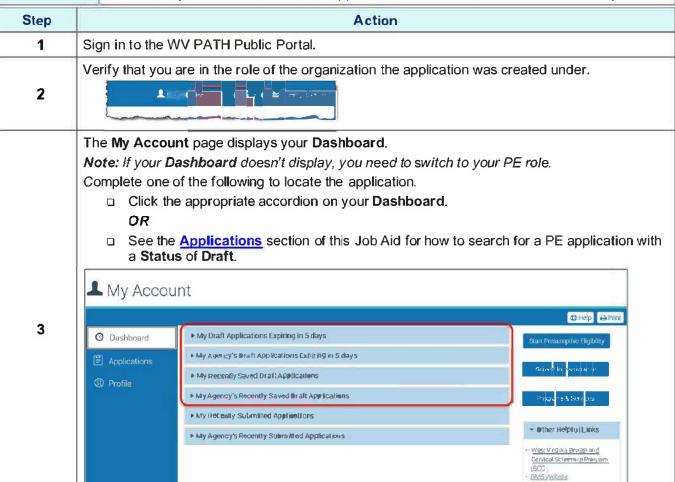


Deactivating a REApplication

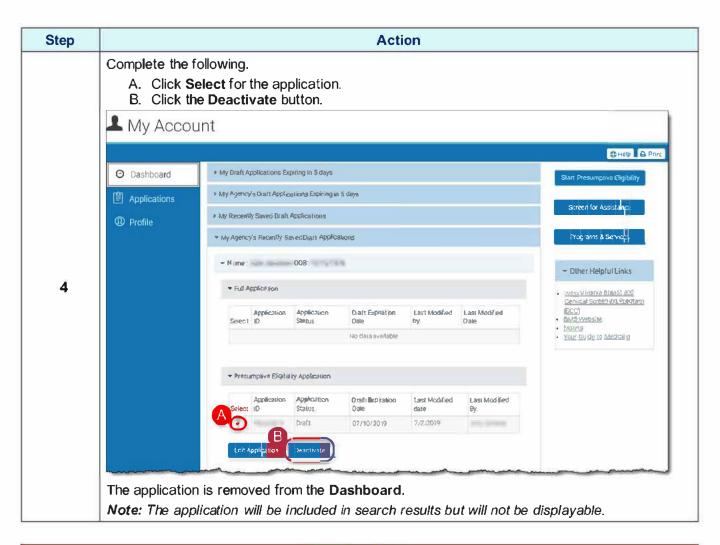
Sub-Section

PE applications with a **Status** of **Draft** remain in the WV PATH Public Portal for seven days after which time they are removed unless they are submitted. A PE can *deactivate* a Draft PE application within their agency prior to this. Follow instructions in this sub-section to deactivate a **Draft** PE application.

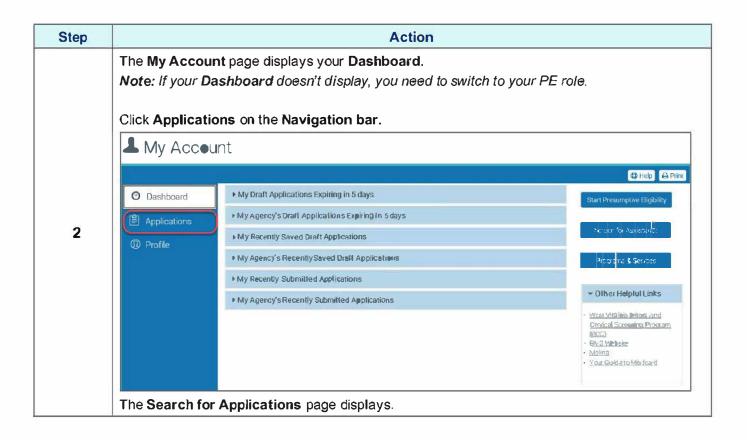
Note: A PE cannot deactivate a Full Medicaid application. The WV PATH Public Portal automatically removes Full Medicaid applications with a **Status** of **Draft** after 30 days.

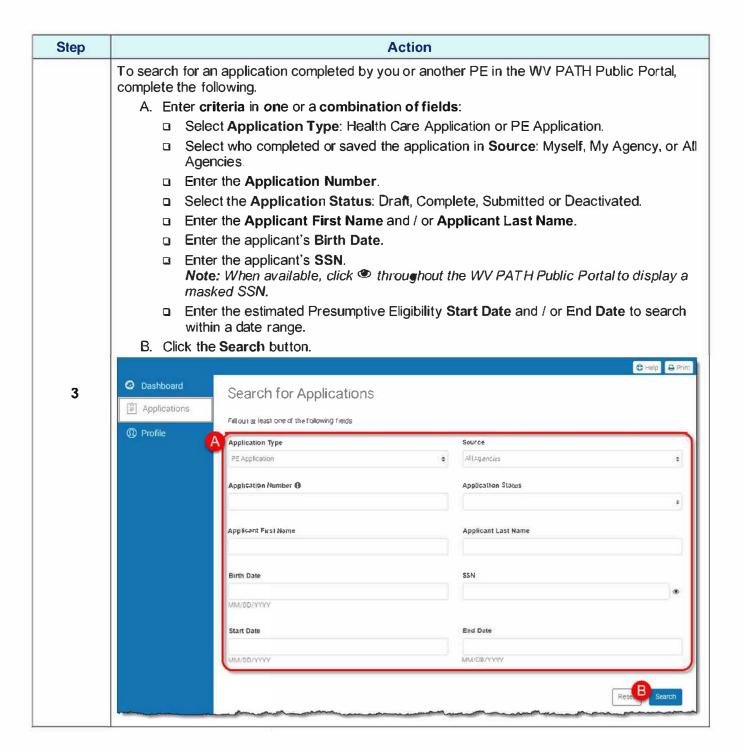


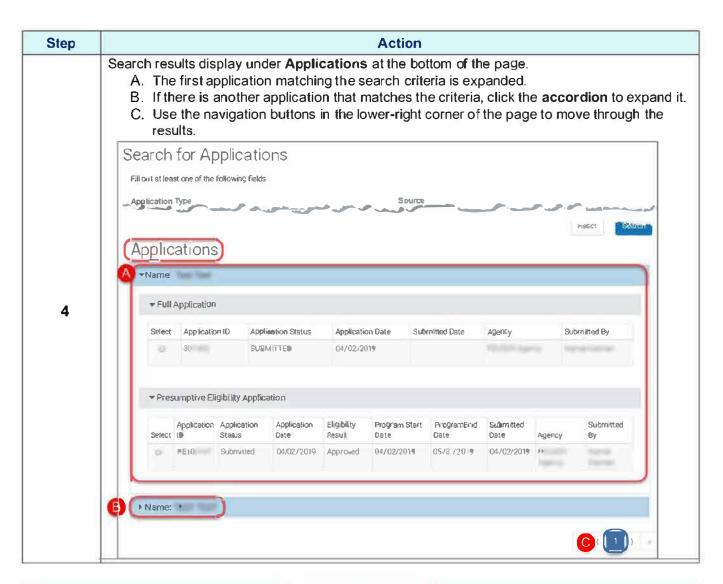
· Your Guide to Medicaid



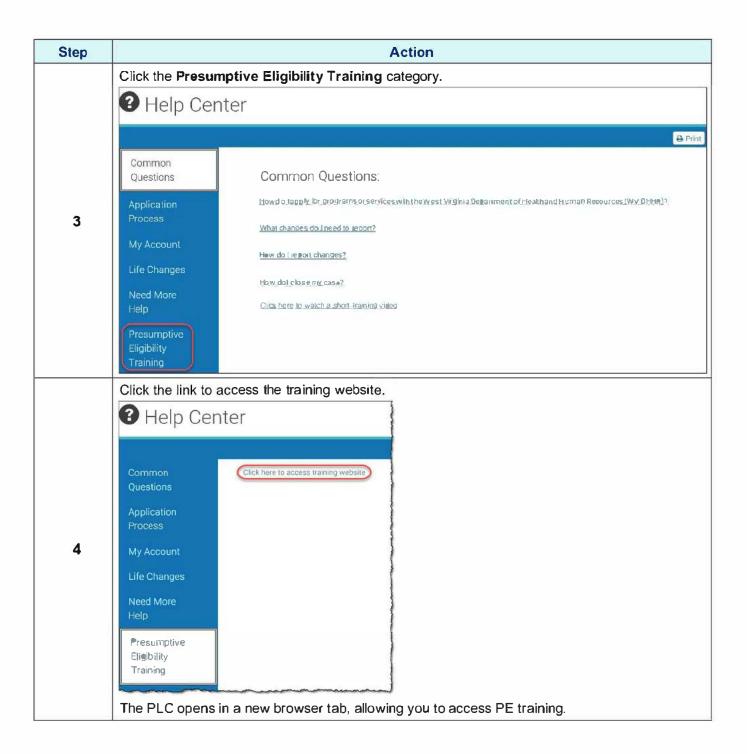
Applications		
Section	Applications created in the WV PATH Public Portal are searchable by yourself and other PE users using the Applications category.	
	Follow these instructions to search for an application created by you or another PE in the WV PATH Public Portal.	
Step	Action	
1	Sign into the WV PATH Public Portal.	







	Help and Training		
Section The Help Center contains system help regarding the use of the WV PATH Public P well as a link to required PE training in the PATH Learning Community (PLC). PE To must complete this training before accessing the PE Dashboard.			
Step	Action		
1	Sign in to the WV PATH Public Portal.		
2	Click Help Center in the banner.		



Terminology & Role(s)			
Terminology	See Frequently Used Acronyms and Terms for a list of terms used throughout this document.		
Role(s)	Public Portal workers		

Revision Vistory				
Date Published	Section	Revision Details	Writer	Approver
12/05/2023	All	Initial Release	Scherer	Optum BA Team
6/14/2024	Completing a Presumptive Eligibility Determination	Added steps for accessing and printing a PE Denial letter.	C Soltis	Optum BA Team

Records Submission Packages - View All

WV - Submission Package - WV2022MS0002O - (WV-23-0001) -Eligibility

VIEW PRINT PREVIEW

Summary Reviewable Units **Versions** RAI Correspondence Log Analyst Notes Review Assessment Report A.pproval Letter Transaction Logs News Related Actions ← Presumptive Eligibility for Pregnant Women | Former Foster Care Children - Presumptive Eligibility →

View Compare Doc

Medicaid State Plan Eligibility

Presumptive Eligibility

Adult Group - Presumptive Eligibility

MEDICAID | Medicaid State Plan | Eligibility | VVV2022MS00020 | WV-23-0001

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

Spell Check Instructions | @ Request System Help

SPA ID WV-23-0001

Effective Date 5/12/2023

CMS-10434 OMB 0938-1188

Not Started in Progress Complete

Package Header

Package ID WV2022MS0002● Submission Type Official Initial Submission Date 3/8/2023 Approval Date 12/19/2024 Superseded SPA ID WV-15-0006

View Implementation Guide

VIEW ALL RESPONSES

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

A. Presumptive Eligibility Period

Collapse

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

System-Derived

- 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 filled by that date.
- 3. Periods of presumptive eligibility are limited as follows:
 - a. No more than one period within a calendar year.
 - (i) 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
 - e. Other reasonable limitation:

B. Application for Presumptive Eligibility

Collapse

- 1. The state uses a standardized screening process for determining presumptive eligibility.
- 📃 2. The state uses the single streamlined paper and/or online application for Medicaid and Presumptive Eligibility, approved by CMS. A copy of the single streamlined paper and/or online application with questions necessary for a PE determination highlighted or denoted is attached.

12/20	124.	10:3	OAM

3. The state uses a separate paper application form for presumptive eligibility, approved by CMS. A copy	

4. The state uses an online portal or electronic screening tool for presumptive eligibility approved by CMS, Screenshots of the tool included.

Name	Date Created	
WV SPA 23 0001 Presumptive Eligibility Application screenshots	9/26/2024 5:19 PM EDT	c

5. Describe the presumptive eligibility screening process:

Authorized presumptive eligibility (PE) employees will gather data from the individual using the presumptive eligibility determination portion of the online system. The employee may obtain information relating to the individual such as name, address, phone number, and social security number from other facility personnel such as registrars; however, this information must be confirmed by the individual or another person with reasonable knowledge of the individual's needs status. The individual or another person with reasonable knowledge of the individual's statusseeking PE must attest to the information provided on the application. Authorized employees may not request any documentation or require verification of information provided, Applicants are allowed only one PE period per 12-month period or, if pregnant, per pregnancy, In the absence of an automated system that can verify the applicant's past use of presumptive eligibility, the facility will rely on self-attestation.

The authorized employee must make the final determination of whether or not the individual may be eligible for Medicaid. This decision is made based on the criteria in section 400.8.3 of the policy manual and the results of the on-line system. Once a final decision is made by the authorized worker he/she will provide the patient with either a temporary Medicaid card or a document stating why he/she was not determined presumptively eligible.

The Authorized Employee must assist the applicant or his authorized representative in completing the single streamlined application (SLA) for Medicaid and forward the application to the Department,

C. Presumptive Eligibility Determination

Collapse

The presumptive eligibility determination is based on the following factors:

- 1. The individual must meet the categorical requirements of 42 CFR 435,119.
- 2. Household income must not exceed the applicable income standard described at 42CFR 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.
- 3. State residency
- 4. Citizenship, status as a national, or satisfactory immigration status

D. Qualified Entities

Collapse

- 1. 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.
- 2. The following qualified entities are used to determine presumptive eligibility for this eligibility group:
- Other entity the agency determines is capable of making presumptive eligibility determinations

Name of entity	Description
First Chairs Souther	First Choice Services - ACA Navigators and HELP4WV Helpline Specialists First Choice Services operates several programs and helplines with the common goal of promoting well-being and facilitating access to behavioral health and social services, First Choice began as a collaborative effort among West Virginia's comprehensive behavioral health care centers. First Choice also operates the ACA Navigator program which is funded by a grant from the Center for Medicare and Medicaic Services.
First Choice Services	ACA Navigators provides free health coverage enrollment assistance to people who are uninsured. Certified Navigators help consumers enroll in qualified health plans through the Health Insurance Marketplace or, If eligible, Medicaid. HELP4W/v offers a 24/7 call, chat, and text line that provides immediate help for any West Virginian struggling with an addiction or mental health issue. The helpline staff offers confidential support and resource referrals, including selfhelp groups, out-patient counseling, medication-assisted treatment, psychiatric care, emergency care, and residential treatment.

Name of entity	Description
Medicaid enrolled pharmacies	Licensed pharmacists and pharmacy technicians employed by Medicaid enrolled pharmacies.
Federally Qualified Health Centers	Federally Qualified Health Centers (FQHC) receiving a grant under Section 330 of the Public Health Service (PHS)Act; or, receiving funding from a grant under a contract with the recipient of a grant and meets the requirements to receive a grant under Section 330 of the PHS Act; or, is not receiving a grant under Section 330 of the PHS Act but is determined by the Secretary of the Department of Health & Human Services (HHS) to meet the requirements for receiving such a grant (i.e., qualifies as a FQHC look-alike) based on the recommendation of the Health Resources and Services Administration; or, was treated by the Secretary of the Department of HHS for purposes of Medicare Part Bas a comprehensive Federally funded health center as of January 1, 1990; or is operating as an outpatient health program or facility of a tribe or tribal organization under the Indian Self-Determination Act or as an urban Indian organization receiving funds under Title V of the Indian Health Care Improvement Act as of October 1, 1991.
Comprehensive community mental health centers	Comprehensive community mental health centers as identified in West Virginia Code §27-2A-1. The Department of Health and Human Resources is authorized and directed to establish, maintain and operate comprehensive community mental health centers at locations within the state that are determined by the secretary in accordance with the state's comprehensive mental health plan.
Rural Health Clinics (RHC)	Rural Health Clinics are defined in section 1861(aa)(2) of the Social Security Act (the Act) as facilities that are engaged primarily in providing services that are typically furnished in an outpatient clinic. RHC services are defined as: • Physician services: • Services and supplies furnished incident to a physician's services; • Nurse Practitioner (NP), Physician Assistant (PA), certified nurse midwlfe (CNM), clinical psychologist (CP), and clinical social worker (CSW) services; and • Services and supplies furnished Incident to an NP, PA, CNM, CP, or CSW services. To be eligible for certification as a RHC, a clinic must be located in a non-urbanized area, as determined by the U.S. Census Bureau, and in an area designated or certified within the previous 4 years by the Secretary, Health and Human Services (HHS), in any one of the four types of shortage area designations that are accepted for RHC certification. RHCs can be either Independent or provider based. Independent RHCs are stand-alone or freestanding clinics and submit claims to a Medicare Administrative Contractor (A/B MAC). The statutory requirements for RHCs are found in section 1861(aa)(2) of the Act. Many of the regulations pertaining to RHCs can be found at 42 CFR 4052400 Subpart X and following, and 42 CFR 491 Subpart A and following.
Local Health Departments	West Virginia's 55 counties are served by 49 local boards of health charged with protecting the health and safety of the citizens of West Virginia. Local boards of health provide services through local health departmen located in all 55 counties including communicable and reportable disease prevention and control.
Free Clinics	Free and Charitable Clinics are safety-net health care organizations that utilize a volunteer/staff model to provide a range of medical dental, pharmacy, vision and/or behavioral health services to economically disadvantaged Individuals. Such clinics are 501(c)(3) taxeexempt organizations, or operate as a program component or affiliate of a 501(c)(3) organization. Entities that otherwise meet the above definition, but charge

Name of entity	Description
	a nominal/sliding fee to patients, may still be considered Free or Charitable Clinics provided essential services are delivered regardless of the patient's ability to pay. Free or charitable clinics restrict eligibility for their services to individuals who are uninsured, underinsured and/or have limited or no access to primary, specialty or prescription health care.

- ☑ 3. The state assures that it has communicated the requirements for qualified entities, at 192

 ♠A(b)(3) of the Act, and has provided adequate training to the entitles and organizations involved.
- 4. A copy of the training materials has been uploaded for review during the submission process.

Name	Date Created	
SL_Presumptive Eligibility(PE) Worker- MR9.docx	9/26/2024 5:20 PM EDT	Ļ
PP_JobAid- Presumptive_Eligibility_Worker	9/26/2024 5:20 PM EDT	

E. Additional Information (optional)

Collapse

PRA Disclosure Statement: Centers for Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal programmanagement of Medicaidprograms and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information obtained will December 1995. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), Including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Click the following link to review the eLearning as the learner would:

https://360.articulate.com/review/content/bd40068a-7e45-47db-9616-43d68c999507/review

Presumptive Eligibility (PE) Worker

1. Welcome

1.1 Presumptive Eligibility (PE)



Notes:

Welcome to Presumptive Eligibility (PE) Worker training. This video provides self-paced training for your role as a PE Worker completing Presumptive Eligibility Determinations in the West Virginia Department of Human Services (WV DoHS) People's Access to Help (WV PATH) Public Portal.

Click Here to begin.

1.2 Key Learning Points



Notes:

Click each number to learn about what will be covered in this video. After completing these topics, you will be presented with a Knowledge Check to confirm your learning. A passing score of 80% is required for completion of this training.

Key Learning Point 1:

Learn how to complete a Presumptive Eligibility Determination in WV PATH and print a Temporary Medical Card.

Key Learning Point 2:

Learn how to complete a Full Medicaid application.

Key Learning Point 3:

Learn about other features available in WV PATH.

2. Complete PE Determination

2.1 Sign In



Notes:

Click Sign In at the top of the screen to get started.

2.2 Sign In



Notes:

Here is where you will enter your Optum GovID and Password to sign in to WV PATH. Click **SIGN IN**.

2.3 Dashboard



Notes:

The Dashboard displays. Your first name, your role as a PE, and your Organization's Name display at the top of the screen. The Dashboard is the Landing Page for your work as a PE in WV PATH. From here, you can quickly navigate to what you need, and efficiently assist your applicants.

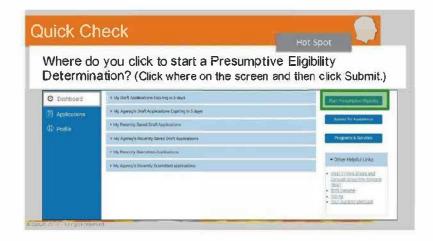
Details about each area of the Dashboard are included in *Job Aid: Presumptive Eligibility Worker*, available in the Resources menu above. Take a moment to open the Job Aid and have it available as you complete this training.

Follow along in the Job Aid as we walk through completing a Presumptive Eligibility Determination in WV PATH.

Click Next.

2.4 Where do you click?

(Hotspot, 10 points, 1 attempt permitted)



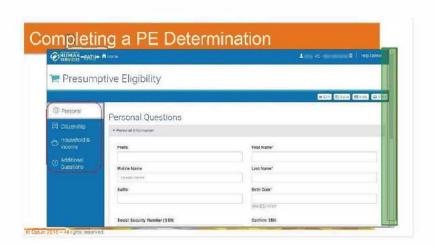
Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. To start a Presumptive Eligibility Determination, click the Start Presumptive Eligibility button.

2.5 Personal

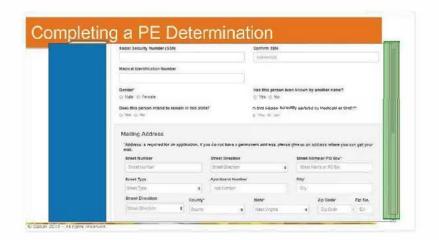


Notes:

After clicking the Start Presumptive Eligibility button, the first page of the Presumptive Eligibility Determination application displays. Information is organized into four categories on the left Navigation bar. This is the Personal category.

Click the Scroll bar on the screen to scroll down the page and review the questions.

2.6 Personal

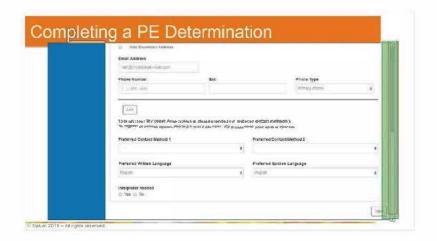


Notes:

Demographic information is entered in the Personal category.

Click the Scroll bar on the screen to continue scrolling down the page.

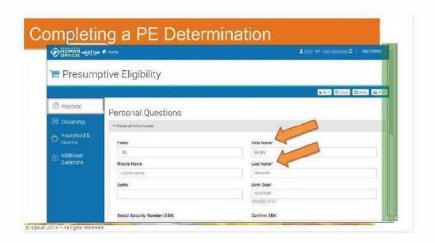
2.7 Personal



Notes:

Click the Scroll bar now to return to the top of the page.

2.8 Personal



Notes:

Watch as fields in this example are completed. Notice that some fields have an asterisk ("*") indicating that they are mandatory. Mandatory fields must be completed in order to move forward in the application.

Click the Scroll bar to scroll down the page.

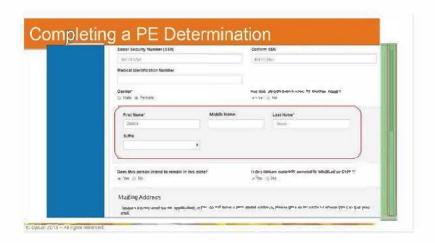
2.9 Personal



Notes:

Click Yes the applicant has been known by another name on the screen.

2.10 Personal



Notes:

A new area displays to enter the additional name. You will see this from time to time in WV PATH. The information being displayed will change based on your selection.

You continue to enter other demographic information.

Click the **Scroll bar** to continue scrolling down the page.

2.11 Personal

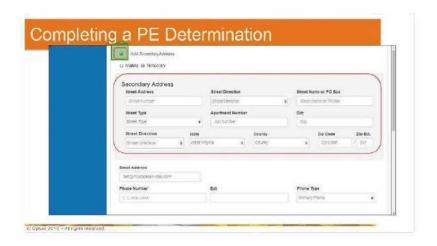


Notes:

You continue to enter the applicant's address. If the applicant has an additional address, click the **Add Secondary Address** check box.

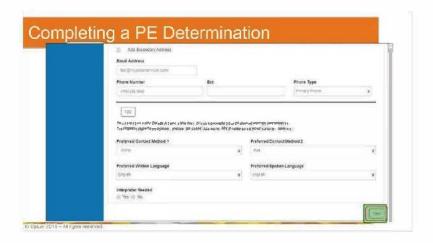
Click the Add Secondary Address check box on the screen.

2.12 Personal



Additional address fields display. In this case, we don't need to enter another address, so click the **Add Secondary Address** check box again to deselect it.

2.13 Personal

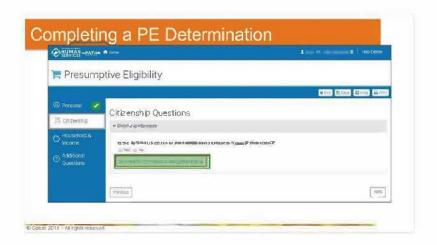


Notes:

If the applicant doesn't have an email address, you can leave that field blank. Enter the applicant's phone number and select the Preferred Contact Method, preferred language, and whether an interpreter is needed.

That completes the **Personal** category.

2.14 Citizenship

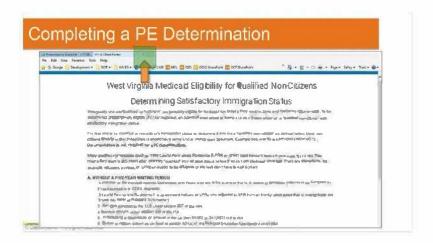


Notes:

The **Citizenship** category is next. If you require clarification of the immigration status definitions, you can click the link on the page to display further information.

Go ahead and click the link for information on immigration status.

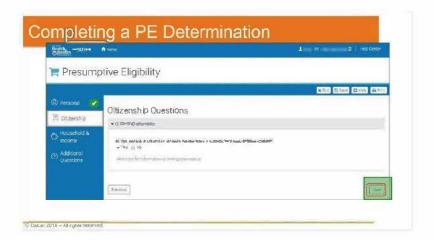
2.15 Citizenship – Looks okay!



Notes:

Details regarding satisfying immigration status requirements display. Click the **X** on the browser tab to close it and return to the application.

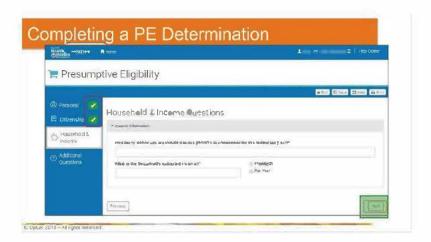
2.16 Citizenship



Notes:

The applicant is a US citizen. Click **Next** to continue through the application.

2.17 Household & Income



Notes:

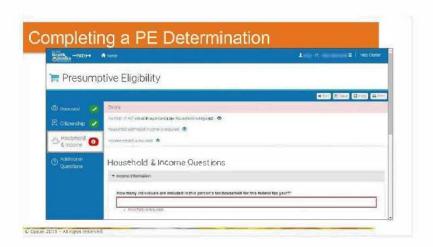
Notice green checkmarks display next to the **Personal** and **Citizenship** categories, indicating that they are complete. If you need to revisit a category, you can select it on the Navigation bar.

You are now viewing the **Household & Income** category. There are two mandatory questions to complete. You need to complete the mandatory information before you can

move to the next category.

Click the **Next** button and see what happens if you *don't* complete mandatory information.

2.18 Household & Income

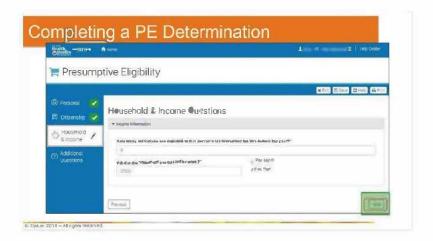


Notes:

WV PATH displays a red alert icon next to the category on the Navigation bar, and red text explains what is missing. The incomplete fields are highlighted red as well.

Click Next.

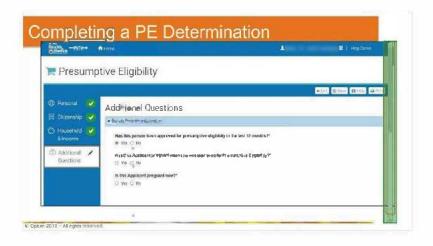
2.19 Household & Income



Notes:

Complete these fields and continue. Note that the **Household & Income** category shows a *pencil icon*, because that's the category you are working in.

2.20 Additional Questions

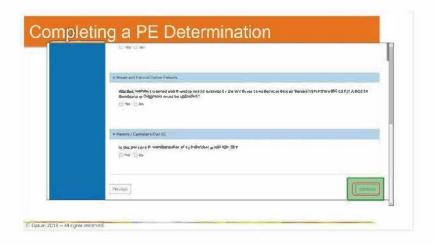


Notes:

The last category is **Additional Questions**. This category contains general questions that are needed to determine Presumptive Eligibility.

Click the Scroll bar on the screen to see the rest of the questions.

2.21 Additional Questions

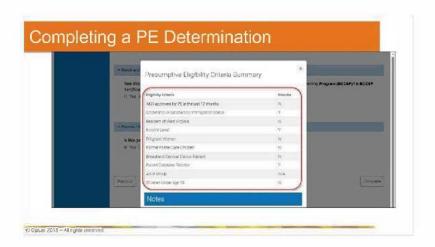


Notes:

All questions have been answered.

Click the **Complete** button on the screen.

2.22 Submit Determination

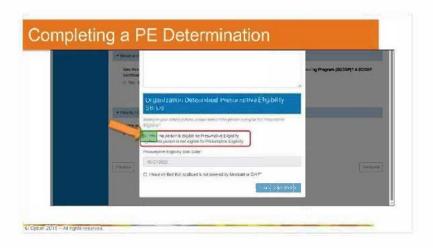


Notes:

The results of each Eligibility Criteria display at the top of the window for your review.

Click Next.

2.23 Yes Determination

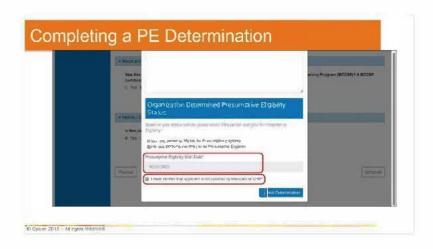


Notes:

After reviewing the results, select "Yes" or "No" to indicate whether the applicant is eligible for Presumptive Eligibility.

Click Yes to continue.

2.24 Yes Determination Date



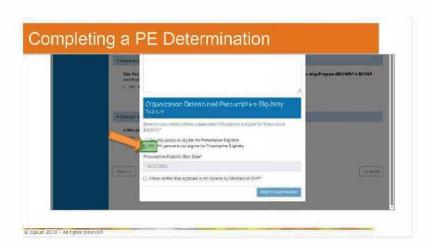
Notes:

Once you determine the applicant to be presumptively eligible, enter today's date to

begin coverage. Then select the check box to indicate that you verified the applicant is *not* covered by Medicaid or CHIP.

Click **Next** to learn the steps to take when you determine the applicant is not eligible.

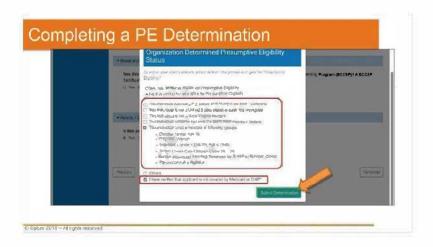
2.25 Submit Determination



Notes:

Select No to indicate the applicant is not eligible for Presumptive Eligibility.

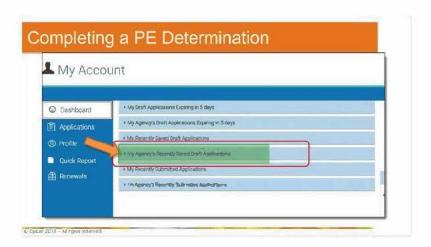
2.26 No Determination



When "No" is selected, one or more reasons must be chosen. You must also select the check box to indicate that you verified the applicant is *not* covered by Medicaid or CHIP.

Click the Submit Determination button to continue.

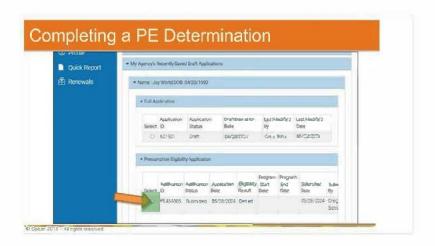
2.27 Printing Denial



Notes:

When a presumptive eligibility application is denied, you must print the eligibility notice, including the reason for the denial, and provide it to the applicant. To do this, click the My Agency's Recently Saved Draft Applications accordion.

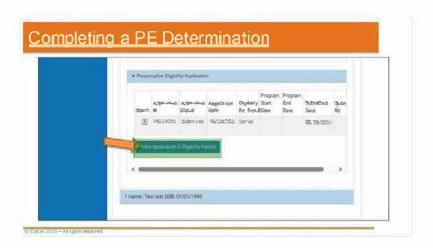
2.28 Printing Denial



Notes:

Click the radio button for the denied application in the Presumptive Eligibility Application sub-accordion.

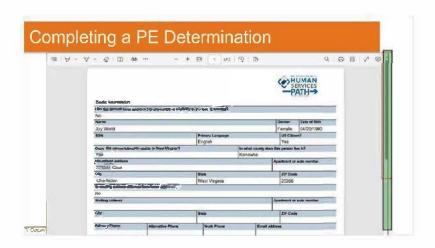
2.29 Printing Denial



Notes:

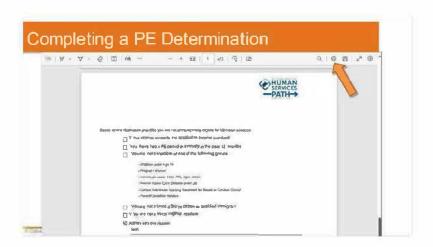
Click the View Application & Eligibility Notice button.

2.30 Printing Denial



A PDF of the selected application displays in a new browser window. Click the **Scroll** bar to scroll down to the second page to view the denial.

2.31 Printing Denial



Notes:

This page of the denial must be printed and provided to the customer. Click Next to continue.

3. Printing Temporary Medical Card

3.1 Dashboard



Notes:

The application is submitted and you are returned to the Dashboard. Now you need to print the applicant's Temporary Medical Card and complete a Full Medicaid Application. To do this, click the **My Recently Saved Draft Applications** accordion.

3.2 My Recently Submitted Applications



Notes:

This is the Presumptive Eligibility Application that you just submitted. Notice that WV PATH started a Full Application for you. We'll come back to this in a bit.

Click the radio button to select the **Presumptive Eligibility Application** you want to print.

3.3 View Application & Eligibility Notice



Notes:

Then click the View Application & Eligibility Notice button.

3.4 Application & Eligibility Notice



Notes:

The submitted application displays. Click the Scroll bar to scroll down the page.

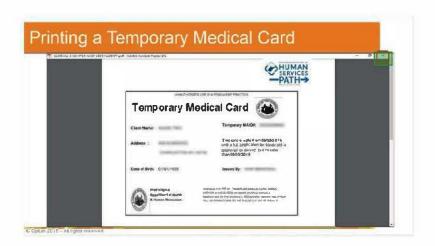
3.5 Application & Eligibility Notice



Notes:

Click the Scroll bar to continue.

3.6 Temporary Medical Card



Here is the applicant's Temporary Medical Card for you to print.

Click the X on the screen to close the window.

3.7 My Recently Submitted Applications



Notes:

The applicant was presumptively eligible, so next, you need to complete a Full Medicaid application. Click the radio button to select the Full Application.

4. Full Application

4.1 Dashboard



Notes:

Then click the Edit Application button.

4.2 Start

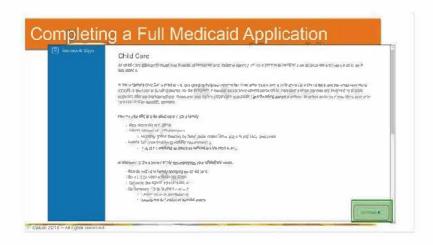


Notes:

This is the first page of the application. Notice the categories listed on the Navigation bar. WV PATH will lead you through completing the categories that are necessary. First, you need to review some information about WV PATH.

Click the Scroll bar to move down the screen.

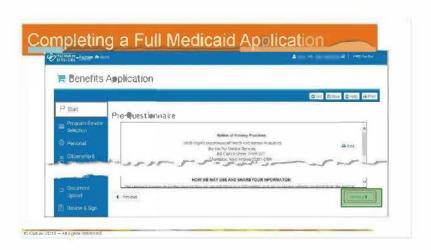
4.3 Start



Notes:

Click the Continue button.

4.4 Start



Notes:

When completing an application, review DHHR's Notice of Privacy Practices with the applicant then click the **Continue** button.

4.5 Start



Notes:

The **Start** category is a pre-questionnaire containing preliminary questions. Because you are currently signed in as a PE, WV PATH selects "I am completing this application on someone's behalf" for the question "Who is completing this application?" and indicates that you are An Authorized Representative.

Click the Scroll bar to scroll down the page.

4.6 Start



This is where you will enter *your* information when completing an application. Click the **Continue** button to continue.

4.7 Start



Notes:

WV PATH selects the Health Care program for you, because you are completing a Full Medicaid application, and only displays the pertinent categories of information on the Navigation bar. Continue through the application.

4.8 Start



Here you enter the customer's or client's information. If needed, you can click the Add Household Member button to add other household members to the application then continue.

4.9 Start



Notes:

For this example, you are completing the application at a Hospital or Doctor's Office so you select that option then click **Continue**.

4.10 Start



Indicate if the applicant has a physical, mental or emotional health condition limiting his or her activities then continue.

4.11 Start



Notes:

Select the applicant as the one needing assistance and continue.

4.12 Start



Notes:

If the applicant is female, you are asked if she is pregnant, the expected due date, expected number of babies, and when she learned she was pregnant.

4.13 Start



Notes:

If anyone in the household has unpaid medical bills in the past three months, indicate which member and how many months of expenses are unpaid. Click **Next** on the screen.

4.14 Personal



Notes:

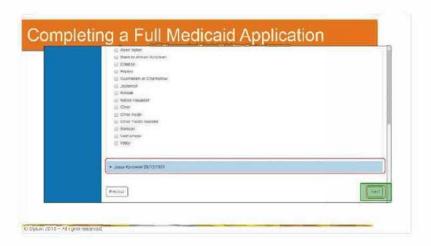
That completes the **Start** category. Notice a green checkmark displays next to it on the Navigation bar, indicating that it is complete. You are now in the **Personal** category. At the top of the page, WV PATH lists the information you will need to complete this category. If you don't have all the required information available, you can click Save and

return to the application when ready.

In the **Personal** category, you enter contact information for each household member, as well as the preferred contact method, preferred language, whether the applicant requires an interpreter, and each member's ethnicity.

Click the Scroll bar to scroll to the bottom of the page.

4.15 Personal



Notes:

Each member of the household has an accordion at the bottom of the page. You need to complete mandatory information for each member of the household before moving to the next category. Click the **Next** button to continue.

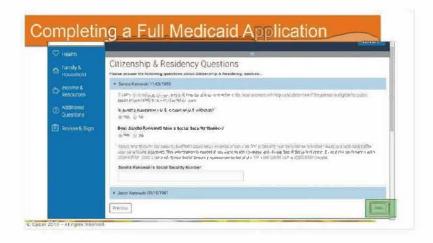
4.16 Citizenship & Residency



Notes:

This is the Citizenship & Residency category. Click the Scroll bar to scroll to the bottom of the page.

4.17 Citizenship & Residency



Notes:

In the **Citizenship & Residency** category, you indicate if the applicant is a U.S. Citizen, U.S. National, or naturalized citizen. Then, enter their Social Security Number.

4.18 Health

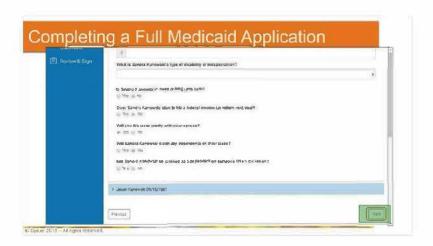


Notes:

In the **Health** category, you enter current health insurance coverage, income, and any in-home care a household member might require.

Click the Scroll bar to scroll down the page.

4.19 Health



Notes:

WV PATH also displays questions regarding the applicant's tax filing status.

4.20 Family & Household

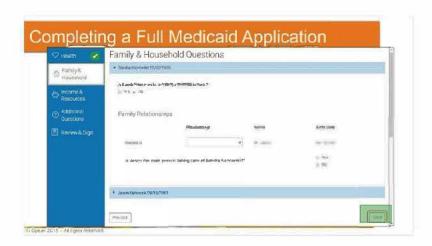


Notes:

In the Family & Household category, enter the applicant's education and household expense information.

Click the Scroll bar to scroll down the page.

4.21 Family & Household



Notes:

Click Next to continue.

4.22 Income & Resources

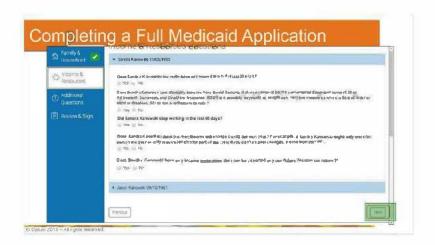


Notes:

In the Income & Resources category, enter the employment and income information.

Click the Scroll bar to scroll down the page.

4.23 Income & Resources



Notes:

Click Next to continue.

4.24 Additional Questions



Notes:

This is the **Additional Questions** category. Answer general questions that don't display elsewhere in this category. Questions will be answered for each household member.

4.25 Review & Sign

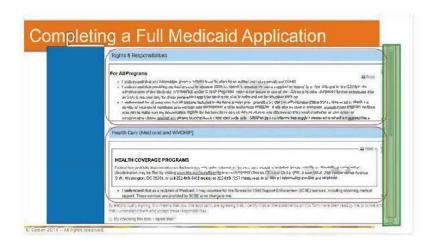


Notes:

The last category is to review and sign the application. Here, you can click on each accordion and review what you entered. If a change is needed, click the category on the left, make the change and return to Review & Sign.

Click the Scroll bar to scroll down the page.

4.26 Review & Sign

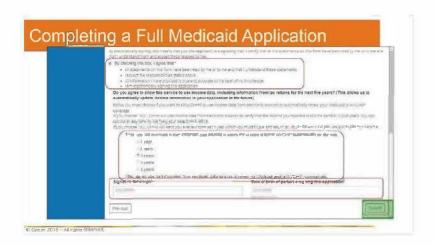


Notes:

Rights & Responsibilities are displayed for review, as well as requirements for Health Care programs.

Click the Scroll bar to scroll down the page.

4.27 Review & Sign



Notes:

After reviewing the Rights & Responsibilities, indicate that the applicant has reviewed them. Select whether he or she consents to DHHR using the income information included in their tax returns. If "Yes" is selected, indicate for how many years. Then enter the applicant's name in the e-sign field, enter his or her date of birth, and click **Submit**.

4.28 Review & Sign

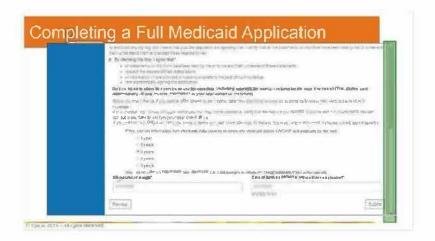


Notes:

A window displays, stating the application is being processed.

Click the **X** to close the window and return to the application.

4.29 Review & Sign



Notes:

Click the Scroll bar to scroll to the top of the page.

4.30 Review & Sign



Notes:

That is how you complete and submit a Full Medicaid application. Click **Exit** to close the application and return to the Dashboard.

5. Searching for Applications

5.1 Dashboard



Notes:

Before we move on to the next topic, take a moment to click on your name, role, and organization at the top of the screen.

5.2 Dashboard



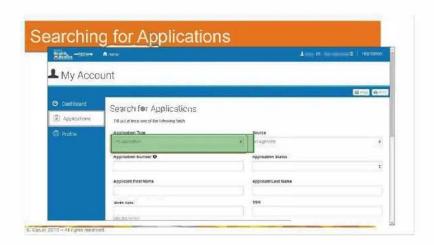
Notes:

A short menu displays here. Let's review the options available. If you perform more than one function in WV PATH such as a PE and a PE Admin, you will use Switch Role to move between them. See *Job Aid: Managing Multiple Roles* under Resources for further

information. My Account is another way to return to your Dashboard from the WV PATH Landing Page. You will select Sign Out here to leave WV PATH.

Back to the Dashboard. Let's see how you can search for applications in WV PATH. Click **Applications** on the Navigation bar.

5.3 Enter Criteria

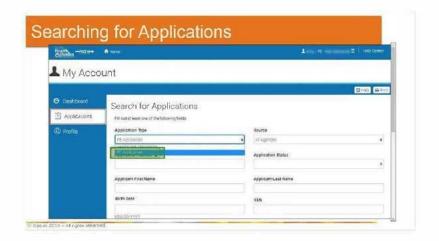


Notes:

Here, you can search for applications created by you or others in your organization. The page displays your search options. In this case, you want to find a Presumptive Eligibility application that you created.

Click Application Type.

5.4 Enter Criteria



Notes:

Select PE Application.

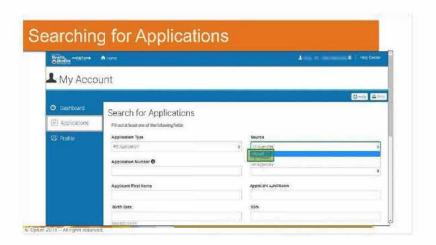
5.5 Enter Criteria



Notes:

Click Source to select who created the application.

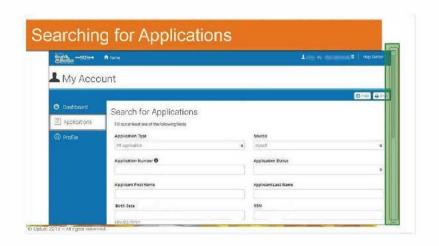
5.6 Enter Criteria



Notes:

Select Myself to find applications that you created.

5.7 Search



Notes:

Click the Scroll bar to scroll down to the Search button.

5.8 Search



Notes:

Click the Search button to run the search.

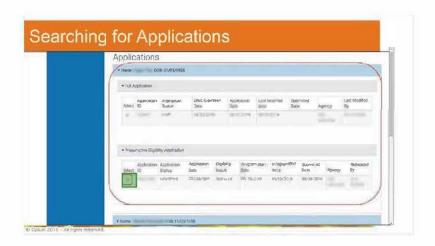
5.9 View Results



Notes:

Click the Scroll bar to scroll to the bottom of the page and view the results.

5.10 PE Application



Notes:

The accordion for the first application is already expanded.

Click the radio button for the Presumptive Eligibility Application.

5.11 PE Application



Notes:

Click the View Application & Eligibility Notice button.

5.12 PE Application

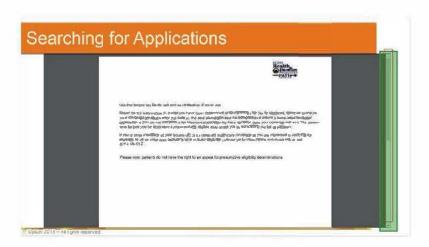


Notes:

The submitted application displays.

Click the Scroll bar to scroll down the page.

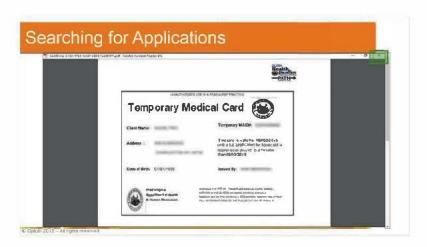
5.13 PE Application



Notes:

Click the Scroll bar to continue scrolling.

5.14 PE Application

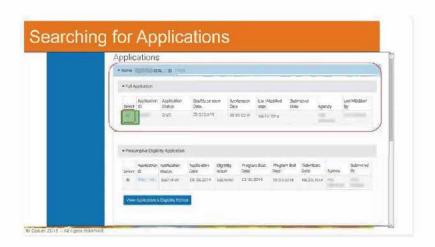


Notes:

Here is the applicant's Temporary Medical Card.

Click the **X** on the screen to close the window and return to the search results.

5.15 Medicaid Application



Notes:

From here, you can also open the Full Medicaid Application that you created.

Click the radio button for the Full Application.

5.16 Medicaid Application



Notes:

Click the **Edit Application** button.

5.17 Exit

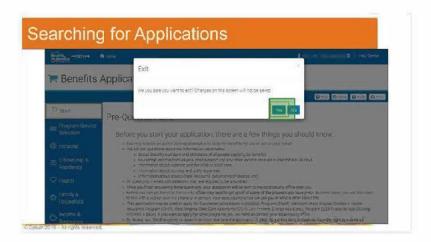


Notes:

Because the Application Status is Draft, WV PATH allows you to continue completing the application. Draft applications are automatically deleted from WV PATH after 30 days.

Click the Exit button.

5.18 Exit



Notes:

WV PATH provides a warning before the application is closed.

Click Yes.

5.19 Dashboard



Notes:

You are returned to the Dashboard.

This course is almost complete. Before completing the Knowledge Check, take a few minutes to learn about two features of WV PATH that you will find useful assisting your applicants: Programs & Services and Screen for Assistance. Let's look at Programs & Services first.

Click Programs & Services on the Dashboard.

6. Programs & Services

6.1 Programs & Services



Notes:

Programs and services offered by DHHR are organized here by category on the left Navigation bar. This is the **Health Care** information page.

To return to your Dashboard, click **Home** at the top of the screen to access the WV PATH Landing Page.

6.2 Programs & Services

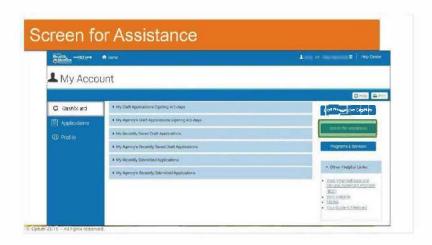


Notes:

Click the **Go** button under My Account to return to your Dashboard.

7. Screen for Assistance

7.1 Screen for Assistance



Notes:

Next, we will look at Screen for Assistance. Here, you can complete questions to see if an applicant may qualify for one or more DHHR programs or services.

Click the Screen for Assistance button on the Dashboard.

7.2 Core



Notes:

The first screen is where you select the programs or services the applicant is interested in.

For this brief demonstration, click Select All.

7.3 Core



Notes:

Notice additional categories display on the Navigation bar. WV PATH will walk you through completing necessary information. When you're done, WV PATH will indicate whether the applicant may be eligible for any of the selected program(s) or service(s).

7.4 General Questions



Notes:

Here, indicate the county the applicant is in, and start describing their household.

7.5 Household Questions



Notes:

More specific household information is entered here, including if any household member requires additional care, any parents of a minor child, anyone attending school, rent / mortgage expenses, heating or cooling expenses, or spousal support.

7.6 Health Questions



Notes:

Because you selected to screen for one or more health care programs, you are prompted to enter health information. In this example, you selected "No" for each option.

7.7 Income & Resources Questions

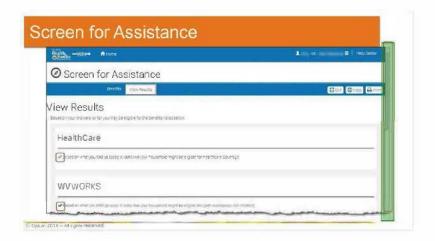


Notes:

The last step is to provide income and resource information.

Then, the screening application is complete. Click **Submit** to see if, in this example, the applicant may be eligible for any programs or services offered by DHHR.

7.8 View Results - Eligible



Notes:

Based on the information that was entered in this example scenario, the applicant *might* be eligible for Health Care and the WV WORKS program under Family Assistance.

Click the Scroll bar on the screen to scroll down the page.

7.9 View Results - Not Eligible



Notes:

At the bottom of the page, click Return to Dashboard, to return to your Dashboard.

7.10 Screen for Assistance

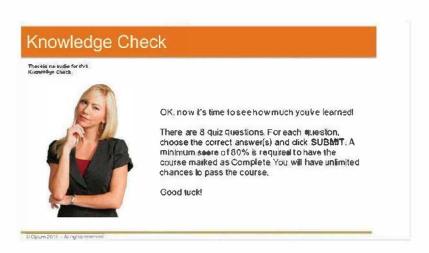


Notes:

You have now completed the Presumptive Eligibility (PE) Worker training course. Click **Next** to access the Knowledge Check. A completion score of 80% or higher is required to have this course marked as Complete in the PATH Learning Community (PLC). Good luck!

8. Knowledge Check

8.1 Quiz Intro

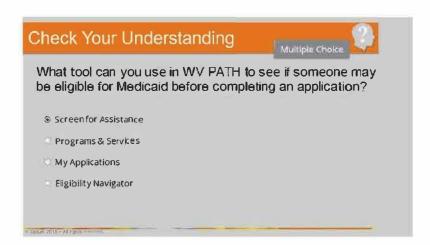


Notes:

There is no audio for this Knowledge Check.

8.2 Multiple Choice

(Multiple Choice, 10 points, 1 attempt permitted)



Correct	Choice
Х	Screen for Assistance
	Programs & Services
	My Applications
	Eligibility Navigator

Feedback when correct:

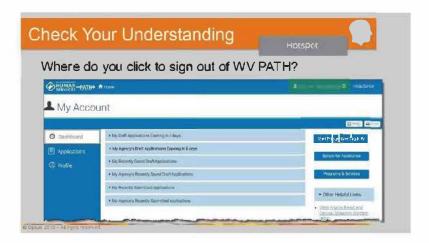
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Use the Screen for Assistance tool.

8.3 Hotspot

(Hotspot, 10 points, 1 attempt permitted)



That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Click your name and role in the banner to select Sign Out.

8.4 Multiple Choice

(Multiple Choice, 10 points, 1 attempt permitted)



Correct Choice

	15 days
	20 days
х	30 days
	45 days
	60 days

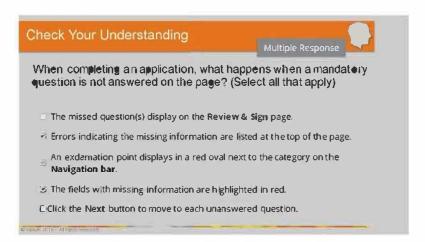
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Draft applications remain on the WV Portal for 30 days.

8.5 Multiple Response

(Multiple Response, 10 points, 1 attempt permitted)



Correct	Choice
	The missed question(s) display on the Review & Sign page.

Х	Errors indicating the missing information are listed at the top of the page.
х	An exclamation point displays in a red oval next to the category on the Navigation bar.
Х	The fields with missing information are highlighted in red.
	Click the Next button to move to each unanswered question.

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

8.6 Matching

(Matching Drag-and-Drop, 10 points, 1 attempt permitted)



Correct	Choice
А	Indicates where you are currently entering
	information.

В	Indicates all mandatory information has been
	entered.
С	Indicates not all mandatory information has
	been entered.

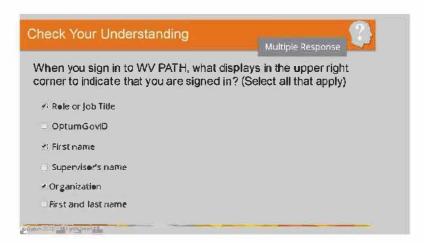
That's right! You selected the correct response.

Feedback when incorrect:

You did not correctly match one or more items.

8.7 Multiple Response

(Multiple Response, 10 points, 1 attempt permitted)



Correct	Choice
Х	Role or Job Title
	Optum GovID
х	First name

	Supervisor's name
Х	Organization
	First and last name

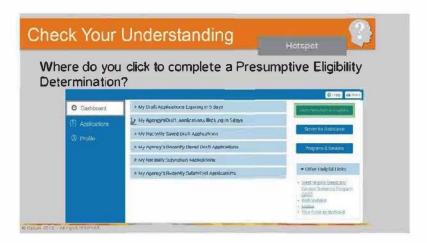
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

8.8 Hotspot

(Hotspot, 10 points, 1 attempt permitted)



Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Click the Start Presumptive Eligibility button to complete a determination.

8.9 Matching

(Matching Drag-and-Drop, 10 points, 1 attempt permitted)



Correct	Choice
А	Click to search for applications.
В	Click to print the Temporary Medical Card.
С	Click to find an application created by another PE.
D	Click to find out about WV's Medicaid program.

Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not correctly match one or more items.

8.10 Results Slide

(Results Slide, 0 points, 1 attempt permitted)



Results for
8.2 Multiple Choice
8.3 Hotspot
8.4 Multiple Choice
8.5 Multiple Response
8.6 Matching
8.7 Multiple Response
8.8 Hotspot
8.9 Matching

Result sinde properties	
Passing	80%
Score	
Notes:	



Presumptive Eligibility Worker

Original Effective Date: 4/1/2024 Revision Date:

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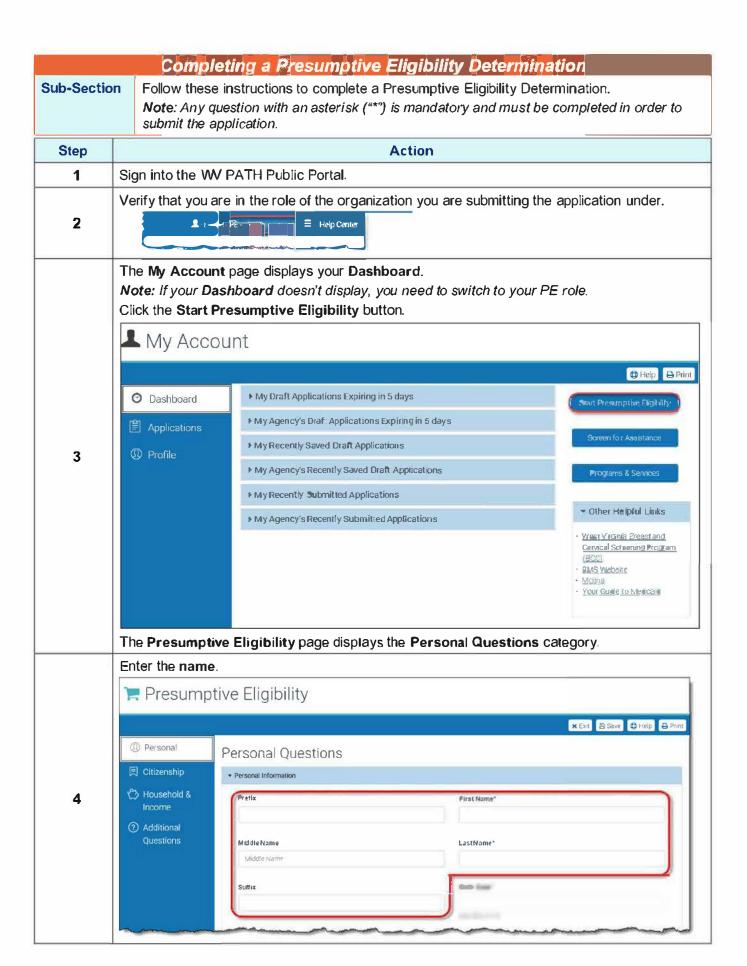
Purpose This Job Aid provides instructions for Presumptive Eligibility Workers (PEs) to complete Presumptive Eligibility Determinations and Full Medicaid applications in the West Virginia People's Access to Help (WV PATH) Public Portal. Re-printing a Temporary Medical Card and searching for an application are also included.

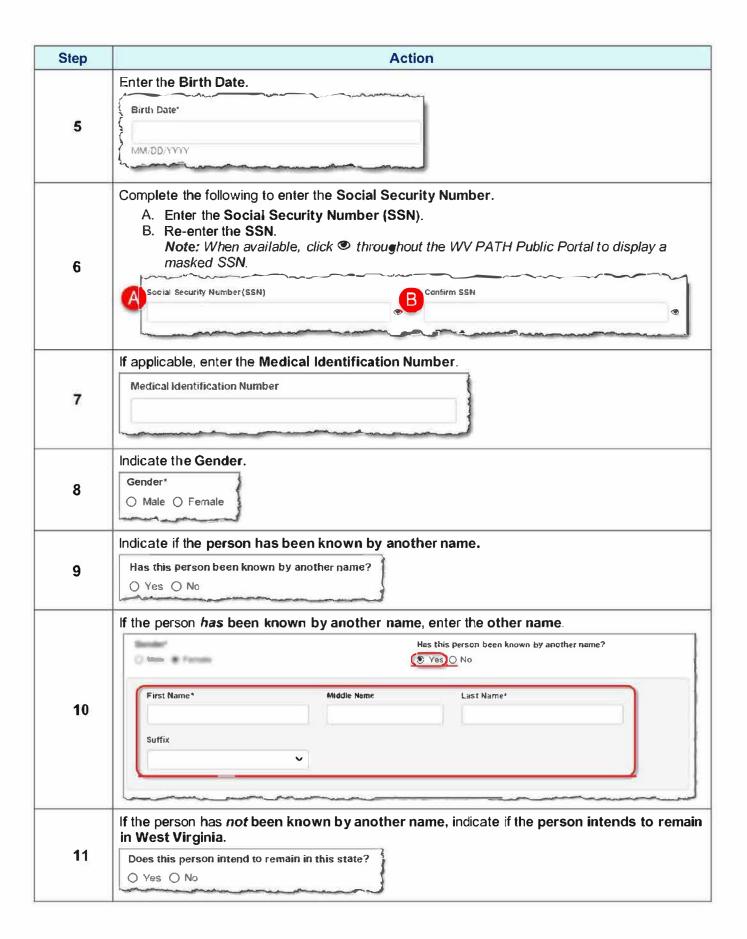
<u>Dashboard</u>			
Section	The Dashboard is the "Home Page" for your work as a PE in the WV PATH Public Portal. From here, you can quickly navigate to what you need in to efficiently assist your customers or clients.		

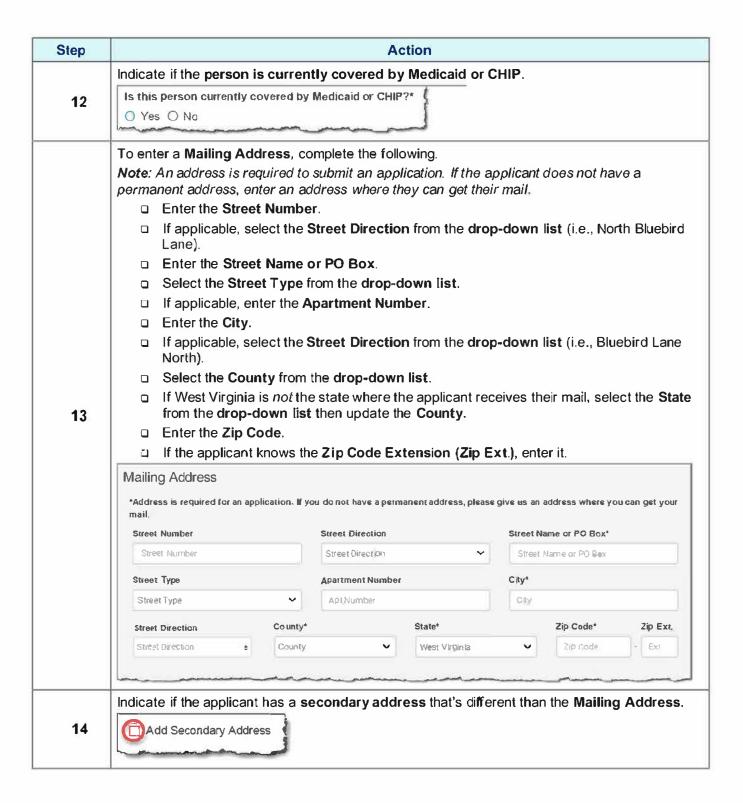
Step	Action
1	Sign into the WV PATH Public Portal.

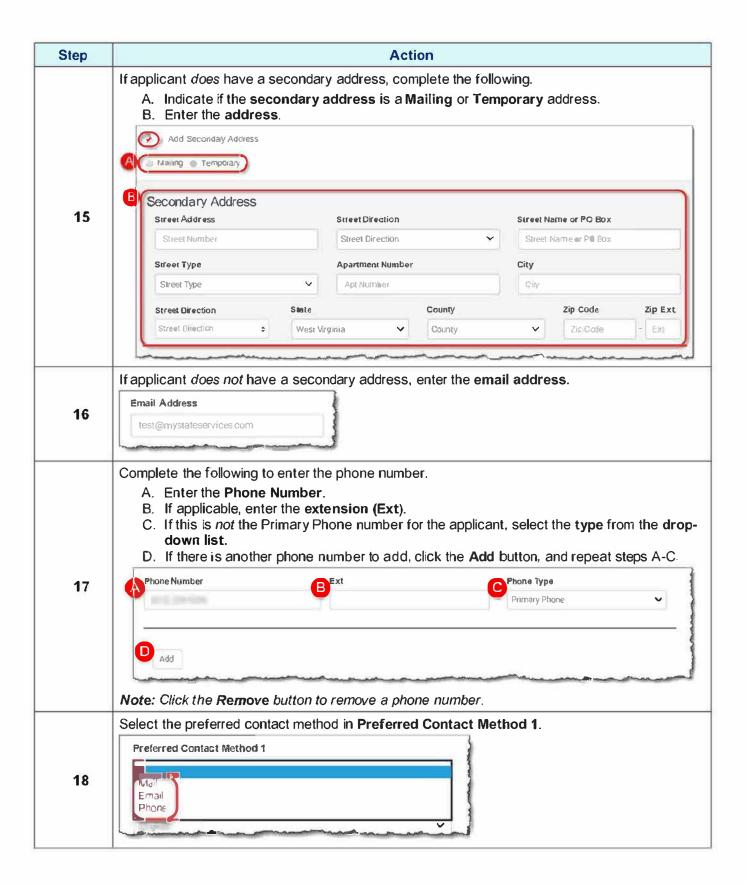


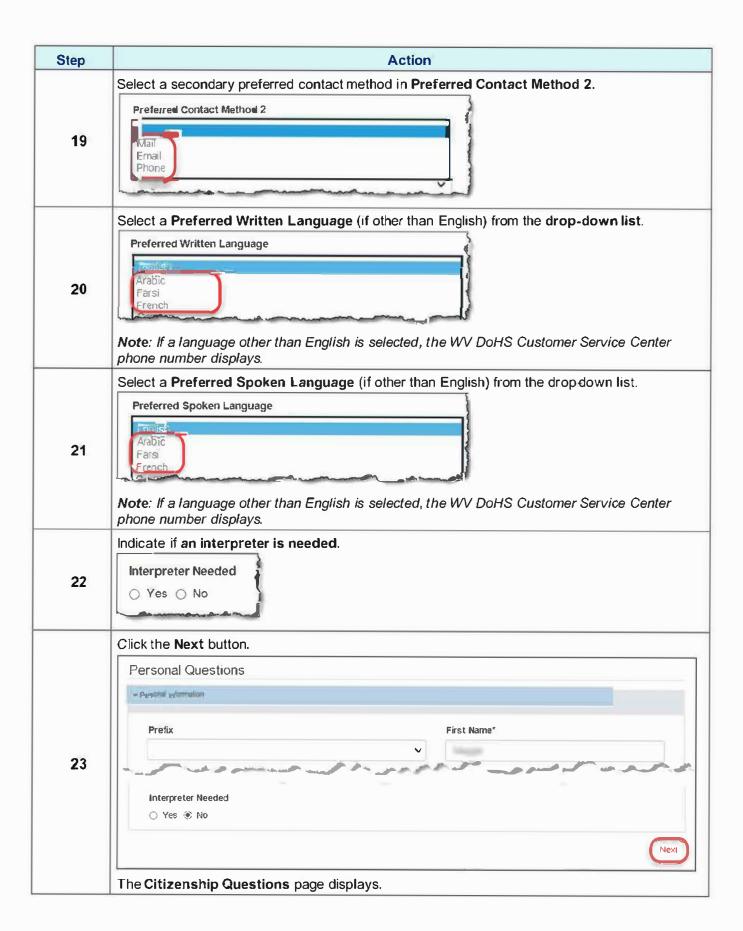
Step Action The My Account page displays your Dashboard. Note: If your Dashboard doesn't display, you need to switch to your PE role. Below is information that explains each area of your Dashboard. A. Your Name, the role you are currently signed in as, and your organization. B. Click to access online **Help**. C. Click to return to this Dashboard. D. Click to search for an application. E. Click to change your default role if you have an organization you work with most often. F. Click to access applications that have been saved but not submitted that are expiring in the next five days. Note: These applications will be removed from the WV PATH Public Portal in the next five days unless they are submitted. G. Click to access the ten most recent applications that have been saved but not submitted. Note: Draft PE applications remain in the WV PATH Public Portal for seven days and draft Full Medicaid applications remain for 30 days, after which time they are removed unless they are submitted. H. Click to access the ten most recently submitted applications. I. Click to start a Presumptive Eligibility Determination. J. Click to access Screen for Assistance to use the screening tool. K. Click to access Programs & Services to review programs and services available from the West Virginia Department of Human Services (WV DoHS). 3 Click a link under Other Helpful Links to access other resources. **☆** Home B Help Center My Account Help Prin O Dashboard ▶ My Draft Applications Expiring in 5 days Start Presumptive Eligibility My Agency's Draft Applications Expiring in 5 days Applications ▶ MyRecently Saved Draft Applications Profile My Agency's Recently Saved Draft Applications MyRecently Submitted Applications ■ Other Helpful Links My Agency's Recently Submitted Applications West Vironia Breast and Cervical Screening Program (9CC) · BMSWebsite Mouna · Your Guide to Medicald

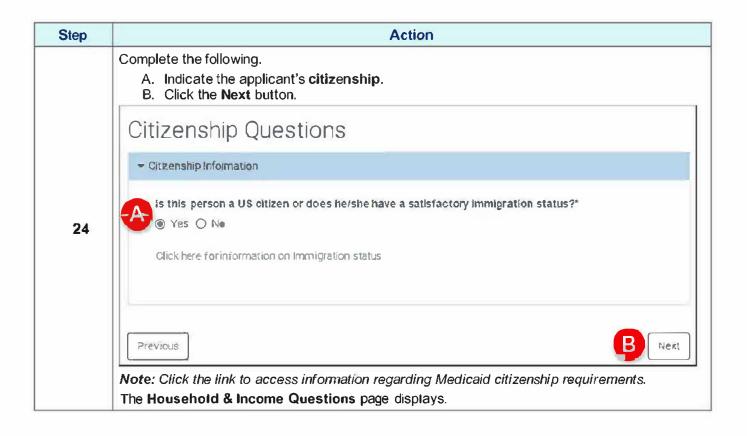


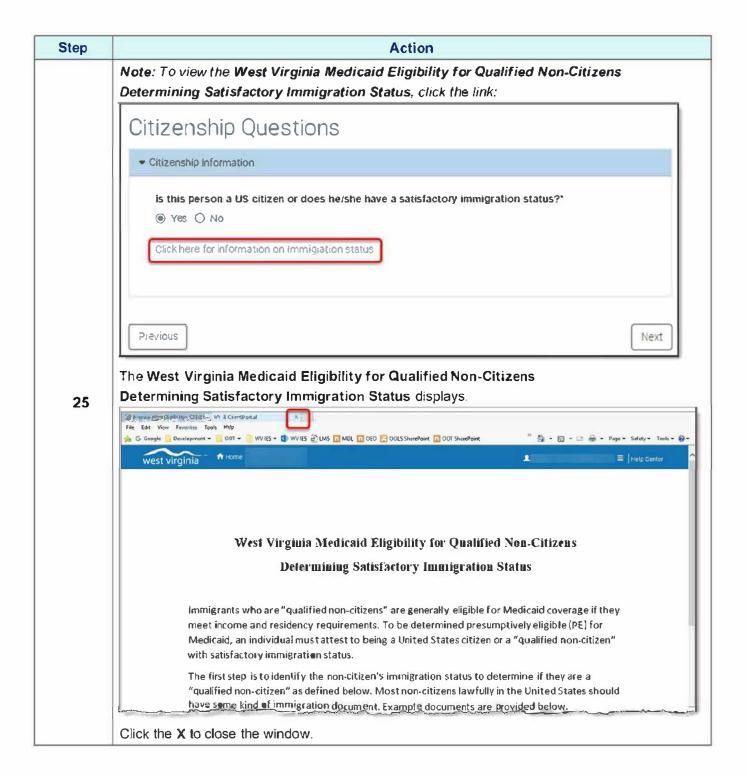


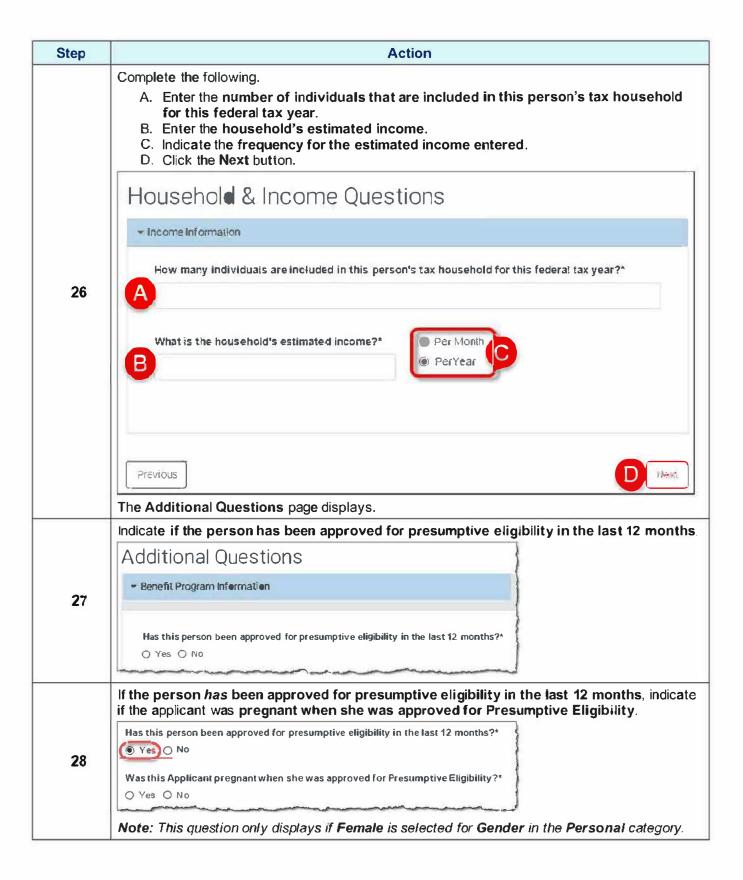




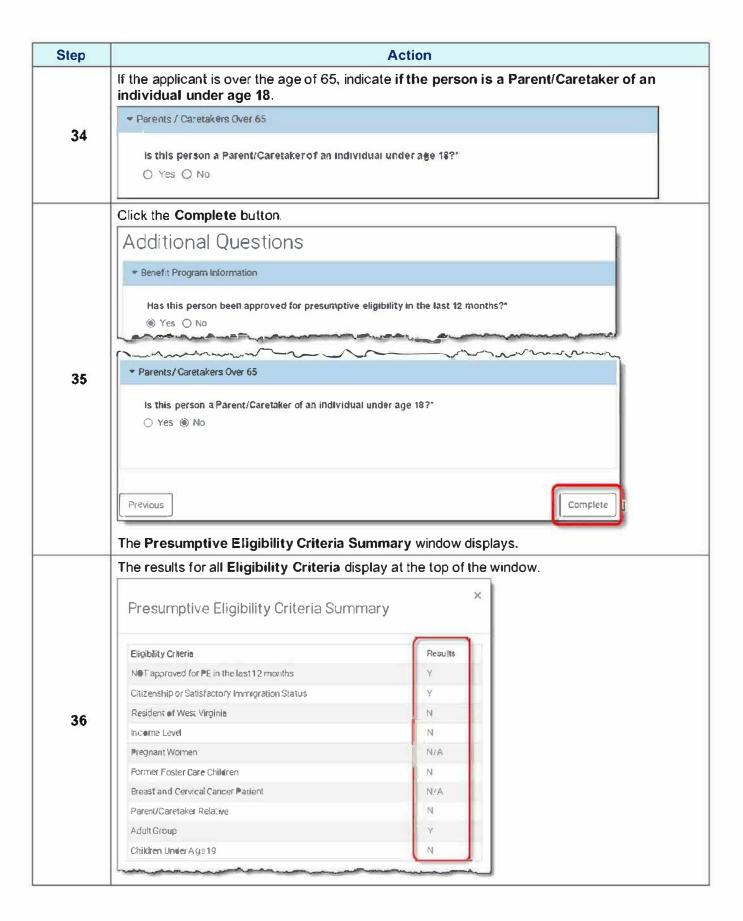


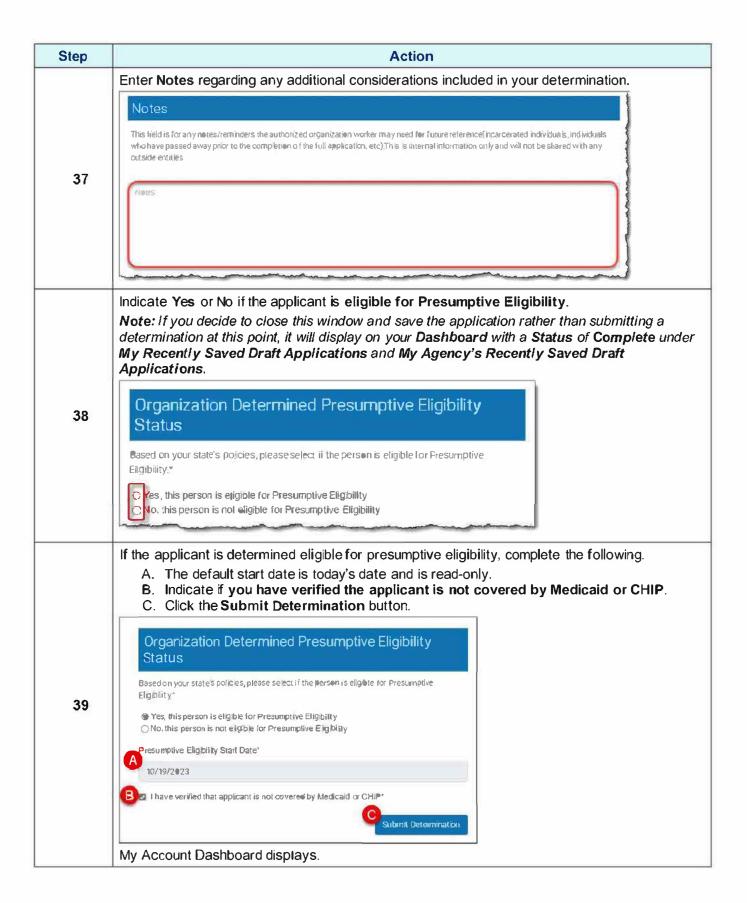


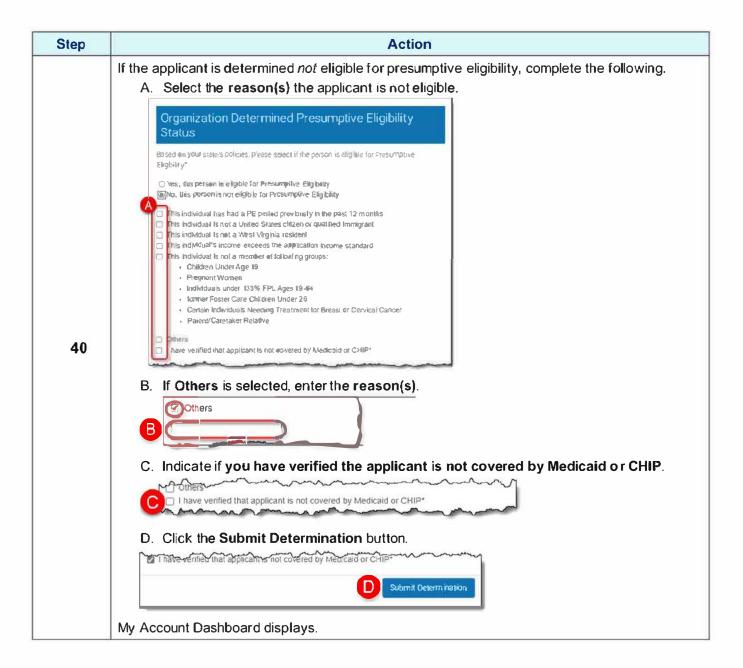


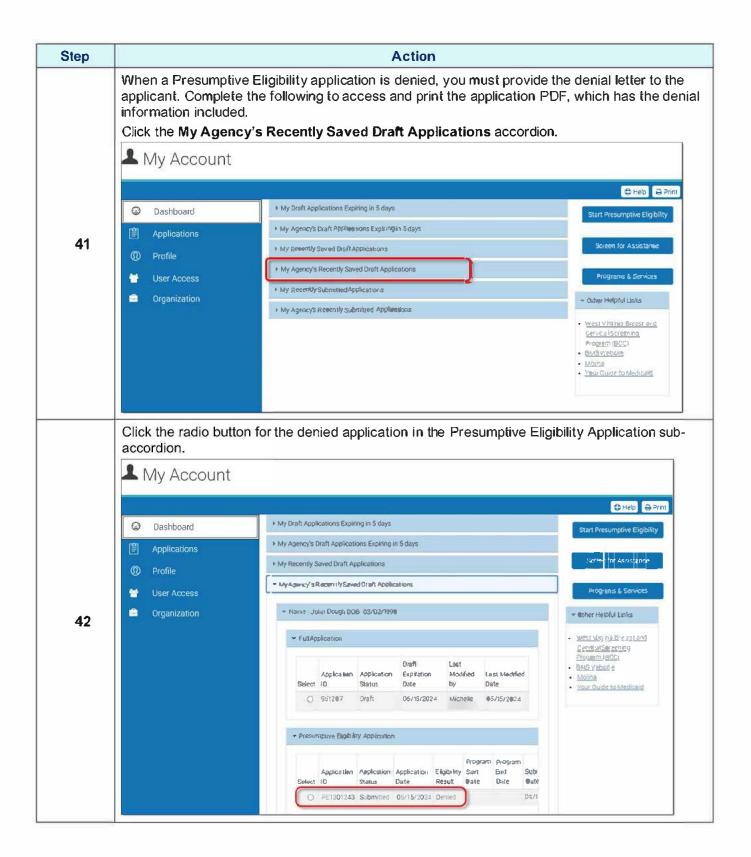


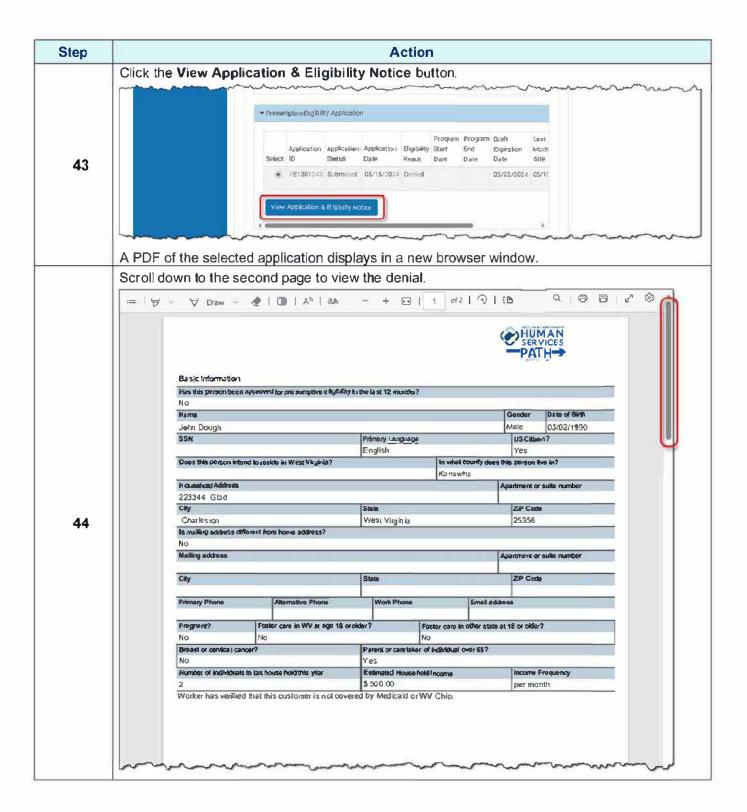
Step	Action
29	If the person has not been approved for presumptive eligibility in the last 12 months, indicate if the pregnancy has ended. Was this Applicant pregnant when she was approved for Presumptive Eligibility?** Has that pregnancy ended?** Yes & No
30	Has that pregnancy ended, enter the Pregnancy End Date. Has that pregnancy ended?* Pregnancy End Date Pregnancy End Date
31	Indicate if the applicant is pregnant now. Is this Applicant pregnant now?* O Yes O No Note: This question only displays if Female is selected for Gender in the Personal category.
32	For youth who turned age 18 before January 1, 2023, indicate the following. Was this child in foster care in West Virginia at age 18 or older? For youth who turned age 18 before January 1, 2023 - Was this child in foster care in West Virginia at age 18 or older? Was this child in foster care in any state at age 18 or older? For youth who turn age 18 on or after January 1, 2023 · Was this child in foster care in any state at age 18 or older? For youth who turn age 18 or older? O Yes O No
33	Indicate if this woman was screened and found to need treatment by the WV Breast and Cervical Cancer Screening Program (BCCSP). * Breast and Cervical Cancer Patients Was this woman screened and found to need treatment by the WV Breast and Cervical Cancer Screening Program (BCCSP)? A BCCSP Certificate of Diagnosis must be uploaded.* O Yes O No Note: This question only displays if Female is selected for Gender in the Personal category.

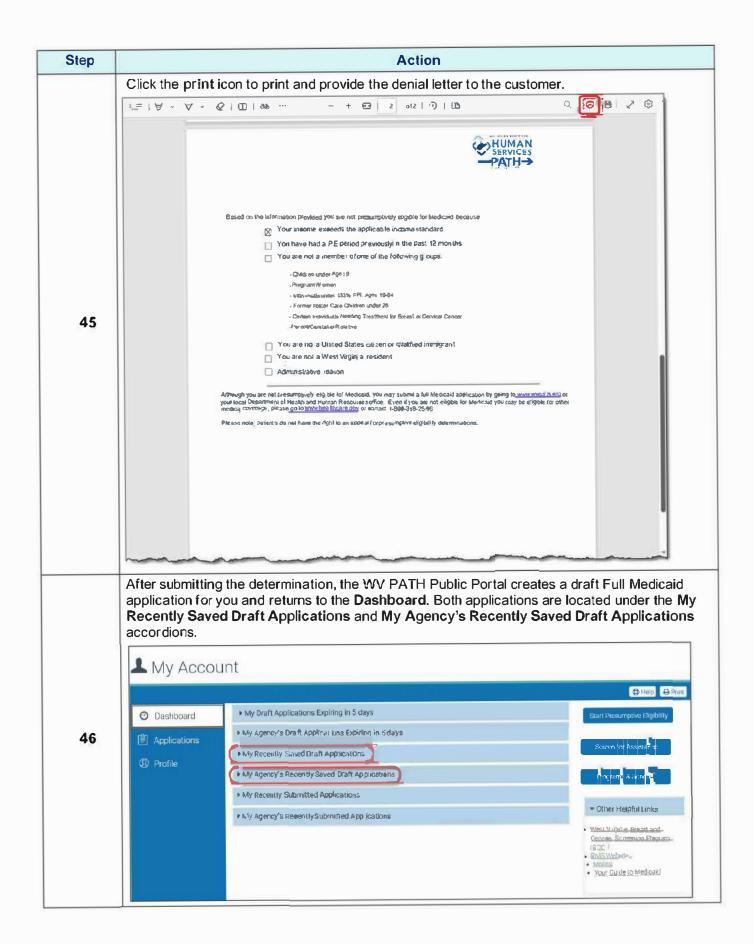


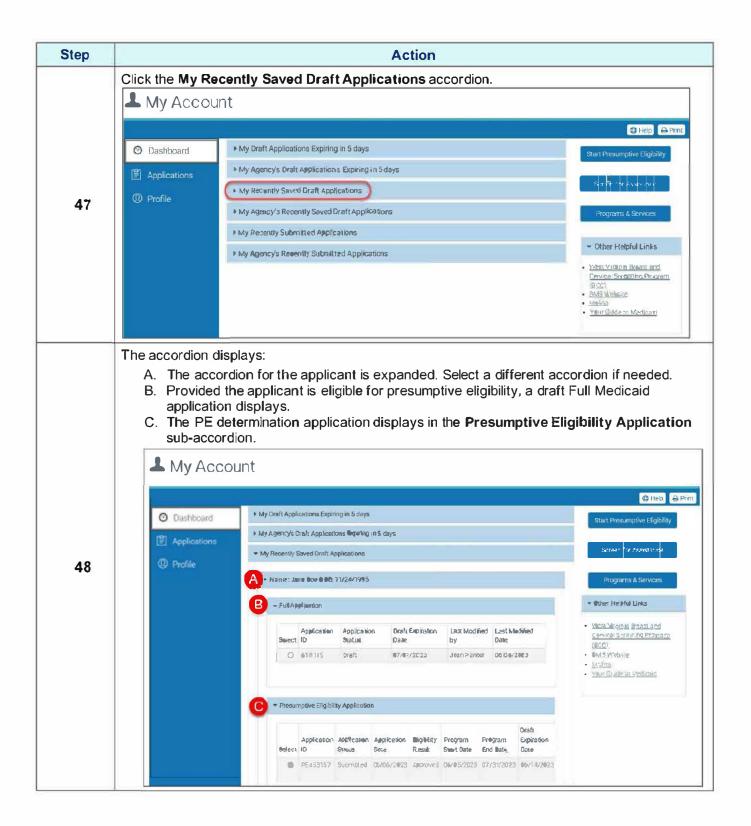






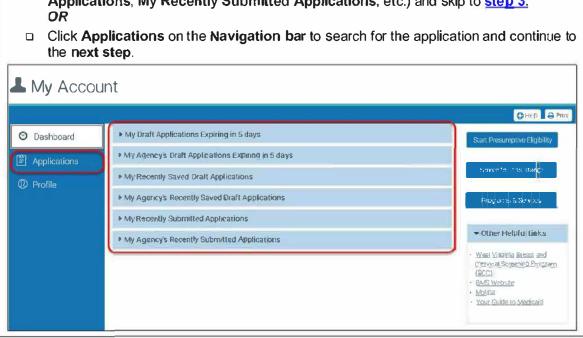


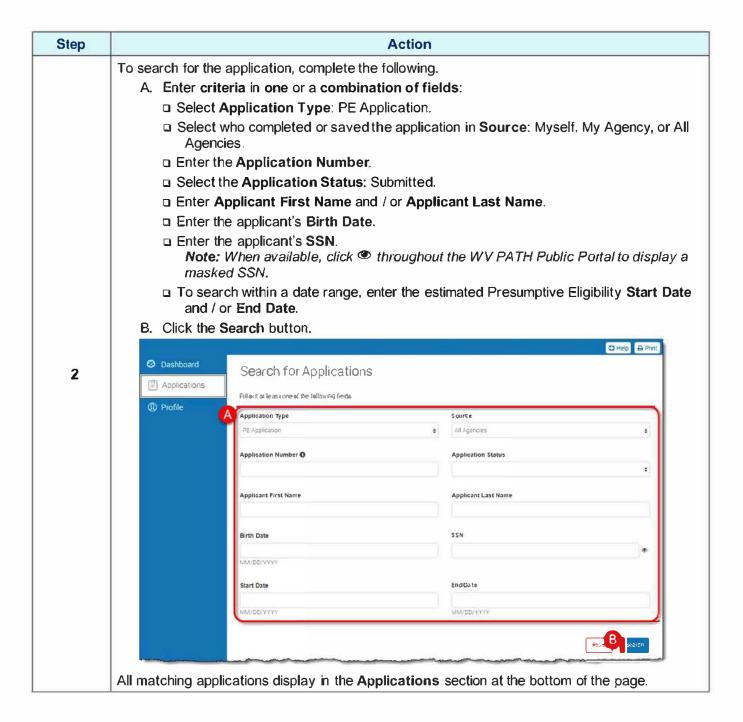


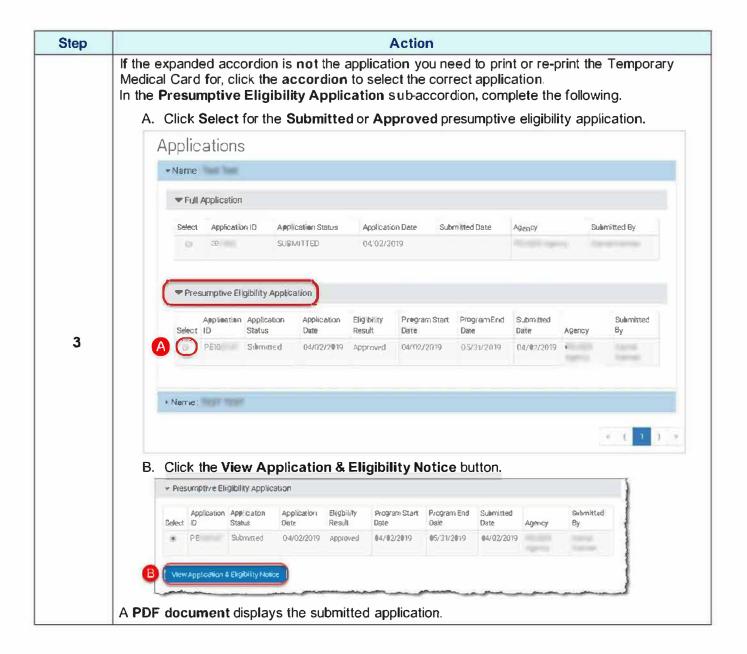


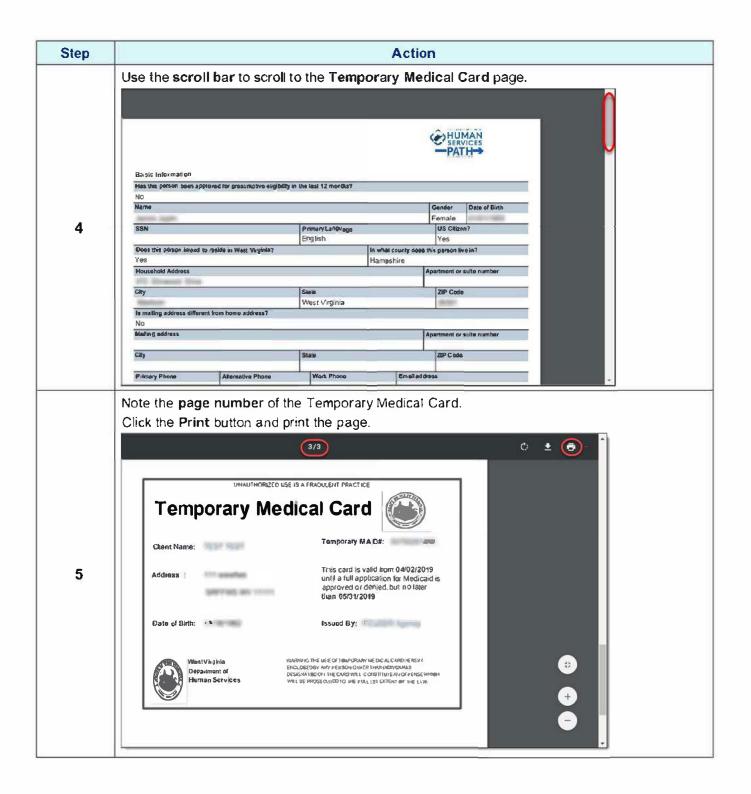
Printing or Re-Printing a Temporary Medical Card Sub-Section Follow these instructions to print or re-print a Temporary Medical Card for an applicant who was presumptively approved by you or another PE. Step Action Complete one of the following to locate the PE application. Click the accordion where the PE application is (i.e., My Recently Saved Draft Applications, My Recently Submitted Applications, etc.) and skip to step 3. OR Click Applications on the Navigation bar to search for the application and continue to

1





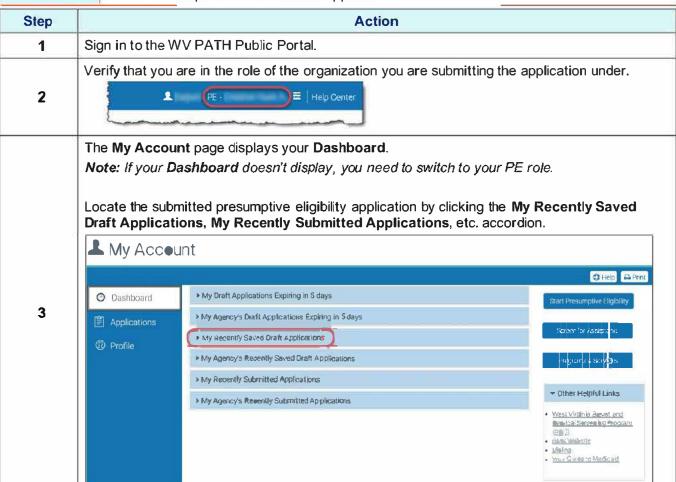


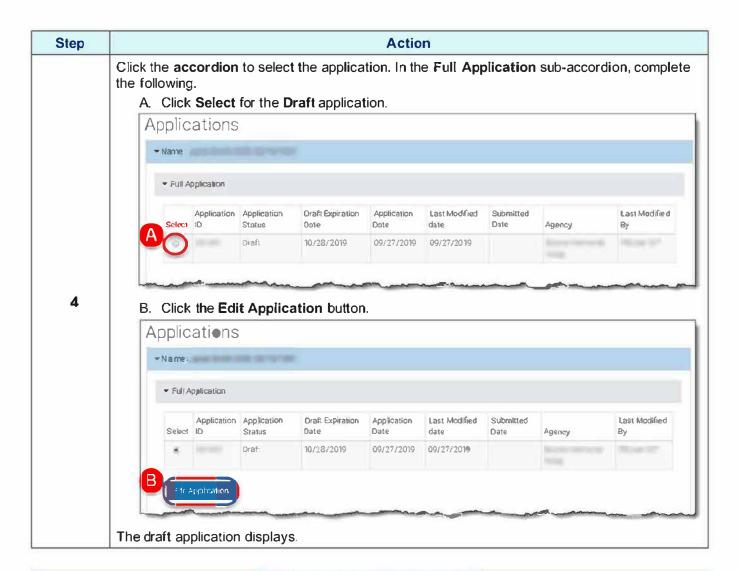


Completing a Full Medicaid Application

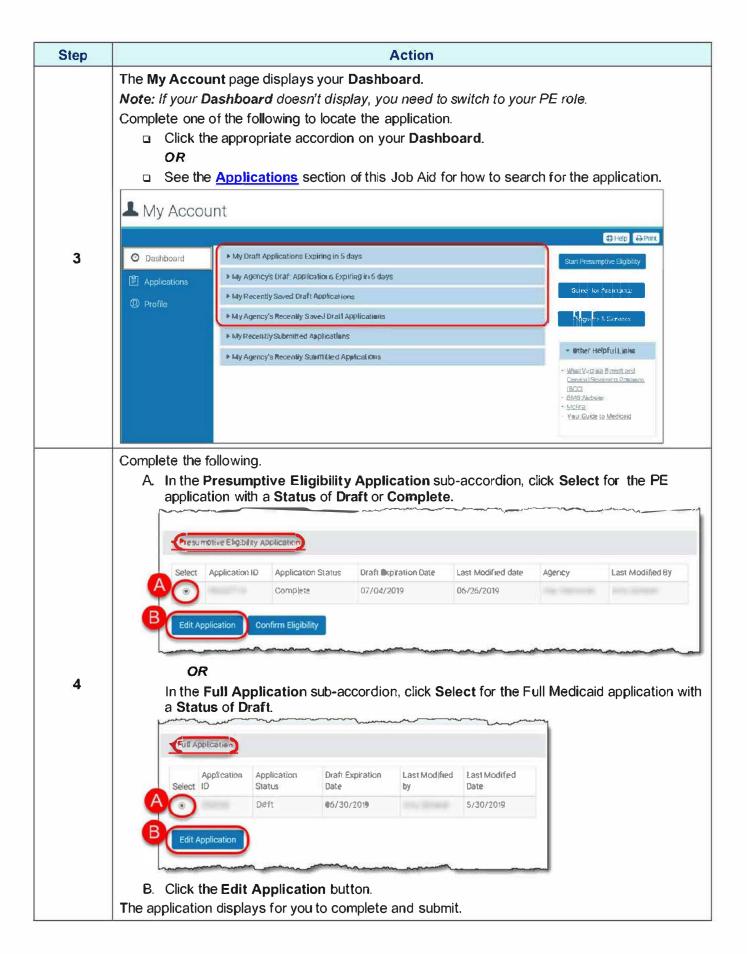
Sub-Section

After submitting an eligible Presumptive Eligibility determination, follow instructions in this section to complete a Full Medicaid application.





Editing a Draft Application Sub-Section If you begin a PE or Full Medicaid application, and save and exit before submitting, follow instructions in this sub-section to locate and complete it before it is removed from the WV PATH Public Portal. Note: Draft PE applications remain in the WV PATH Public Portal for seven days and draft Full Medicaid applications remain for 30 days, after which time they are removed unless submitted. Step Action 1 Sign into the WV PATH Public Portal. Verify that you are in the role of the organization the application was created under.

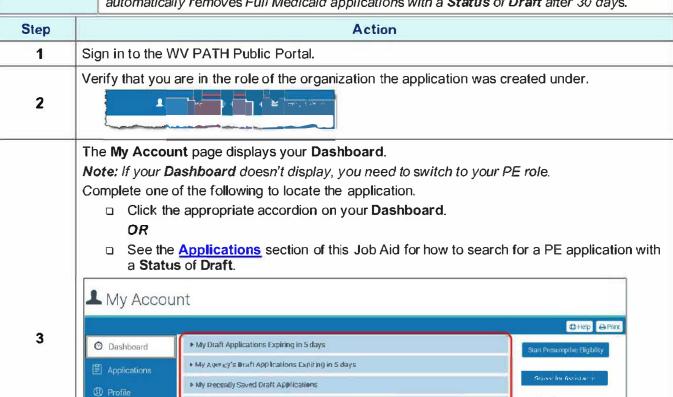


Deactivating a RE Application

Sub-Section

PE applications with a **Status** of **Draft** remain in the WV PATH Public Portal for seven days after which time they are removed unless they are submitted. A PE can *deactivate* a Draft PE application within their agency prior to this. Follow instructions in this sub-section to deactivate a **Draft** PE application.

Note: A PE cannot deactivate a Full Medicaid application. The WV PATH Public Portal automatically removes Full Medicaid applications with a **Status** of **Draft** after 30 days.



My Agency's Recently Saved Braft Applications

My Agency's Recently Submitted Applications

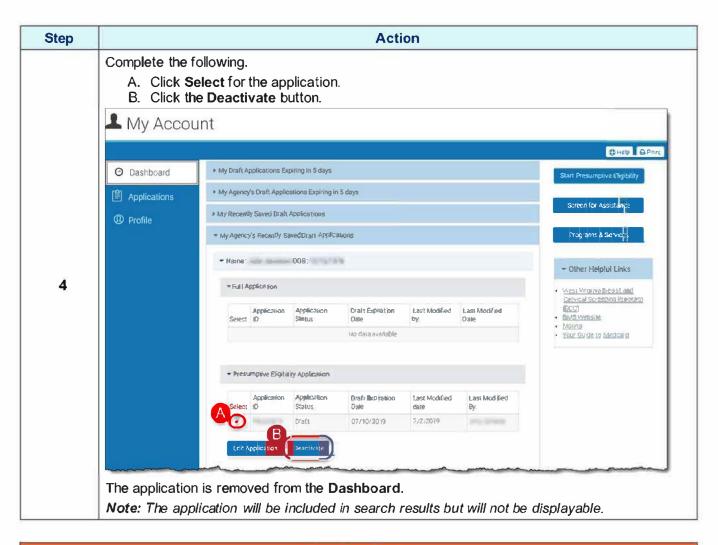
My Recently Submitted Applications

27 of 33

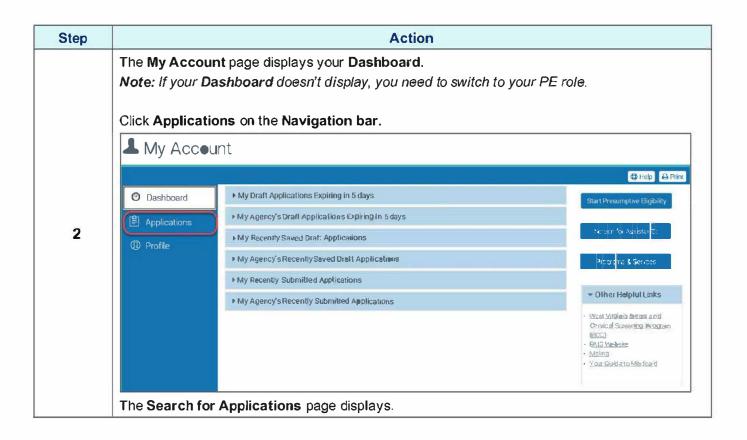
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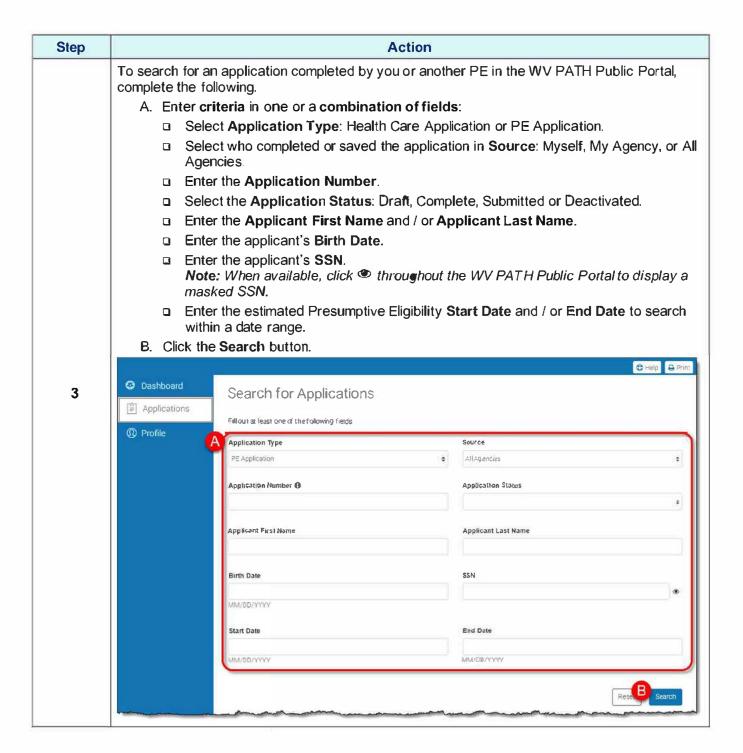
- Other Helpful Links

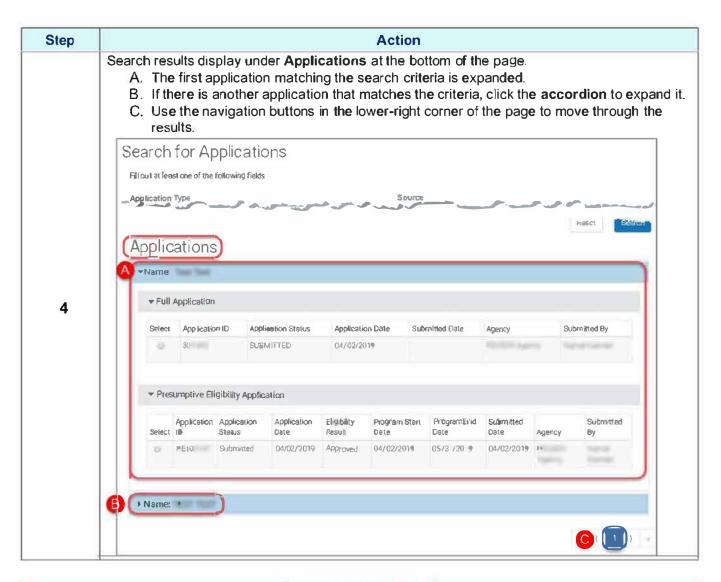
 West virgina Breasi and Cervical Screening Program (BCC)
 BMS Webats
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 Your Quide to Medicaid



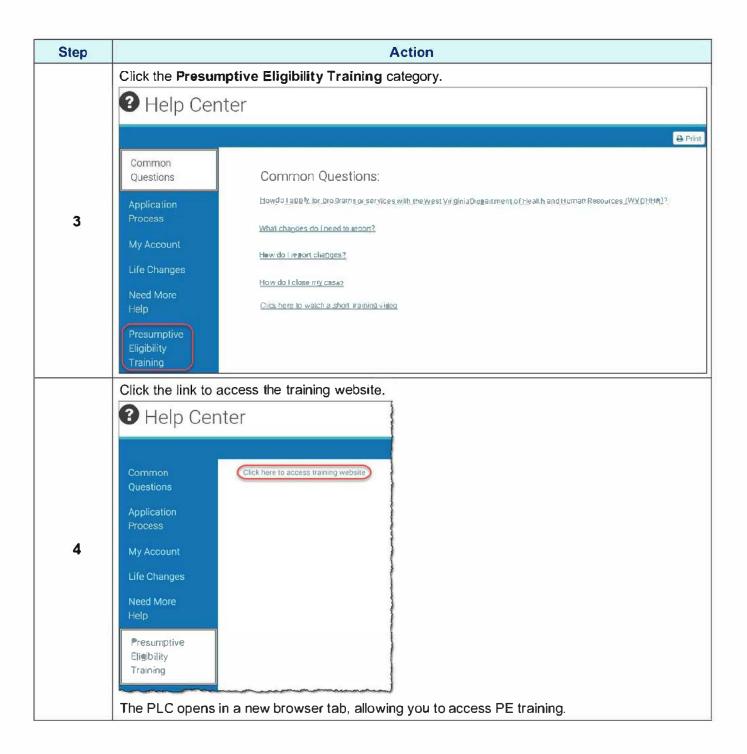
Applications			
Section	Applications created in the WV PATH Public Portal are searchable by yourself and other PE users using the Applications category. Follow these instructions to search for an application created by you or another PE in the WV PATH Public Portal.		
Step	Action		
1	Sign into the WV PATH Public Portal.		







Help and Training			
Section	The Help Center contains system help regarding the use of the WV PATH Public Portal, as well as a link to required PE training in the PATH Learning Community (PLC). PE Trainees must complete this training before accessing the PE Dashboard.		
Step	Action		
1	Sign in to the WV PATH Public Portal.		
2	Click Help Center in the banner.		



Terminology & Role(s)			
Terminology	See Frequently Used Acronyms and Terms for a list of terms used throughout this document.		
Role(s)	Public Portal workers		

Revision History				
Date Published	Section	Revision Details	Writer	Approver
12/05/2023	All	Initial Release	Scherer	Optum BA Team
6/14/2024	Completing a Presumptive Eligibility Determination	Added steps for accessing and printing a PE Denial letter.	C Soltis	Optum BA Team

Records Submission Packages - View All

WV - Submission Package - WV2022MS0002O - (WV-23-0001) -Eligibility

VIEW PRINT PREVIEW

Summary Reviewable Units Versions RAI Correspondence Log **Analyst Notes** Review Assessment Report Approval Letter Transaction Logs News Related Actions ← All Reviewable Units ← Adult Group - Presumptive Eligibility | Individuals Needing Treatment for Breast or Cervical Cancer - Presumptive Eligibility →

View Compare Doc

Medicaid State Plan Eligibility

Presumptive Eligibility

Former Foster Care Children - Presumptive Eligibility

MEDICAID | Medicaid State Plan | Eligibility | WV2022MS00020 | WV-23-0001

The state covers former foster care children when determined presumptively eligible by a qualified entity.

🚣 Spell Check Instructions | 😥 Request System Help

CMS-10434 GMR 0938-1188

Not Started in Progress Complete

Package Header

Package ID WV2022MS00020 SPA ID WV-23-001 Submission Type Official Initial Submission Date 3/8/2023 Approval Date 12/19/2024 Effective Date 5/12/2023 Superseded SPA ID WV-15-0006

System Derived

View Implementation Guide

VIEW ALL RESPONSES

A. Presumptive Eligibility Period

Collapse

- 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 filled 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 twelvemonth period, starting with the effective date of the initial presumptive eligibility
 - @ e. Other reasonable limitation:

B. Application for Presumptive Eligibility

Collapse

- 1. The state uses a standardized screening process for determining presumptive eligibility.
- 📃 2. The state uses the single streamlined paper and/or online application for Medicaid and Presumptive Eligibility, approved by CMS. A copy of the single streamlined paper and/or online application with questions necessary for a PE determination highlighted or denoted is attached.
 - a. Paper A copy of the application form is included.

- b. Online A copy of the application form is included.
- 🗏 3. The state uses a separate paper application form for presumptive eligibility, approved by CMS, A copy of the application form is included.
- 4. The stateuses an online portal or electronic screening tool for presumptive eligibility approved by CMS, Screenshots of the tool included.

Name	Date Created	
V/V SPA 23 0001 Presumptive Eligiblity Application screenshots	9/26/2024 5:24 PM EDT	

5. Describe the presumptive eligibility screening process:

Authorized presumptive eligibility (PE) employees will gather data from the individual using the presumptive eligibility determination portion of the on-line system. The employee may obtain information relating to the individual such as name, address, phone number, and social security number from other facility personnel such as registrars; however, this information must be confirmed by the individual or another person with reasonable knowledge of the individual's status. The individual or another person with reasonable knowledge of the individual's statusseeking PE must attest to the information provided on the application. Authorized employees may not request any documentation or require verification of information provided. Applicants are allowed only one PE period per 12-month period or, if pregnant, per pregnancy, In the absence of an automated system that can verify the applicant's past use of presumptive eligibility, the facility will rely on self-attestation.

The authorized employee must make the final determination of whether or not the individual may be eligible for Medicaid. This decision is made based on the criteria in section 400.8.3 of the policy manual and the results of the online system. Once a final decision is made by the authorized worker he/she will provide the patient with elther a temporary Medicaid card or a document stating why he/she was not determined presumptively eligible.

The Authorized Employee must assist the applicant or his authorized representative in completing the single streamlined application (SLA) for Medicaid and forward the application to the Department,

C. Presumptive Eligibility Determination

Collapse

The presumptive eligibility determination is based on the following factors:

- 1. The individual must meet the categorical requirements of 42 CFR 435,150.
- 2. State residency
- 3. Citizenship, status as a national, or satisfactory immigration status

D. Qualified Entities

Collapse

- 1. 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.
- 2. The following qualified entities are used to determine presumptive eligibility for this eligibility group:
- Other entity the agency determines is capable of making presumptive eligibility determinations

Name of entity	Description
First Choice Services	First Choice Services - ACA Navigators and HELP4WW Helpline Specialists First Choice Services operates several programs and helplines with the common goal of promoting well-being and facilitating access to behavioral health and social services. First Choice began as a collaborative effort among West Virginia's comprehensive behavioral health care centers. First Choice also operates the ACA Navigator program which is funded by a grant from the Center for Medicare and Medicaid Services. ACA Navigators provides free health coverage enrollment assistance to people who are uninsured. Certified Navigators help consumers enroll in qualified health plans through the Health Insurance Marketplace or, if eligible, Medicaid, HELP4WW offers a 24/7 call, chat, and text line that provides immediate help for any West Virginian struggling with an addiction or mental health Issue. The helpline staff offers confidential support and resource referrals, including self-help groups, out-patient counseling, medication-assisted
Medicaid enrolled pharmacies	treatment, psychiatric care, emergency care, and residential treatment. Licensed pharmacists and pharmacy technicians employed by Medicaid enrolled pharmacies.

Name of entity	Description
Free Clinics	Free and Charitable Clinics are safety-net health care organizations that utilize a volunteer/staff model to provide a range of medical, dental, pharmacy, vision and/or behavioral health services to economically disadvantaged Individuals. Such clinics are 501(c)(3) tax-exempt organizations, or operate as a program component or affiliate of a 501(c)(3) organization. Entities that otherwise meet the above definition, but charge a nominal/sliding fee to patients, may still be considered Free or Charitable Clinics provided essential services are delivered regardless of the patient's ability to pay. Free or charitable clinics restrict eligibility for their services to individuals who are uninsured, underinsured and/or have limited or no access to primary, specialty or prescription health care.
Federally Q ualified Health Centers	Federally Qualified Health Centers (FQHC) receiving a grant under Section 33® of the Public Health Service (PHS) Act; or, receiving funding from a grant under a contract with the recipient of a grant and meets the requirements to receive a grant under Section 33® of the PHS Act; or, is not receiving a grant under Section 33® of the PHS Act; or, is not receiving a grant under Section 33® of the PHS Act but is determined by the Secretary of the Department of Health & Human Services (HHS) to meet the requirements for receiving such a grant (i.e., qualifies as a FQHC look-alike) based on the recommendation of the Health Resources and Services Administration; or, was treated by the Secretary of the Department of HHS for purposes of Medicare Part Bas a comprehensive Federally funded health center as of January 1, 1990; or is operating as an outpatient health program or facility of a tribe or tribal organization under the Indian Seif-Determination Act or as an urban Indian organization receiving funds under Title V of the Indian Health Care Improvement Act as of October 1, 1991.
Comprehensive community mental health centers	Comprehensive community mental health centers as identified in West Virginia Code §27-2A-1. The Department of Health and Human Resources is authorized and directed to establish, maintain and operate comprehensive community mental health centers at locations within the state that are determined by the secretary in accordance with the state's comprehensive mental health plan.
Rural Health Clinics (RHC)	Rural Health Clinics are defined in section 1861(aa)(2) of the Social Security Act (the Act) as facilities that are engaged primarily in providing services that are typically furnished in an outpatient clinic. RHC services are defined as: • Physician services; • Services and supplies furnished incident to a physician's services; • Nurse Practitioner (NP), Physician Assistant (PA), certified nurse midwife (CNM), clinical psychologist (CP), and clinical social worker (CSW) services; and • Services and supplies furnished incident to an NP, PA, CNM, CP, or CSW services. To be eligible for certification as a RHC, a clinic must be located in a non-urbanized area, as determined by the U.S. Census @ureau, and in an area designated or certified within the previous 4 years by the Secretary, Health and Human Services (HHS), in any one of the four types of shortage area designations that are accepted for RHC certification. RHCs can be either independent or provider-based. Independent RHCs are stand-alone or freestanding clinics and submit claims to a Medicare Administrative Contractor (A/B MAC). The statutory requirements for RHCs arefound in section 1861(aa)(2) of the Act. Many of the regulations pertaining to RHCs can be found at 42 CFR 491 Subpart A and following,
Local Health Departments	West Virginia's 55 counties are served by 49 local boards of health charged with protecting the health and safety of the citizens of West Virginia. Local boards of health provide

Name of entity	Description
	services through local health department slocated in all 55 counties including communicable and reportable disease prevention and control.

- 3. 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.
- 4. A copy of the training materials has been uploaded for review during the submission process.

Name	Date Created	
SL_Presumptive Eligibility (PE) Worker - MR9.docx	9/26/2024 5:25 PM EDT	Į
PP_lobAid- Presumptive_Eligibility_Worker	9/26/2024 5:25 PM EDT	Į

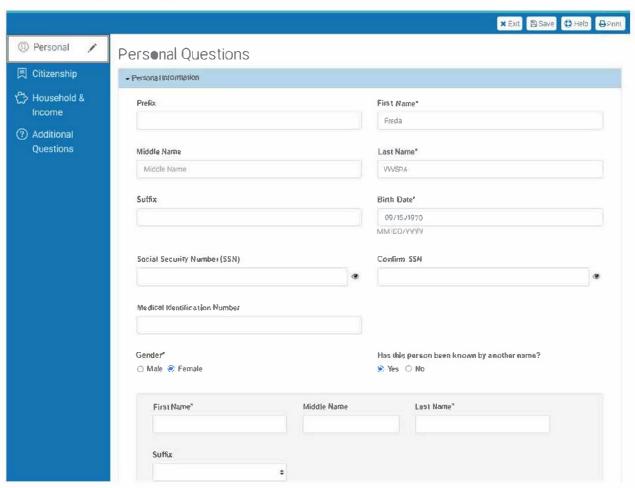
E. Additional Information (optional)

Collapse

PRA Disclosure Statement, Centers for Medicare & Medicard Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 43012); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for Improving this form, please write to: CMS, 7500 Security Boulevard, Atin: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

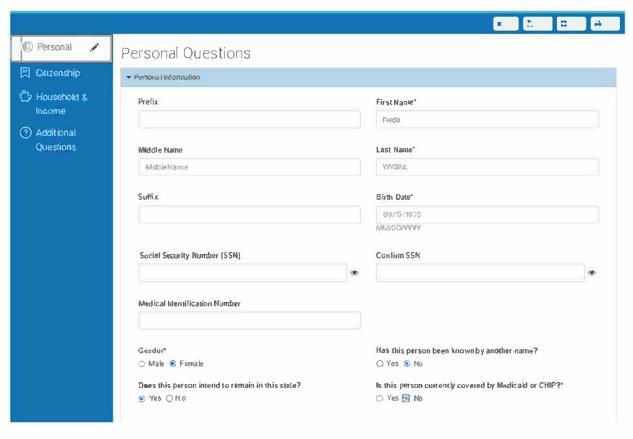


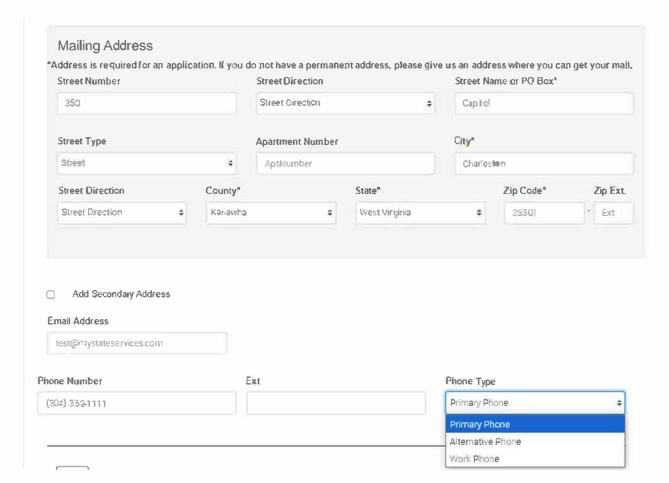
📜 Presumptive Eligibility

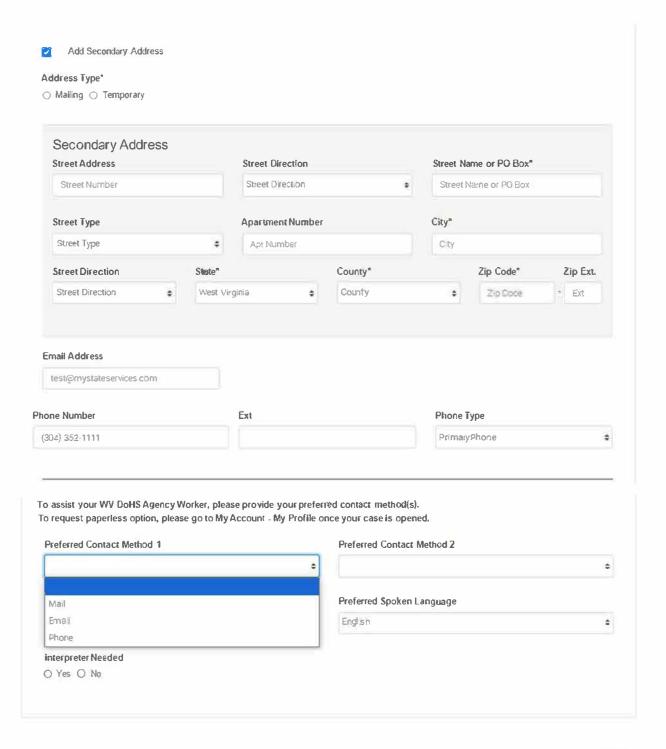




Presumptive Eligibility







To assist your WV DoHS Agency Worker, please provide your preferred contact method(s).

To request paperless option, please go to My Account - My Profile once your case is opened.

Preferred Contact Method 2

Preferred Written Language

English

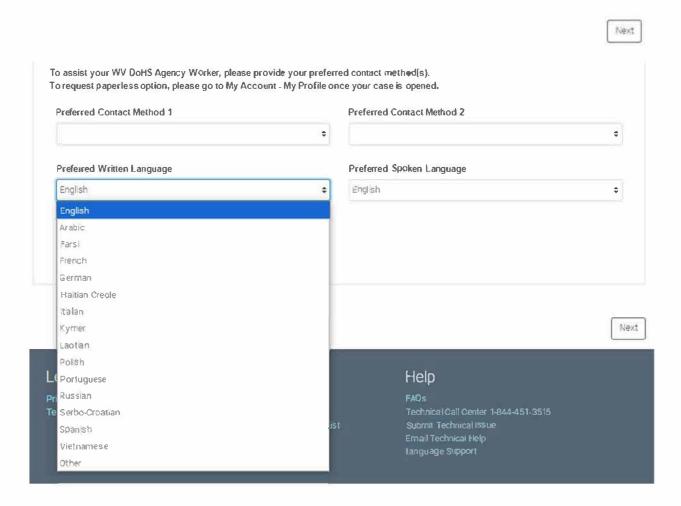
Mail

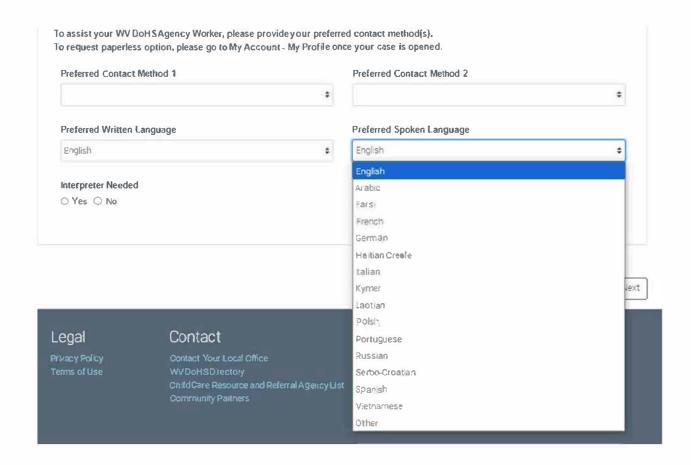
Email

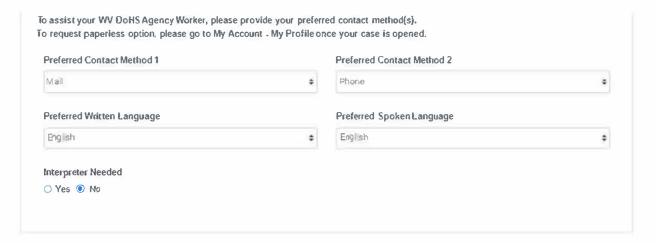
Phone

Interpreter Needed

O Yes O No







Nex



Presumptive Eligibility



West Virginia Medicaid Eligibility for Qualified Non-Citizens

Determining Satisfactory Immigration Status

imnigrants who are "qualified non-chizens" are generally eligible for Medicaid coveraged they neetimorne and residency requirements. To be delismined presumptively eligible (PE) for Medicaid, an individual must attest to being a United States citizen or a "qualified non-citizen" with salisfaciory immigration status

The first step is to identify the non-climents immigration status to determine if they are a "qualified non-witzen" as defined below. Most taan te chiefled non-witzen strengted States strengted strengted strengted occument Example documents are provided below. NOTE: Documentation is not required for a PE determination, Many qualified non-căizens (such as many Lawful Permanent Residents (LPRs) orgreen card holders) Lawe a Syear wairing period. This means they must wait Syears after receiviêng qualified "imnigration status before they can get Medicaid coverage. Thare are exceptions, for example, refugees, explees, or LPRs who used to be refugees or asylees don't have to wait 5 years.

A. WITHOUT A FIVE-YEAR WAITING PERIOD

- 1. Critisens of the Marshall Islands, Micronesia, and Patau who are fiving in one of the U.S. states or territories (referred to as Compact of Free Association or C@FArrigiants).

 2. Lav/All Petinanent Residents (it e, green-card holders or LPRs who adjased to LPR from an immigration status that is exempt from the
- 2. Lavviul Pelnaneni Residenie (i.e., green-card holders or LPRs who adjissed to LPR from an immigration status that is exempl from the 5-year bar fisted attriumbers 3.10, below)

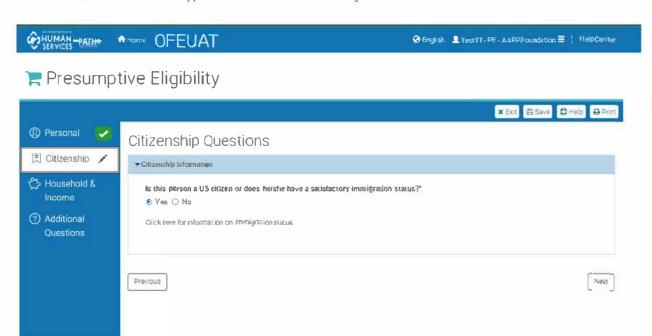
 - 3. Rekigee admitted to the U.S. under section 207 of the INA 4. Granted asytum under section 208 of the INA

- 5, Withholding of deportation or remayal under section 243(h) or 241(b)(3) of the INA 6. Cuban or Haliban entrant as defined is section 501(e) of the Retrigee Education Assistance Aut of 1980 7. Amerasian immigrant admitted pursuant to section 584 of Public Law (Pub. L. No.) 100-202 (1211987), as amended by Pub. L. No., 100-
 - 461 (10/1988)
 - 8, Applicants for a victim of trafficking/T-visa or victim of trafficking with a pervification or eligibity letter from the Office of Refugee
- 9, Iraqir'Afghara spenial ihranigrani visə holder 10. Member of a federality recognized Indian inflie or American Indian bem in Canada
- B. WITHA FIVE-YEAR WALTING PERIOD (from the date they received the qualifying status)
 11. Lawful Penthaneni Residents (i.e., green-card holders on LPRs), unless adjusted from a status that is exemption the 5-year walling
- 11. Levinuir remainserent sections of the control o

- 14. Conditional entrants granted status prior to April 1, 1980 (Note: because of the grant date requirement, these non-citizens will already have met the 5-year waiting period)
- 15. Exception: qualified non-citizens (11-15) are exempt from the 5-year wailing period if they are:
 - a. Veterans who received an honorable discharge, or
 - b:A military service member on active duty in the armed forces of the United States (other than active duty for training i.e., Reserves), or
 - c. A spouse or unmarried dependent child of a veteran or active duty service member as described above, or
 - d Have lived in the US since 1996
 - e. An American Indian born in Canada to whom the provisions of 8 U.S.C. 1359 apply
 - f. A member of an Indian wibe, as defined in 25 U.S.C. 450b(e)
 - g Non-citizens receiving SSI

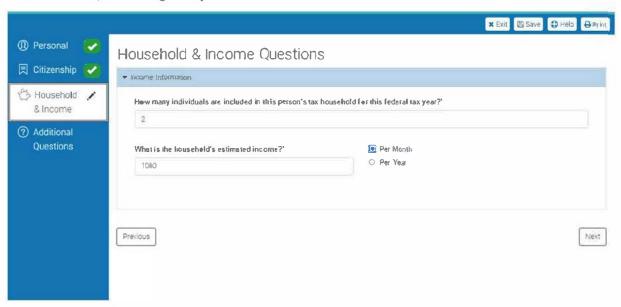
C. LAWFULLY PRESENT PREGNANT WOMEN AND CHILDREN UNDER AGE 19 The following individuals are considered lawfully present and eligible for PE. if otherwise eligible

- a. All qualified non-citizens (see above)
- b A non-otizen in valid nonimmigrant status (for example, student visas, worker visas, etc.)
- c, A non-citizen who has been paroled into the United States, for less than 1 year, except for a non-citizen paroled for prosecution, deferred inspection or pending removal proceedings
- d A noncitizen who belongs to one of the following classes!
 - i. Non-citizens currently in temporary resident status
 - ii. Noncitizens currently under Temporary Protected Status (TPS) and pending applicants for TPS who have been granted employment authorization.
 - iii. Non-itizens who have been granted employment authorization;
 - iv. Family Unity beneficiaries
 - y. Non-citizens currently under Deferred Enforced Departure (DED) pursuant to a decision made by the President
 - vi. Non-citizens currently in deferred action status (note that this does not include individuals with DACA granted under the June 2012 DHS Policy [Deferred Action for Childhood Arrivals] status)
 - vii. Granted an administrative stay of removal
 - viii. Non-citizens whose visa petition has been approved and who have a pending application for adjustment of status;
- e. A pending applicant for asylum or for withholding of removal or under the Convention Against Torture who has been granted employment authorization, or is an applicant under the age of 14 and has had an application pending for at least 180 days
- f: A non-eitizen who has been granted withholding of removal under the Convention Against Torture
- g. A child who has a pending application for Special Immigrant Juvenile status
- h A non-eitizen who is lawfully present in American Samoa under the immigration laws of American Samoa

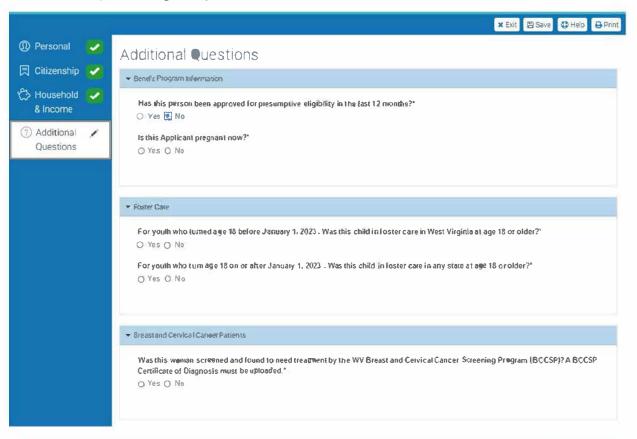


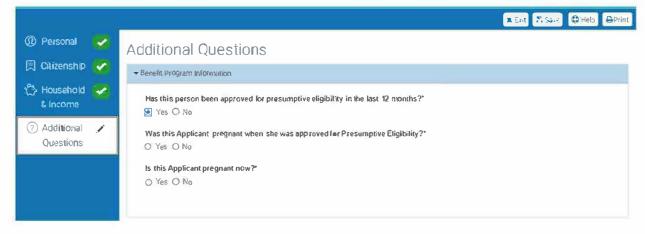


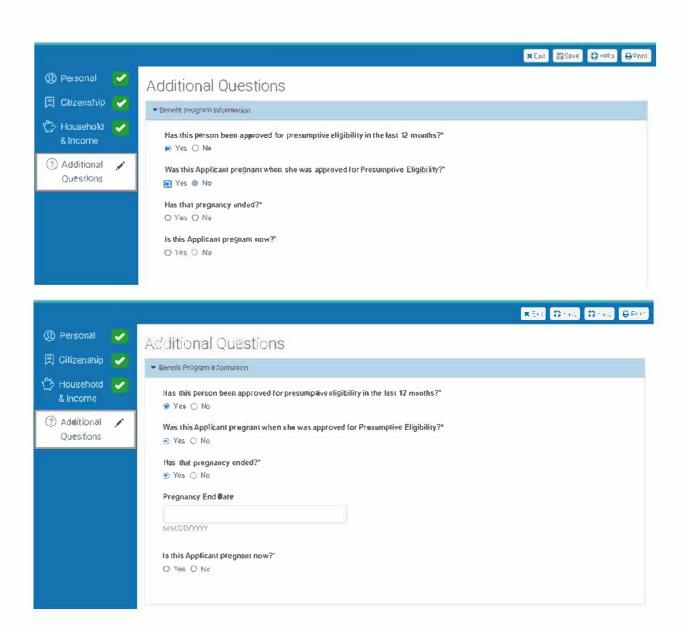
📜 Presumptive Eligibility

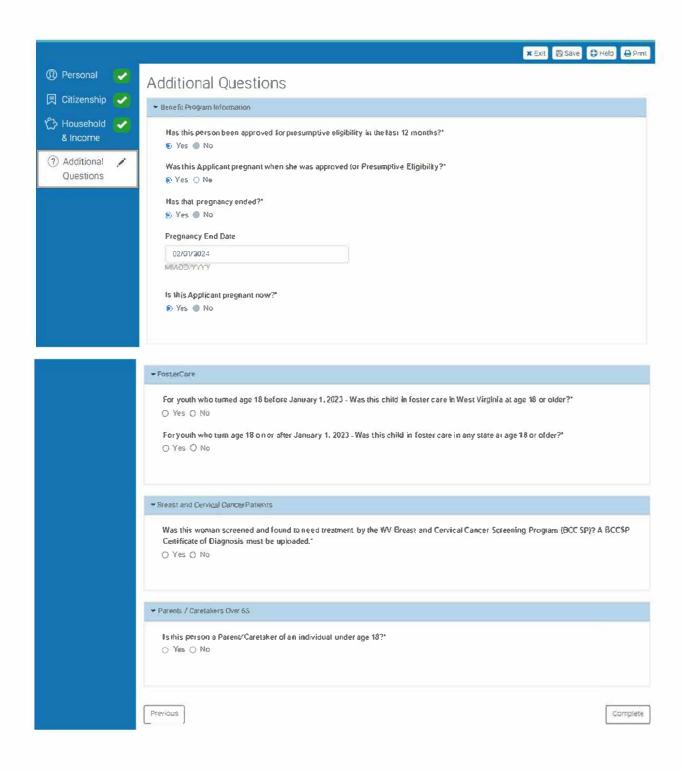


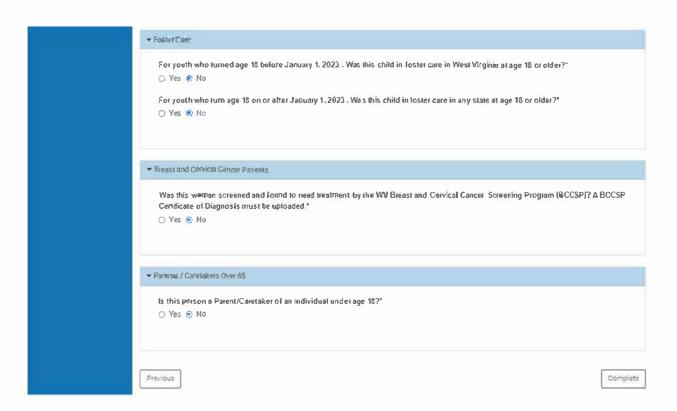
📜 Presumptive Eligibility

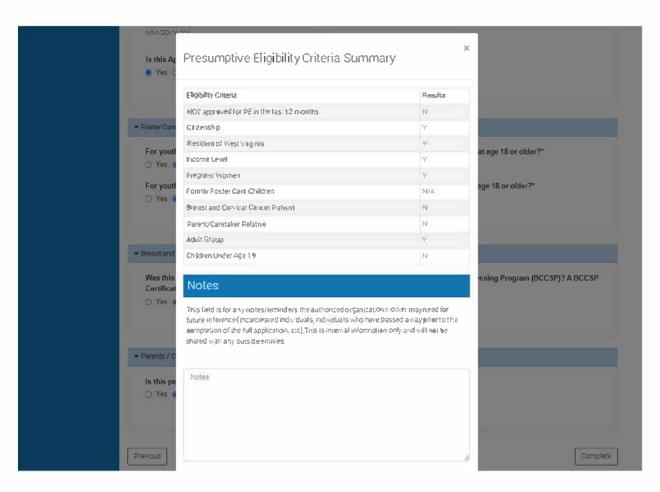


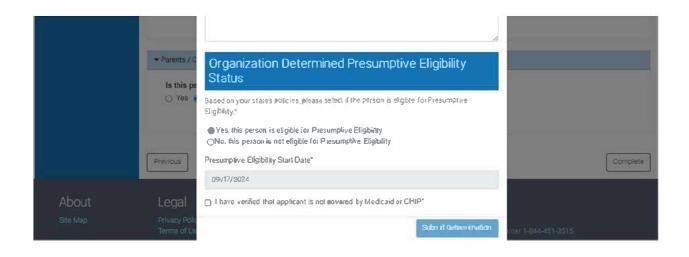


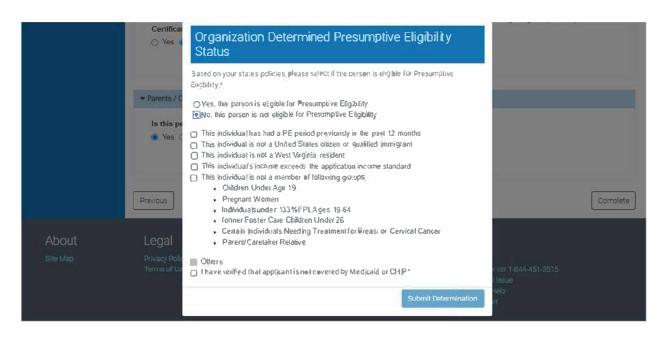


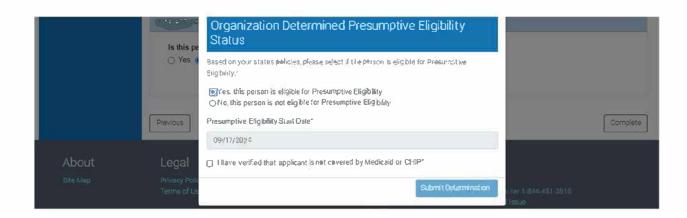


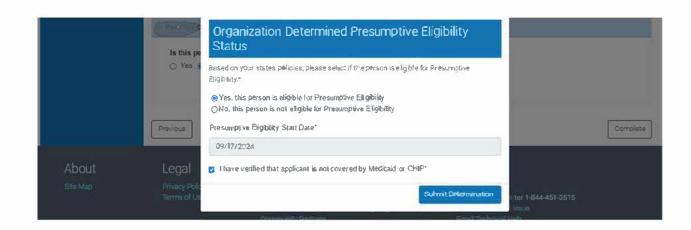












Click the following link to review the eLearning as the learner would:

https://360.articulate.com/review/content/bd40068a-7e45-47db-9616-43d68c999507/review

Presumptive Eligibility (PE) Worker

1. Welcome

1.1 Presumptive Eligibility (PE)



Notes:

Welcome to Presumptive Eligibility (PE) Worker training. This video provides self-paced training for your role as a PE Worker completing Presumptive Eligibility Determinations in the West Virginia Department of Human Services (WV DoHS) People's Access to Help (WV PATH) Public Portal.

Click Here to begin.

1.2 Key Learning Points



Notes:

Click each number to learn about what will be covered in this video. After completing these topics, you will be presented with a Knowledge Check to confirm your learning. A passing score of 80% is required for completion of this training.

Key Learning Point 1:

Learn how to complete a Presumptive Eligibility Determination in WV PATH and print a Temporary Medical Card.

Key Learning Point 2:

Learn how to complete a Full Medicaid application.

Key Learning Point 3:

Learn about other features available in WV PATH.

2. Complete PE Determination

2.1 Sign In



Notes:

Click Sign In at the top of the screen to get started.

2.2 Sign In



Notes:

Here is where you will enter your Optum GovID and Password to sign in to WV PATH. Click **SIGN IN**.

2.3 Dashboard



Notes:

The Dashboard displays. Your first name, your role as a PE, and your Organization's Name display at the top of the screen. The Dashboard is the Landing Page for your work as a PE in WV PATH. From here, you can quickly navigate to what you need, and efficiently assist your applicants.

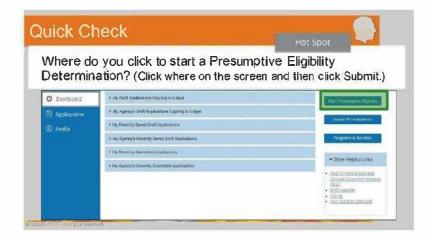
Details about each area of the Dashboard are included in *Job Aid: Presumptive Eligibility Worker*, available in the Resources menu above. Take a moment to open the Job Aid and have it available as you complete this training.

Follow along in the Job Aid as we walk through completing a Presumptive Eligibility Determination in WV PATH.

Click Next.

2.4 Where do you click?

(Hotspot, 10 points, 1 attempt permitted)



Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. To start a Presumptive Eligibility Determination, click the Start Presumptive Eligibility button.

2.5 Personal

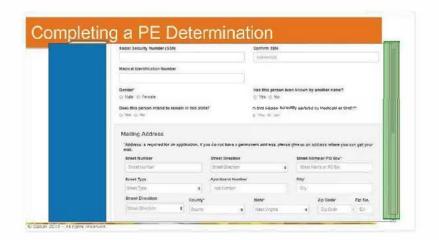


Notes:

After clicking the Start Presumptive Eligibility button, the first page of the Presumptive Eligibility Determination application displays. Information is organized into four categories on the left Navigation bar. This is the Personal category.

Click the Scroll bar on the screen to scroll down the page and review the questions.

2.6 Personal

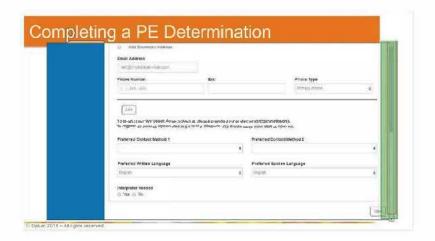


Notes:

Demographic information is entered in the Personal category.

Click the Scroll bar on the screen to continue scrolling down the page.

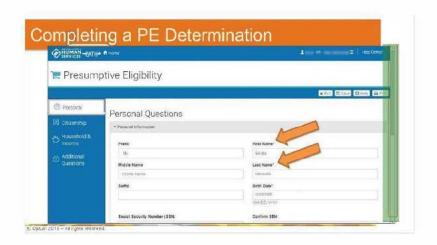
2.7 Personal



Notes:

Click the **Scroll** bar now to return to the top of the page.

2.8 Personal

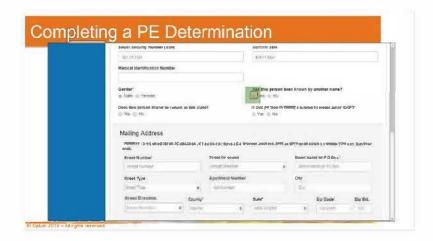


Notes:

Watch as fields in this example are completed. Notice that some fields have an asterisk ("*") indicating that they are mandatory. Mandatory fields must be completed in order to move forward in the application.

Click the Scroll bar to scroll down the page.

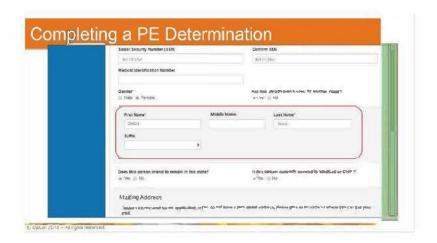
2.9 Personal



Notes:

Click Yes the applicant has been known by another name on the screen.

2.10 Personal



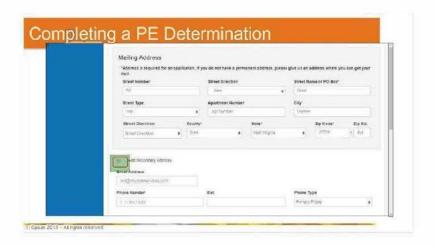
Notes:

A new area displays to enter the additional name. You will see this from time to time in WV PATH. The information being displayed will change based on your selection.

You continue to enter other demographic information.

Click the **Scroll bar** to continue scrolling down the page.

2.11 Personal

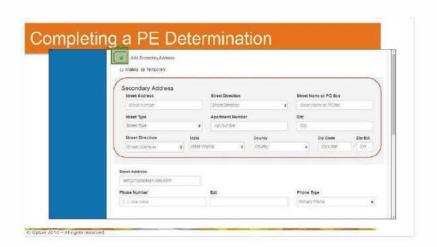


Notes:

You continue to enter the applicant's address. If the applicant has an additional address, click the **Add Secondary Address** check box.

Click the Add Secondary Address check box on the screen.

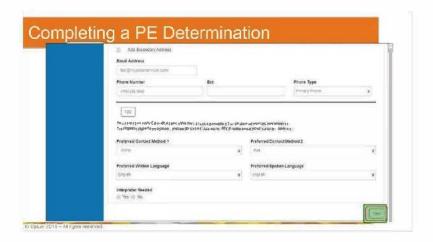
2.12 Personal



Notes:

Additional address fields display. In this case, we don't need to enter another address, so click the **Add Secondary Address** check box again to deselect it.

2.13 Personal

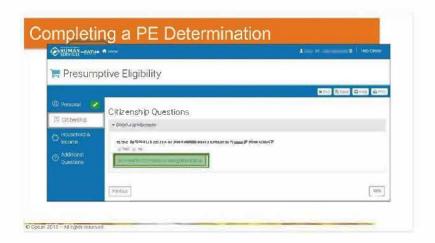


Notes:

If the applicant doesn't have an email address, you can leave that field blank. Enter the applicant's phone number and select the Preferred Contact Method, preferred language, and whether an interpreter is needed.

That completes the **Personal** category.

2.14 Citizenship

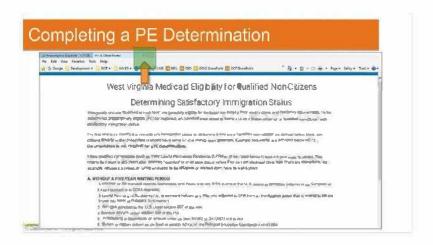


Notes:

The **Citizenship** category is next. If you require clarification of the immigration status definitions, you can click the link on the page to display further information.

Go ahead and click the link for information on immigration status.

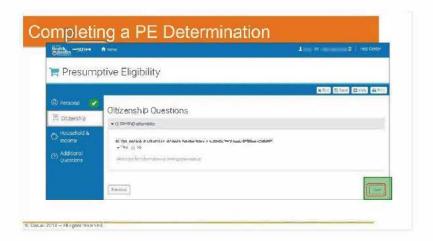
2.15 Citizenship – Looks okay!



Notes:

Details regarding satisfying immigration status requirements display. Click the **X** on the browser tab to close it and return to the application.

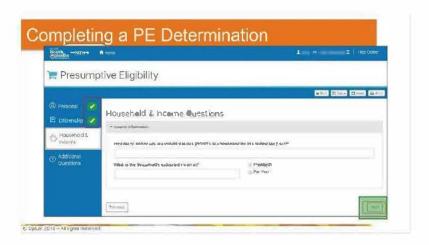
2.16 Citizenship



Notes:

The applicant is a US citizen. Click **Next** to continue through the application.

2.17 Household & Income



Notes:

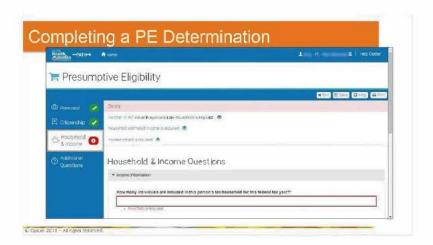
Notice green checkmarks display next to the Personal and Citizenship categories, indicating that they are complete. If you need to revisit a category, you can select it on the Navigation bar.

You are now viewing the **Household & Income** category. There are two mandatory questions to complete. You need to complete the mandatory information before you can

move to the next category.

Click the **Next** button and see what happens if you *don't* complete mandatory information.

2.18 Household & Income

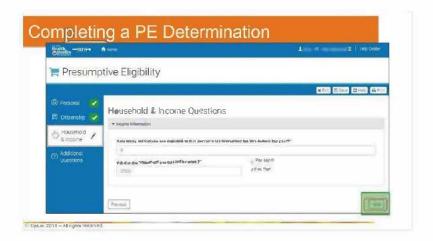


Notes:

WV PATH displays a red alert icon next to the category on the Navigation bar, and red text explains what is missing. The incomplete fields are highlighted red as well.

Click Next.

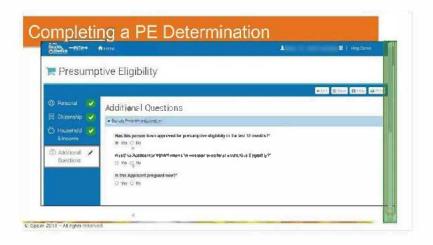
2.19 Household & Income



Notes:

Complete these fields and continue. Note that the **Household & Income** category shows a *pencil icon*, because that's the category you are working in.

2.20 Additional Questions

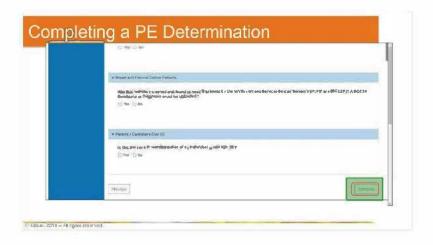


Notes:

The last category is **Additional Questions**. This category contains general questions that are needed to determine Presumptive Eligibility.

Click the **Scroll bar** on the screen to see the rest of the questions.

2.21 Additional Questions

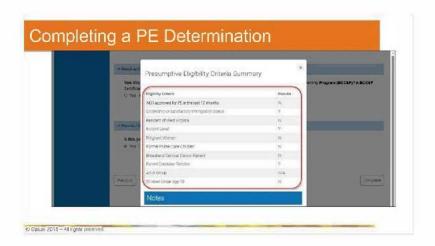


Notes:

All questions have been answered.

Click the Complete button on the screen.

2.22 Submit Determination

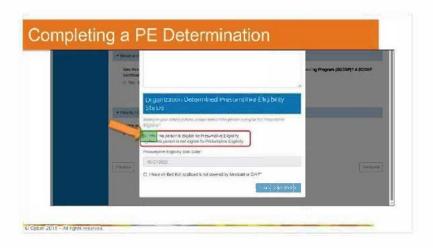


Notes:

The results of each Eligibility Criteria display at the top of the window for your review.

Click Next.

2.23 Yes Determination

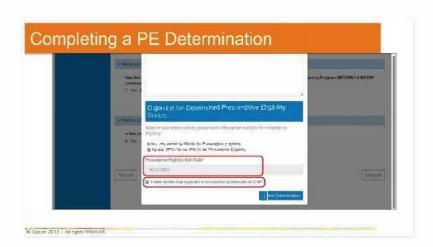


Notes:

After reviewing the results, select "Yes" or "No" to indicate whether the applicant is eligible for Presumptive Eligibility.

Click Yes to continue.

2.24 Yes Determination Date



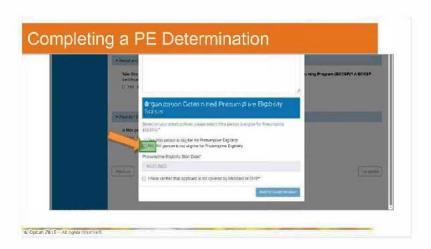
Notes:

Once you determine the applicant to be presumptively eligible, enter today's date to

begin coverage. Then select the check box to indicate that you verified the applicant is *not* covered by Medicaid or CHIP.

Click **Next** to learn the steps to take when you determine the applicant is not eligible.

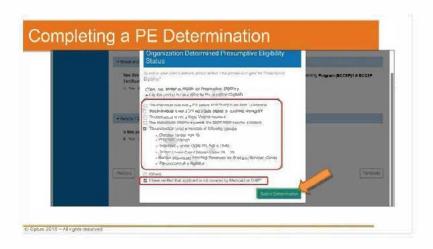
2.25 Submit Determination



Notes:

Select No to indicate the applicant is not eligible for Presumptive Eligibility.

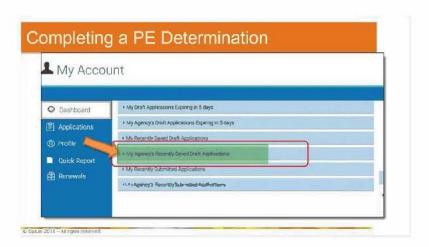
2.26 No Determination



When "No" is selected, one or more reasons must be chosen. You must also select the check box to indicate that you verified the applicant is *not* covered by Medicaid or CHIP.

Click the Submit Determination button to continue.

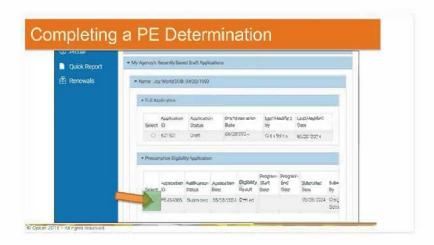
2.27 Printing Denial



Notes:

When a presumptive eligibility application is denied, you must print the eligibility notice, including the reason for the denial, and provide it to the applicant. To do this, click the My Agency's Recently Saved Draft Applications accordion.

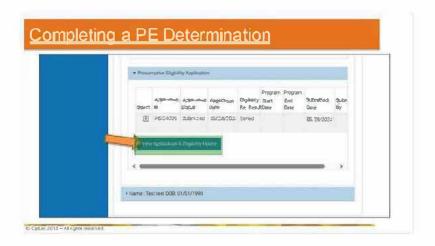
2.28 Printing Denial



Notes:

Click the radio button for the denied application in the Presumptive Eligibility Application sub-accordion.

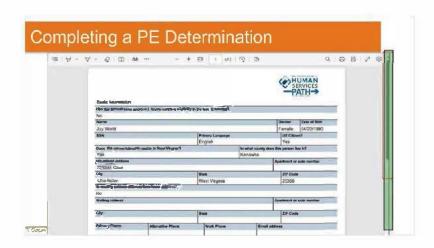
2.29 Printing Denial



Notes:

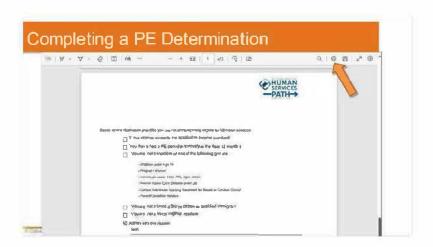
Click the View Application & Eligibility Notice button.

2.30 Printing Denial



A PDF of the selected application displays in a new browser window. Click the **Scroll** bar to scroll down to the second page to view the denial.

2.31 Printing Denial



Notes:

This page of the denial must be printed and provided to the customer. Click Next to continue.

3. Printing Temporary Medical Card

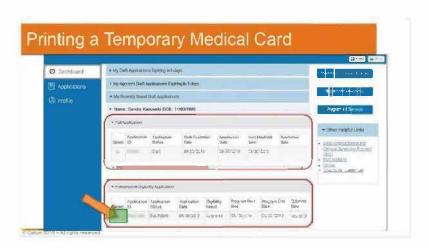
3.1 Dashboard



Notes:

The application is submitted and you are returned to the Dashboard. Now you need to print the applicant's Temporary Medical Card and complete a Full Medicaid Application. To do this, click the **My Recently Saved Draft Applications** accordion.

3.2 My Recently Submitted Applications



Notes:

This is the Presumptive Eligibility Application that you just submitted. Notice that WV PATH started a Full Application for you. We'll come back to this in a bit.

Click the radio button to select the **Presumptive Eligibility Application** you want to print.

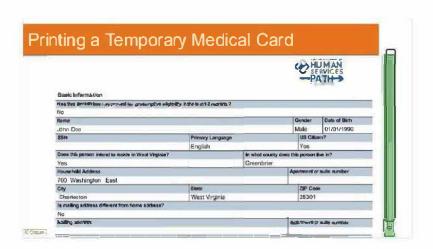
3.3 View Application & Eligibility Notice



Notes:

Then click the View Application & Eligibility Notice button.

3.4 Application & Eligibility Notice



Notes:

The submitted application displays. Click the Scroll bar to scroll down the page.

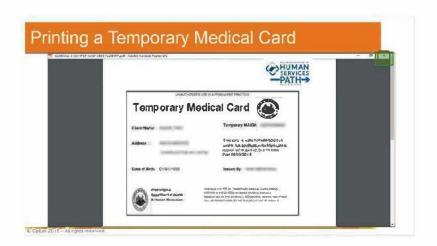
3.5 Application & Eligibility Notice



Notes:

Click the Scroll bar to continue.

3.6 Temporary Medical Card



Here is the applicant's Temporary Medical Card for you to print.

Click the X on the screen to close the window.

3.7 My Recently Submitted Applications



Notes:

The applicant was presumptively eligible, so next, you need to complete a Full Medicaid application. Click the radio button to select the Full Application.

4. Full Application

4.1 Dashboard



Notes:

Then click the Edit Application button.

4.2 Start

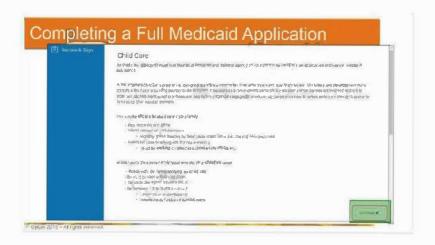


Notes:

This is the first page of the application. Notice the categories listed on the Navigation bar. WV PATH will lead you through completing the categories that are necessary. First, you need to review some information about WV PATH.

Click the Scroll bar to move down the screen.

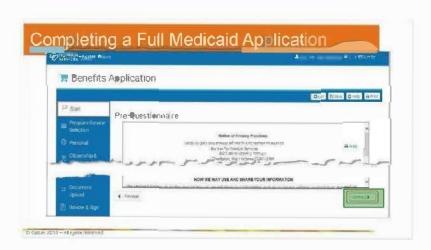
4.3 Start



Notes:

Click the Continue button.

4.4 Start



Notes:

When completing an application, review DHHR's Notice of Privacy Practices with the applicant then click the **Continue** button.

4.5 Start



Notes:

The **Start** category is a pre-questionnaire containing preliminary questions. Because you are currently signed in as a PE, WV PATH selects "I am completing this application on someone's behalf" for the question "Who is completing this application?" and indicates that you are An Authorized Representative.

Click the Scroll bar to scroll down the page.

4.6 Start



This is where you will enter *your* information when completing an application. Click the **Continue** button to continue.

4.7 Start



Notes:

WV PATH selects the Health Care program for you, because you are completing a Full Medicaid application, and only displays the pertinent categories of information on the Navigation bar. Continue through the application.

4.8 Start



Here you enter the customer's or client's information. If needed, you can click the Add Household Member button to add other household members to the application then continue.

4.9 Start



Notes:

For this example, you are completing the application at a Hospital or Doctor's Office so you select that option then click **Continue**.

4.10 Start



Indicate if the applicant has a physical, mental or emotional health condition limiting his or her activities then continue.

4.11 Start



Notes:

Select the applicant as the one needing assistance and continue.

4.12 Start



Notes:

If the applicant is female, you are asked if she is pregnant, the expected due date, expected number of babies, and when she learned she was pregnant.

4.13 Start



Notes:

If anyone in the household has unpaid medical bills in the past three months, indicate which member and how many months of expenses are unpaid. Click **Next** on the screen.

4.14 Personal



Notes:

That completes the **Start** category. Notice a green checkmark displays next to it on the Navigation bar, indicating that it is complete. You are now in the **Personal** category. At the top of the page, WV PATH lists the information you will need to complete this category. If you don't have all the required information available, you can click Save and

return to the application when ready.

In the **Personal** category, you enter contact information for each household member, as well as the preferred contact method, preferred language, whether the applicant requires an interpreter, and each member's ethnicity.

Click the Scroll bar to scroll to the bottom of the page.

4.15 Personal



Notes:

Each member of the household has an accordion at the bottom of the page. You need to complete mandatory information for each member of the household before moving to the next category. Click the **Next** button to continue.

4.16 Citizenship & Residency



Notes:

This is the Citizenship & Residency category. Click the Scroll bar to scroll to the bottom of the page.

4.17 Citizenship & Residency



Notes:

In the **Citizenship & Residency** category, you indicate if the applicant is a U.S. Citizen, U.S. National, or naturalized citizen. Then, enter their Social Security Number.

4.18 Health

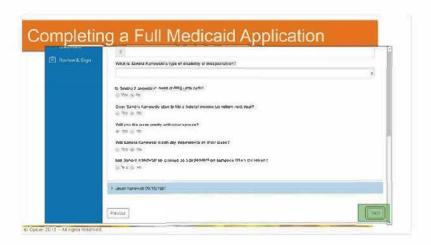


Notes:

In the **Health** category, you enter current health insurance coverage, income, and any in-home care a household member might require.

Click the Scroll bar to scroll down the page.

4.19 Health



Notes:

WV PATH also displays questions regarding the applicant's tax filing status.

4.20 Family & Household



Notes:

In the Family & Household category, enter the applicant's education and household expense information.

Click the Scroll bar to scroll down the page.

4.21 Family & Household



Notes:

Click Next to continue.

4.22 Income & Resources

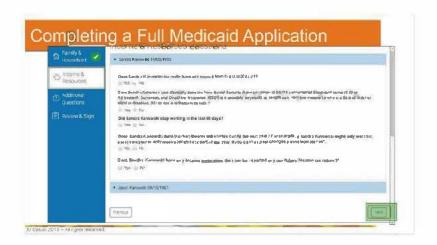


Notes:

In the Income & Resources category, enter the employment and income information.

Click the Scroll bar to scroll down the page.

4.23 Income & Resources



Notes:

Click Next to continue.

4.24 Additional Questions



Notes:

This is the **Additional Questions** category. Answer general questions that don't display elsewhere in this category. Questions will be answered for each household member.

4.25 Review & Sign

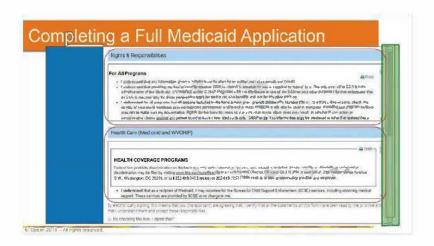


Notes:

The last category is to review and sign the application. Here, you can click on each accordion and review what you entered. If a change is needed, click the category on the left, make the change and return to Review & Sign.

Click the **Scrol**l bar to scroll down the page.

4.26 Review & Sign

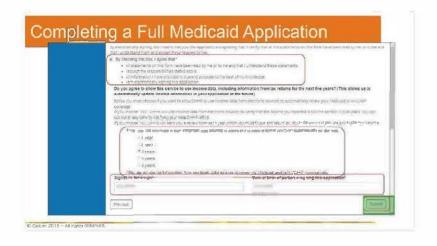


Notes:

Rights & Responsibilities are displayed for review, as well as requirements for Health Care programs.

Click the Scroll bar to scroll down the page.

4.27 Review & Sign



Notes:

After reviewing the Rights & Responsibilities, indicate that the applicant has reviewed them. Select whether he or she consents to DHHR using the income information included in their tax returns. If "Yes" is selected, indicate for how many years. Then enter the applicant's name in the e-sign field, enter his or her date of birth, and click **Submit**.

4.28 Review & Sign

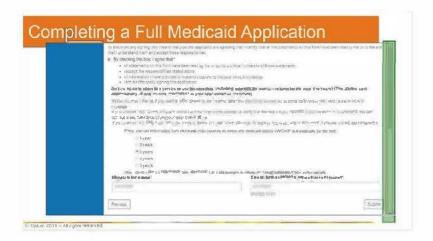


Notes:

A window displays, stating the application is being processed.

Click the **X** to close the window and return to the application.

4.29 Review & Sign



Notes:

Click the Scroll bar to scroll to the top of the page.

4.30 Review & Sign



Notes:

That is how you complete and submit a Full Medicaid application. Click **Exit** to close the application and return to the Dashboard.

5. Searching for Applications

5.1 Dashboard



Notes:

Before we move on to the next topic, take a moment to click on your name, role, and organization at the top of the screen.

5.2 Dashboard



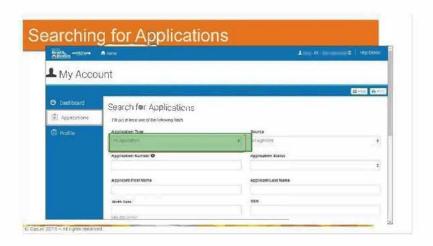
Notes:

A short menu displays here. Let's review the options available. If you perform more than one function in WV PATH such as a PE and a PE Admin, you will use Switch Role to move between them. See *Job Aid: Managing Multiple Roles* under Resources for further

information. My Account is another way to return to your Dashboard from the WV PATH Landing Page. You will select Sign Out here to leave WV PATH.

Back to the Dashboard. Let's see how you can search for applications in WV PATH. Click **Applications** on the Navigation bar.

5.3 Enter Criteria

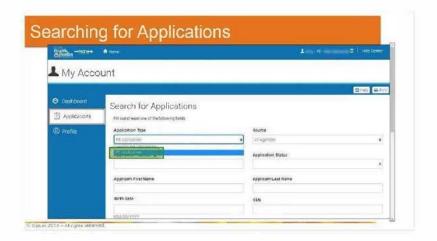


Notes:

Here, you can search for applications created by you or others in your organization. The page displays your search options. In this case, you want to find a Presumptive Eligibility application that you created.

Click Application Type.

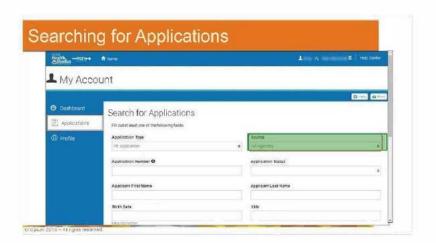
5.4 Enter Criteria



Notes:

Select PE Application.

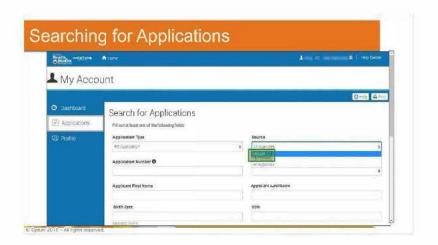
5.5 Enter Criteria



Notes:

Click Source to select who created the application.

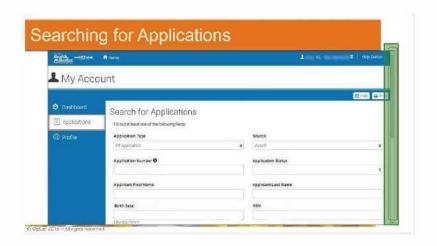
5.6 Enter Criteria



Notes:

Select Myself to find applications that you created.

5.7 Search



Notes:

Click the Scroll bar to scroll down to the Search button.

5.8 Search



Notes:

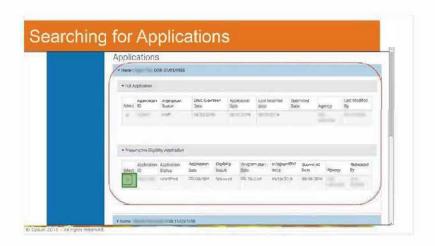
Click the Search button to run the search.

5.9 View Results



Click the **Scroll bar** to scroll to the bottom of the page and view the results.

5.10 PE Application



Notes:

The accordion for the first application is already expanded.

Click the radio button for the Presumptive Eligibility Application.

5.11 PE Application



Notes:

Click the View Application & Eligibility Notice button.

5.12 PE Application

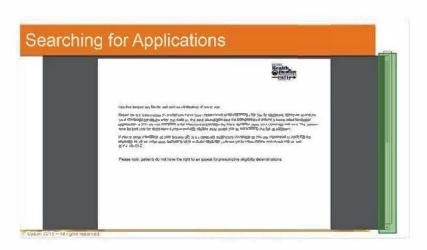


Notes:

The submitted application displays.

Click the Scroll bar to scroll down the page.

5.13 PE Application



Notes:

Click the Scroll bar to continue scrolling.

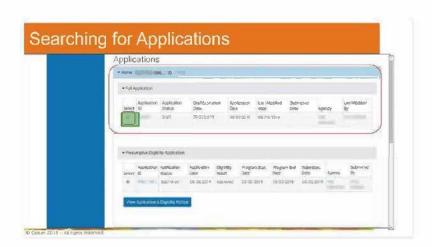
5.14 PE Application



Here is the applicant's Temporary Medical Card.

Click the **X** on the screen to close the window and return to the search results.

5.15 Medicaid Application

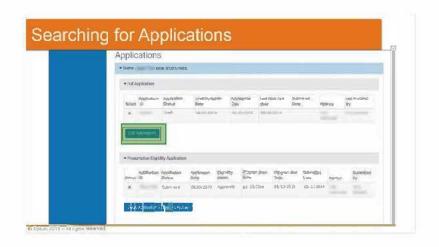


Notes:

From here, you can also open the Full Medicaid Application that you created.

Click the radio button for the Full Application.

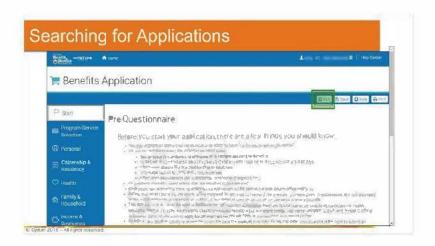
5.16 Medicaid Application



Notes:

Click the **Edit Application** button.

5.17 Exit

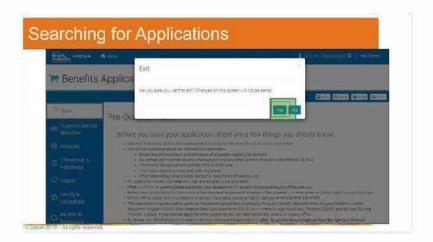


Notes:

Because the Application Status is Draft, WV PATH allows you to continue completing the application. Draft applications are automatically deleted from WV PATH after 30 days.

Click the Exit button.

5.18 Exit



Notes:

WV PATH provides a warning before the application is closed.

Click Yes.

5.19 Dashboard



Notes:

You are returned to the Dashboard.

This course is almost complete. Before completing the Knowledge Check, take a few minutes to learn about two features of WV PATH that you will find useful assisting your applicants: Programs & Services and Screen for Assistance. Let's look at Programs & Services first.

Click Programs & Services on the Dashboard.

6. Programs & Services

6.1 Programs & Services



Notes:

Programs and services offered by DHHR are organized here by category on the left Navigation bar. This is the **Health Care** information page.

To return to your Dashboard, click **Home** at the top of the screen to access the WV PATH Landing Page.

6.2 Programs & Services



Notes:

Click the **Go** button under My Account to return to your Dashboard.

7. Screen for Assistance

7.1 Screen for Assistance



Notes:

Next, we will look at Screen for Assistance. Here, you can complete questions to see if an applicant may qualify for one or more DHHR programs or services.

Click the Screen for Assistance button on the Dashboard.

7.2 Core



Notes:

The first screen is where you select the programs or services the applicant is interested in.

For this brief demonstration, click Select All.

7.3 Core



Notes:

Notice additional categories display on the Navigation bar. WV PATH will walk you through completing necessary information. When you're done, WV PATH will indicate whether the applicant may be eligible for any of the selected program(s) or service(s).

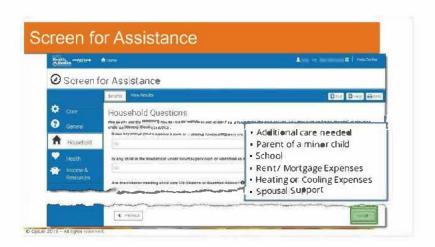
7.4 General Questions



Notes:

Here, indicate the county the applicant is in, and start describing their household.

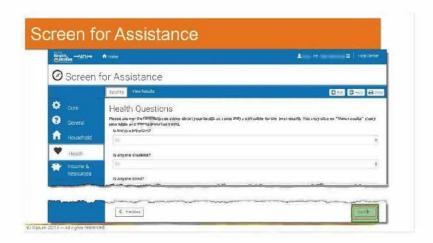
7.5 Household Questions



Notes:

More specific household information is entered here, including if any household member requires additional care, any parents of a minor child, anyone attending school, rent / mortgage expenses, heating or cooling expenses, or spousal support.

7.6 Health Questions



Notes:

Because you selected to screen for one or more health care programs, you are prompted to enter health information. In this example, you selected "No" for each option.

7.7 Income & Resources Questions

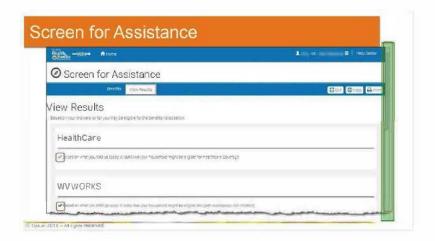


Notes:

The last step is to provide income and resource information.

Then, the screening application is complete. Click **Submit** to see if, in this example, the applicant may be eligible for any programs or services offered by DHHR.

7.8 View Results - Eligible

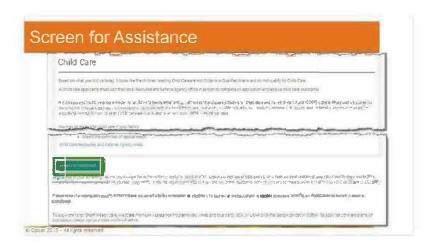


Notes:

Based on the information that was entered in this example scenario, the applicant *might* be eligible for Health Care and the WV WORKS program under Family Assistance.

Click the Scroll bar on the screen to scroll down the page.

7.9 View Results - Not Eligible



Notes:

At the bottom of the page, click Return to Dashboard, to return to your Dashboard.

7.10 Screen for Assistance

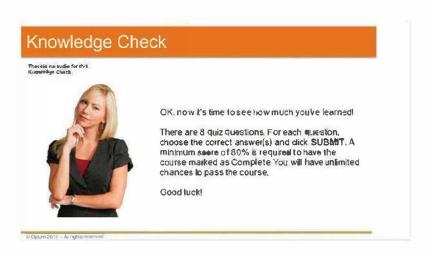


Notes:

You have now completed the Presumptive Eligibility (PE) Worker training course. Click **Next** to access the Knowledge Check. A completion score of 80% or higher is required to have this course marked as Complete in the PATH Learning Community (PLC). Good luck!

8. Knowledge Check

8.1 Quiz Intro

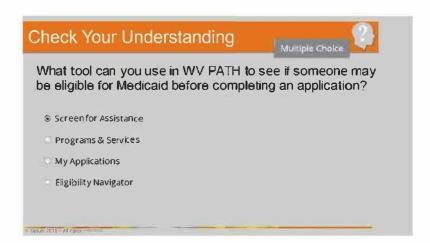


Notes:

There is no audio for this Knowledge Check.

8.2 Multiple Choice

(Multiple Choice, 10 points, 1 attempt permitted)



Correct	Choice
Х	Screen for Assistance
	Programs & Services
	My Applications
	Eligibility Navigator

Feedback when correct:

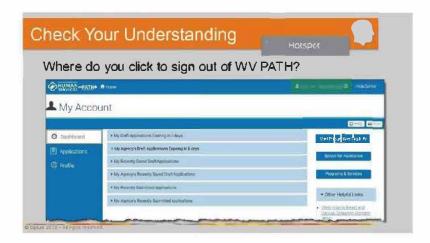
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Use the Screen for Assistance tool.

8.3 Hotspot

(Hotspot, 10 points, 1 attempt permitted)



That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Click your name and role in the banner to select Sign Out.

8.4 Multiple Choice

(Multiple Choice, 10 points, 1 attempt permitted)



Correct Choice

	15 days
	20 days
х	30 days
	45 days
	60 days

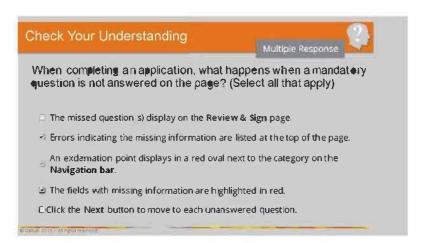
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Draft applications remain on the WV Portal for 30 days.

8.5 Multiple Response

(Multiple Response, 10 points, 1 attempt permitted)



Correct	Choice
	The missed question(s) display on the Review & Sign page.

Х	Errors indicating the missing information are listed at the top of the page.
х	An exclamation point displays in a red oval next to the category on the Navigation bar.
х	The fields with missing information are highlighted in red.
	Click the Next button to move to each unanswered question.

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

8.6 Matching

(Matching Drag-and-Drop, 10 points, 1 attempt permitted)



Correct	Choice
А	Indicates where you are currently entering
	information.

В	Indicates all mandatory information has been
	entered.
С	Indicates not all mandatory information has
	been entered.

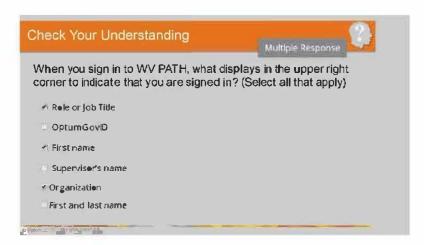
That's right! You selected the correct response.

Feedback when incorrect:

You did not correctly match one or more items.

8.7 Multiple Response

(Multiple Response, 10 points, 1 attempt permitted)



Correct	Choice
Х	Role or Job Title
	Optum GovID
Х	First name

	Supervisor's name
х	Organization
	First and last name

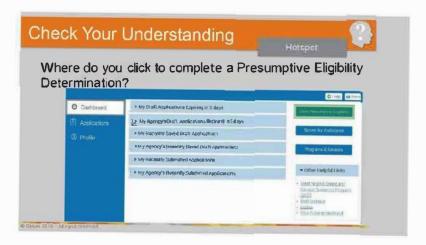
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

8.8 Hotspot

(Hotspot, 10 points, 1 attempt permitted)



Feedback when correct:

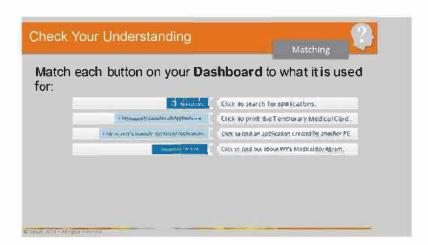
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response. Click the Start Presumptive Eligibility button to complete a determination.

8.9 Matching

(Matching Drag-and-Drop, 10 points, 1 attempt permitted)



Correct	Choice
А	Click to search for applications.
В	Click to print the Temporary Medical Card.
С	Click to find an application created by another PE.
D	Click to find out about WV's Medicaid program.

Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not correctly match one or more items.

8.10 Results Slide

(Results Slide, 0 points, 1 attempt permitted)



Results for
8.2 Multiple Choice
8.3 Hotspot
8.4 Multiple Choice
8.5 Multiple Response
8.6 Matching
8.7 Multiple Response
8.8 Hotspot
8.9 Matching

Result sinde properties	
Passing	80%
Score	
Notes:	



Presumptive Eligibility Worker

Original Effective Date: 4/1/2024 Revision Date:

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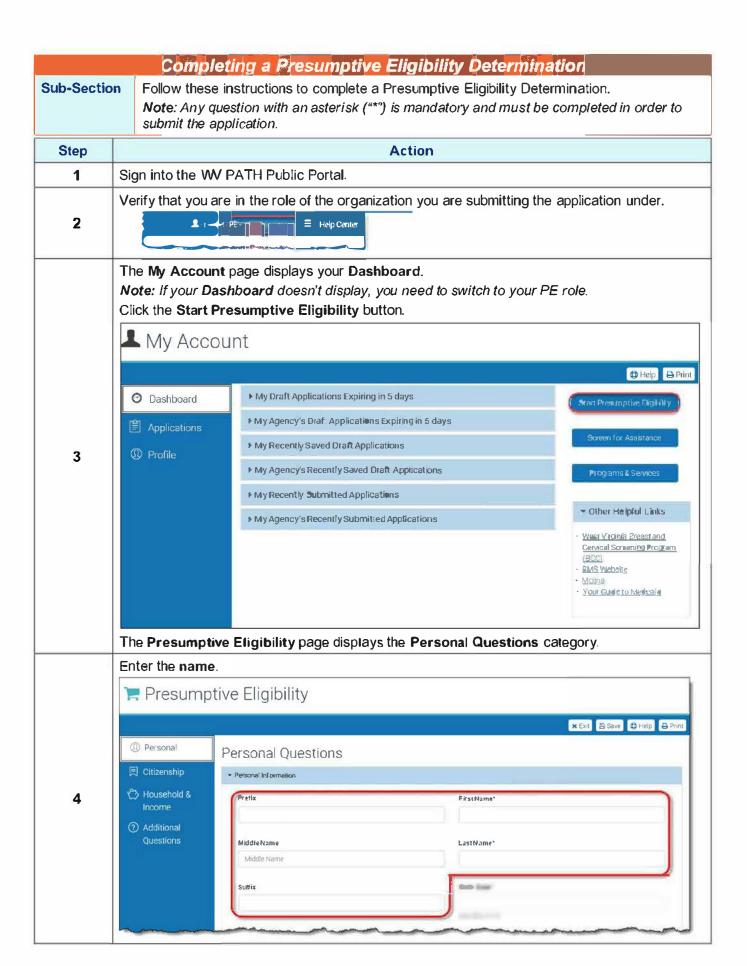
Overview:		
Purpose	This Job Aid provides instructions for Presumptive Eligibility Workers (PEs) to complete Presumptive Eligibility Determinations and Full Medicaid applications in the West Virginia People's Access to Help (WV PATH) Public Portal. Re-printing a Temporary Medical Card and searching for an application are also included.	

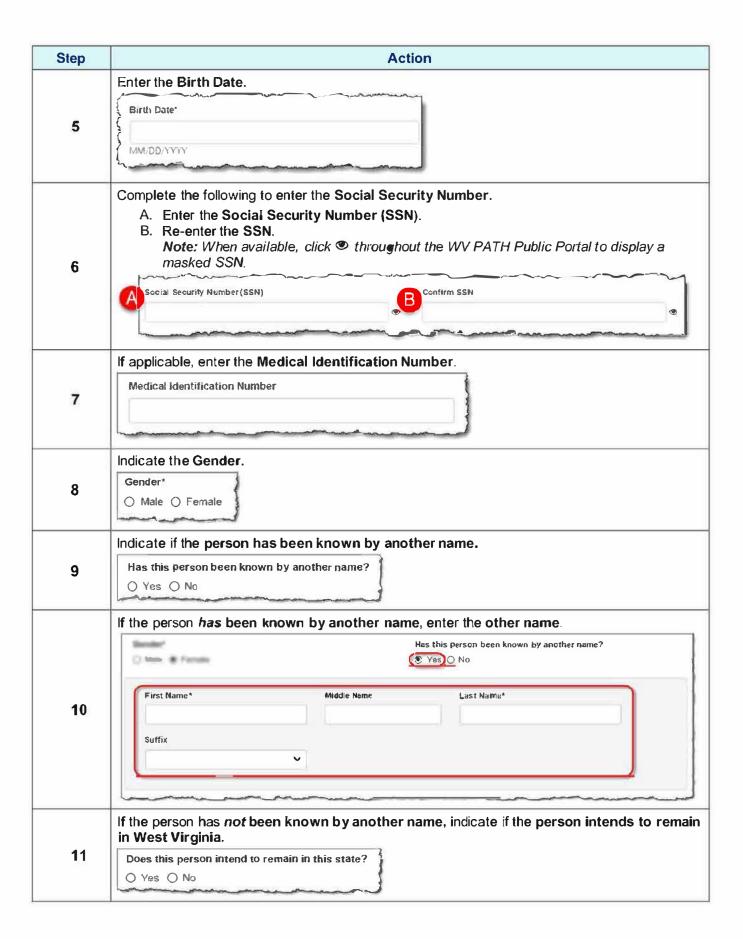
<u>Dashboard</u>		
Section	The Dashboard is the "Home Page" for your work as a PE in the WV PATH Public Portal. From here, you can quickly navigate to what you need in to efficiently assist your customers or clients.	

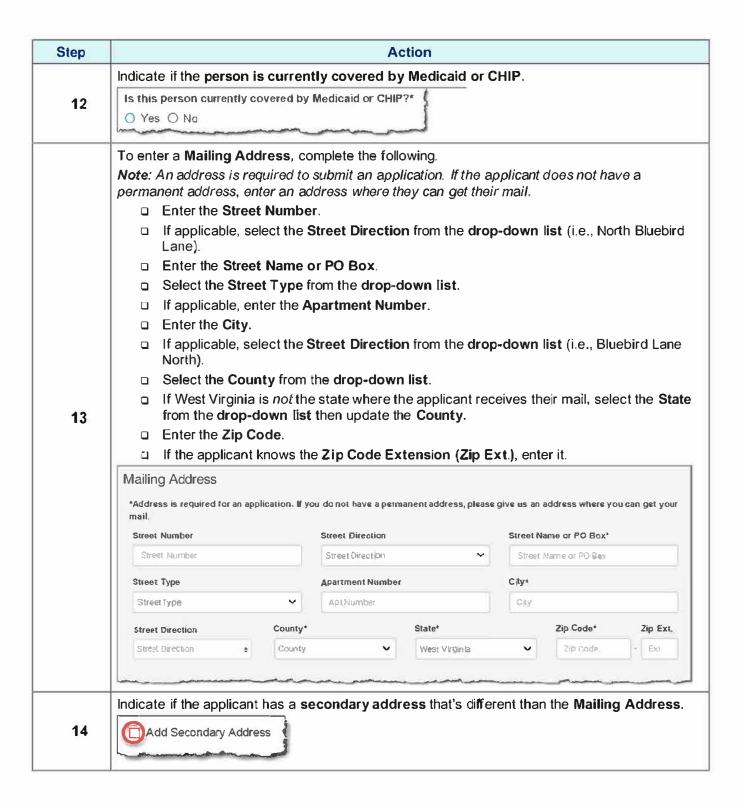
Step	Action
1	Sign into the WV PATH Public Portal.

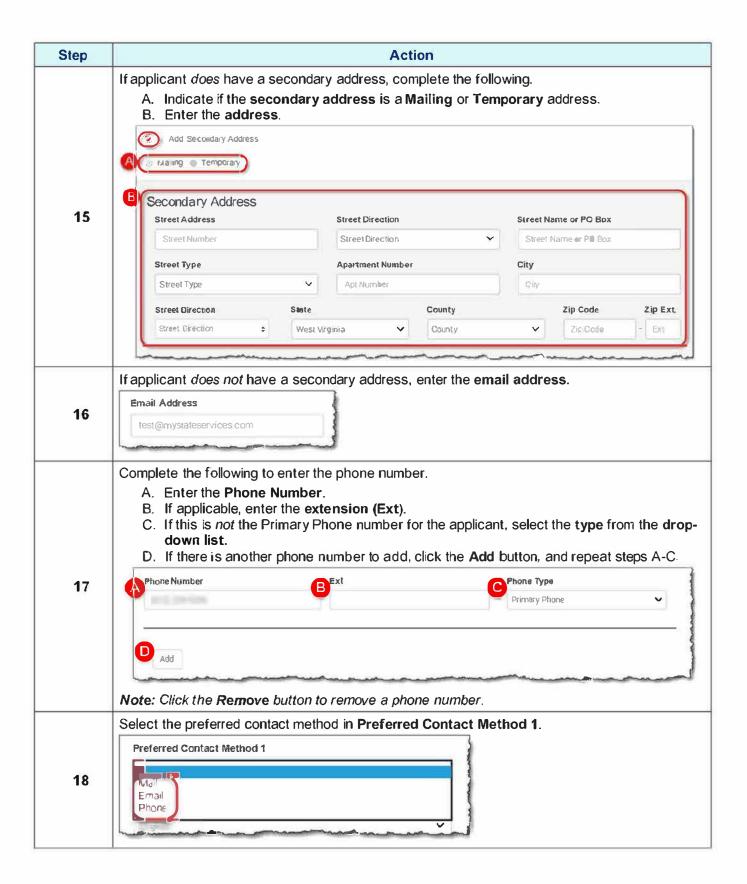


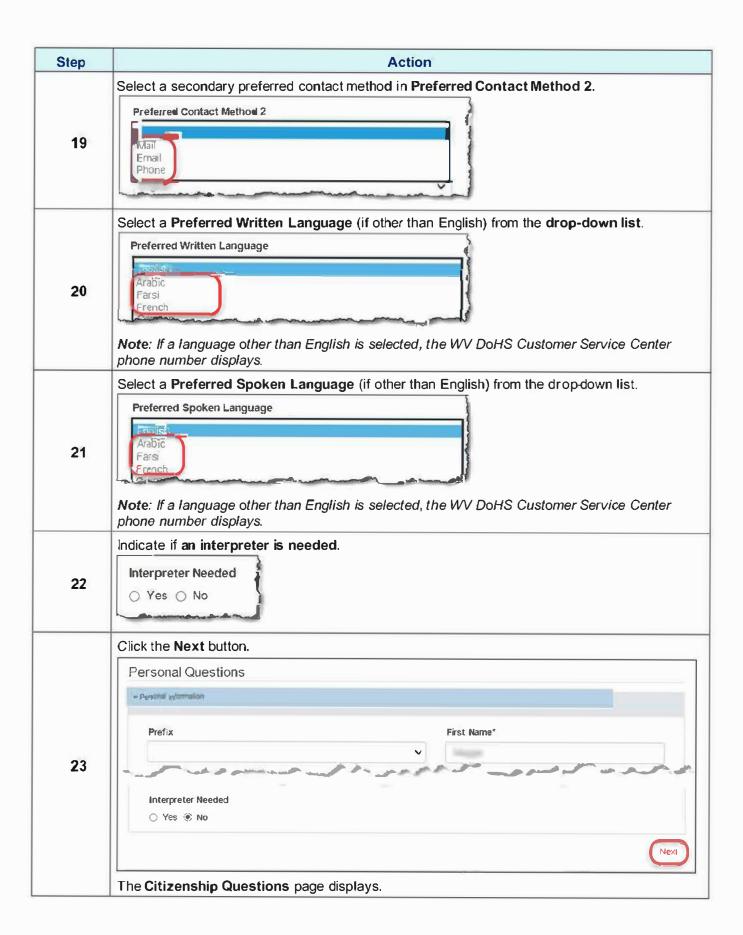
Step Action The My Account page displays your Dashboard. Note: If your Dashboard doesn't display, you need to switch to your PE role. Below is information that explains each area of your Dashboard. A. Your Name, the role you are currently signed in as, and your organization. B. Click to access online **Help**. C. Click to return to this Dashboard. D. Click to search for an application. E. Click to change your default role if you have an organization you work with most often. F. Click to access applications that have been saved but not submitted that are expiring in the next five days. Note: These applications will be removed from the WV PATH Public Portal in the next five days unless they are submitted. G. Click to access the ten most recent applications that have been saved but not submitted. Note: Draft PE applications remain in the WV PATH Public Portal for seven days and draft Full Medicaid applications remain for 30 days, after which time they are removed unless they are submitted. H. Click to access the ten most recently submitted applications. I. Click to start a Presumptive Eligibility Determination. J. Click to access Screen for Assistance to use the screening tool. K. Click to access Programs & Services to review programs and services available from the West Virginia Department of Human Services (WV DoHS). 3 Click a link under Other Helpful Links to access other resources. ♠ Home B Help Center My Account Help Prin O Dashboard My Draft Applications Expiring in 5 days Start Presumptive Eligibility My Agency's Draft Applications Expiring in 5 days Applications My Recently Saved Draft Applications Profile My Agency's Recently Saved Draft Applications My Recently Submitted Applications ■ Other Helpful Links My Agency's Recently Submitted Applications · West Vironia Breast and Cervical Screening Program (9CC) · BMSWebsite Mouna · Your Guide to Medicald

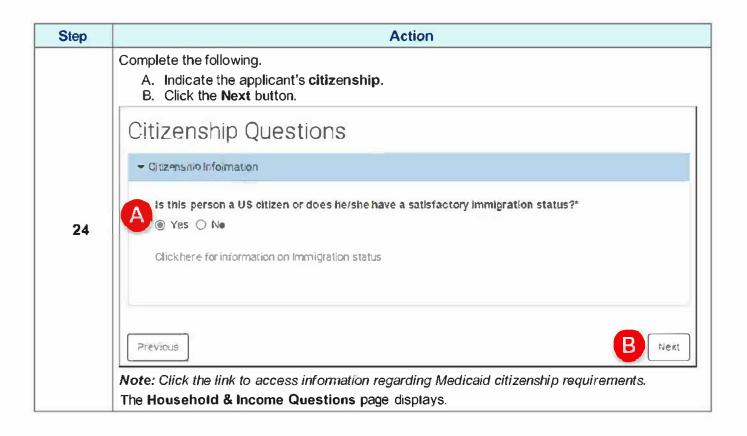


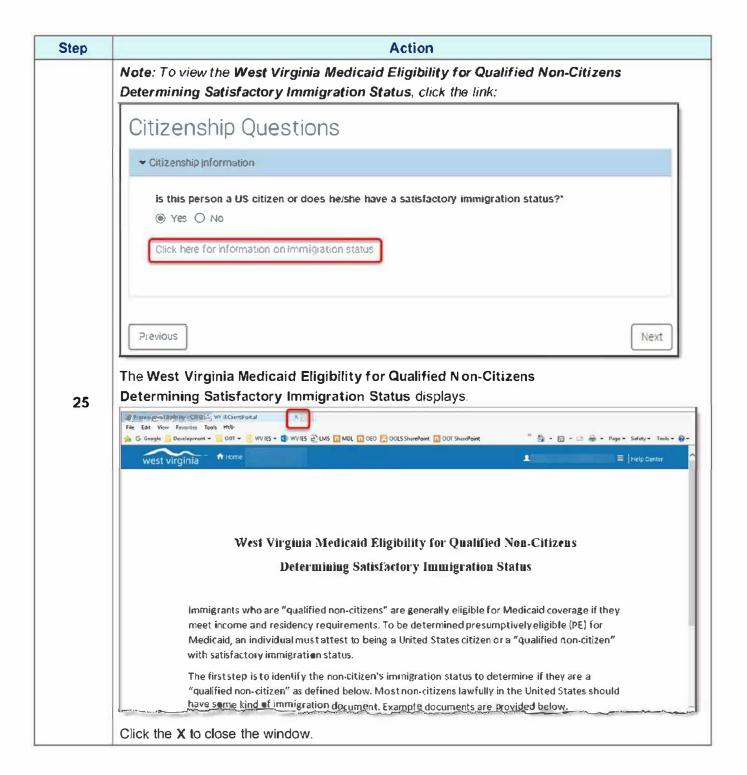


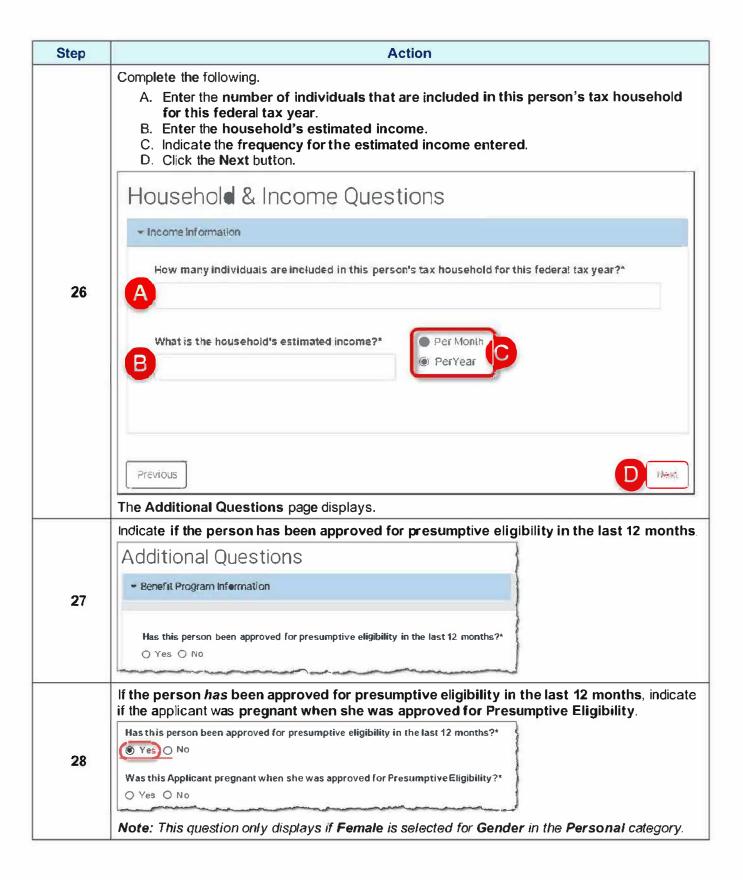




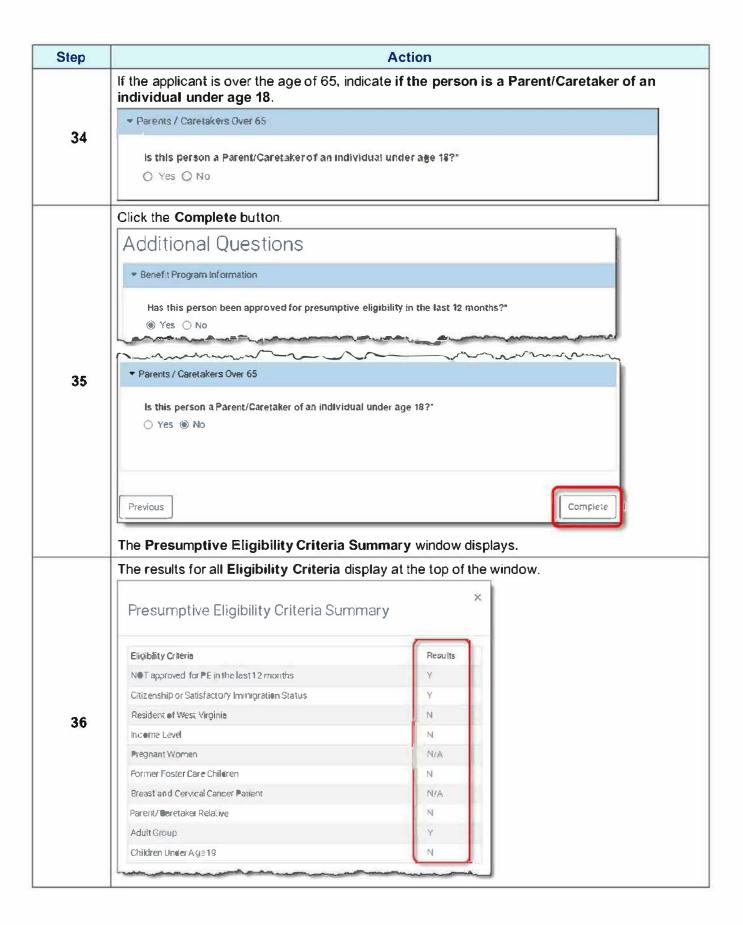


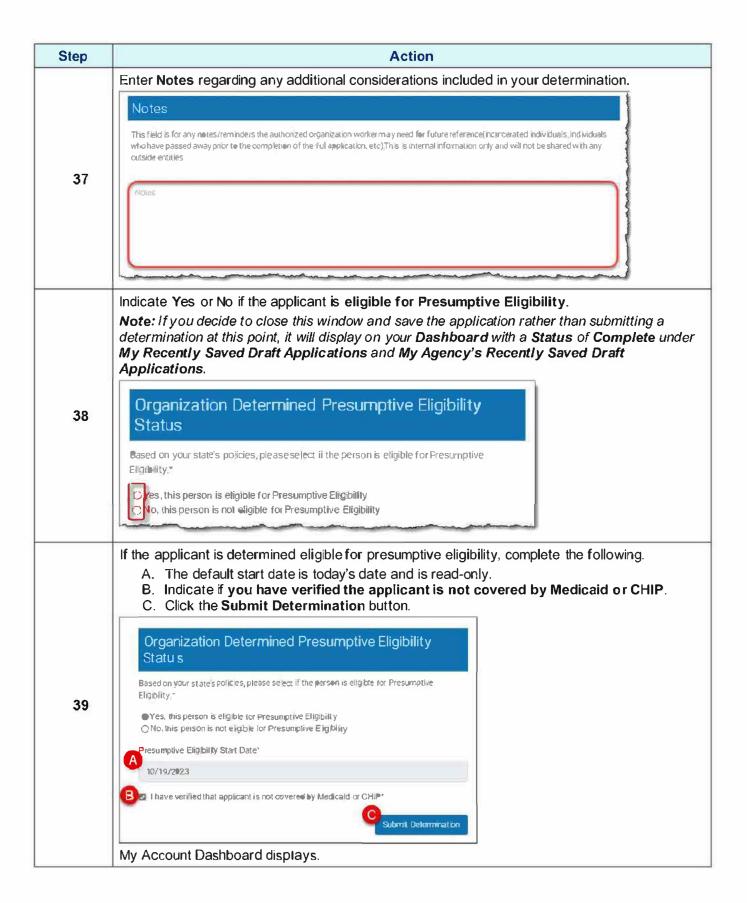


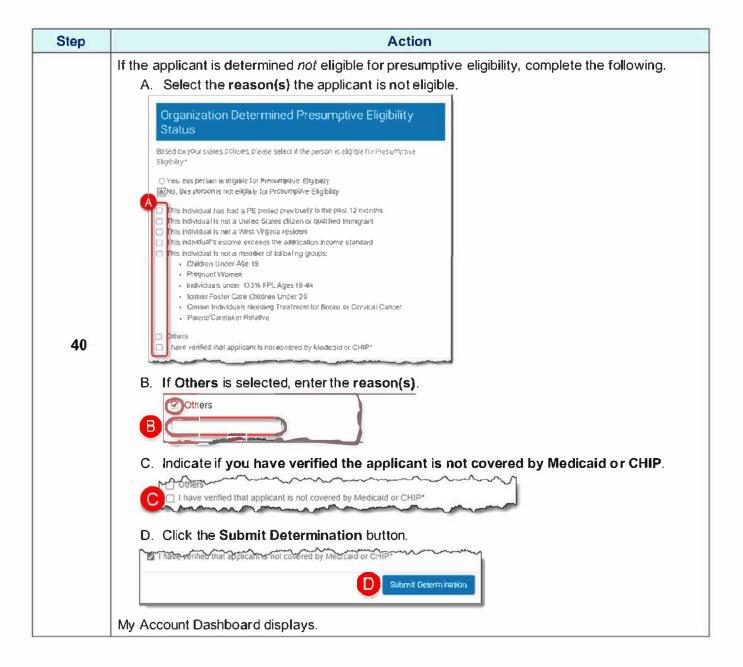


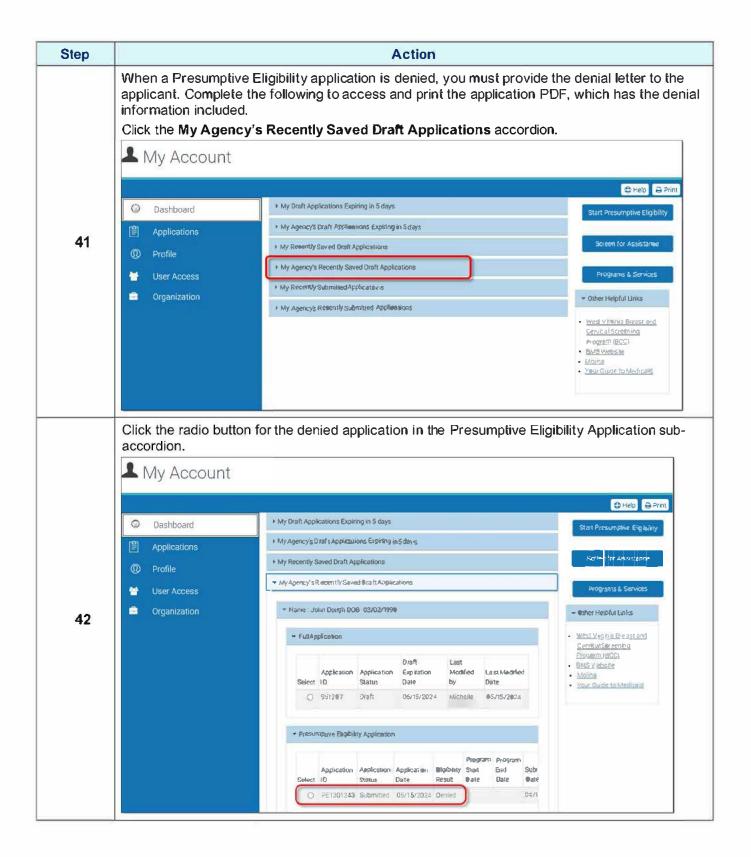


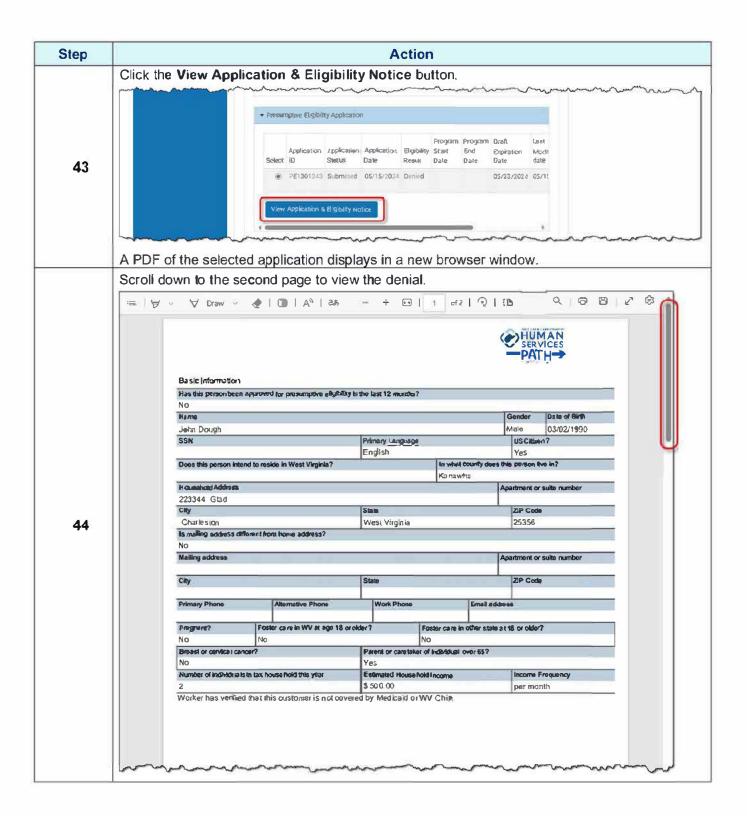
Step	Action
29	If the person has not been approved for presumptive eligibility in the last 12 months, indicate if the pregnancy has ended. Was this Applicant pregnant when she was approved for Presumptive Eligibility?** Has that pregnancy ended?* Yes O No
30	Has that pregnancy ended, enter the Pregnancy End Date. Has that pregnancy ended?* Pregnancy End Date Pregnancy End Date
33	Indicate if the applicant is pregnant now. Is this Applicant pregnant now?* O Yes O No Note: This question only displays if Female is selected for Gender in the Personal category.
32	For youth who turned age 18 before January 1, 2023, indicate the following. Was this child in foster care in West Virginia at age 18 or older? For youth who turned age 18 before January 1, 2023 - Was this child in foster care in West Virginia at age 18 or older? Was this child in foster care in any state at age 18 or older? For youth who turn age 18 or older? For youth was this child in foster care in any state at age 18 or older? O Yes O No
33	Indicate if this woman was screened and found to need treatment by the WV Breast and Cervical Cancer Screening Program (BCCSP). • Breast and Cervical Cancer Patients Was this woman screened and found to need treatment by the WW Breast and Cervical Cancer Screening Program (BCCSP)? A BCCSP Certificate of Diagnosis must be uploaded: O ves O No Note: This question only displays if Female is selected for Gender in the Personal category.

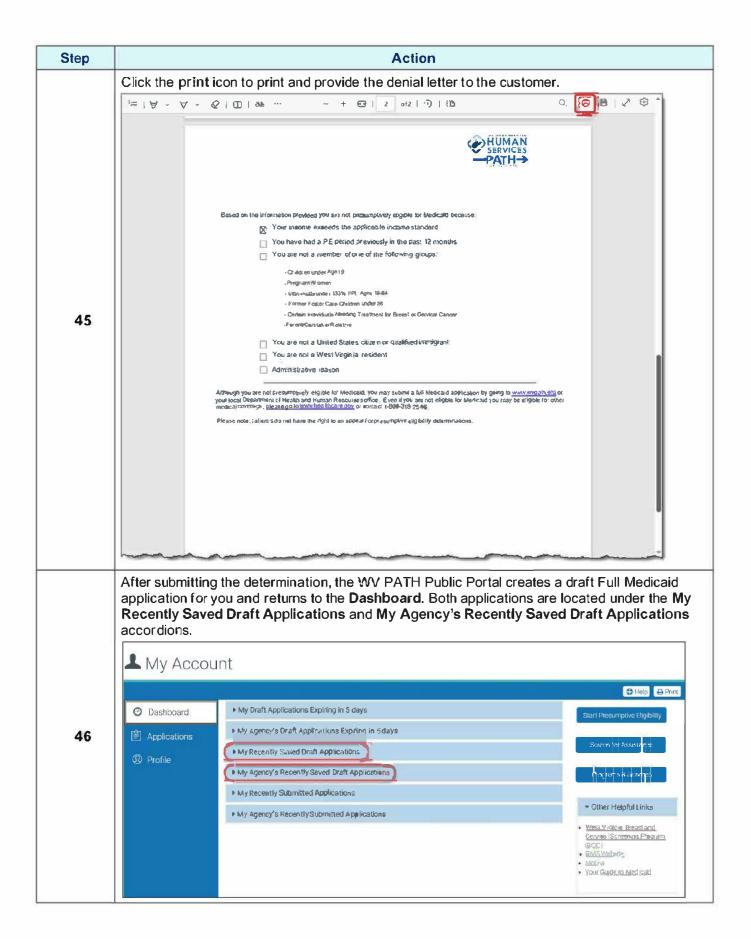


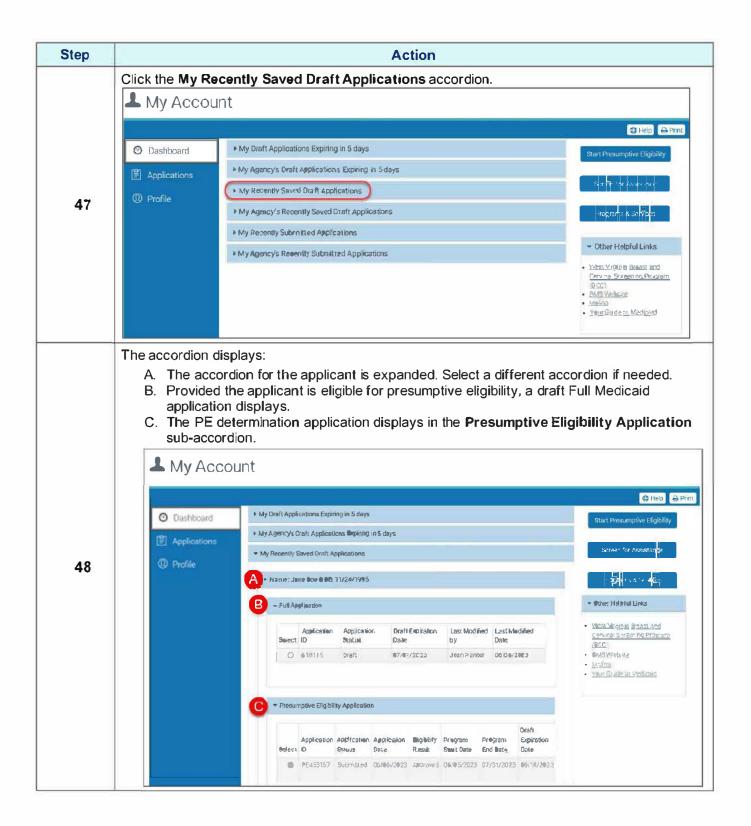








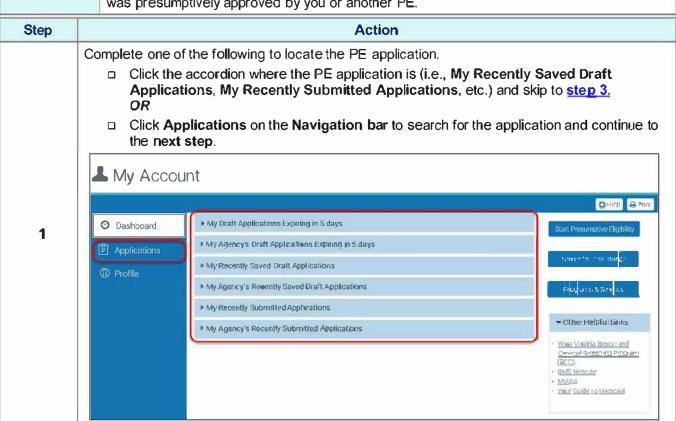


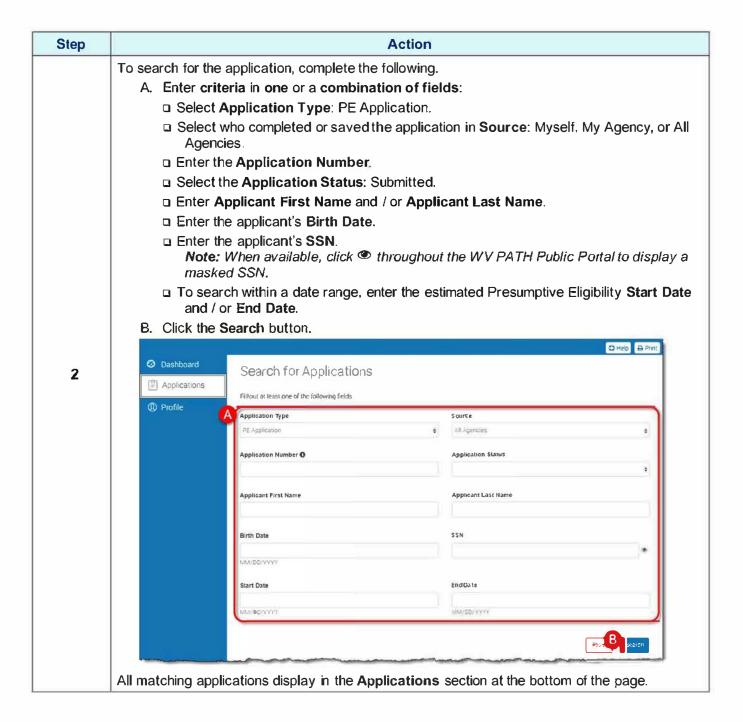


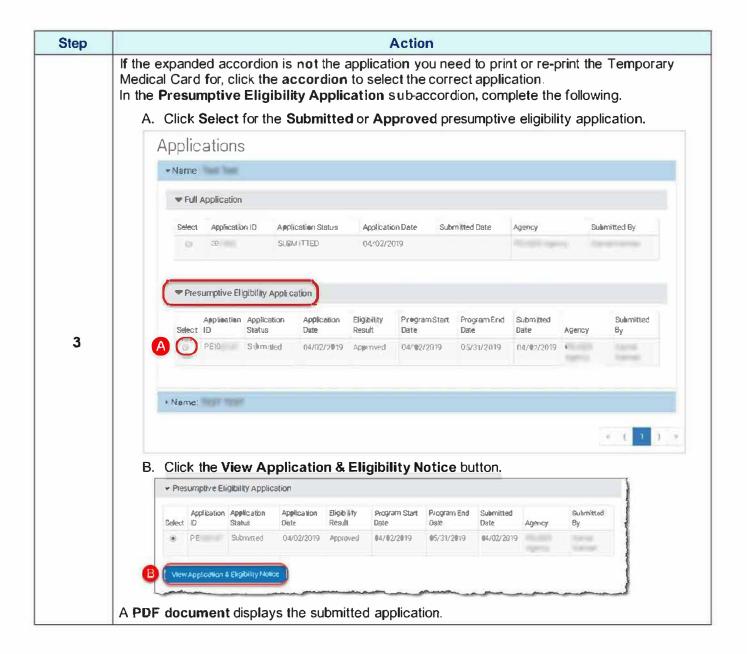
Printing or Re-Printing a Temporary Medical Card

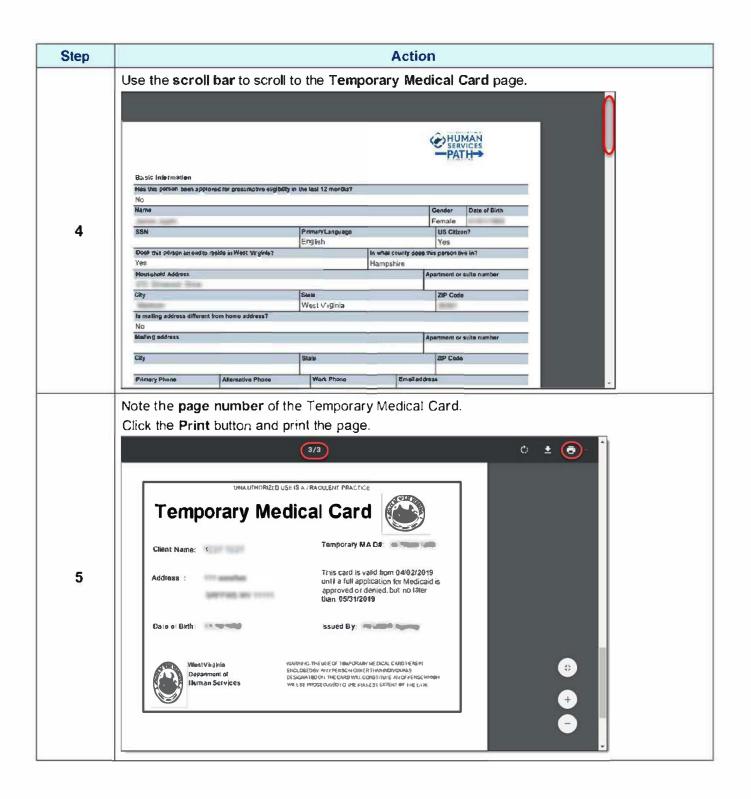
Sub-Section

Follow these instructions to print or re-print a Temporary Medical Card for an applicant who was presumptively approved by you or another PE.





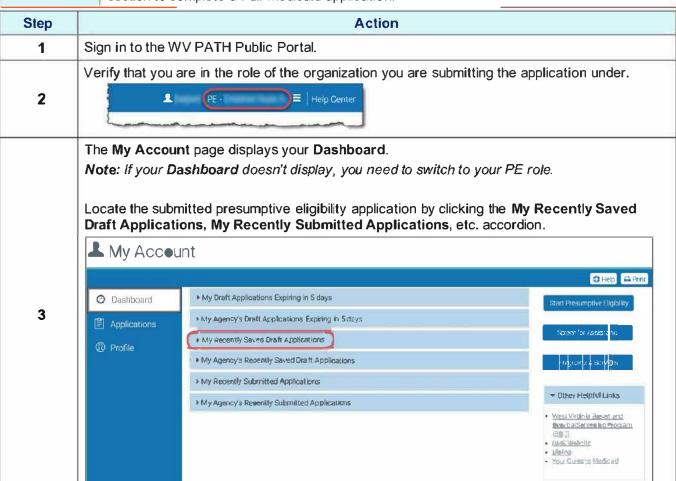


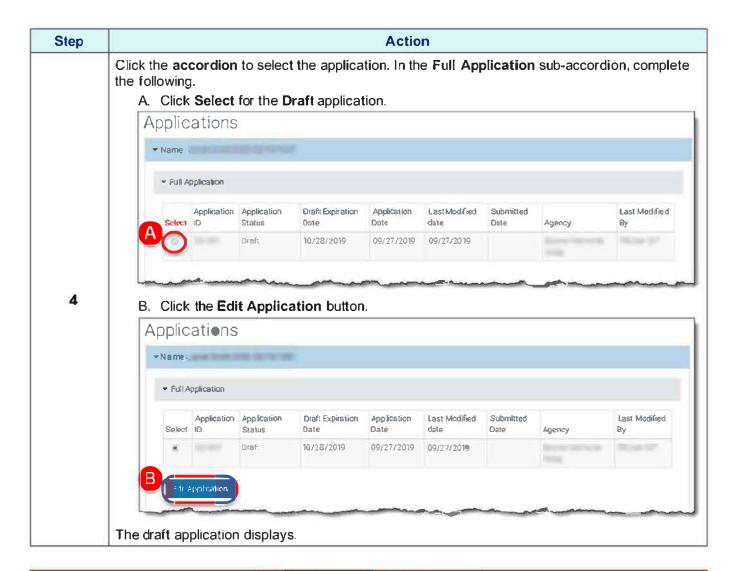


Completing a Full Medicaid Application

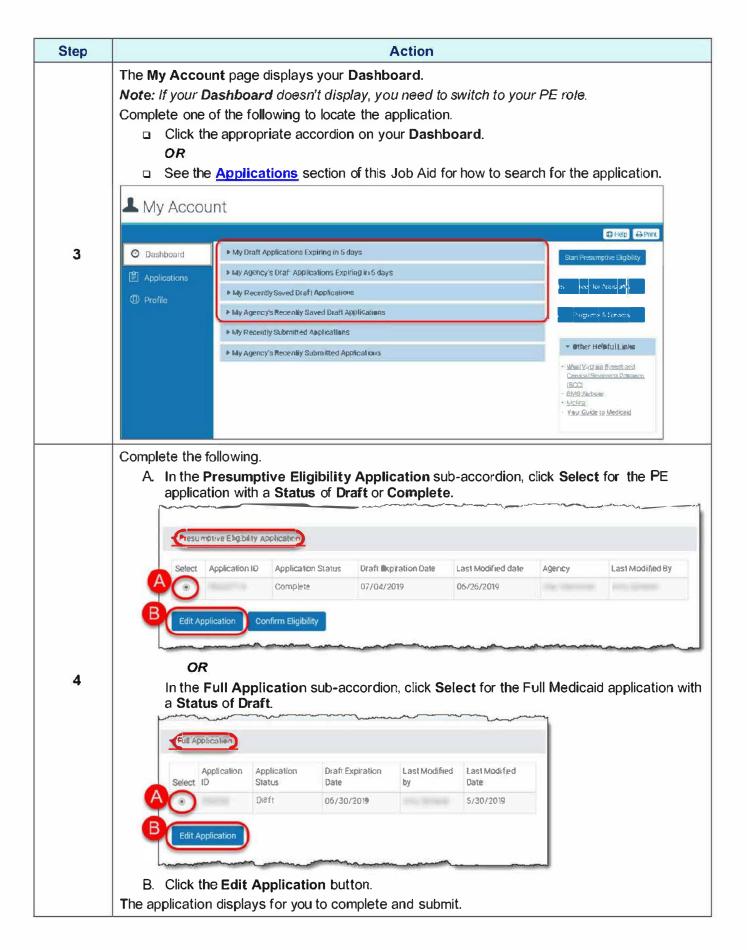
Sub-Section

After submitting an eligible Presumptive Eligibility determination, follow instructions in this section to complete a Full Medicaid application.





Editing a Draft Application Sub-Section If you begin a PE or Full Medicaid application, and save and exit before submitting, follow instructions in this sub-section to locate and complete it before it is removed from the WV PATH Public Portal. Note: Draft PE applications remain in the WV PATH Public Portal for seven days and draft Full Medicaid applications remain for 30 days, after which time they are removed unless submitted. Step Action 1 Sign into the WV PATH Public Portal. Verify that you are in the role of the organization the application was created under.

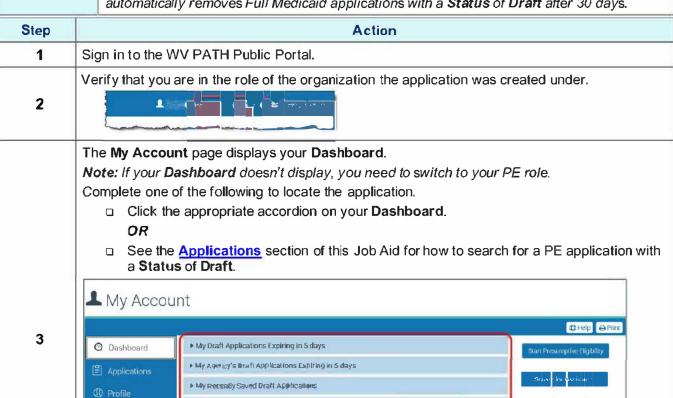


Deactivating a PE Application

Sub-Section

PE applications with a **Status** of **Draft** remain in the WV PATH Public Portal for seven days after which time they are removed unless they are submitted. A PE can *deactivate* a Draft PE application within their agency prior to this. Follow instructions in this sub-section to deactivate a **Draft** PE application.

Note: A PE cannot deactivate a Full Medicaid application. The WV PATH Public Portal automatically removes Full Medicaid applications with a **Status** of **Draft** after 30 days.



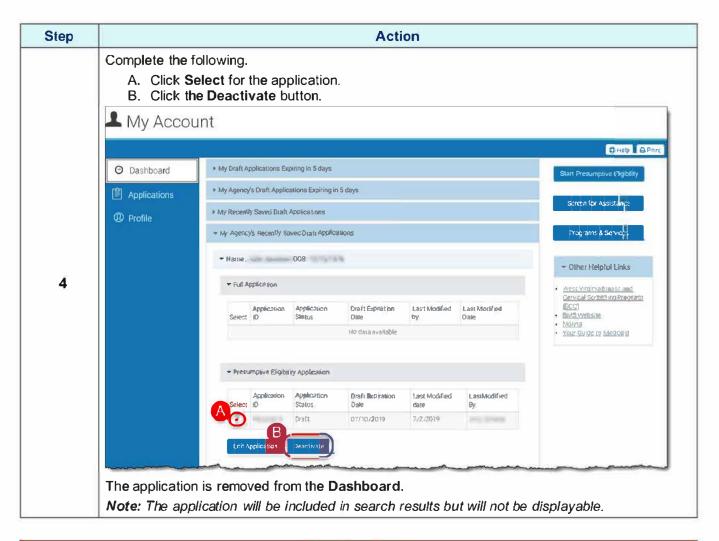
► My Agency's Recently Saved Oraft Applications

► My Recently Submitted Applications

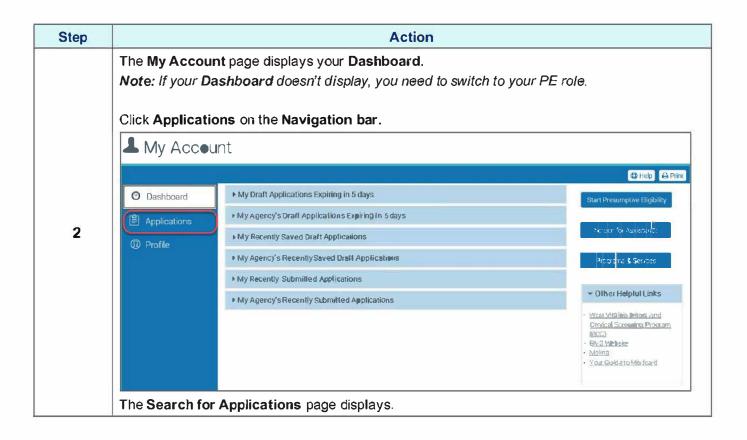
My Agency's Recently Submitted Applications

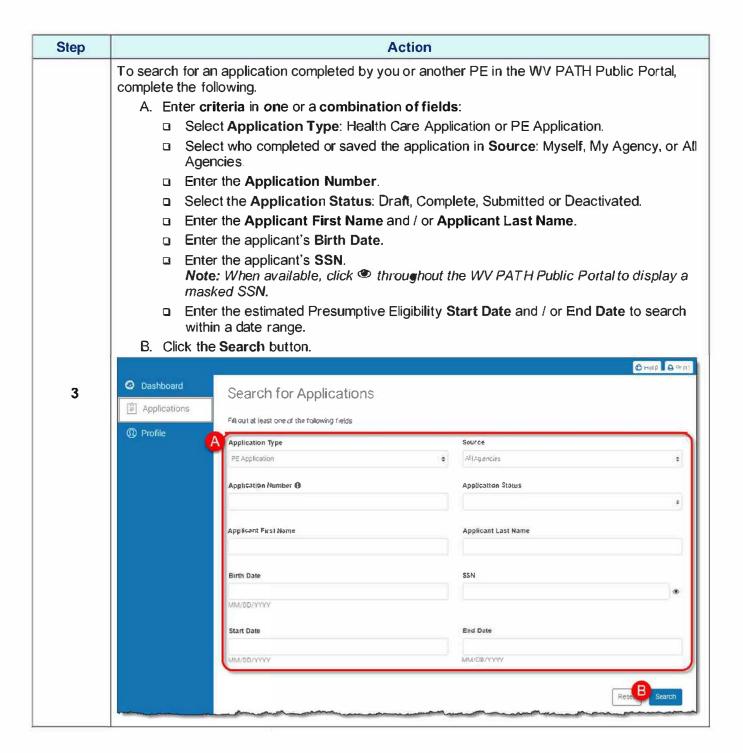
- Other Helpful Links

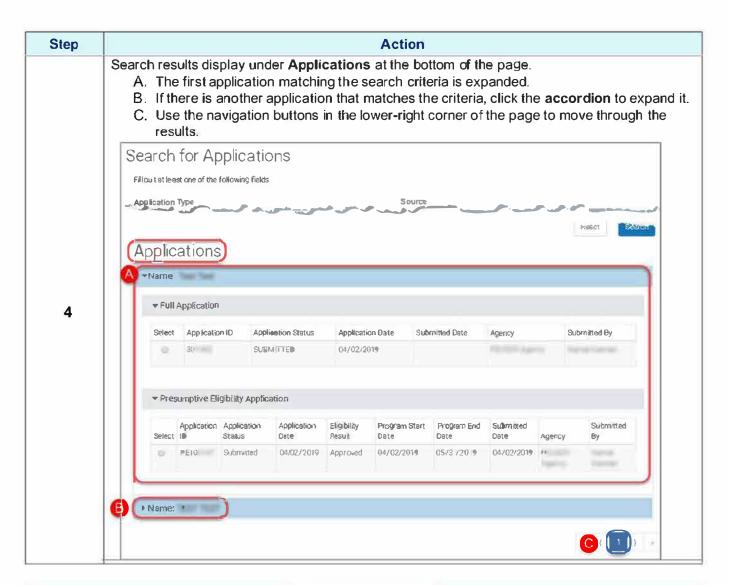
West Virginia Broast and Cervical Science to Proglam (BCC)
BMS Mebatts
Your Quide to Medicaid
Your Quide to Medicaid



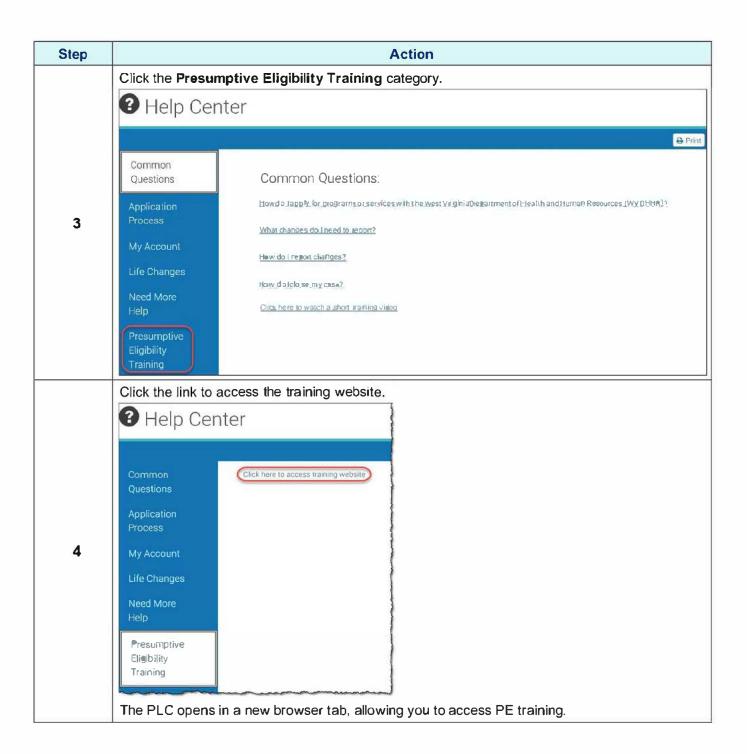
Applications					
Section	Applications created in the WV PATH Public Portal are searchable by yourself and other PE users using the Applications category.				
	Follow these instructions to search for an application created by you or another PE in the WV PATH Public Portal.				
Step	Action				
1	Sign into the WV PATH Public Portal.				







Help and Training						
Section	The Help Center contains system help regarding the use of the WV PATH Public Portal, as well as a link to required PE training in the PATH Learning Community (PLC). PE Trainees must complete this training before accessing the PE Dashboard .					
Step	Action					
1	Sign in to the WV PATH Public Portal.					
2	Click Help Center in the banner.					



Terminology & Role(s)					
Terminology	See Frequently Used Acronyms and Terms for a list of terms used throughout this document.				
Role(s)	Public Portal workers				

Revision 'listory							
Date Published	Section	Revision Details	Writer	Approver			
12/05/2023	All	Initial Release	Scherer	Optum BA Team			
6/14/2024	Completing a Presumptive Eligibility Determination	Added steps for accessing and printing a PE Denial letter.	C Soltis	Optum BA Team			