Presumptive Eligibility for Children under Age 19

POLICY CITATION

Statute: 1920A
Regulation: 42 CFR 435.1101, 435.1102

BACKGROUND

Overview
This reviewable unit (RU) describes the provisions under which the state determines presumptive eligibility (PE) for the mandatory group for infants and children under age 19 and the optional group for targeted low income children. This option, as described at 42 CFR 435.1102, allows an individual to be determined presumptively eligible by a qualified entity and to access Medicaid-covered services while his or her full application is being processed. A full eligibility determination is not immediately needed and cannot be required in order for PE to be approved. An individual may attest to information needed to make a PE determination, such as income, household size, and, at state option, citizenship and residency, but verification of such information is not required.

See the implementation guides for the Infants and Children under Age 19 (or Infants and Children under Age 19 – Territories) and Optional Targeted Low Income Children RUs for background information about the eligibility groups.

Presumptive Eligibility Determination
To be determined presumptively eligible, the child must be under age 19 or a lower age, as specified by the state and have household income that does not exceed the applicable income standard established by the state plan. The income standard applicable to PE for children under age 19 depends upon whether or not the state has chosen to cover the optional eligibility group for targeted low-income children (42 CFR 435.229). If the state does not cover that group, then the income standard used for PE is the standard for the child’s age under the eligibility group for infants and children under age 19. If the state covers the optional targeted low-income children group, the income standard used for PE for children is the higher of the standards used for the child’s age under the two groups (Infants and Children under Age 19 and Optional Targeted Low-Income Children). An individual cannot be required to provide a Social Security Number in order to receive a PE determination.

Option: Household Income. As described at 42 CFR 435.1102(a), in determining household income for PE, the state may use either gross income or a reasonable estimate of MAGI. A full MAGI-based eligibility determination cannot be required to determine PE. To arrive at a reasonable estimate of MAGI, states may utilize a simplified methodology such as determining household composition following the rules for non-filers described at 42 CFR 435.603(f).

Option: Additional PE Determination Factors of Residency and Citizenship. In addition to the categorical and income requirements, states may elect to consider state residency and U.S. citizenship or eligible immigration status when making a PE determination. Verification of such
information is not required. If a state does not elect these options in the state plan, then attestation of residency, citizenship and immigration status cannot be required as part of the PE application process.

**Qualified Entities**
A qualified entity is an entity that is determined by the agency to be capable of making PE determinations based on an individual’s household income and other requirements. Qualified entities can also help families gather the documents needed to complete the full application process, thereby reducing the administrative burden on states to obtain missing information.

Many different types of entities can serve as a qualified entity to make PE determinations. Qualified entities may include health care providers, schools, community-based organizations, agencies that determine eligibility for other health or social services programs, jails, or entities of the courts, among others.

The qualified entities selected by a state must be appropriately trained on the state’s PE screening process and the requirements for PE, as described at section 1920(c) of the Social Security Act (the Act). A copy of the state’s training materials is submitted with this RU for CMS review.

**Application for Presumptive Eligibility**
States have different options for developing and administering the PE application, but they must establish a standardized screening process for determining PE. States are not required to use a written application for PE; they may utilize verbal screening questions, a written application, or an online portal. Whichever process is used, the qualified entity is responsible for collecting and recording all information necessary to make a PE determination.

If the state requires a written application, either the single, streamlined application or a PE-specific application may be used. When the single, streamlined application is used, it must denote those fields that are required for a PE determination. A PE-specific application may not include questions that are not relevant to a PE determination. If an online portal or electronic screening tool is used for PE, it must meet the same guidelines. Both written and electronic applications are submitted with the **Presumptive Eligibility for Children under Age 19** RU for approval.

**Presumptive Eligibility Period**
Individuals may be covered under a PE determination only for a limited period of time. Section 1920A(b)(2) of the Act, codified at 42 CFR 435.1101, discusses the beginning and end dates for coverage based on PE, as follows.

- **Beginning:** The PE period begins on the day that a qualified entity determines the individual to be presumptively eligible.
- **End:** The end date varies depending on whether or not the individual submits a Medicaid application.
  - If the individual submits a Medicaid application by the last day of the month following the month in which PE was determined, the PE period will continue until full Medicaid eligibility is either approved or denied.
If the individual does not submit a Medicaid application, the PE period ends on the last day of the month following the month in which PE was determined. Example: PE is determined on the 5th of February. If a full Medicaid application is not submitted by March 30th, coverage will end on that date. If a full Medicaid application is filed by March 30th, PE coverage ends on the day the full Medicaid application is either approved or denied.

States must establish reasonable standards limiting the number of PE periods that will be authorized. These standards may be based on the calendar year – no more than one PE period per calendar year – or they may be based on a specific timeframe, such as no more than one PE period every 12 months. States may establish other reasonable limitations that reflect the needs of the population.
REVIEWABLE UNIT DEPENDENCIES

Many RUs in MACPro are dependent upon other RUs. Each time a primary RU is changed, there could be an effect on other, secondary RUs which are dependent on the primary. For example, in the Mandatory Eligibility Groups RU, there is question as to whether the state covers the adult group. If Yes is selected, and if a box is checked to include the adult group in the submission package, then the Adult Group RU will be included by the system in the package and the user can navigate to it to complete it. If No is selected, the Adult Group RU will not be included in the package. In this example, the Mandatory Eligibility Groups RU is the Primary RU and the Adult Group RU is the Secondary RU. The Adult Group RU is considered to be dependent on selections made in the Mandatory Eligibility Groups RU.

Whenever a change in a primary RU may affect a secondary RU, you either need to revise the secondary RU (if it is already in the package) or add the secondary RU to the package so that it can be updated in the same submission package as the primary RU.

The following table explains the dependent relationships for the Optional Eligibility Groups RU:

<table>
<thead>
<tr>
<th>Primary RU</th>
<th>Secondary RU</th>
<th>Nature of Dependency</th>
<th>Actions Needed</th>
</tr>
</thead>
</table>
| Optional Eligibility Groups | Presumptive Eligibility for Children under Age 19                           | Unless the Optional Eligibility Groups RU (primary) has either been approved in MACPro or is included, completed and validated in the submission package, the Presumptive Eligibility for Children under Age 19 (secondary) RU cannot be displayed. | If the secondary RU will not display because the primary RU is neither approved in MACPro nor included in the package, you need to:  
  • Add the primary RU to the package, complete it and validate it.  
  • Alternatively, remove the secondary RU from the package |
<table>
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</tr>
</thead>
<tbody>
<tr>
<td>Optional Eligibility Groups</td>
<td>Presumptive Eligibility for Children under Age 19</td>
<td>The selection of the <em>Optional Targeted Low Income Children</em> eligibility group in the <em>Covered in State Plan</em> column in the <em>Optional Eligibility Groups</em> RU (primary) affects static text in section A of the <em>Presumptive Eligibility for Children under Age 19</em> RU (secondary), regarding the income standard used to determine eligibility presumptively.</td>
<td>When you either select or de-select <em>Optional Targeted Low Income Children</em> in the <em>Covered in State Plan</em> column in the primary RU, determine if the secondary RU is already in MACPro — either approved or in the submission package. • If an approved secondary RU already exists, you must include the secondary RU in this submission package so that the static text in section A can be corrected based on the new version of the primary RU. • If the secondary RU already exists in the package, just navigate to it and the language will be adjusted appropriately. • If the secondary RU is in MMDL and has not yet been completed in MACPro, you are not required to include it in the package.</td>
</tr>
</tbody>
</table>
INSTRUCTIONS

A. Presumptive Eligibility Income Standard
   • At A.1, there is a statement that the income standard for presumptive eligibility is the standard used for the Infants and Children under Age 19 eligibility group if the Optional Targeted Low-Income Children eligibility group is not covered.
     o If you wish to view this standard, select the View approved version of the Infants and Children under Age 19 eligibility group link.
     o The Infants and Children under Age 19 RU will appear if it has been approved in the MACPro system.
     o If there is no approved version of the RU in MACPro, a screen will appear with the following message: “There is no approved version of this reviewable unit in MACPro available to display.”
     o Select the Medicaid State Plan Eligibility - Presumptive Eligibility - Presumptive Eligibility for Children under 19 link to return to the Presumptive Eligibility for Children under 19 RU.
   • At A.2, there is a statement that the income standard for presumptive eligibility is the standard used for the Optional Targeted Low-Income Children eligibility group, if that eligibility group is covered.
     o If you wish to view this standard, select the View approved version of the Targeted Low Income Children eligibility group link.
     o The Targeted Low Income Children RU will appear if it has been approved in the MACPro system.
     o If there is no approved version of the RU in MACPro, a screen will appear with the following message: “There is no approved version of this reviewable unit in MACPro available to display.”
     o Select the Medicaid State Plan Eligibility - Presumptive Eligibility - Presumptive Eligibility for Children under 19 link to return to the Presumptive Eligibility for Children under 19 RU.

B. Presumptive Eligibility Age Limit
   • Select the age under which children will qualify for PE from the list provided.

C. Presumptive Eligibility Period
   • C.1. has a general rule that the PE period begins on the date the determination is made.
   • C.2. has rules for the end date of the PE period.
   • At C.3, select one of the five options to indicate how the periods of PE are limited.
     o If C.3.e. Other reasonable limitation is selected:
       • Provide the name of the limitation and a description in the text boxes provided.
       • If there is more than one other limitation, select the +Add Limitation link again and repeat the above step.
       • To delete a previously added limitation, select the X next to its name and description.
D. Application for Presumptive Eligibility

- At D.1., indicate that a standardized screening process is used for determining PE. To do this, check the box next to the assurance.
- Select one or more of the three options at D.2. through D.4. You may select:
  - Option D.2. alone
  - Option D.3. alone
  - Option D.4. alone
  - Both options D.3. and D.4.
- Upload at least one document (application form or screen shot) for each option that is selected. These uploaded documents will become part of the state plan.
- If you select both D.3. and D.4., at D.5., describe the PE screening process in the text box provided.

E. Presumptive Eligibility Determination

- E.1. has a statement that the individual must meet the age requirement found in section A.
- At E.2., select one of the two options regarding the income counting methodology.
- Select E.3. and/or E.4. only if applicable in your state.

F. Qualified Entities

- F.1. describes the use of qualified entities to determine PE.
- At F.2., select the Add/Modify Qualified Entities button to display the Qualified Entities screen.
  - Select one or more types of qualified entities.
  - If an entity is used that is not listed, select Other entity the agency determines is capable of making presumptive eligibility determinations
    - Provide the name of the entity and a description in the text boxes provided
    - To add additional Other entities, select the +Add Other entity link.
    - To remove an Other entity, select the Delete link under it.
  - When finished selecting qualified entities, select the Save Qualified Entities button and the entities that were selected will be displayed in section D of the RU.
- At F.3., indicate that the requirements for qualified entities at 1920A(b)(3) of the Act have been communicated and adequate training has been provided to the entities involved. To do this, check the box next to the assurance.
- At F.4., upload a copy of the qualified entity training materials for review (e.g., PowerPoint or webinar training slides, written instructions or manual for PE determinations). These uploaded documents are submitted for reference only and will not become part of the state plan.

G. Additional Information (optional)

Except in limited circumstances, this field remains blank. Please consult with CMS before adding any additional information concerning this RU.
REVIEW CRITERIA

If the state selects the “Other reasonable limitation” option at C.3.e., it must name any such limitation and provide a description. The description must be sufficiently clear, detailed and complete to permit the reviewer to determine that the state’s election meets applicable federal statutory, regulatory and policy requirements.

If the state selects Other qualified entity at F.2., the description of the entity needs to explain why the state believes this entity is qualified to determine presumptive eligibility, including such factors as knowledge of Medicaid policy and experience with Medicaid beneficiaries. The description must be sufficiently clear, detailed and complete to permit the reviewer to determine that the state’s election meets applicable federal statutory, regulatory and policy requirements.