

OTHER ELIGIBILITY REQUIREMENTS**PRESUMPTIVE ELIGIBILITY**

Policy: Presumptive eligibility is Medicaid coverage provided to certain applicants who reasonably appear to meet all of the criteria, financial and non-financial, pending the completion of the full eligibility determination.

References: SSL Sect. 364-i 4. (a)(e)
364-1
368-a

Dept. Reg. 360-3.7
Part 531

ADMs 08 OHIP/ADM-2
97 ADM-10
90 ADM-9

Interpretation: A/Rs can apply for Medicaid through the presumptive eligibility process if they meet one of the following certain conditions:

- a pregnant women who applies for Medicaid at an Article 28 Pre-natal Care Provider or other entity designated by the State Department of Health, who has been trained to perform presumptive eligibility and perform application assistance ;
- a child under the age of 19 who applies for Medicaid with a Qualified Entity (QE) that has a signed Memorandum of Understanding (MOU) with the State Department of Health, or
- a patient in an acute care hospital awaiting discharge but needing the type of medical care provided by a Certified Home Health Agency, Long Term Home Health Care Program, nursing facility or hospice.

The sections that follow discuss these forms of presumptive eligibility:

- Nursing facility, hospice or home health care services,
- Children up to age 19
- Pregnant women.