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Presumptive Eligibility for Pregnant Women (PEPW)



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Contents

The PowerPoint Presentation will:

- Explain the criteria for Presumptive Eligibility for Pregnant Women (PEPW).
- Discuss terms and definitions that are used in the eligibility determination.
- Review the eligibility determination process.

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What is Presumptive Eligibility?

- Presumptive eligibility is a reasonable determination of eligibility made by Qualified Designated Provider (QDP) staff based on the countable income of the Medicaid Standard Filing Unit (SFU).
- The income must be less than or equal to 185% of the Federal Poverty Level (FPL).
- There is no asset limit.
- Citizenship/alien status and providing an SSN are not factors of eligibility for PEPW.

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What is Presumptive Eligibility?

- Presumptive eligibility allows a pregnant woman to receive temporary Medicaid coverage for prenatal care (including transportation services, emergency room services and prescriptions) provided by Medicaid providers.
- Presumptive eligibility is limited to one eligibility span per pregnancy.

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What is Presumptive Eligibility?

Eligibility Coverage:

The presumptive period begins with the date the eligibility determination is completed by the QDP.

The presumptive period ends on either:

- The date of the full Medicaid determination (approved or denied), or
- The last day of the month following the month of the PEPW determination if the pregnant woman fails to apply for or follow through with her full Medicaid application.

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Terms, Definitions & Concepts

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[The Florida On-Line Recipient Integrated Data Access System]

The integrated on-line public assistance computer system that is used to determine eligibility for PEPW as well as other public assistance programs, such as Temporary Cash Assistance (TCA), Medicaid and Food Assistance.

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Terms, Definitions & Concepts

FILING UNIT

- A filing unit consists of individuals whose needs and income are included based on tax filing rules.
- The unborn is **always counted** as a member of the filing unit.
- Family members that are receiving Supplemental Security Income (SSI) are included in the filing unit, and the SSI income is **not** counted in the budget computation.

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Terms, Definitions & Concepts

MONTHLY GROSS EARNED INCOME

- The total wages, prior to deductions, that are earned or expected to be earned in the application month for individuals included in the filing unit.
- Gross earned income includes wages, salaries and tips paid by an employer and self-employment income.

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Terms, Definitions & Concepts

MONTHLY GROSS UNEARNED INCOME

Monthly Gross Unearned Income includes, but is not limited to:

- Alimony,
- Social Security Benefits,
- Retirement Benefits, and
- Unemployment Compensation.

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Determining Eligibility for Presumptive Coverage



These are the steps in the eligibility determination process :

- Medicaid Status (current recipient),
- Filing Unit for the Pregnant Woman,
- Computing and Budgeting Income,
- Monthly Income Standard,
- Eligibility Determination, and
- Proof of Eligibility.

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Medicaid Status

Before beginning the process, determine if the pregnant woman is receiving Medicaid:

- If receiving Medicaid, DO NOT complete the PEPW eligibility determination.
- If NOT receiving Medicaid, continue with the PEPW eligibility determination.

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Filing Unit

Determine who should be included in the filing unit:

- Accept the pregnant woman's statement of who lives in the home.
 - *Always count the unborn child as one member in the filing unit.*

For example,

If the pregnant woman is expecting twins, count two unborn children. The pregnant woman's statement of the number of expected unborns is accepted.

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Basic Filing Unit Rules

If the pregnant woman is under age 21, unmarried or married and had the marriage annulled, she is considered a child.

- If she is considered a child and is claimed by her parent(s) as a tax dependent or lives with parents who are non-tax filers, the parent(s) income is counted when determining eligibility.
- If the pregnant woman lives with the father of the unborn, he is included in the filing unit and his income is counted, if he is the pregnant woman's spouse.

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Basic Filing Unit Rules (cont.)

For a pregnant woman who does not live with her parents, but lives with relatives or other non-related adults,

- Do not count the income of the other adults, and do not include them in the filing unit.
- A pregnant woman under age 21 does not have to live with a responsible adult to receive Medicaid.

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Basic Filing Unit for a Pregnant Woman over 21



- Pregnant Woman,
- Her unborn child(ren),
- The pregnant woman's child(ren), and
- The father of the unborn, if he is the pregnant woman's spouse.

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Filing Unit for an Unmarried Pregnant Woman Under age 21 #1

When the pregnant woman is unmarried, under age 21 and living with her parent(s), the filing unit is:

- Pregnant woman,
- Her unborn child(ren),
- Her parent(s) (biological, adopted and step),
- The pregnant woman's siblings (biological, adopted and step) who are unmarried and under age 19, or 19 & 20 and a full time student, and
- The pregnant woman's child(ren).

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Filing Unit for an Unmarried Pregnant Woman Under age 21 #2

When an unmarried pregnant woman who is under 21, lives with siblings in the home of other caretaker relatives or a non-relative, the filing unit is:

- The Pregnant woman,
- The unborn child(ren),
- The pregnant woman's child(ren), under age 21, and
- The pregnant woman's siblings (biological, adopted, and step) who are unmarried and under age 19 or 19 & 20, if in school full time.

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Computing and Budgeting Income

After determining the filing unit:

- Use the pregnant woman's statement of income for all individuals counted in the filing unit.
- Determine the filing unit's total countable income.
- Verification of the income is NOT required.

Compute income and self-employment deductions received more frequently than monthly in the following manner:

- Multiply weekly income by 4.
- Multiply bi-weekly income by 2.
- Multiply semi-monthly income by 2.

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Income & Budgeting

Include the income of all filing unit members.

- Remember to include the unwed pregnant minor's parent's income (biological, adopted and step) if she lives in their home.
- Determine total monthly gross earned income by adding total wages earned & wages that will be earned in the application month.
- If the individual is self-employed, deduct business expenses and work-related expenses.
- Determine the total countable income by combining the total gross earned income and total gross unearned income.

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Monthly Income Standard

The next step in determining presumptive eligibility is determining the monthly income standard, as follows:

- Identify the size of the filing unit by counting all filing unit members previously identified in basic Filing Unit rules.
- Determine the monthly income standard based on the filing unit size.
- The FLORIDA System automatically enters this information according to the entries made on the AIPW screen.

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The Determination

Compare the total net income with the income standard (185% of FPL).

- If greater than 185% FPL, the pregnant woman is **INELIGIBLE** for PEPW Medicaid.
- If equal to or less than 185% FPL, the pregnant woman is **ELIGIBLE** for PEPW Medicaid.
- The poverty levels are available on the internet at:
<http://www.dcf.state.fl.us/programs/access/esspolicymanual.shtml>.

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Proof of Eligibility

Proof of Medicaid eligibility for PEPW coverage is provided by printing the Temporary Medicaid Identification Card.

- The QDP may print the Temporary Medicaid Identification Card at the time of the eligibility determination approval.
- The client can also print a Temporary Medicaid Identification Card using their My ACCESS Account. The web address is: <http://www.dcf.state.fl.us/programs/access/>.
She will need her FLORIDA case number to set up an account.

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Operational & Referral Procedures

- The FLORIDA system is the method to determine presumptive eligibility.
- Clients are notified of their PEPW eligibility at the time the determination is completed.
- The presumptive period begins the day the determination of presumptive eligibility is approved by the QDP staff.

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Operational & Referral Procedures

QDP staff must:

- Determine current Medicaid status through inquiry on the FLORIDA System and/or FMMIS.
- Determine the woman's eligibility for PEPW Coverage.
- The QDP may assist or have the pregnant woman submit a web application via the internet. The application is available on the following website: <http://www.dcf.state.fl.us/programs/access/>.

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Coordination of Services

- Each QDP is responsible for maintaining contact with the applicant and the local DCF office to facilitate the application processing for full Medicaid coverage .
- The QDP staff should assist in getting any other required documents to DCF.

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Coordination of Services

- QDP staff may follow up on the status of the pregnant woman's application independently on the Community ACCESS Network .
- Information for Customers and Community Partner Site Participants is available on the ACCESS website at:
[http://www.myflorida.com/accessflorida.](http://www.myflorida.com/accessflorida)

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Coordination of Services

- FLORIDA will automatically close any PEPW (MU) category if the pregnant woman fails to apply for full Medicaid coverage by the last day of the month following the month of the PEPW determination.
- If there is a pending application for full Medicaid coverage, the PEPW eligibility continues until the full Medicaid determination is completed.
- Staff should enter a 12-month review date on the AWAA screen.

Summary and Questions

