



PRESUMPTIVE ELIGIBILITY FOR CHILDREN IN MEDICAID AND THE STATE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP): A FACT SHEET

Many uninsured children have unmet health care needs. However, when they apply for health coverage through Medicaid and CHIP, they often have to wait for over a month before their application is processed and their parents can make doctors' appointments. "Presumptive eligibility" can help children get needed care right away.

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WHAT IS "PRESUMPTIVE ELIGIBILITY"?

Presumptive eligibility provides children immediate access to health services by giving them temporary health insurance through Medicaid or CHIP if they appear to be eligible. Children can be determined presumptively eligible by people who provide other services to low-income families, which helps with outreach efforts, too.

WHY IS PRESUMPTIVE ELIGIBILITY FOR CHILDREN IMPORTANT?

- Children can get health services immediately, instead of waiting several weeks for paperwork to be processed.
- Families are much more likely to seek care when they have insurance. Delays in obtaining care can lead to dangerous and expensive emergency situations.
- Presumptive eligibility brings the enrollment process into the community and allows families to work with individuals and organizations they trust to get health coverage.
- Presumptive eligibility links children's health insurance outreach and coverage with other programs that provide assistance for low-income families.
- Presumptive eligibility helps health care providers get paid for care for uninsured children who aren't yet enrolled in Medicaid or CHIP.

HOW DOES PRESUMPTIVE ELIGIBILITY WORK?

- 1) "Qualified entities" (described below) identify children they are already serving who are uninsured and who are likely to be eligible for Medicaid or CHIP.
- 2) The qualified entity compares the family income of those children to eligibility levels for children's health coverage under Medicaid or CHIP.
- 3) If it looks like the child is eligible, the family is given a card or a letter providing access to temporary health care coverage until an official eligibility determination is made.
- 4) The child can now receive any and all health care services offered under Medicaid or CHIP.
- 5) A complete application for Medicaid and/or CHIP must be filed by the end of the next month following the date the presumptive eligibility period begins. If the state uses the same simplified form for the presumptive eligibility application and the Medicaid and CHIP application, this extra step can be eliminated.

WHAT IS A QUALIFIED ENTITY?

In selecting organizations or individuals to make presumptive eligibility determinations, states may choose from:

- health care providers participating in Medicaid;
- primary or secondary schools;
- organizations that determine eligibility for Head Start, WIC, and the Child Care and Development Block Grant program;
- agencies administering Medicaid, CHIP, TANF, or housing assistance;
- child support enforcement agencies;
- certain homeless shelters; and
- any other entity a state chooses, if approved by the federal government.

WHO PAYS FOR THIS TEMPORARY COVERAGE?

- The state and the federal government pay for the cost of any services provided, just as they would if the child were already enrolled in Medicaid or CHIP.
- Whether a child is found eligible or not, neither the families nor the providers have to pay the costs of services for the presumptive eligibility period.
- States can adopt presumptive eligibility in Medicaid, in CHIP, or in both programs.

WHAT STATES HAVE ALREADY ADOPTED PRESUMPTIVE ELIGIBILITY?

In Medicaid	In CHIP	In Medicaid and CHIP
Connecticut Florida* Nebraska New Hampshire New Mexico	Michigan*	Massachusetts Mississippi* New Jersey New York

* Enacted but not implemented

HOW CAN STATES MAKE THE MOST OF A PRESUMPTIVE ELIGIBILITY PROGRAM?

To recruit individuals and organizations to participate in the program, states should:

- engage all the individuals and organizations that provide services to low-income families;

- provide adequate training of qualified entities so they can help families through the process; and
- offer reasonable reimbursement to qualified entities for the costs of making determinations for presumptive eligibility.

To ensure that families complete a full eligibility determination, states should:

- use the same application form presumptive eligibility, Medicaid, and for CHIP;
- make it simple and easy to complete the full Medicaid and CHIP application process;
- make sure families know what is required of them (i.e., what forms or documents they need to submit and when);
- allow families sufficient time to gather and submit whatever forms are necessary to document their eligibility for the program; and
- conduct follow-up as necessary to help families complete the application process and get children enrolled in Medicaid or CHIP.

For more information, see *Promising Ideas in Children's Health Insurance: Presumptive Eligibility for Children*, available at www.familiesusa.org/pubs/prelig.htm.

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