DATE: August 1, 2014

SUBJECT: Provider Instructions for Determining Presumptive Eligibility for Pregnant Women

DISTRIBUTION: Enrolled Presumptive Eligibility Providers
County Directors of Social Services
Medicaid Eligibility Staff

I. BACKGROUND

North Carolina Division of Medical Assistance (DMA) requested an amendment to the Pregnant Woman State Plan Amendment (SPA) which required attestation of U.S. citizenship or eligible immigration status. The Centers for Medicare and Medicaid Services (CMS) approved the amendment request. Therefore, this addendum is required to update eligibility requirements found in Administrative Letter 18-13, Provider Instructions for Presumptive Eligibility for Pregnant Women, dated May 28, 2014, section III.

II. APPLICANT/BENEFICIARY ELIGIBILITY REQUIREMENTS

Effective for applications taken on or after August 15, 2014, pregnant women applying for presumptive eligibility are no longer required to attest to U.S. citizenship or eligible immigration status.

In order for a pregnant woman to be authorized presumptively she must:

A. Attest to pregnancy.

B. Attest to North Carolina residency or intent to reside in North Carolina.

C. Not be an inmate of public institution.

D. Not be receiving Medicaid in another aid/program category, county, or state.

E. Have household gross income equal to or less than 196% of the federal poverty levels listed in IV.F of Administrative Letter 06-13.

   The unborn(s) is included in the family size and the amount of household income is based on the pregnant woman’s statement.
F. Presumptive eligibility is limited to one presumptive period per pregnancy.

III. EFFECTIVE DATE AND IMPLEMENTATION

This policy is effective for applications taken on or after August 15, 2014. Use the new eligibility requirements to determine eligibility for presumptive applications dated August 15, 2014 and later.

If you have questions regarding this material, please contact your Operational Support Team (OST) representative.

Robin Gary Cummings, M.D.
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(This material was researched and written by Pam Cooper, Policy Consultant, Medicaid Eligibility Unit).