THE SECRETARY FOR HEALTH SERVICES
COMMONWEALTH OF KENTUCKY
275 EAST MAIN STREET
FRANKFORT 40621-0001
(502) 564-7042
(502) 564-7091 FAX

PAUL E. PATTON
GOVERNOR

MARCIA R. MORGAN
SECRETARY

October 3, 2001

Dear Medicaid Provider:

Thank you for the excellent service you provide to all of your Medicaid patients. We think the best way to improve the health and well-being of those we serve is by working hand-in-hand with providers like you. For that reason, we are pleased to announce a new program for pregnant women, called Presumptive Medicaid Eligibility, to be implemented in November. Over 30 states have adopted presumptive eligibility as a way to assure immediate access to prenatal care.

Through this initiative, enrolled providers and their office staff may complete a simple application and determine a pregnant woman's presumptive eligibility for Medicaid. In return, providers are assured payment for those early prenatal services provided and can help the woman obtain pharmacy and other ambulatory prenatal benefits immediately.

Women who are granted presumptive eligibility by a qualified provider will receive designated benefits for up to 90 days. During this period she will be asked to go to her local Department for Community Based Services (DCBS) office to determine her ongoing eligibility for Medicaid. The beauty of the program is that even if a woman does not follow through with the application process or if she is found ineligible, Medicaid providers will be reimbursed for covered services they have provided to the presumptively eligible pregnant woman for her designated eligibility period.

It should be noted that, once presumptive eligibility is implemented, the KCHIP mail in application which was temporarily used also for ***pregnant women*** *will no longer be accepted as a means of obtaining eligibility for those over 19 years of age.*

Provider participation in the presumptive eligibility process is voluntary. Only providers who attend, personally or through a representative, the special presumptive eligibility training sponsored by the Department for Medicaid Services will be enrolled to determine presumptive eligibility.

We hope to see you or your representative at one of our presumptive eligibility training sessions. Please see the attached registration form for the locations and dates for the presumptive eligibility training sessions. There is no fee for the training. If you choose to participate, you will be an enrolled presumptive eligibility provider. Feel free to bring any office staff you believe would benefit from the training. Please fax the attached registration form to (502) 564-9445 or call us at (866) 818-0073 if you plan on attending. Together, we can ensure healthy outcomes for all Kentuckians.

Sincerely,

Marcia R. Morgan
Secretary

FAX REGISTRATION FORM

TO: Department for Medicaid Services "Presumptive Eligibility Help Desk" FAX # (502) 564-9445

FROM: _____ _____
(Provider/Clinic Name) (Medicaid Provider ID #)

_____
(Telephone Number)

DATE: _____

SUBJECT: PRESUMPTIVE ELIGIBILITY PROVIDER CERTIFICATION/TRAINING SESSION

Please check one of the following boxes & return to DMS at the fax number listed above by October 15, 2001

☐ YES – Our practice/clinic is interested in becoming certified in the Presumptive Eligibility Process. The following individual(s) will attend the training session designated below:

_____ _____
(Print Individual's Name)/(Phone #) (Print Individual's Name)/(Phone #)

_____ _____
(Print Individual's Name))/(Phone #) (Print Individual's Name)/(Phone #)

Please check the PE Certification/Training Session you will be attending:

- ☐ Bowling Green, KY., Bowling Green Chamber of Commerce, 812 State Street, – Tuesday, October 23, 2001 – 1:30 p.m. – 4:30 p.m.
- ☐ Madisonville, KY., Trover Clinic, 200 Clinic Drive, 8th Floor Tower, Large Conference Room – Wednesday, October 24, 2001 – 10:00 a.m. – 1:00 p.m.
- ☐ Somerset, KY., Center for Rural Development, 2292 South Highway 27, Suite 300 – Thursday, October 25, 2001 – 1:00 p.m. – 4:00 p.m.
- ☐ Covington, KY., Florence Government Center, 8100 Ewing Blvd., – *Monday*, October 29, 2001 – 1:00 p.m. – 4:00 p.m.
- ☐ Morehead, KY., Morehead State University, Adron Doran University Center, East Room B, 2nd Floor – Tuesday, October 30, 2001 – 9:30 a.m. – 12:30 p.m.

☐ MAYBE - Our practice/clinic is interested in learning more about becoming certified in the Presumptive Eligibility Process, but cannot attend any of the upcoming sessions. Please include us on distribution lists for future programs.

☐ NO – We have no interest at this time.

Our office/clinic has Internet Access: ☐ YES ☐ NO

Please bring your Medicaid Clinic or Individual Provider Number with You to the training session.

9/25/01

PRESUMPTIVE ELIGIBILITY
FACT SHEET

What is Presumptive Eligibility?

Presumptive Eligibility (or "PE") is an eligibility tool adopted by Kentucky's Department for Medicaid Services to expedite a pregnant woman's access to needed outpatient prenatal services. Presumptive eligibility provides temporary prenatal health benefits to eligible women while their application for full Medicaid benefits is being processed. PE enlists the aid of health care providers who are treating pregnant women to help identify, enroll and educate qualified patients on this valuable benefit.

Why is the Commonwealth Offering this Program?

The Department for Medicaid Services wants to improve pregnant women's access to much needed prenatal care to assure optimal care for that mother and her unborn child. In Kentucky, 15% of pregnant women fail to receive critical prenatal care until after their first trimester. Regular prenatal care is proven to reduce many health risks to both mother and child. Early detection and appropriate management of potentially high risk pregnancies can also make a significant impact on reducing the overall cost of delivering health care to the financially needy citizens of our Commonwealth.

Who is Eligible?

PE benefits are available to pregnant women whose household income is at or below 185% of the Federal Poverty Level and who do not already have an application pending for Medicaid benefits. PE benefits end when either: (a) the patient becomes effective for coverage under Medicaid; or (b) at the end of the third month of PE (not to exceed ninety days), whichever occurs first.

What Benefits are Available to PE Recipients?

- Primary Care Services provided by a pregnant woman's primary care physician, OB/GYN, ARNP, midwife, physician assistant, rural health clinic, primary care center and/or federally qualified health center
- Preventive Services delivered by her local health department
- Laboratory Services
- Diagnostic Radiology Services (including ultrasounds)
- Dental Services
- Emergency Room Services
- Transportation (both emergency and non-emergency)
- Prescription Drugs

Hospital, mental health and services rendered by a specialist are not covered as part of PE benefits.

How Can My Practice/Clinic Help?

It is typically a health care provider and/or his/her office staff who are the first to discover that a pregnant woman may be financially unprepared to secure needed prenatal services. By initiating the PE enrollment process at that provider's site with the patient present, a pregnant woman and her health care provider can both feel secure in knowing that needed outpatient prenatal services will be paid for. The PE screening and enrollment process is quite simple and can be completed quickly by a member of the practice/clinic's office staff. Practices/clinics must have Internet access and complete a free training program before they can enroll patients in the PE program.

Where Can I Get Additional Information?

Contact the Department for Medicaid Services' "PE Help Desk" at **866-818-0073**.