Presumptive Eligibility & Deemed Portal Guide

Use the Presumptive Eligibility and Deemed Portal to Process a Presumptive Eligibility Request

Ohio
Department of Medicaid
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What is Presumptive Eligibility (PE)?

Presumptive Eligibility is a program that provides immediate access to health services by giving residents temporary health coverage through Medicaid if they are presumed to be eligible.

Who is eligible for Presumptive Eligibility?

Presumptive Eligibility requestors must meet the following criteria to receive PE:

- » Not currently receiving Medicaid benefits and have not had a Presumptive Eligibility span in the past twelve months (pregnant women are limited to one Presumptive Eligibility span per pregnancy)

- » A resident of Ohio

- » US citizen or has satisfactory immigration status

Approved residents are categorized into one of the following four Presumptive Eligibility program types:

- » Presumptive Eligibility Child

- » Presumptive Eligibility Parent/Caretaker

- » Presumptive Eligibility Pregnant Women

- » Presumptive Eligibility Adult

What is a Qualified Entity (QE)?

An entity that is capable of conducting and authorizing Presumptive Eligibility determinations to identified groups as determined by the state agency.

How can providers participate in Presumptive Eligibility?

In order to make Presumptive Eligibility determinations, a hospital or FQHC must:

- » Participate in the Medicaid program

- » Notify the state of its election to make Presumptive Eligibility determinations, complete required training and execute an acknowledgement form then return that form to: pequestions@medicaid.ohio.gov

- » Agree to make Presumptive Eligibility determinations consistent with policies and procedures of the state by signing the Acknowledgement of Terms and Conditions

- » Agree to provide the consumer with 36 hours' worth of needed medications

  Note: *The PE Acknowledgement Form is available online:*

  http://medicaid.ohio.gov/Portals/0/Providers/Training/PE_Acknowledgement_Form.pdf

What is the duration of a Presumptive Eligibility Span?

The Presumptive Eligibility period begins with, and includes, the day on which the provider makes the Presumptive Eligibility determination.

Note: Services provided to a resident will only be eligible for payment starting on the day Presumptive Eligibility results are approved and accepted.

The Presumptive Eligibility period ends on:

- » The day on which the state makes the eligibility determination for full Medicaid, or

- » The last day of the month following the month in which the qualified entity makes the Presumptive Eligibility determination, if the individual does not file a full application by that time.

The Presumptive Eligibility period is limited to one request every 12 months, or once per pregnancy for pregnant women (Presumptive Eligibility Pregnant

women benefits are limited to ambulatory prenatal care, birthing expenses are not covered).

Presumptive Eligibility requests must be submitted and accepted within 25 hours of initiation in the portal. Requests that exceed the 25 hour window will expire and be deleted from the system.

What staff are eligible to make Presumptive Eligibility determinations?

Once a provider is a qualified entity, any employee who is properly trained and certified can make Presumptive Eligibility determinations. Third party vendors or contractors may not make Presumptive Eligibility determinations.

Are there any provider performance standards that must be met?

Ohio Department of Medicaid staff will monitor Presumptive Eligibility enrollments monthly, quarterly, and annually to determine if the following standards are being met by any single qualified entity:

» For all persons enrolled presumptively by a qualified entity, at least 85% must have had an application for full Medicaid benefits submitted.

» For all persons who had an application for full benefits submitted, at least 85% of those must result in an awarding of Medicaid eligibility.

» The State has the authority to take corrective action against a provider, including termination from the Presumptive Eligibility program, if the provider does not follow state policies or does not meet established standards.

Security Roles

The security role that you are assigned in the Presumptive Eligibility and Deemed Portal determines the requests that you can view and update:

Qualified Entity Worker (MITS Agent): Can submit, search for and update their own Presumptive Eligibility requests.

Qualified Entity Supervisor (MITS Administrator): Can submit, search for and update their own Presumptive Eligibility requests. Additionally, they can search for and update the requests of the workers assigned to their provider.

Note: Services provided to a resident will only be eligible for payment starting on the day Presumptive Eligibility results are approved and accepted.

How do I navigate to the Presumptive Eligibility and Deemed Portal?

The Presumptive Eligibility and Deemed Portal is your starting point to submit and view Presumptive Eligibility requests.

To access the Presumptive Eligibility and Deemed Portal, visit: https://pe.benefits.ohio.gov

This guide will walk you through navigating the Portal and completing the screens.

Connecting Individuals to Full Medicaid Coverage

Individuals can apply for full Medicaid coverage:

» Online at www.Benefits.Ohio.gov
» By calling the Ohio Medicaid Consumer Hotline at (800) 324-8680
» By mailing or faxing the paper application to the local CDJFS
» In-person at the local County Department of Job and Family Services (CDJFS)

Individuals can find help completing their application by contacting the Hotline or by using the 'Online Help' tool provided on the Ohio Benefits portal.

If you have further questions, please contact: pequestions@medicaid.ohio.gov

Login Page
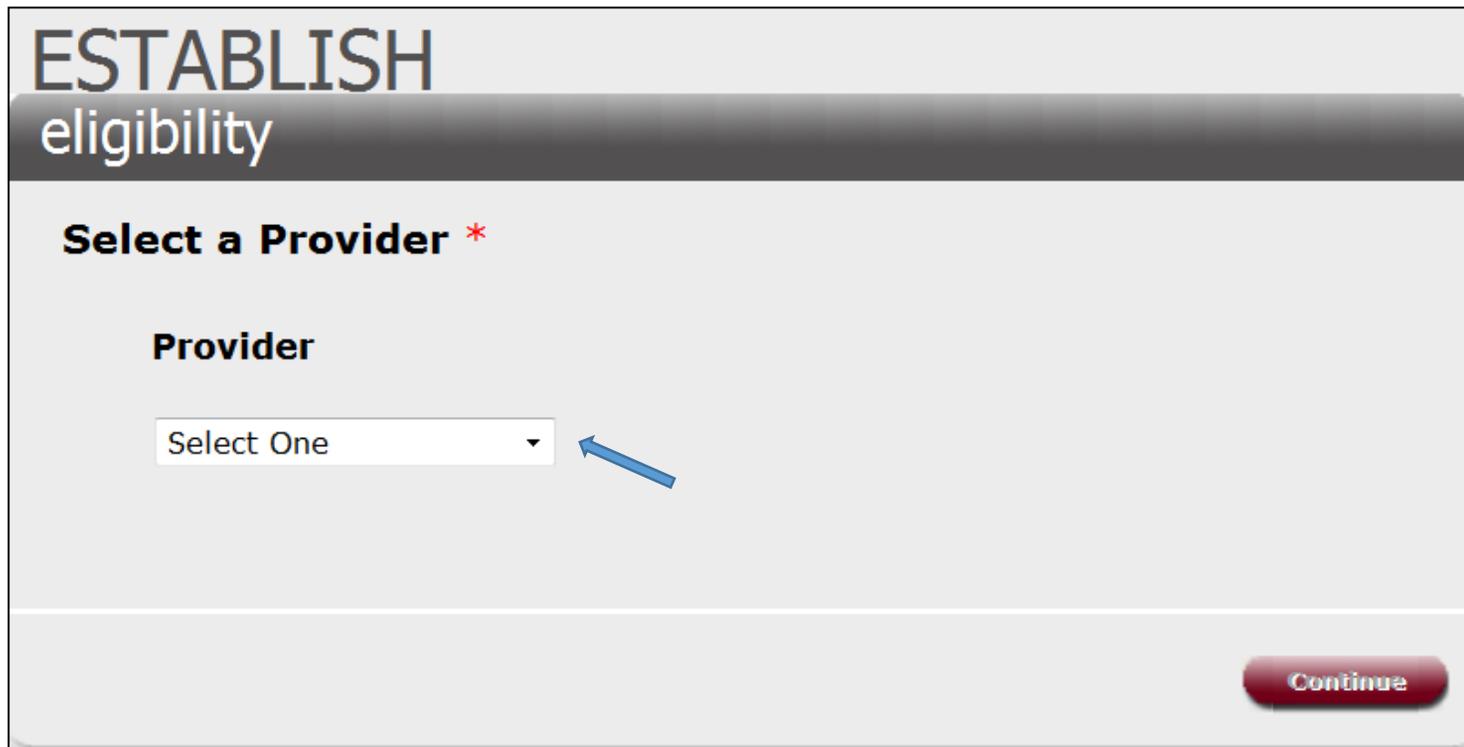

In the 'User Name' text box, type your MITS user name.

In the 'Password' text box, type your MITS password, then click the 'Log In' button.

The Select a Provider page will then display.

Select a Provider

The 'Select a Provider' page requires you to select the qualified provider which you are authorized to represent prior to submitting Presumptive Eligibility requests.

To select a provider, click the 'Provider' dropdown box. All providers associated with the user will be listed. Choose the appropriate provider you are representing from the dropdown list.

Click the 'Continue' button to proceed to the Presumptive Eligibility and Deemed Portal homepage

Home Page

The Presumptive Eligibility and Deemed Portal is your starting point to submit and view Presumptive Eligibility requests.

Introducing a Request

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Let's get started

As a Qualified Entity, you have been authorized to process a Presumptive Eligibility determination.

You will answer the following questions based on the information provided by the requestor.
Here are some things that may be required to process the determination.

For the person seeking coverage:

- Confirmation of any prior Presumptive Eligibility Coverage or Existing Medicaid coverage
- First Name
- Last Name
- Gender
- Date of Birth
- State residence
- Home address
- Citizenship
- Income
- Pregnancy status

For the family members living with this person:

- First Name
- Last Name
- Gender
- Date of Birth
- Income
- Pregnancy status

For Deemed Newborns:

- First Name
- Last Name
- Gender
- Date of Birth
- Mother's first name
- Mother's last name
- Mother's Medicaid ID
- Mother's date of birth

Upon completion of the required fields, a Presumptive Eligibility determination will be completed, or a child's Deemed Newborn eligibility will be processed.

☐ *By submitting this presumptive determination, I acknowledge that I am responsible for taking all reasonable steps necessary to ensure that an application for full Medicaid benefits is filed by the requestor or for the requestor. If less than 85% of presumptive enrollments by this qualified entity are followed by applications for full benefits, the system will shut off the ability of the QE to presumptively enroll requestors.*

Continue

The 'Let's Get Started' page provides an introduction to the request for a potential Presumptive Eligibility recipient and identifies some of the things that may be required to process the determination. Review the information and confirm that you are completing the request based on information provided by the requestor.

You must click in the confirmation checkbox indicating acknowledgement to continue. Click the 'Continue' button to go to the 'Select a Program' page in the request.

Select a Program

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Select a Program *

○ **Presumptive Eligibility**

○ **Deemed Newborn**

[Back] [Save and Continue]

The 'Select a Program' page allows you to select Presumptive Eligibility as the program you will be requesting.

Once you have selected 'Presumptive Eligibility', click the 'Save and Continue' button to proceed with processing the request.

Over the pages that follow, you will enter various pieces of information for the individuals requesting coverage, as well as any individuals currently living in their home. These pages include dynamic questions which may result in additional questions that are dependent on how you responded to initial questioning.

Enter Personal Information

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Enter Personal Information

Welcome → Start Request → People → Income → Other → Submit

Percent Complete: 1.0%

* Red asterisk indicates required

Requestor Information: Who are you seeking coverage for?

First Name *	Middle Initial	Last Name *	Suffix	Maiden Name
			Select One ▾	

Contact Information

Home Phone Number (999)999-9999	Mobile Phone Number (999)999-9999	Personal Email Address (example@abc.com)

As you complete each part of the request, you will be able to see your progress in the tracking bar at the top of the screen that shows "Percent Complete." This section of the request is labeled 'Start Request.' It asks you to enter your personal information.

On this page, you enter the requestor's name and contact information.

You must enter information in all fields designated by a red asterisk (*).

Individuals cannot be required to provide proof/documentation of any PE eligibility criteria. Hospital staff must accept self-attestation of all eligibility factors.

Enter Personal Information

Address Information

Does this person have a home address? *
○ Yes ○ No

Mailing Address Line 1 *

[   ]

Mailing Address Line 2

[   ]

Mailing City *   Mailing State *   Mailing County *   Mailing Zip Code *
[   ]   [Ohio   ▼]   [▼]   [   ]

[Back] [Save and Continue]

You must enter information in all fields designated by a red asterisk (*).

When you have completed the page, click the 'Save and Continue' button. The 'Select Address' page will be displayed.

Select Address

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Select Address

Welcome | Start Request | People | Income | Other | Submit

Percent Complete: 1.0%

Please choose one option for Home address and one option for mailing address.
Please choose one of the option for Home address.

Your Home address as you entered is:
- 50 WEST TOWN STREET
  Columbus, OH Franklin 43287

Back   Save and Continue

The 'Select Address' page displays the address from the requestor and checks it against the United States Postal Service (USPS) database, then puts the address in their standard format.

Select the appropriate address(es) and click the 'Save and Continue' button.

Tell Us More

The 'Tell Us More' page collects basic information about the requestor. This page uses dynamic questions to present only the questions that are relevant to the person requesting Presumptive Eligibility.

When you have completed the page, click the 'Save and Continue' button.

Background Information

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Background Information

| Welcome | Start Request | People | Income | Other | Submit |

Percent Complete: 17.0%
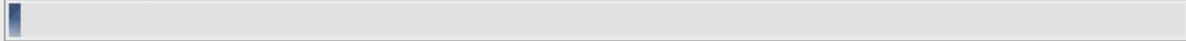
Please give us additional information about this person.

Jane Doe

Is this person a resident of Ohio?	⦿ Yes ○ No
Was this person ever in foster care?	○ Yes ⦿ No
Does this person have a parent living outside the home?	○ Yes ⦿ No
Is this person a U.S. citizen?	⦿ Yes ○ No
What is this person's race? **(Optional)**	☐ American Indian or Alaskan Native
	☐ Asian
	☐ Black or African American
	☐ Hispanic or Latino
	☐ Native Hawaiian or Other Pacific Islander
	☐ White
	☑ Unknown

Back   Save and Continue

On the Background Information page, enter information about the requestor's foster care, citizenship, and race information.

When you have completed the page, click the 'Save and Continue' button.

Start Request Summary

The 'Start Request Summary' page summarizes the basic and background information about the primary requestor that has been entered. This page gives you an opportunity to review the information before moving on to the next page in the request.

After reviewing the 'Start Summary Request' page and ensuring the information entered is accurate, click the 'Save and Continue' button.

People Summary

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People Summary

Welcome | Start Request | **People** | Income | Other | Submit

Percent Complete: 17.0%

Primary Requestor | John Doe

Does anyone else live in your home? Please include yourself, your spouse/partner and children who live with you and/or anyone on your same federal income tax return if you file one. If you don't file a tax return, remember to still add family members who live with you.

Add Another Person

Save and Exit

Save and Continue

The 'People Summary' page displays the primary requestor's name and gives you the ability to add additional people to the household and benefits request.

For Presumptive Eligibility, if there are additional people living in the primary requestor's household, click the 'Add Another Person' button. You will be directed to information about the additional people living in the requestor's home.

You will be prompted to enter the same basic information that was previously collected for the primary requestor, and indicate whether this person is also seeking coverage.

If there are no additional people to add to the request, click the Save and Continue button.

Income Information

The 'Income Information' page asks about individuals in the home who have income.
This includes wages from employment or income from any other sources.

Make the appropriate selection then click the 'Save and Continue' button.

If you selected 'Yes', the 'Income Detail' page displays.

Income Detail

The 'Income Detail' page is used to document the current monthly gross income for each individual who resides in the home.

Choose the appropriate person from the 'Select a person' drop-down menu and then enter that person's income in the 'Monthly Gross Income (before taxes)' text box.

Click the 'Save and Continue' button. The 'Income Detail Summary' page is displayed.

Income Summary

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Income Detail Summary

| Welcome | Start Request | People | Income | Other | Submit |

Percent Complete: 42.0%

Show All | Hide All

Income Detail

John Doe   Hide Details

Monthly Gross Income (before taxes):   100

Delete   Edit

Does anyone have income?   Add Another Entry

Back   Continue

The Income Detail Summary page displays income information for the identified person with income.

If any additional individuals from the household currently have income, you can add their income information by clicking the 'Add Another Entry' button. You can also edit and remove entries on this page as needed.

After verifying that all information is listed correctly, click the 'Continue' button.

Household Relationships

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Household Relationships

Welcome | Start Request | People | Income | Other | Submit

Percent Complete: 60.0%

Listed below are all members of your household entered on the application. If any household member is missing, please return to the People Tab and add them. When all household members have been listed, please tell us each person's relationship to one another. This information is required to process your application.

Household Member	Relationship*	Related Household Member	Start Date	Parental Control
john doe	is the [Select One ▾] of	Jane Doe	as of [ ] 🗓	☐

There is no other household member identified to have a relationship with. Please go to People category to add if you have missed anyone.

Back | Save and Continue

The 'Household Relationships' page provides you the ability to establish relationships between all members of the household.

For each 'Household Member' listed, enter the proper 'Relationship' from the dropdown menu. Enter the start date of the relationship (make sure the date is prior to the date you are making the Presumptive Eligibility determination).

In the screen above, John Doe is the father of Jane Doe. Enter 'Father' from the 'Relationship' dropdown list. The 'Start Date' should be prior to the date you are processing the request for Presumptive Eligibility. Since John Doe is the father of Jane Doe, click the 'Parental Control' box to indicate John has parental control of Jane. Caretakers/Relatives may also have 'Parental Control' of a child.

After entering the correct 'Relationship' information for each individual listed, click the 'Save and Continue' button.
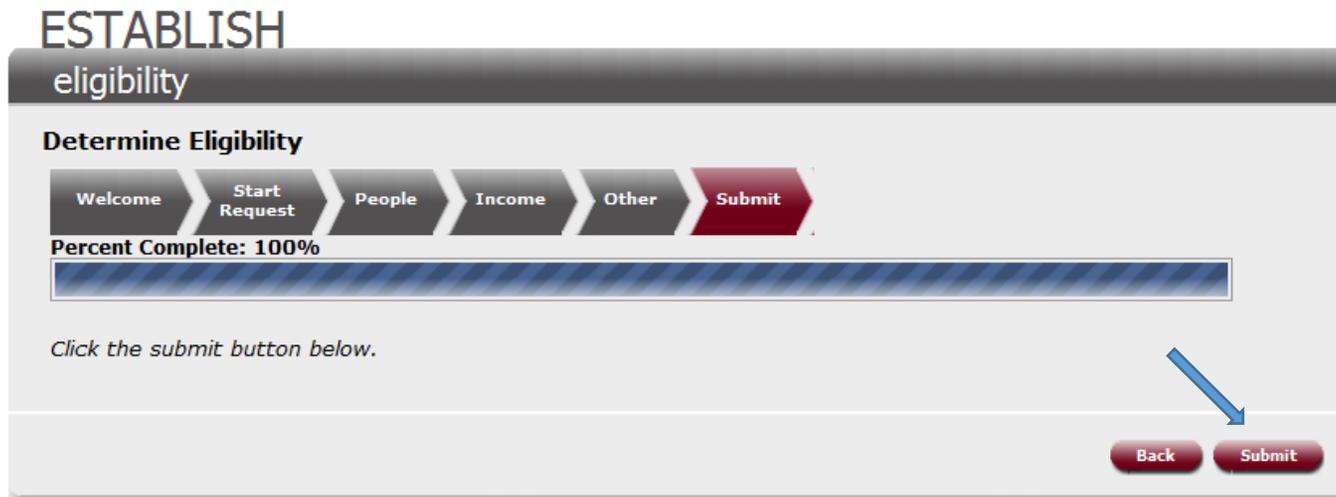
Determine Eligibility

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Determine Eligibility

Welcome ＞ Start Request ＞ People ＞ Income ＞ Other ＞ **Submit**

Percent Complete: 100%

Click the submit button below.

Back   Submit

Clicking the 'Submit' button on the 'Determine Eligibility' page prompts the Presumptive Eligibility and Deemed Portal to determine the requestor's eligibility for Presumptive Eligibility benefits.

Eligibility Results

The 'Eligibility Results' page provides an eligibility determination for each individual requesting Presumptive Eligibility.

The page lists the individuals who requested Presumptive Eligibility, whether the request was approved or denied, and the type of Presumptive Eligibility:

» Presumptive Eligibility Child

» Presumptive Eligibility Parent/Caretaker

» Presumptive Eligibility Pregnant Women

» Presumptive Eligibility Adult

Presumptive Eligibility will be approved if the requestor(s) meet the eligibility requirements based on eligibility rules. The begin date for coverage is the date eligibility is approved and the results are accepted.

Click the 'Accept Results' button to confirm the results of the eligibility determination.

The Presumptive Eligibility determination results are transferred to the Ohio Benefits system when the results are accepted.

Confirmation Page

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Confirmation

Thank you.
The following PE Determination results have been accepted.
The PE and Medicaid request confirmation is 0-i0z1yh

First Name	Last Name	Result	Reason	Type
john	doe	Approved		PE ADULT
Jane	Doe	Approved		PE ADULT

Notice Language   English ▼

Print Request   Print Notice

Exit

The 'Confirmation' page displays eligibility determination results, program type, and reason (if denied) for each Presumptive Eligibility request. If the request is approved, a confirmation number will be listed on this page.

The Presumptive Eligibility and Deemed Portal generates both a PDF of the request and a Notice of Action.

» The Notice of Action will inform the requestor of:

» Whether they are approved or denied eligibility at the time of the determination

» Medicaid billing number

» Reason for denied eligibility (if denied)

This notice and request should be printed to provide a paper copy to the requestor.

View Requests

Next we will discuss how you can view existing requests using the "View Requests" portlet on the homepage.

View Results/My Requests

The 'View Requests' portlet provides you with the ability to search for requests using a variety of search criteria such as date range, status, and confirmation number.

After executing a search, you will see all the results that match your criteria.

The 'My Requests' link gives you the ability to search the Presumptive Eligibility requests that you have submitted to locate those that match the criteria you enter.

On the 'My Requests' search page, you must enter information in all fields designated by a red asterisk (*). Entering additional information will help you to refine your search for greater accuracy.

Note: Services provided to a resident will only be eligible for payment starting on the day Presumptive Eligibility results are approved and accepted.

Other Requests

VIEW
Other Requests

Search by Request Date

From Date *	To Date *	Status	Type
02/24/2014	03/10/2014	Select One ▼	Select One ▼

Last Name	First Name	Confirmation Number	QE Worker Name

Search   Close

The 'Other Requests' link gives Qualified Entity Supervisors the ability to search for their own Presumptive Eligibility requests or for those that belong to members in their group that match the criteria that is entered.

You must have a Qualified Entity Supervisor role to use this feature; a user with the Qualified Entity Worker role will not see this link.