HOSPITAL PRESUMPTIVE ELIGIBILITY

Legal Authority: 42 CFR 435.1101-1103; 42 CFR 435.1110; Tenn. Comp. R. & Regs. 1200-13-20

1. Policy Statement

The Hospital Presumptive Eligibility (HPE) program provides a period of presumptive TennCare Medicaid eligibility to individuals determined eligible by Qualified Entities. All Qualified Entities make presumptive eligibility determinations for the Child 0-1 MAGI, Child 1-5 MAGI, Child 6-18 MAGI, Pregnancy MAGI, Caretaker Relative and Former Foster Care categories. Qualified Entities operated by DOH make presumptive eligibility determinations for the Breast or Cervical Cancer (BCC) category.

2. Qualified Entities

Participating hospitals who serve as Qualified Entities base presumptive determinations on self-attested financial and non-financial criteria for the category in which an individual groups. Employees of Qualified Entities are required to assist the applicant in completion of a full Medicaid application for any individual who applies for HPE, regardless of whether the individual is determined presumptively eligible. Employees of third-party contractors/vendors cannot make HPE determinations.

3. Eligibility Period

Eligibility for HPE begins the date a Qualified Entity determines an individual is presumptively eligible and will end the earlier of:

a. In a case where a Medicaid application has not been filed, the last day of the month following the month in which the determination of presumptive eligibility was made; or
b. In a case where a Medicaid application has been filed, the date a determination is made on the Medicaid application.

Applicants are only allowed one period of HPE every two calendar years for non-pregnancy-related categories. For pregnant women, one period of presumptive eligibility is allowed per pregnancy.

4. Non-Financial Eligibility Requirements

a. Age: Individuals are required to meet age requirements for the category in which he groups. Self-attestation of age is accepted.

b. Caretaker Relative Status: Self-attestation of Caretaker Relative status is accepted. Refer to the *Caretaker Relative MAGI* policy regarding Caretaker Relative status.

c. Citizenship: Individuals must be a U.S. Citizen, U.S. National or eligible non-citizen. Self-attestation of citizenship or immigration status is accepted.

d. Enumeration: Individuals eligible for a Social Security Number (SSN) are required to provide a valid SSN. Self-attestation of enumeration is accepted. Individuals attesting to be a U.S. Citizen, U.S. National or eligible non-citizen should not be denied if unable to provide an SSN.

e. Former Foster Care Recipient: Self-attestation of Former Foster Care Recipient status is accepted. Refer to the *Former Foster Care Children up to Age 26* policy regarding Former Foster Care Recipient status.

f. Pregnancy: A woman must be pregnant to group in the Pregnancy MAGI category. Self-attestation of pregnancy is accepted.

g. State Residence: An applicant must be a Tennessee resident. Self-attestation of residency status is accepted.

5. Financial Eligibility Requirements

a. Household Composition

HPE applicants are subject to non-filer household composition rules. Self-attestation of household composition is accepted. The household includes the applicant and, if living with the applicant:

i. The applicant's spouse;
ii. The applicant's natural, adopted and stepchildren under age 19, or 21 if a full-time student;
iii. For applicants under age 19, or 21 if a full-time student, the applicant's natural, adopted or stepparent; and
iv. For applicants under age 19, or 21 if a full-time student, the applicant's natural, adopted and stepsiblings who are under age 19, or 21 if a full-time student.

When determining household size for a pregnant woman, the pregnant woman is counted as herself plus the number of children she is expected to deliver. When determining household size for other applicants in the household, the pregnant woman is counted as one person.

b. Income Standard

Self-attested household income is evaluated against the income standard for the TennCare Medicaid category in which the applicant groups.

c. Resource Test

There is no resource test for HPE applicants.

6. Presumptive Eligibility Application Process

Staff at participating hospitals will process eligibility for HPE. After eligibility has been determined, hospital staff will input the required eligibility information into TennCare Online Services, which will

update interChange and provide presumptive coverage for eligible applicants. Hospital staff will be notified of errors in data input that occur at the time of keying the eligibility and will be expected to submit error reports to correct the incorrect data. Hospitals are also encouraged to review the submitted information to ensure accuracy and can submit error reports without having been previously notified by TennCare.

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Revision History

Revision Date	Section	Section Title	Page Number(s)	Reason for Revision	Reviser
08.01.2016	2.	Qualified Entities	1	Policy Clarification	AF
01.05.2017	3.	Eligibility Period	1	Policy Clarification	RH
03.18.2019	3.a.	Legal Authority; Eligibility Period	1	Policy Clarification	SN
03.18.2019	4.a-b.; 5.a.	Age; Caretaker Relative Status; Household Composition	1-2	Non-Substantive Change	SN
01.03.2023	4.e.	Former Foster Care Recipient	2	Policy Change	AJ