



---

KENTUCKY CABINET FOR  
HEALTH AND FAMILY SERVICES

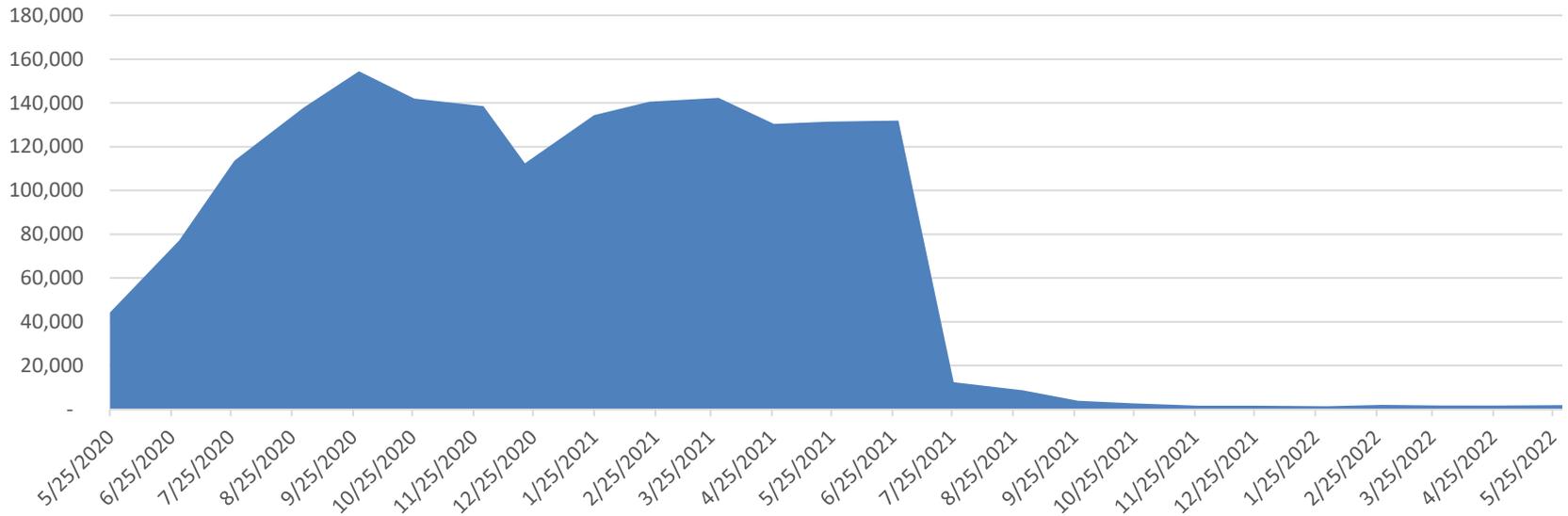
**Medicaid Oversight and Advisory Committee**  
**Medicaid Presumptive Eligibility**  
July 7, 2022

**Lisa Lee, Commissioner**  
**Department for Medicaid Services**

# Medicaid Presumptive Eligibility (PE)

- Presumptive Eligibility (PE):
  - Temporary enrollment
  - Hospital PE
  - PE for pregnant women
  - Allows members to receive services while processing full Medicaid application
  - Allows providers to receive payment while processing full Medicaid application
  - Enrollment levels back to pre-pandemic levels

# Medicaid Presumptive Eligibility

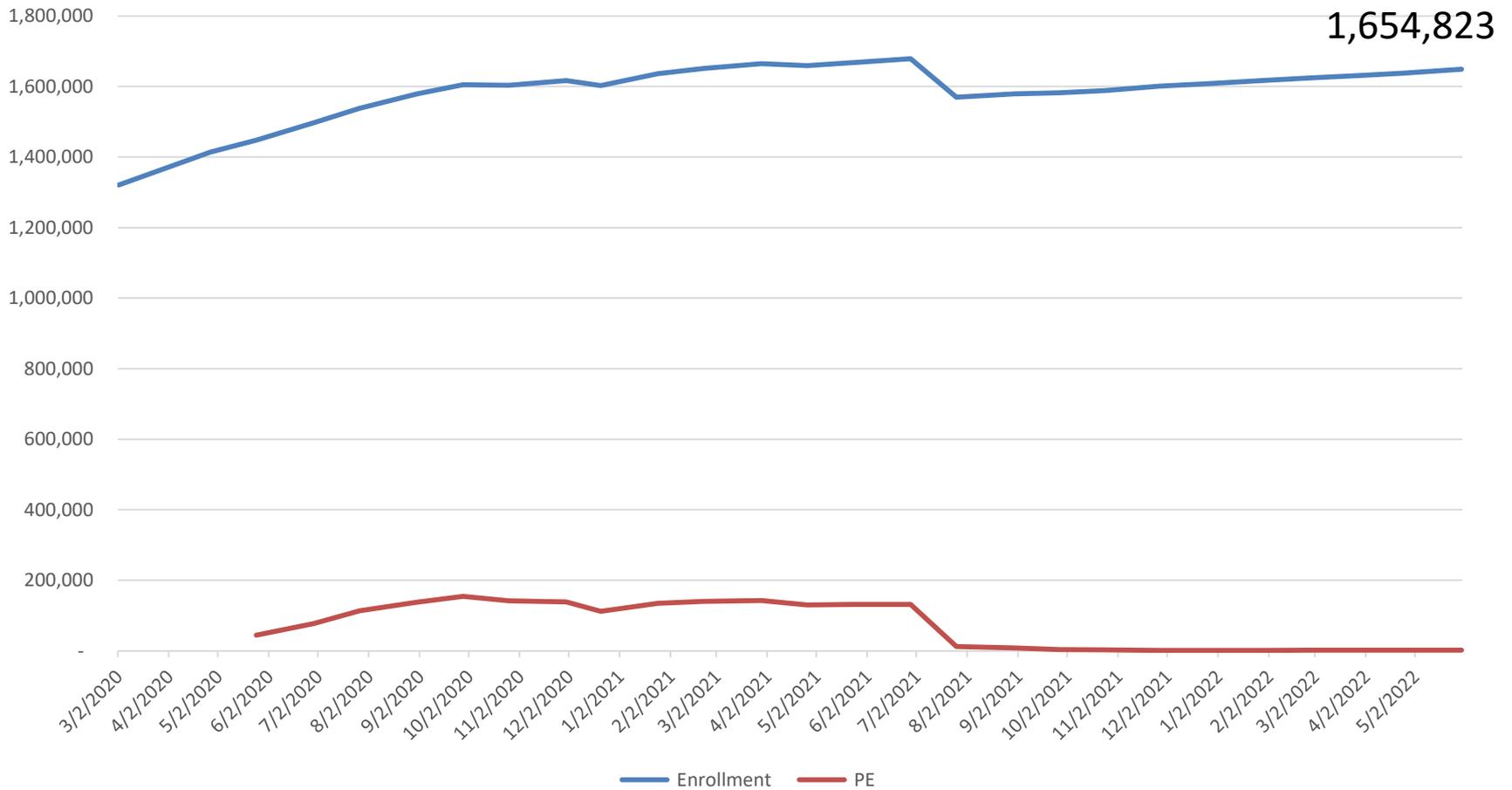


**Current Medicaid Presumptive Eligibility Enrollment: 1,924**

# Medicaid Presumptive Eligibility (PE)

- During the period of March 2020 to May 2022 243,917 individuals received Medicaid PE
- 63,054, or 26%, qualified for traditional Medicaid

# Medicaid Enrollment



# Medicaid Presumptive Eligibility (PE)

- Public Health Emergency (PHE) and Maintenance of Eligibility Requirements (MOE)
  - Ensure continuous enrollment for current enrollees
  - Provides 6.2 percent increase in federal share of Medicaid spending
  - States must apply Medicaid eligibility standards and procedures that are no more restrictive than those in place on January 1, 2020
  - Cannot disenroll individuals for procedural reasons, such as failure to respond to notice
  - Disenrollment allowed for:
    - Death
    - Move out of state
    - Member request
  - Not applicable to PE

# House Bill 7

- CHFS was considered a qualified entity for the purpose of making PE determinations based on emergency state plan amendment that expires at end of PHE
- Section 8 of HB 7 prohibits CHFS or the department from being a PE entity – form will be removed from website July 14, 2022
- Section 9 of HB7 relates to hospital PE
  - Hospitals must assist individuals in completing a full Medicaid application
  - Regulations related to hospital PE are in place with the exception of additional guidance about assisting individuals in completing a full Medicaid application. DMS will amend 907 KAR 20:050 in the coming months to update PE requirements
- Section 32(4) of HB7 requires the cabinet to contract with a third party to review all PE determinations made by hospitals between January 1, 2020 and effective date of HB7

# Questions?