



# Hospital Presumptive Eligibility (HPE) Application

## Provider Status and Agreement

Presumptive Eligibility (PE) is short-term Medicaid coverage for children up to age 19, pregnant women, former foster care and parent/caretaker relatives. It is also the process of applying for this short-term coverage. This means covered medical services accessed during this time by the eligible individual will be paid by Medicaid. Periods of presumptive eligibility are limited to no more than one presumptive eligibility period within a calendar year.

A finalized and approved full Alabama Medicaid application form may result in 12 months of Medicaid eligibility for children; coverage for pregnant women (which includes two months of post-partum care); coverage for parent/caretaker relatives; coverage for former foster care; Breast and Cervical Cancer Program coverage; or one year of family planning Medicaid coverage for women. The Alabama Medicaid agency expects the HPE provider to make a good faith effort to refer and encourage individuals to begin the full Medicaid application process to provide patients the most comprehensive coverage period

To become a HPE Determiner, an individual must first be a member of an eligible hospital. Each determiner will also be required to complete an Alabama Medicaid sanctioned training to qualify as a Hospital Presumptive Eligibility Determiner. Each qualified hospital will be responsible for ensuring that the trained determiners follow applicable Alabama Medicaid rules

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I understand that presumptive eligibility provider status means that this hospital will, to the best of our ability, use Alabama Medicaid's PE forms and methodology to establish PE for individuals, entitling pregnant women to receive Medicaid coverage for ambulatory prenatal services and full coverage for children, former foster care and parent/caretaker relatives.

I understand that the hospital must keep complete and thorough records on all PE clients, and that these records are subject to review by state *and/or* federal agencies. I understand hospital staff must sign and abide by the Determiner Code of Conduct. Failure to sign the Code of Conduct or to comply with guidelines for establishing PE status may result in denial of application for determiner status or immediate termination of determiner status.

Alabama Medicaid may terminate HPE status immediately if the Code of Conduct is breached or if the HPE fails to comply with Alabama Medicaid guidelines for establishing HPE status.

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Provider Name (*Please Print*)

\_\_\_\_\_  
Provider Telephone Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Provider's Medicaid Billing Number

\_\_\_\_\_  
Provider's E-mail Address

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date