



Presumptive Medicaid

Hannah Griffin, RN, BSN
Flathead City-County Health Department



About Me & Maternal Child Health

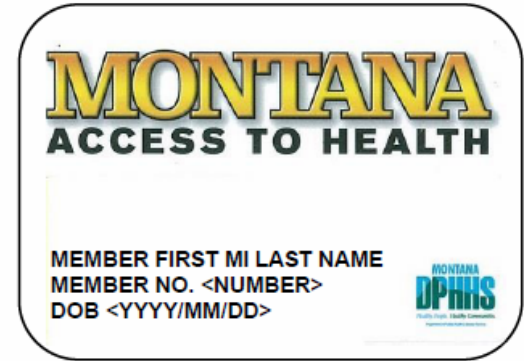
- Maternal Child Health RN at local health department
- Maternal Child Health Block Grant

State Performance Measure 2: Family Support & Health Education: Number of clients ages 0-21, and women ages 22-44 who are assessed for social service and health education needs; and are placed into a referral and follow-up system, or provided with health education as needed



What is Presumptive Medicaid?

- Short term, immediate Medicaid coverage for special populations that lasts up to 2 months
- Provides coverage while waiting for long-term coverage to be approved
- Can only be used once a year or once per pregnancy





Who can Administer Presumptive Medicaid?

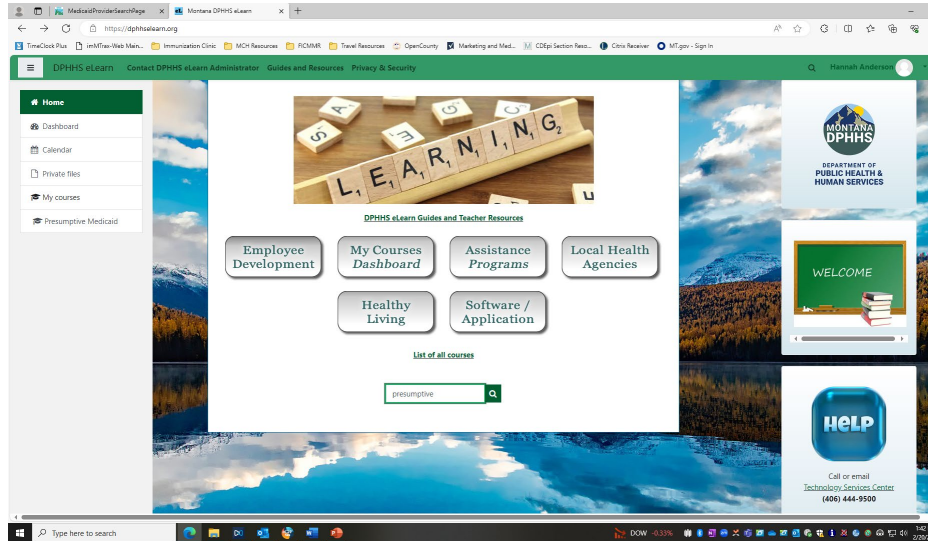
Pregnancy Medicaid ONLY:

- Migrant Health Centers
 - Public Health Departments
 - Community Health Centers
 - State Perinatal Programs
 - WIC
 - IHS/Tribal Health
- Hospitals can do Presumptive Medicaid for pregnant women, children, breast and cervical cancer, former foster care children, and parent/caretaker Medicaid

**Any staff member at an
eligible facility can be trained
to make Presumptive
Medicaid determinations!**



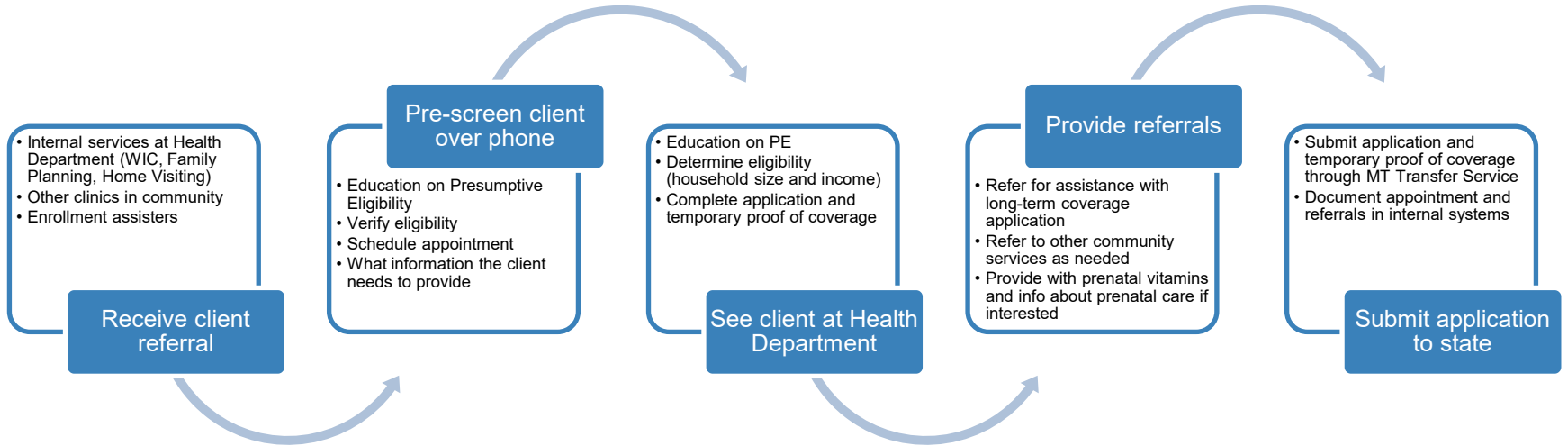
How to Get Trained



- Complete online training with DPHHS
- Can complete training on your own time
- Open resource quiz at the end
- 2-3 hours max
- <https://dphselearn.org/login/index.php>



Presumptive Medicaid at Local Health Departments





What We Have Learned: Coverage Limits

- Conflicting info!
- MCA states: ambulatory prenatal care ONLY
- Health Coverage Unit staff at DPHHS: any pregnancy related care
- Medicaid eligibility portal: appears no different than standard Medicaid

- Key takeaway: Reassure patients that prenatal care is covered. They should speak directly with their providers to determine coverage for other needs.



What We Have Learned: Qualified Non-Citizens



Presumptive Eligibility Application Addendum for Qualified Non-Citizens

ALL PERSONS WHO ARE IMMIGRANTS NEED TO REVIEW THE FOLLOWING INFORMATION TO DETERMINE IF THEY ARE A QUALIFIED NON-CITIZEN; THEN THEY SHOULD MARK THE APPROPRIATE RESPONSE ON PAGE 1.

Those who are in ANY of the following groups would be considered a Qualified Non-Citizen:

- Lawful Permanent Residents (LPR/Green Card Holder)** -- SEE FURTHER INFORMATION, BELOW
- Asylees
- Refugees
- Cuban/Haitian entrants
- Paroled into the U.S. for at least one year
- Conditional entrant granted before 1980
- Battered non-citizens, spouses, children, or parents
- Victims of trafficking and his or her spouse, child, sibling, or parent or individuals with a pending application for a victim of trafficking visa
- Granted withholding of deportation
- Member of a federally recognized Indian tribe or American Indian born in Canada
- Children lawfully residing in the state of Montana (lawfully present and otherwise eligible for Medicaid or HMK in the state, including being a state resident)

**In order to get Medicaid coverage, under current law most ADULT Lawful Permanent Residents or green card holders have a 5-year waiting period. This means they must wait 5 years after receiving "qualified" immigration status before being eligible for Medicaid. There are also exceptions -- Lawful Permanent Residents who don't have to wait 5 years -- such as people who used to be refugees or asylees.

Montana has removed the 5-year waiting period to cover lawfully residing children who are otherwise eligible for Medicaid or HMK. A child is "lawfully residing" if lawfully present and otherwise eligible for Medicaid or HMK in the state (including being a state resident).

NOTE: Immigrants who are qualified non-citizens are generally eligible for Medicaid and Children's Health Insurance Program (HMK) coverage IF they are otherwise eligible for Medicaid and HMK in the state; that is, if they meet Montana's income eligibility rules.

- Ask client to bring any and all documentation of their immigration status
- State Medicaid office has no clear paperwork requirements





What We Have Learned: Pregnancy Termination

- Terminations are covered by Medicaid if medically necessary
- Patients need to work with a provider to determine if their pregnancy termination would be covered
- Contraception is typically covered after a pregnancy ends
- Pregnancy termination is a sensitive topic for patients – develop language that doesn't make assumptions about the pregnancy!



What We Have Learned: Other Types of Medicaid

Patients who are enrolled in another Medicaid plan (Standard Medicaid, Plan First, etc.) are NOT eligible for Presumptive Medicaid!

They should report their pregnancy or other status change directly to Medicaid.





What We Have Learned: Household Members



- Pregnant woman
- The pregnancy
- Father of the pregnancy IF married AND living in the same household
- Other living children



What We Have Learned: Other Barriers

- Interpretation services for non-English speakers
- Knowledge of other community resources (car seats, safe sleep, where to get prenatal care, WIC, etc.)





Why This Work Matters

- Medicaid Unwinding – 60% of Medicaid and CHIP recipients have been disenrolled from Medicaid in Montana
- In November 2023, 25% of Medicaid/CHIP terminations were due to a procedural or administrative reason
- Local example: half of preventable fetal/infant deaths in Flathead County did not receive adequate prenatal care
- Montana PRAMS data: women who do not have insurance pre-pregnancy are more likely to get inadequate prenatal care throughout their pregnancy (less than 50% of expected visits)
- Long wait times to get enrolled in long-term coverage

Thank you!

Questions?

Hannah Griffin, RN
hgriffin@flathead.mt.gov