



## State of New Jersey

DEPARTMENT OF HUMAN SERVICES  
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

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Director

**MEDICAID COMMUNICATION NO.:** 01-02

**DATE:** January 16, 2001

**TO:** County Board of Social Services Directors  
State Eligibility Determination Agencies

**SUBJECT:** Presumptive Eligibility Reporting Procedures

As you may know, since the implementation of presumptive eligibility for pregnant women more than ten years ago, this process has expanded significantly, now including children and additional adults, and involving more types of providers than were involved in the past.

Our ability to track the outcomes of presumptive eligibility determinations has always been an important part of this process, and continues to be important with the introduction of these new populations of eligible people. There are two reasons why this part of the process is so critical. The first is to enable us to track the rate of presumptively eligible individuals who ultimately apply for full program benefits. This now has significant impact on the funding for services used by presumptively eligible applicants. The second, equally important reason, is so we can continue presumptive eligibility until an application which has been submitted can be reviewed and, if pending, completed.

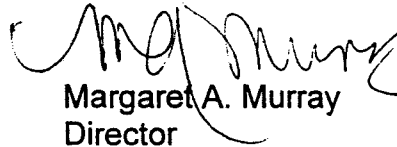
With some of the recent changes in this program related to children and adults, it has become necessary to place the responsibility of PE extensions with the eligibility determination agencies, rather than the providers. However, follow-through with the turn-around document, used for dispositions and requesting extensions, has been sporadic. As a result, both clients and providers are affected.

It is extremely important that these documents are returned when a PE case has been referred to your agency. If no application is submitted by the end of the initial PE period, then a disposition to that effect should be submitted within one week after the eligibility period ends. If the case must be referred to another agency, then the disposition should be returned indicating that transfer, and requesting an extension of presumptive eligibility. Likewise, findings of eligibility or ineligibility resulting from applications matched up with PE referrals should also generate a return of the PE disposition form. In other words, whether an application is received or not, no matter what the outcome, the disposition should always be returned to the PE Unit for tracking and, where indicated, further action.

Many PE providers are also enrollment sites, and will be encouraged to be sure an application follows a presumptive eligibility determination. Where your agency has a worker at the presumptive eligibility provider site, your workers should be accepting those applications as a matter of course. There is a growing concern that we are permitting a lapse in coverage for individuals who have done everything they should. While the reporting component of presumptive eligibility may be burdensome, addressing the potential consumer complaints and remedial actions which are beginning to result could, in the long term, be much more labor intensive for everyone.

Your assistance in maintaining the effectiveness of this vital program is, of course, appreciated.

Sincerely,

  
Margaret A. Murray  
Director

MAM:Ss

c Christine Grant, Commissioner  
William Conroy, Deputy Commissioner  
Department of Health and Senior Services

David Heins, Director  
Division of Family Development

Charles Venti, Director  
Division of Youth and Family Services