This section details the patient enrollment process for the Hospital Presumptive Eligibility (PE) program and includes information about Hospital PE patient eligibility criteria.

### Hospital PE

#### Program Overview

Under the Hospital Presumptive Eligibility (PE) program, hospitals assist patients who are being admitted to the hospital to apply for temporary, no Share of Cost Medi-Cal benefits. Depending on the patient’s answers during the application process, they may be presumed eligible for Medi-Cal.

Hospitals qualified under the state plan or hospitals with a Medicaid 1115 demonstration waiver have the option as qualified entities to make presumptive eligibility determinations.

Patients may be granted coverage for a period of up to two months, beginning the first day of the month the Hospital PE application is approved, and ending the last day of the following month.

Following completion of the patient’s Hospital PE application and submission of patient information through the web-based Hospital PE application portal, patients who are pre-enrolled in Medi-Cal receive a copy of the *Immediate Need Eligibility Document* and insurance affordability application to apply for healthcare coverage beyond the pre-enrollment period.

#### Hospital Responsibilities

Hospitals must attest that all personnel participating in the Hospital PE program have taken the Hospital Presumptive Eligibility training on the Learning Management Portal (LMP), and have agreed to abide by the regulatory requirements and policies. The hospital provider must also attest that information submitted on applications and attachments is true, accurate and complete to the best of the provider's knowledge, and is furnished in good faith. The provider understands failure to comply with the requirements of the Hospital PE program may result in disenrollment from the program.
Performance Standards

For records management, hospitals are required to:

• Maintain records of the Hospital PE application (including signed application) in patient’s file for three years from the last date of billing
• Make records available to the Department of Health Care Services (DHCS) upon request
• Permit periodic review of the records with adequate notice (adequate notice being 30 days prior to review)

Hospitals are also required to:

• Provide patients with a confirmation of their Hospital PE application
• Track patient receipt of the confirmation in a log
• Provide patients with a copy of the insurance affordability application no less than 100 percent of the time

Provider Participation

The following providers can enroll patients through the Hospital PE web-based application:

• Provider Type 16 - Community Hospital Inpatient
• Provider Type 60 - County Hospital Inpatient
• Provider Type 72 - Mental Health Inpatient

Provider Identification Number (PIN)

Providers must have a Provider Identification Number (PIN) to participate in the Hospital PE process. A PIN allows providers to submit the application using the online application portal. Providers may contact the Telephone Service Center (TSC) at 1-800-541-5555, seven days a week, from 6 a.m. to midnight, for instructions about obtaining a PIN.

Provider Application and Agreements Required

Providers must complete the Hospital Presumptive Eligibility (PE) Program Provider Election Form and Agreement to join the Hospital PE program and enroll patients using the Hospital PE application portal. Providers may refer to the Hospital Presumptive Eligibility: Provider Enrollment manual section, which details instructions on filling out the form.

Providers must also have a valid Medi-Cal Point of Service (POS) Network/Internet Agreement form on file with DHCS to pre-enroll patients into Medi-Cal through the Hospital PE online application.
### Patient Eligibility Criteria

Uninsured Californians belonging to one of the five primary ACA groups may be eligible for coverage through Hospital PE:

- Children from birth up to 18 years of age
- Parents/caretaker relatives
- Pregnant women
- Former foster care children 18 – 26 years of age who received foster care on their 18th birthday
- Adults 19 – 64 years of age who are not pregnant, not enrolled in Medicare and not eligible for any group described above

Patients are not eligible for pre-enrollment through Hospital PE if they:

- Are not residents of California
- Exceed income limits for their coverage group
- Currently have health insurance through Covered California or Medi-Cal
- Have already received Hospital PE benefits in the current year or current pregnancy

### Patient Eligibility Limitations

Presumptive eligibility may be granted for periods of up to two months. The Hospital PE period begins the first day of the month the patient is admitted, and ends the last day of the following month.

**Example:** If a trauma patient is admitted to the hospital 1/31 and the application is completed 1/31, the Hospital PE period would be 1/1 through 2/28.

Patients are limited to one Hospital PE period per year. The year begins in the same month eligibility is granted. For example, if a patient is granted Hospital PE in April, the individual could not be considered for another Hospital PE period until the following April.

Pregnant women are an exception. Pregnant women are granted one presumptive eligibility period per pregnancy and could potentially receive more than one Hospital PE period per eligibility year.
### Application Preparation

Following are important steps for providers in preparing to submit presumptive eligibility applications:

**Acquire Application**

The application is available on the Medi-Cal website at [www.medi-cal.ca.gov](http://www.medi-cal.ca.gov) on the Hospital Presumptive Eligibility (PE) Program page. The application is only available in electronic format (not paper) and currently is available in English only.

**Review Patient Application**

Providers must review the pre-enrollment application after the patient, spouse, parent/legal guardian or authorized representative completes it to determine patient eligibility for pre-enrollment through the Hospital PE web-based application.

Providers are not responsible for verifying information given by applicants. Providers are only responsible for assuring that the applicant understands the questions and that the application is completed and signed.

**Print Summary for Patient Signature**

Providers print the summary of the completed pre-enrollment application for the patient, spouse, parent/legal guardian or authorized representative to sign prior to online submission. The application is not complete without a valid signature.

**Safeguard Patient Confidentiality**

Providers must provide safeguards when completing the application process to ensure patient confidentiality of the information provided on the application.

**Retain Signed Copy**

Providers retain the signed Hospital PE application form in the patient’s hospital record for three years from the last date of billing.
Completing the Hospital PE Application Online

Providers submit the Hospital Presumptive Eligibility Medi-Cal Application form through the Transactions tab on the Medi-Cal website at www.medi-cal.ca.gov.

To initiate the Hospital PE application submission, providers enter the information from the patient’s completed and signed hard copy pre-enrollment application form online for processing.

Once the online application is submitted, the patient’s information is transmitted to the Medi-Cal Eligibility Data System (MEDS) for data matching to determine if the patient is currently known or has established eligibility with a public health subsidy program. The Hospital PE determination is conducted in real-time and providers receive a timely eligibility response of approval or denial.

If the individual is not found in MEDS for services in the month of the hospital admission and eligibility requirements are met, the patient’s pre-enrollment is established.

Complete instructions for completing the online application are included in the Hospital Presumptive Eligibility (PE) Program User Guide. The user guide may be downloaded from the Medi-Cal Web site at www.medi-cal.ca.gov.

Patient Take-Home Information

Providers must give patients who are temporarily pre-enrolled in Medi-Cal a copy of the Immediate Need Eligibility Document and an insurance affordability application to facilitate the patient’s application process for ongoing health care coverage beyond the pre-enrollment period.

Continuation of Benefits

The patient’s pre-enrollment period will be extended if the patient completes and submits the insurance affordability application prior to the termination of pre-enrollment eligibility. The extension of benefits continues until the full application is adjudicated.

The patient can complete the application in paper format, online, over the phone or in person at their local county welfare office. The patient must complete and submit the insurance affordability application before the end of the pre-enrollment period to receive continuing health care coverage.

If patients have questions about the application process, providers may refer patients to Covered California at 1-800-300-1506 or the Covered California website at www.coveredca.com.