



Bulletin

NUMBER

#15-21-02

DATE

February 10, 2015

OF INTEREST TO

County Directors

Social Services Supervisors
and Staff

Financial Assistance
Supervisors and Staff

Mille Lacs Tribal TANF

MinnesotaCare Operations
Managers, Supervisors and
Staff

ACTION/DUE DATE

Please read information
and prepare for
implementation.

EXPIRATION DATE

February 10, 2017

Hospital Presumptive Eligibility

TOPIC

Hospital Presumptive Eligibility (HPE) provides temporary Medical Assistance (MA) coverage to people who meet the HPE program eligibility requirements.

PURPOSE

This bulletin describes the HPE program requirements, benefits and policy to county and tribal workers.

CONTACT

Qualified HPE hospitals should direct questions to:
Health Care Eligibility Operations (HCEO) Division
651-431-3480 or 888-702-9968. Press option 1.

MinnesotaCare Operations, counties and tribal agencies should submit policy questions to HealthQuest.

All others should direct questions to:

Health Care Eligibility and Access (HCEA) Division
P.O. Box 64989540 Cedar Street
St. Paul, MN 55164-0989

SIGNED

Nathan Moracco
Assistant Commissioner, Health Care Administration

TERMINOLOGY NOTICE

The terminology used to describe people we serve has changed over time. The Minnesota Department of Human Services (DHS) supports the use of "People First" language.

I. Background

Effective July 1, 2014, qualified hospitals may determine a person's eligibility for temporary Medical Assistance (MA) under Hospital Presumptive Eligibility (HPE), using an HPE application form. HPE was established by the Affordable Care Act. The HPE program allows participating hospitals to determine temporary eligibility for MA for people who meet basic criteria. The goal of HPE is twofold: (1) to connect people to ongoing coverage and (2) to allow providers to be reimbursed by MA for services provided to people who meet the eligibility criteria for HPE coverage.

Certified hospital staff members are responsible for determining whether a person is eligible for HPE coverage. No verifications are required to establish eligibility for HPE coverage. Instead, the eligibility determination is based on preliminary information provided by the applicant. After a hospital approves a person for HPE coverage, the hospital must help the person file an application for ongoing MA coverage. A hospital may help the person do that in a number of ways, such as by scheduling an appointment for the person with a navigator or certified application counselor (CAC) organization, or by helping the person complete an application for ongoing MA coverage.

For more information about HPE policy, see the [DHS HPE Policy Guide for Qualified Hospitals](#).

II. Introduction

This section provides a high-level overview of the HPE program. (DHS has made more-detailed HPE eligibility training materials available to all HPE providers on the DHS [HPE Toolkit: Forms and Documents](#) web page and the DHS [HPE Training](#) web page.)

A. Begin and End Dates for HPE Coverage

HPE coverage begins on the date that the hospital approves HPE.

The date that HPE coverage ends depends on whether the HPE enrollee submits an application for MA during the HPE coverage period.

- If the HPE enrollee submits an application for MA, HPE coverage ends on the date on which the person's eligibility for ongoing MA is determined.
- If the HPE enrollee does not submit an MA application, HPE coverage ends on the last day of the month after the month in which HPE coverage was approved.

B. Eligibility Requirements for HPE Coverage

Qualified hospitals determine eligibility for HPE coverage.

- The HPE income limits are the same as the MA limits in the federal poverty guidelines. However, an income disregard of 5 percent of these limits is manually calculated and applied in determining an applicant's eligibility for HPE coverage. See the [HPE Income and Asset Guidelines](#). For applicants who apply through MNsure, the new eligibility system automatically applies the five percent income disregard.
- An applicant who says that he or she does not intend to remain in Minnesota is ineligible for HPE.
- An applicant who states that she is a noncitizen, and is pregnant without an MA-qualified immigration status, qualifies for HPE under the Children's Health Insurance Program (CHIP).
- An applicant who states that he or she is a noncitizen must have an MA-qualified immigration status to be eligible for HPE. What is considered an MA-qualified immigration status depends on the applicant's age and pregnancy status. Children and pregnant women are considered to have an MA-qualified immigration status if they are lawfully present. Adults must have one of the immigration statuses listed on the [HPE Immigration Eligibility Tip Sheet](#).
- An applicant who has current MA or MinnesotaCare coverage is ineligible for HPE.
- An applicant with coverage through the Consolidated Chemical Dependency Treatment Fund or HIV/AIDS Program may be eligible for HPE coverage if he or she is not also enrolled in MA.
- An applicant with coverage through the Minnesota Family Planning Program (MFPP) may also be eligible for HPE coverage.

Note: Inmates of correctional facilities who are admitted to hospitals are ineligible for HPE.

C. HPE and Other Types of Presumptive Eligibility

HPE does not replace presumptive eligibility available for women with breast or cervical cancer (MA-BC) or the MFPP.

- A woman applying for MA-BC coverage is ineligible for HPE coverage because a woman with MA-BC coverage has a separate presumptive eligibility process.
- A person applying for MFPP must use the MFPP presumptive eligibility process.
- A person who has current MFPP coverage is eligible for HPE coverage because HPE provides the full MA benefit set while MFPP provides a limited benefit set.

D. Frequency of Eligibility for HPE Coverage

A person is ineligible for HPE coverage if the person has had an HPE begin date in the past 12 months, unless the person is pregnant.

Example:

Jim was approved for HPE coverage on July 15, 2014. The earliest date that Jim is eligible to receive a new HPE coverage period is July 15, 2015.

A pregnant woman is eligible for HPE coverage once per pregnancy. As a result, a pregnant woman may receive HPE coverage more than once in a 12-month period.

Example:

Joan received HPE coverage from July 1, 2014, through August 31, 2014. Joan becomes pregnant in April 2015. Joan is eligible to receive HPE coverage once per pregnancy, so Joan is eligible for HPE coverage even though she received it during the past 12 months.

E. Verification Requirements for HPE Coverage

Federal law prohibits verification of any financial or nonfinancial eligibility criteria for HPE coverage. A hospital makes eligibility determinations based on the applicant's attestation alone. An applicant is asked to provide his or her Social Security number (SSN), but is not required to provide it as a condition of filing the HPE application. Although the SSN is not required, DHS encourages HPE hospital staff members to try to collect it. Having the SSN on the HPE application allows DHS to more quickly and accurately create and maintain the HPE case in the Medicaid Management Information System (MMIS). Having the SSN also enhances the ability to accurately link an HPE application to a MNsure application filed later.

F. HPE Covered Services

A person approved for HPE coverage receives the full MA benefit set with the exception of waiver services. A person with HPE coverage is excluded from managed care and is covered on a fee-for-service basis during the HPE coverage period. The person can receive any MA-covered service from any provider that participates in the fee-for-service MA program.

G. Approval and Denial Notices

A hospital must provide an HPE applicant an approval or denial notice. An approval notice must be printed on the security paper that DHS provides to the hospital. The approval notice indicates the following:

- The hospital that approved HPE coverage
- The name, date of birth, Person Master Index (PMI) number (if available) and HPE coverage period of the enrollee

A person approved for HPE coverage can use this approval notice as proof of coverage until he or she receives a Minnesota Health Care Programs (MHCP) identification card. MMIS mails an MHCP identification card to every person approved for HPE coverage. A health care provider can verify a person's HPE coverage through its usual process using either MN-ITS (the DHS Web-based electronic billing and administrative transaction system) or the Eligibility Verification System (EVS). Documentation of HPE coverage is available in MN-ITS and EVS as soon as DHS Health Care Eligibility Operations (HCEO) (formerly MinnesotaCare Operations) enters the eligibility into MMIS.

III. Action Required

Workers are not required to take any action to determine a person's eligibility for HPE coverage or to establish a person's coverage under HPE. Trained hospital staff members determine eligibility for HPE coverage. HCEO staff members at DHS enter HPE coverage into MMIS within two business days of receiving an approved HPE application from a qualified hospital.

A. HPE Coverage in MMIS

HCEO staff members use the following HPE eligibility types, which are compatible only with major program MA:

- 2A – PE Adult/Parent
- 2C – PE Child under 21
- 2F – PE Former Foster Care to Age 26
- 2P – PE Pregnant Woman
- 2X – PE CHIP Pregnant Woman

B. MA Coverage Determined via the New Eligibility System – Interactions with HPE

If an HPE enrollee is determined eligible for MA via the new eligibility system, the interface between MMIS and the new eligibility system automatically adjusts the HPE span. The interface between MMIS and the new eligibility system is an automated process and does not require any worker intervention. To allow for accurate claims processing, DHS has programmed MMIS to automatically replace the HPE span with the MA span. If an HPE enrollee is determined to be eligible for MA during the first month of HPE coverage, the entire HPE span is replaced with the MA span. If an HPE enrollee is determined to be eligible for MA during the second month of HPE coverage, MMIS automatically closes HPE on the last day of the first month and replaces HPE with MA in the second month.

The following examples illustrate the interaction between HPE and the new eligibility system.

Example:

June is approved for HPE coverage on September 12, 2014, under the adults-without-children basis of eligibility. In MMIS on the RELG screen, county eligibility workers see Major program: MA, Elig Type: 2A, with a coverage begin date of 9/12/14 and a coverage end date of 10/31/14.

On September 28, 2014, June submits the online MNsure application and is determined eligible for MA. The new eligibility system interface replaces the HPE span in MMIS on the RELG screen. At this point, county eligibility workers no longer see the HPE span on the RELG screen. Instead, they see Major program: MA, Elig Type: AX span, with coverage begin and end dates of 9/1/14–99/99/99. June's HPE coverage begin and end dates are displayed on the RMSC screen in MMIS.

Example:

Joseph is approved for HPE coverage on September 12, 2014, under the adults-without-children basis of eligibility. In MMIS on the RELG screen, county eligibility workers see Major program: MA, Elig Type: 2A, with a coverage begin date of 9/12/14 and a coverage end date of 10/31/14.

On October 20, 2014, Joseph submits the online MNsure application and is determined eligible for MA. The new eligibility system interface automatically adjusts the HPE coverage end date to 9/30/14. Major program MA, Elig Type: AX, begins on 10/1/14.

C. MA Coverage Determined by County or Tribal Human Services Agencies via MAXIS – Interactions with HPE

Some HPE enrollees may not be able to have their ongoing MA eligibility determined through the new eligibility system. For example, a person who qualifies for one of the following programs or bases of eligibility or requests one of the following programs must have eligibility for MA determined by a county or worker:

- MA for people aged 65 and older
- MA for people who are blind or certified disabled
- MA for people receiving care and rehabilitation services from the Center for Victims of Torture
- Refugee MA (RMA)
- MA with a spenddown
- Medicare Savings Programs (MSPs)
- MA for payment of long-term care services in a long-term care facility (LTCF) or through a home and community-based services (HCBS) waiver program
- People receiving treatment in an institution for mental diseases (IMD)
- Children in out-of-home placement

D. Processing MA Eligibility in MAXIS for an Applicant Who Has HPE Coverage in the Same Month the Person Is Found Eligible for Ongoing MA

County eligibility workers will not be able to approve MA eligibility for an applicant in MAXIS if the applicant has an HPE span in the same month that ongoing MA eligibility is approved. In these situations, the worker must request help from DHS by sending a secure message from his or her SIR email account to DHS_HPE@state.mn.us, providing the following information:

- Enrollee's first and last name
- Enrollee's date of birth
- Enrollee's MAXIS case number
- Enrollee's PMI number
- Month(s) in which a conflict with HPE exists

When MMIS staff members receive a message from a worker with this information, they will remove the HPE span on RELG in MMIS to allow the worker to enter the MA span in the correct month.

E. People Seeking Coverage through the Consolidated Chemical Dependency Treatment Fund or the HIV/AIDS Program

To qualify for coverage through the Consolidated Chemical Dependency Treatment Fund (CCDTF), a person must meet the clinical and financial eligibility requirements. A person who has been determined eligible for MA or Minnesota Supplemental Assistance (MSA) automatically meets the financial eligibility requirements for CCDTF.

A determination of eligibility for HPE coverage is **not** the same as a determination of eligibility for MA. Eligibility for HPE coverage is based on the applicant's attestation only. Therefore, workers must complete the full financial eligibility evaluation for applicants for CCDTF who have been approved for HPE coverage.

DHS has directed HPE providers to refer all applicants for CCDTF, regardless of MA eligibility, to the county contacts listed in CCDTF Rule 25 Referral Numbers ([DHS-5685](#)).

MMIS permits overlapping coverage spans for HPE and CCDTF or HPE and HIV/AIDS. County workers responsible for approving eligibility under these programs should simply be aware that HPE coverage can overlap with either of these programs.

F. Processing Paper Applications for MA for People with HPE Coverage

DHS has told HPE providers that all paper MNsure Applications for Health Coverage and Help Paying Costs ([DHS-6696](#)) filed on behalf of people approved for HPE must be marked "HPE" and faxed to HCEO for processing.

For various reasons, it is possible that a county eligibility worker will receive one of these applications. The following table explains what actions county eligibility workers must take when they receive one of these applications or any other type of paper application for MA, depending on the type of application and the system in which eligibility for the applicant must be determined and established.

Type of Application	System	County Eligibility Worker Action Required
DHS-6696	MNsure	Fax application to HCEO at 651-431-7780.
DHS-3876	MAXIS	Process eligibility in MAXIS.
DHS-3531	MAXIS	Process eligibility in MAXIS.
DHS-3340	MAXIS	Process eligibility in MAXIS.

IV. Legal Authority

Minnesota Statutes, section 256B.057, subdivision 12

Code of Federal Regulations, title 42, chapter IV, subchapter C, part 435, subpart L, section 435.1102

Code of Federal Regulations, title 42, chapter IV, subchapter C, part 435, subpart L, section 435.1103

Code of Federal Regulations, title 42, chapter IV, subchapter C, part 435, subpart L, section 435.1110

United States Code, title 42, chapter 7, subchapter XIX, section 1396a, subsection a, paragraph 47

V. Americans with Disabilities Act (ADA) Advisory

This information is available in accessible formats for people with disabilities by calling (651) 431-2670 (voice) or toll free at (800) 657-3739 or by using your preferred relay service. For other information on disability rights and protections, contact the agency's ADA coordinator.