Presumptive Eligibility (PE) for Qualified Entities Quick Reference Guide

kynect
health coverage
Together for a better Kentucky

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This Presumptive Eligibility (PE) Quick Reference Guide is designed to assist qualified entities with understanding PE, including the benefits and features, eligibility requirements, and how to enroll citizens for PE using kynect/Self-Service Portal (SSP).

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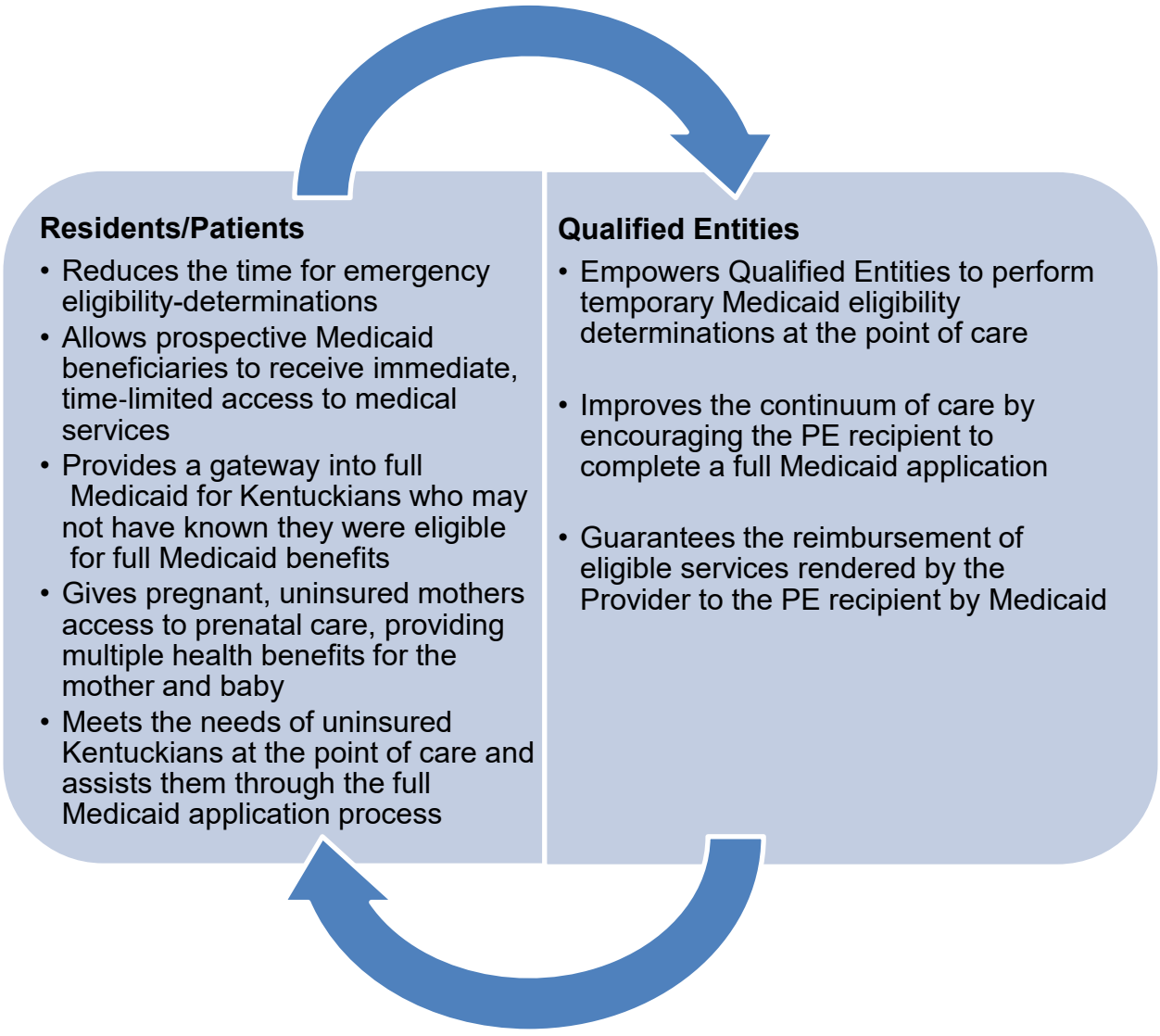
1. General Presumptive Eligibility Information

A. Purpose

i. Presumptive Eligibility is a process in Kentucky which expedites an individual's ability to receive temporary coverage for Medicaid services.

ii. Residents who are approved for Presumptive Eligibility are encouraged to complete the full Medicaid application process before their presumptive eligibility coverage ends.

B. Benefits and Expected Results



C. Authorization to Conduct PE Evaluation

i. To be authorized to conduct a patient PE evaluation, the Individual must work at a Qualified Entity that:

- Currently participate in the Medicaid program
- Have access to the internet
- Have completed the PE certification/training program
- Abide by the standards of the Department of Medicaid Services

D. Services and Coverage Available

i. PE covers Medicaid services, including:

All groups (Except pregnant women)	**Pregnant women** Pregnant women are only eligible for ambulatory prenatal care services delivered in an outpatient setting; birthing expenses are not covered under PE
Hospital	Services furnished by a primary care provider, a rural health clinic, a primary care center, or a federally qualified health care center
Pharmacy	Laboratory services
Emergency room services	X-ray services
Physician	Dental services, excludes orthodontics
Dental	Emergency room services
Lab	Emergency and non-emergency transportation
X-ray services	Pharmacy services

ii. Presumptive Eligibility (PE) coverage is Fee-For-Service (FFS). Individuals approved for PE are not enrolled in a Managed Care Organization (MCO). Under FFS, participating healthcare providers bill the Department for Medicaid Services (DMS) and are reimbursed for each covered service delivered. Once approved, Individuals will receive a Presumptive Eligibility card by email and postal mail. They can use this card to access covered services from participating providers.

2. PE Eligibility Requirements

A. Who Is Eligible



Individuals who are not currently receiving Medicaid benefits

Pregnant women (eligible once per pregnancy)

Individuals who are in a family with the gross family income meeting the following criteria:



≤138% Federal Poverty Level (FPL) for adults 19-64

≤218% FPL for children < 19

≤218% FPL for pregnant women and postpartum

No income limit for Former Foster Care



Cannot be an inmate of a public institution



Must be a U.S. citizen or qualified immigrant/non-citizen



Individuals who have not been approved for PE benefits during the current calendar year or for the current pregnancy



Residents of the Commonwealth of Kentucky

B. Categories of Assistance

i. **Adults**: Individuals age 19 through 64
ii. **Parents and Caretaker Relatives**: Individuals living with and caring for a related child under the age of 18, Parents/Caretaker Relatives can be 65 or older.
iii. **Pregnant Women**: Individuals who are pregnant, the number of expected children count in the household size for income eligibility.
iv. **Children**: Under the age of 19, income limits are determined by the age of the child.
v. **Former foster care**: Individuals 19 through 26 who received Medicaid due to foster care status until they aged out of the program. There is no income limit for this group.

C. Duration of Coverage

i. Coverage is effective immediately upon receipt of a PE ID card/number and continues until:
    a. A Medicaid application is filed and either approved or denied; or
    b. The last day of the second month after PE determination, if no Medicaid application is filed
        i. Pregnant women receive 60 days of PE, and should apply for Medicaid during that time

ii. Individuals can apply for full Medicaid coverage:
    a. Online at https://www.kynect.ky.gov/
    b. In person at a Department for Community Based Services county office
    c. By mail or fax using a paper application
    d. By calling the contact center at 1-855-459-6328
    e. By applying through a kynector or insurance agent at https://kynect.ky.gov/benefits/s/auth-reps-assisters?language=en_US

D. Minimum Information Needed for PE

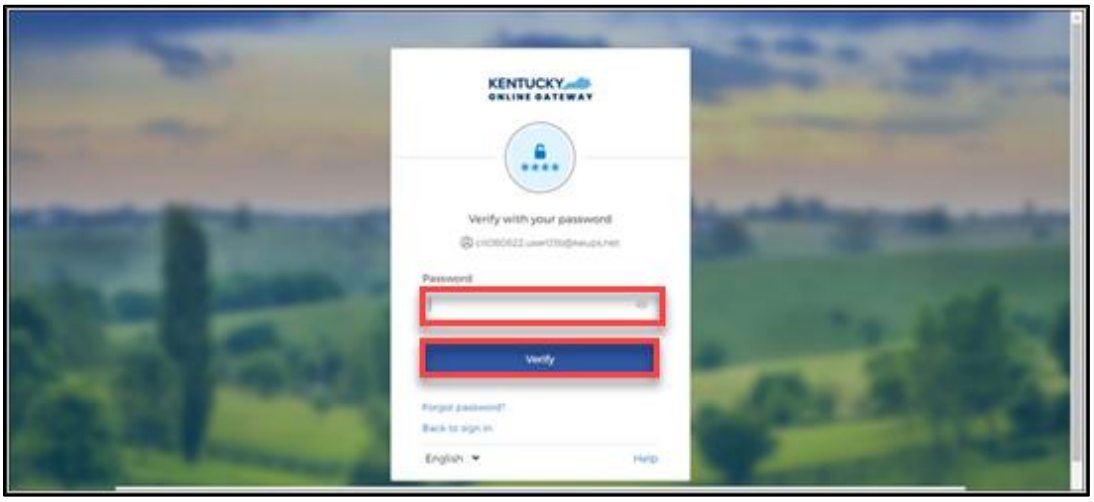
i. To process a PE application, the minimum information is required:
    a. Today's Date
    b. Last Name
    c. First Name
    d. Birthdate
    e. SSN
    f. Address, City, State, ZIP
    g. Telephone Number, Email Address
    h. Marital Status
    i. Number of People in Your Family (Count Unborn if anyone is pregnant)
    j. Family Member's Name, Current Income Amount, How Often For each member
    k. Total Family Income

3. Logging Into Kentucky Online Gateway

1. Go to https://kog.chfs.ky.gov/.
2. The system navigates to the **Welcome to the Kentucky Online Gateway** screen.
3. To log in, enter the **Email Address** and select **Next**.

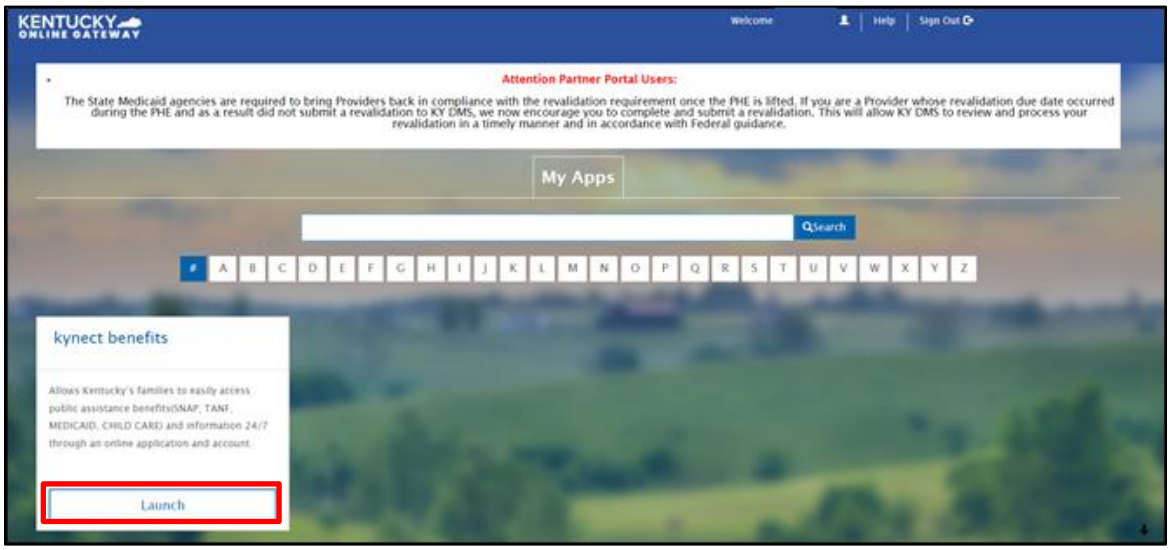


4. Enter **Password** and select **Verify**.



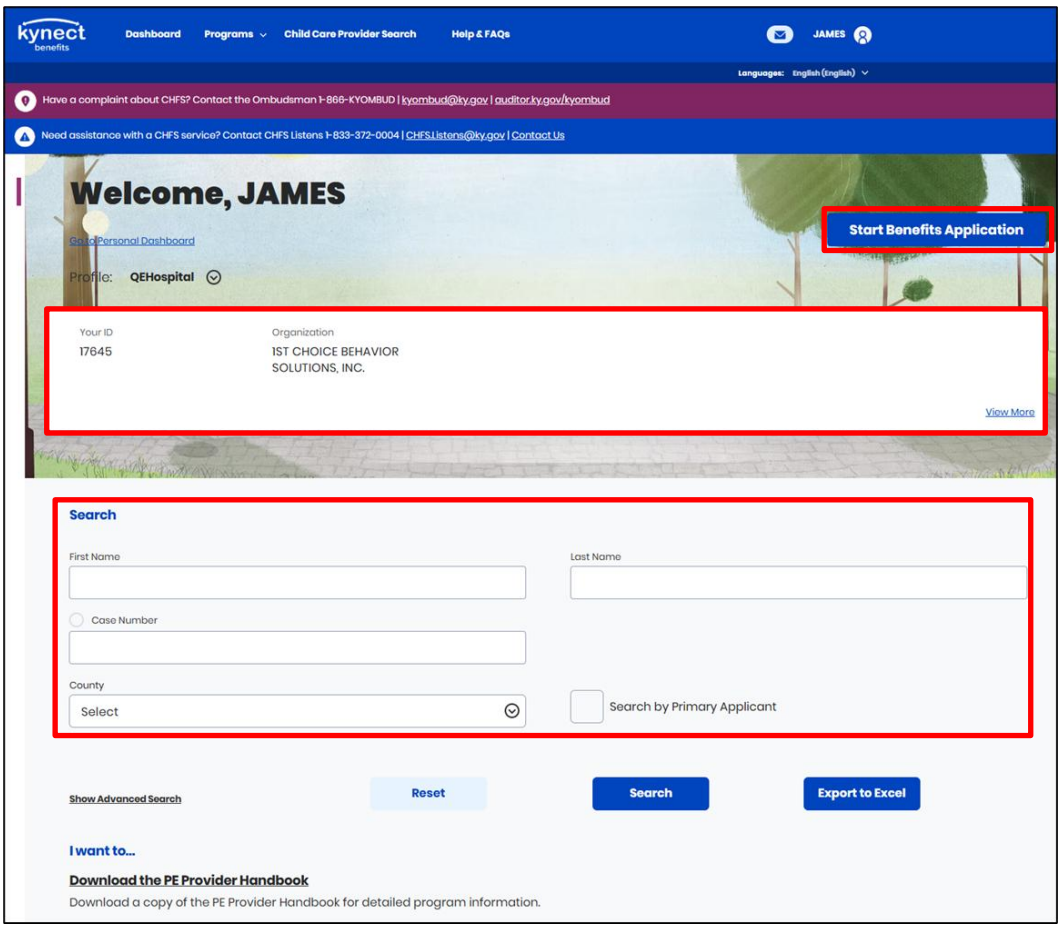
Please Note: *As kynect utilizes Multi-Factor Authentication (MFA), users are prompted to complete MFA when logging into KOG. Reference the* ***Multi-Factor Authentication(MFA) Quick Reference Guide*** *if MFA has not already been set up. This is a one-time registration.*

5. After completing MFA, the KOG **My Apps** screen displays. Select **Launch** on the *kynect benefits* tile.



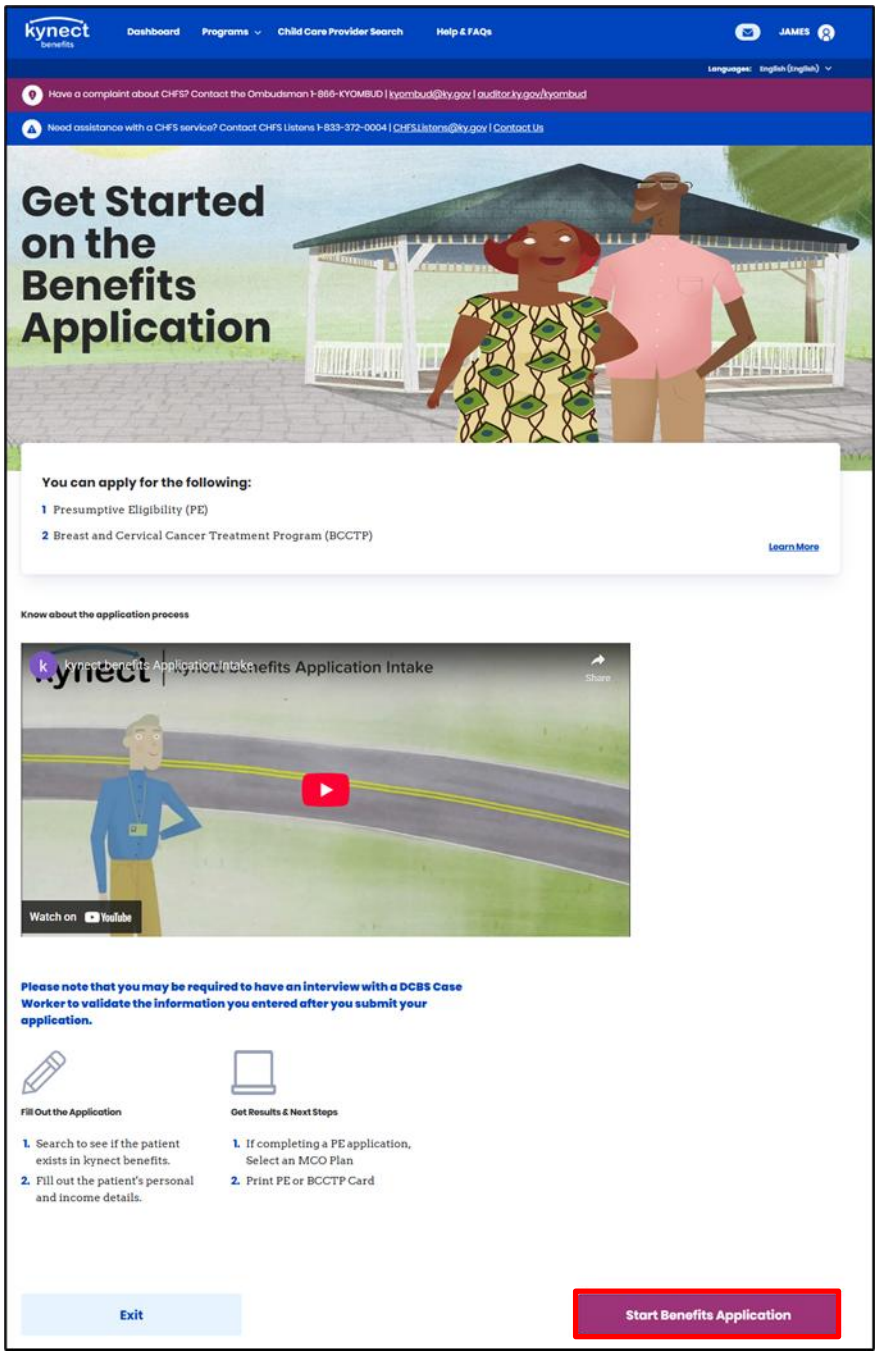
4. Exploring the Qualified Entity Dashboard

1. **My Details:** Provides a summary of the Qualified Entity (QE) employee's personal information, including their ID, their organization, and their coverage area.
2. **Search:** Allows the QE employee to search for Individuals who are associated with their user ID or organization, depending on how the QE has set up the access privileges for their users.
    i. For example, based on a QE's settings, QE employees may or may not be able to search for any client who is associated with the QE.
3. **Start Benefits Application:** Begins the process for a Benefits Application by taking the QE employee to the screen to perform the client search and determine if the applicant is eligible to apply for PE benefits.

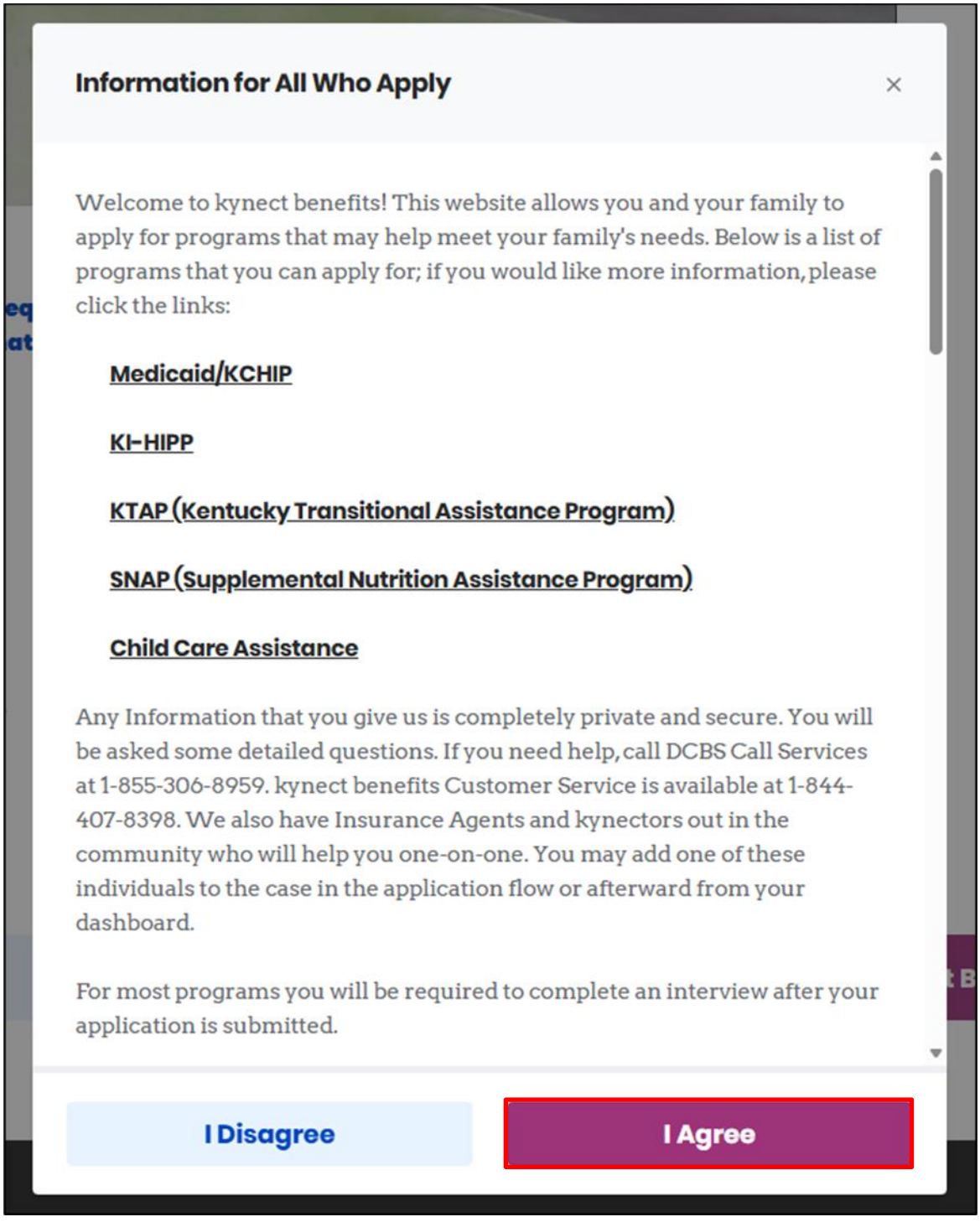


5. Presumptive Eligibility Application Process

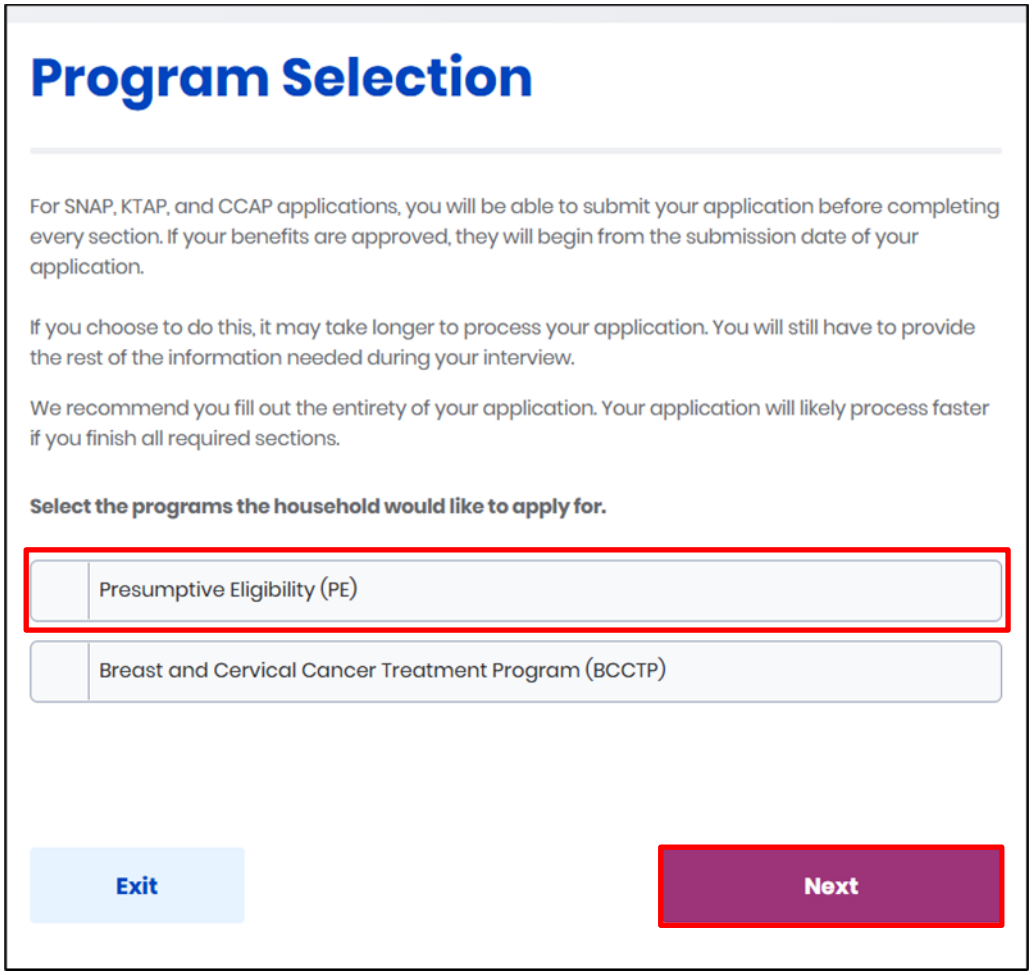
1. Select **Start Benefits Application**.



2. Scroll to the bottom of the **Information for All Who Apply** pop-up and select **I Agree**.

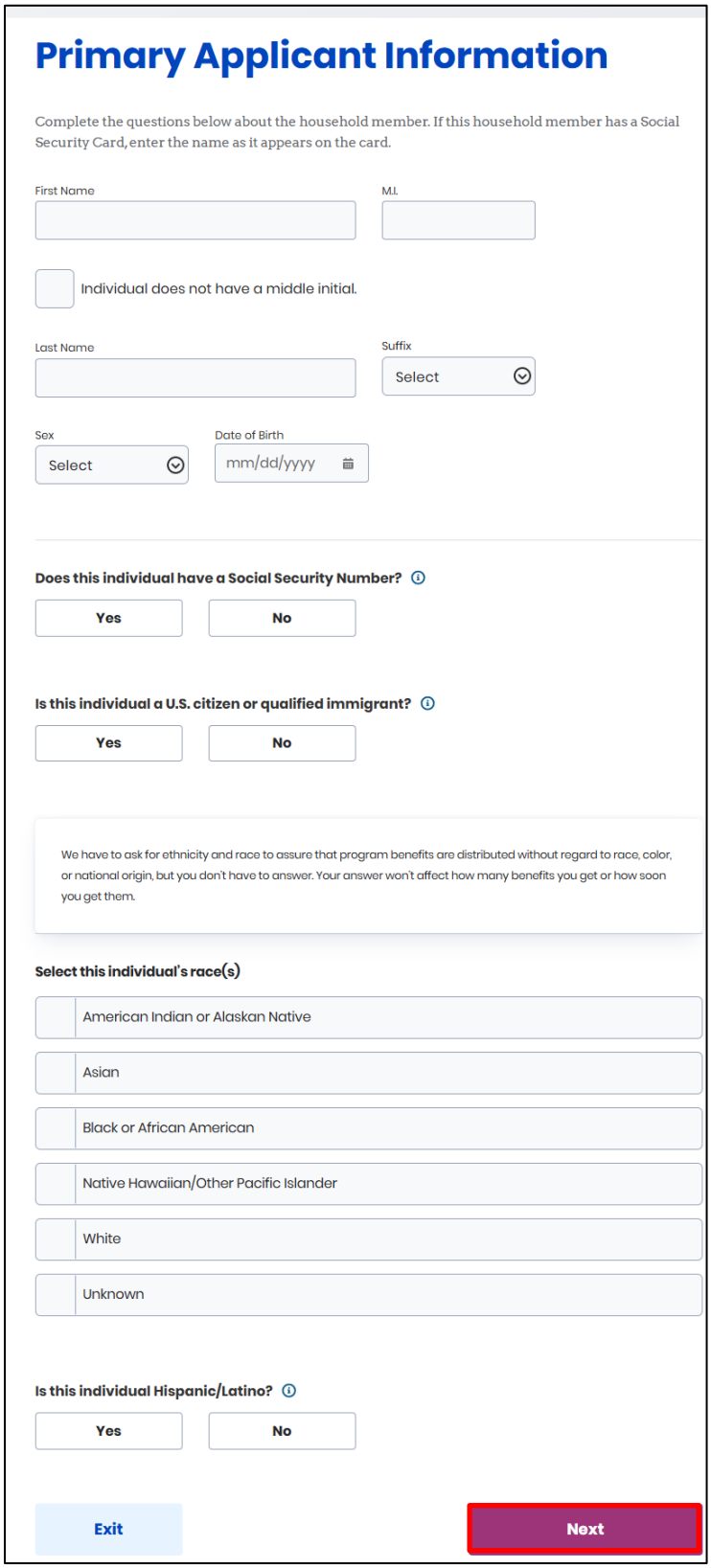


3. The **Program Selection** screen appears, select **Presumptive Eligiblity**. Select **Next**.

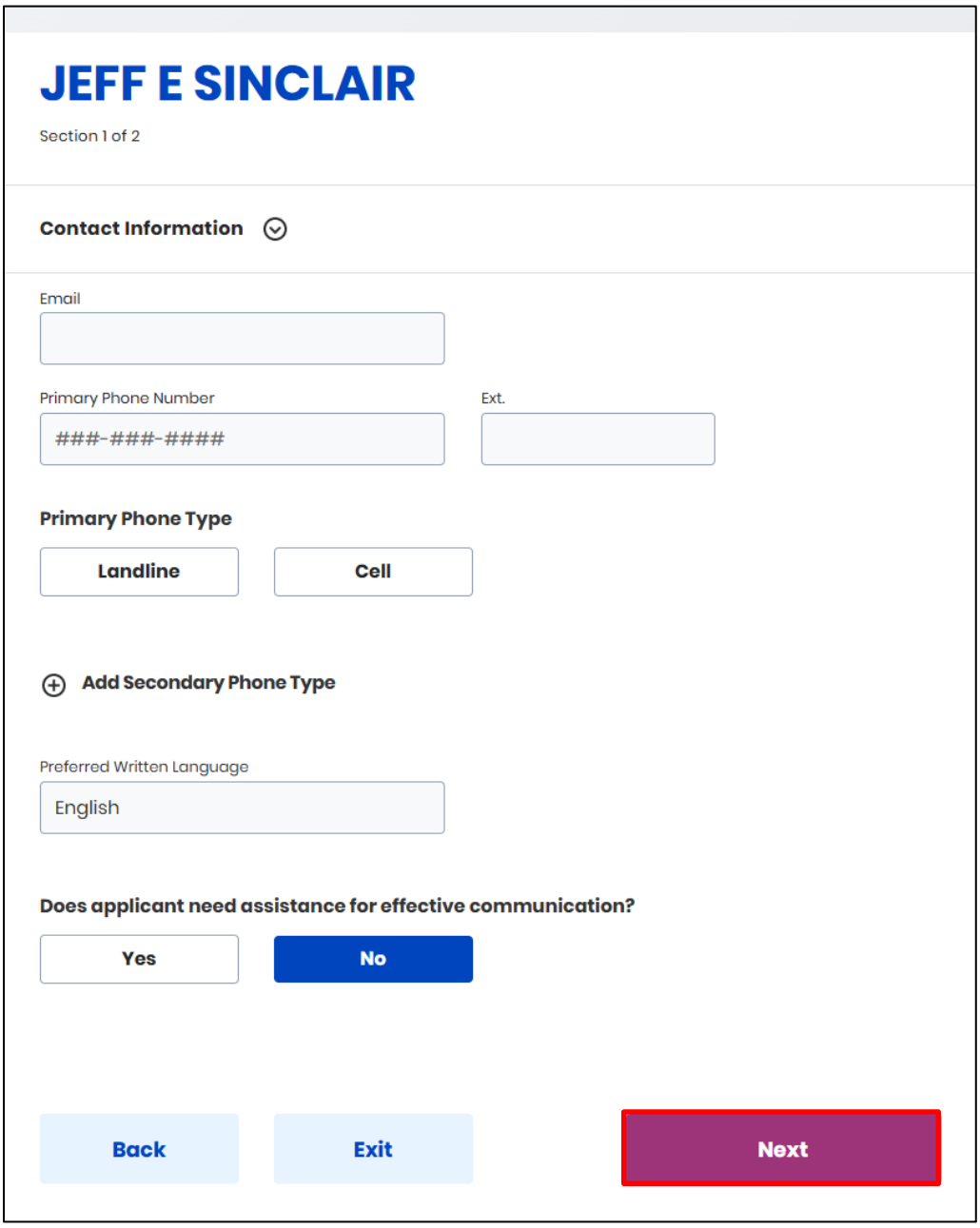


Please Note: *Upon completing the* ***Program Selection*** *screen, QE employees must continue through and complete the* ***Contact Information***, ***Personal Details***, *and* ***Income Details*** *screens.*

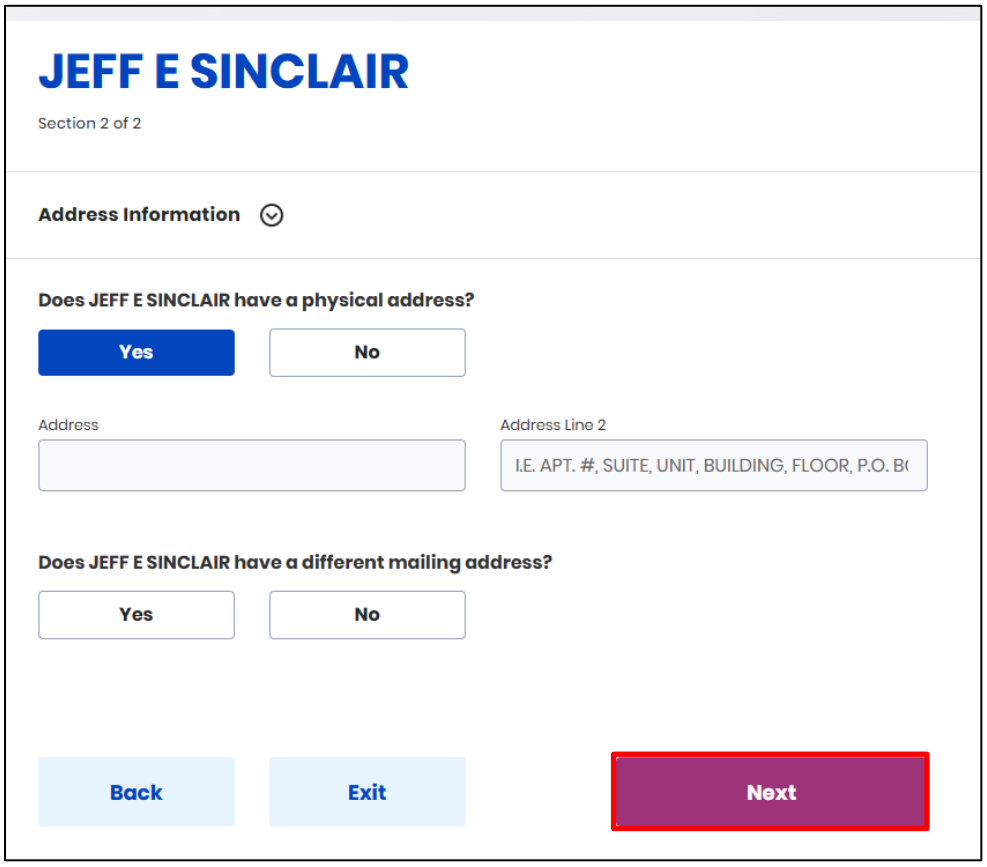
4. Complete all mandatory and relevant applicant information on the **Primary Applicant Information** screen and select **Next**.



5. Upon completing the **Primary Applicant Information** screen, QE employees are prompted to complete the **Contact Information** screen. On the **Contact Information** screen, fill out all mandatory and relevant contact information for the Resident and then select **Next.**

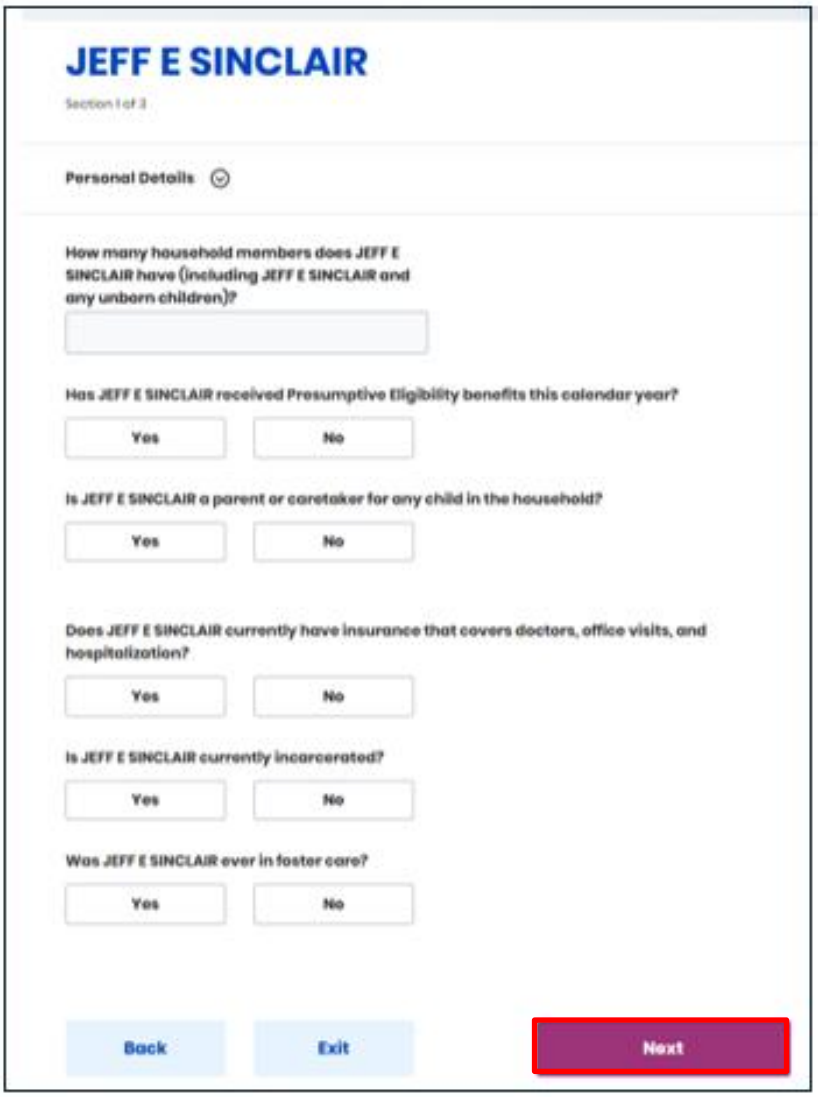


6. Complete all mandatory and relevant address information on the **Address Information** screen and select **Next**.



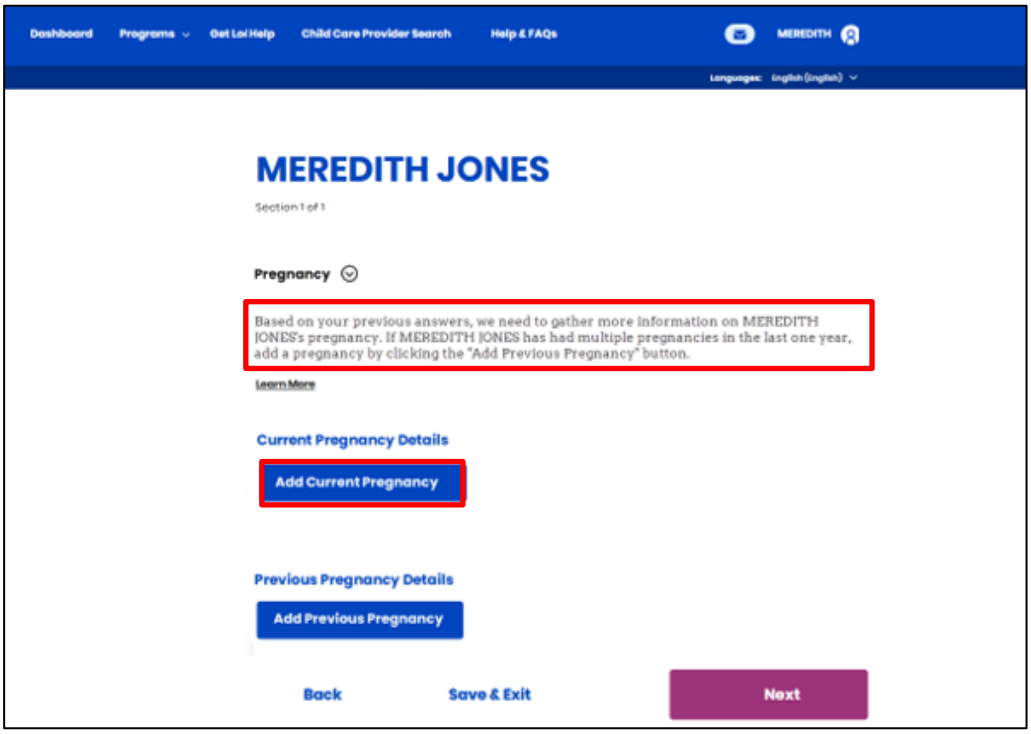
7. Upon completing the **Address Information** screen, QE employees are prompted to complete the **Personal Details** screen. On the **Personal Details** screen, fill out all mandatory and relevant personal information of the Resident and select **Next.**

   Please Note: *The Presumptive Eligibilty (PE) Begin Date is now set as the date of submission in the SSPDC Request.*

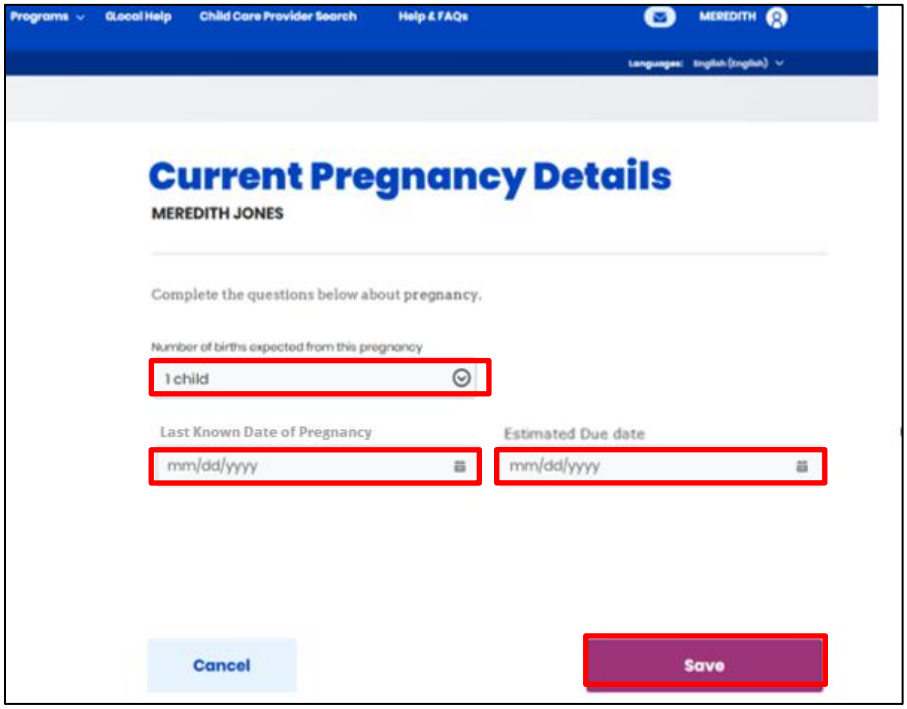


Please Note: *If the Individual is female, the question "Is [Individual's Name] currently pregnant?" displays after "Is [Individual's Name] a parent or caretaker for any child in the household?".*

8. For female Individuals who answered **Yes** to *"Is [Individual's Name] currently pregnant?"*, the **Pregnancy Summary** screen is queued. At the top of the screen, this verbiage displays: *"Based on your previous answers, we need to gather more information on <Individual's Full Name> pregnancy. If <Individual's Full Name> has had multiple pregnancies in the last one year, add a pregnancy by clicking the "**Add Previous Pregnancy**" button".*
9. If there is no current pregnancy record, the *Current Pregnancy Details* section is empty. Select **Add Current Pregnancy** button to open the **Current Pregnancy Details** screen.

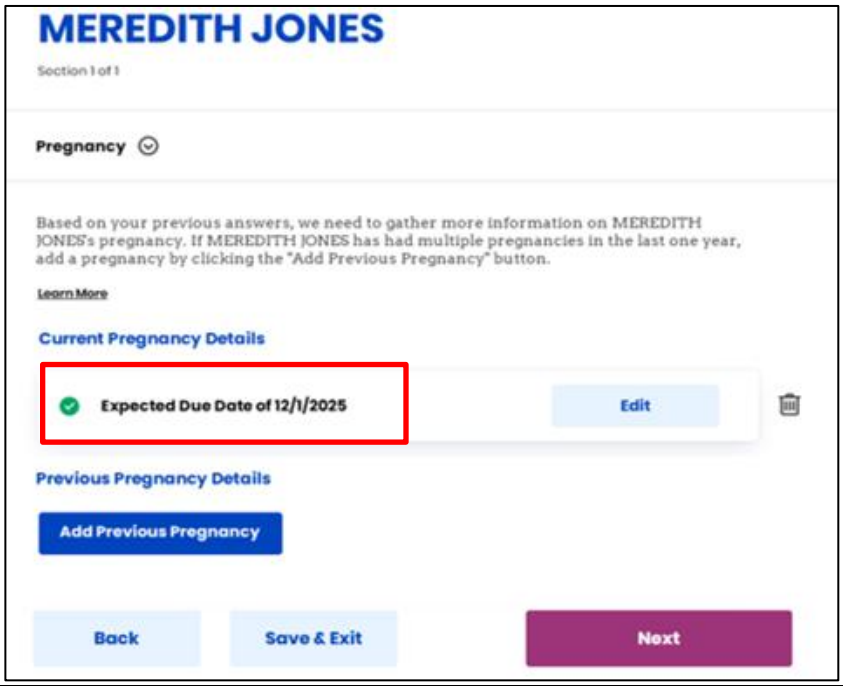


10. Use the drop-down menu to select **Number of births expected from this pregnancy**.
11. Enter the date for **Last Known Date of Pregnancy**.
12. Enter date for **Estimated Due date**.
13. Select **Save**.

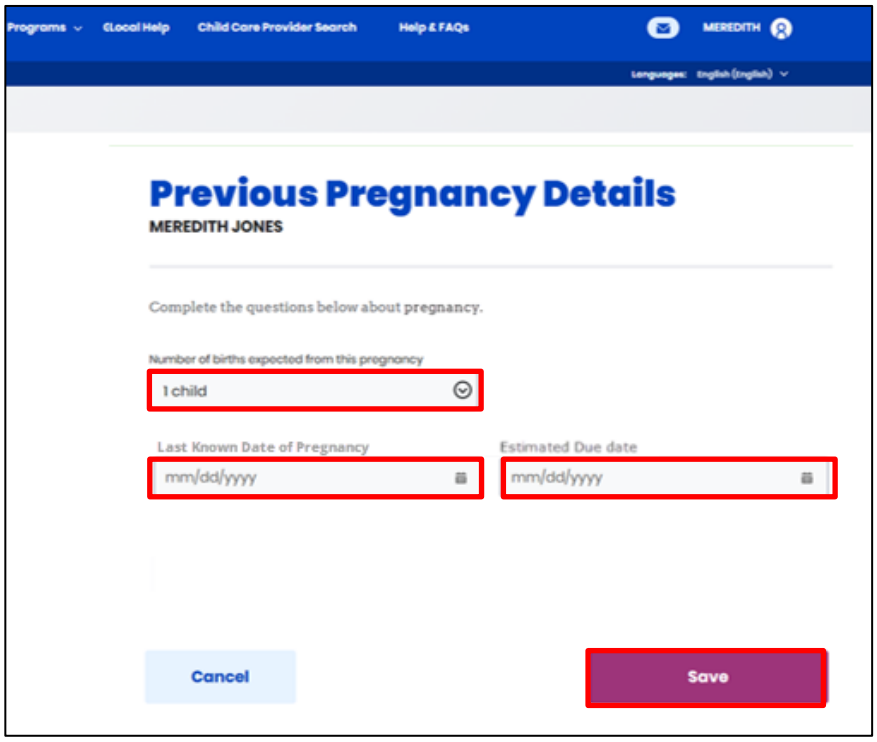


Please Note: *The question "Has <Individual's Name> received Presumptive Eligibilty benefits this calendar year?" queues on the* ***Current Pregnancy Details*** *screen within the Presumptive Eligibilty program application flow.*

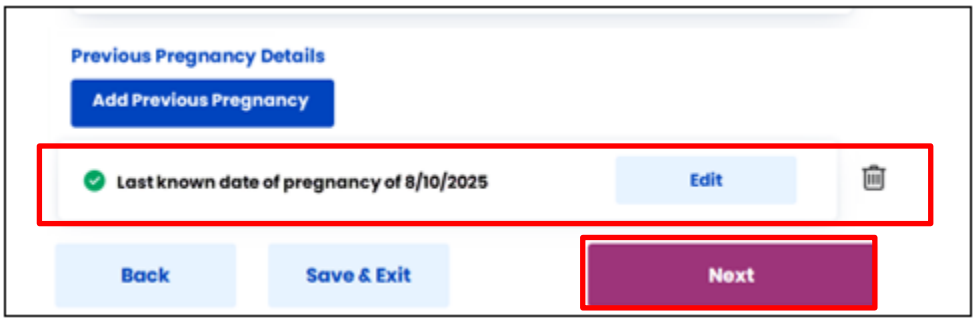
14. On the **Pregancy Summary** screen, the tile displays the entered **Expected Due Date of [MM/DD/YYYY]**. When a **Last Known Date of Pregnancy** is added to a current pregnancy record, it will be shifted to the *Previous Pregnancy Details* section.



15. If applicable, select the **Add Previous Pregnancy** button to enter the previous pregnancy details. If there are no end-dated or previous pregnancy records from the past two years, the section is empty.
16. Use the drop-down menu to select **Number of births expected from this pregnancy**.
17. Enter the date for **Last Known Date of Pregnancy**.
18. Enter date for **Estimated Due date**.
19. Select **Save**.

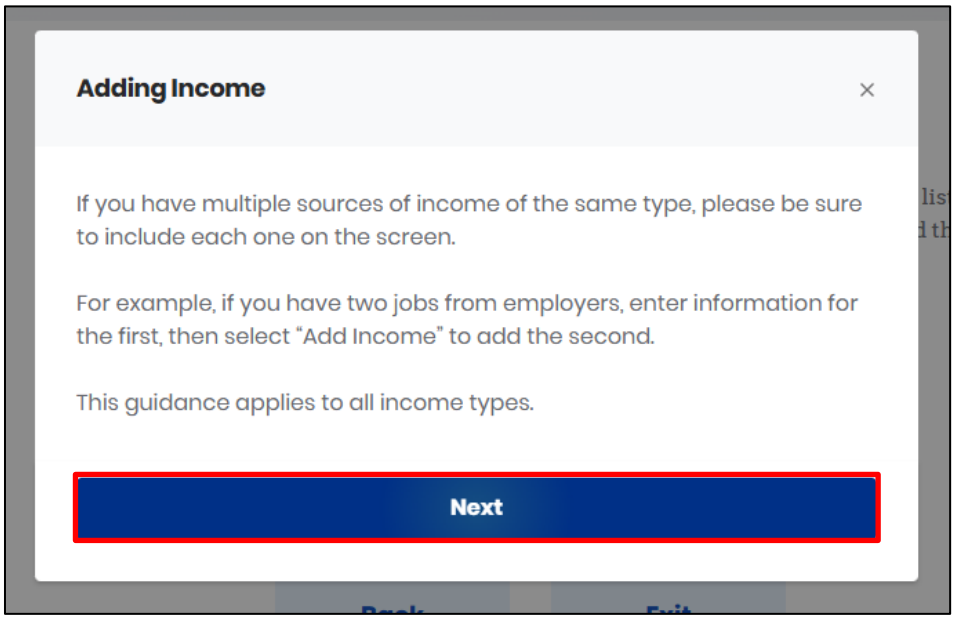


20. On the **Pregancy Summary** screen, the tile displays the entered **Last known date of pregnancy [MM/DD/YYYY]**.
21. Select **Next**.

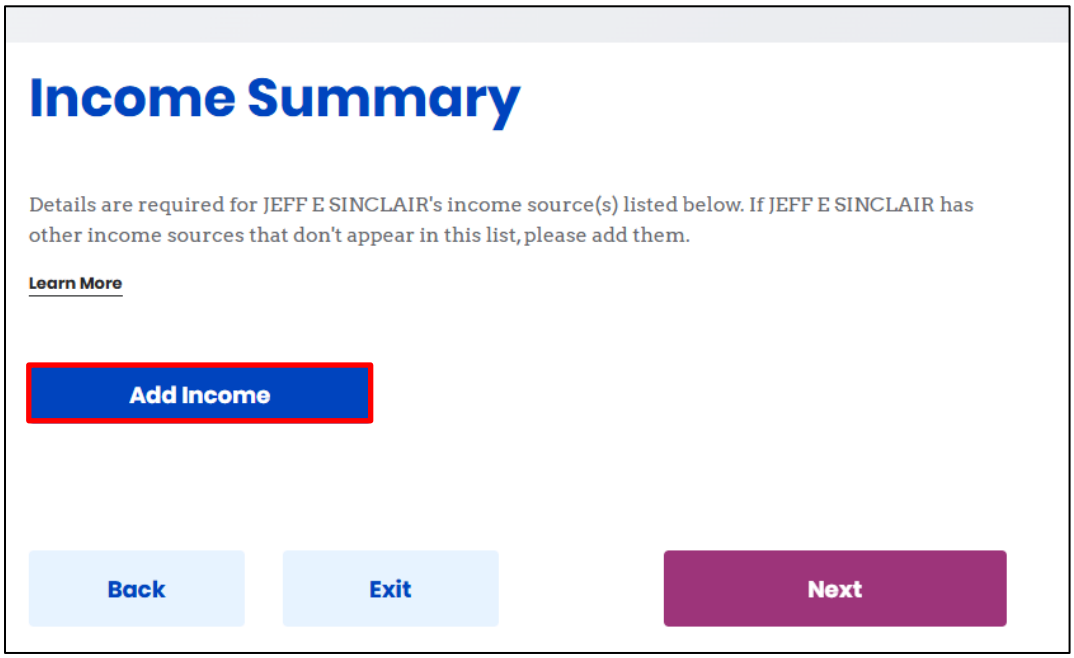


Please Note: *For both current and previous pregnancy records, records that have already been submitted to IEES/Worker Portal will have only the* ***Edit*** *button available. Newly created records will also have the* ***Trash Can*** *icon to remove the record.*

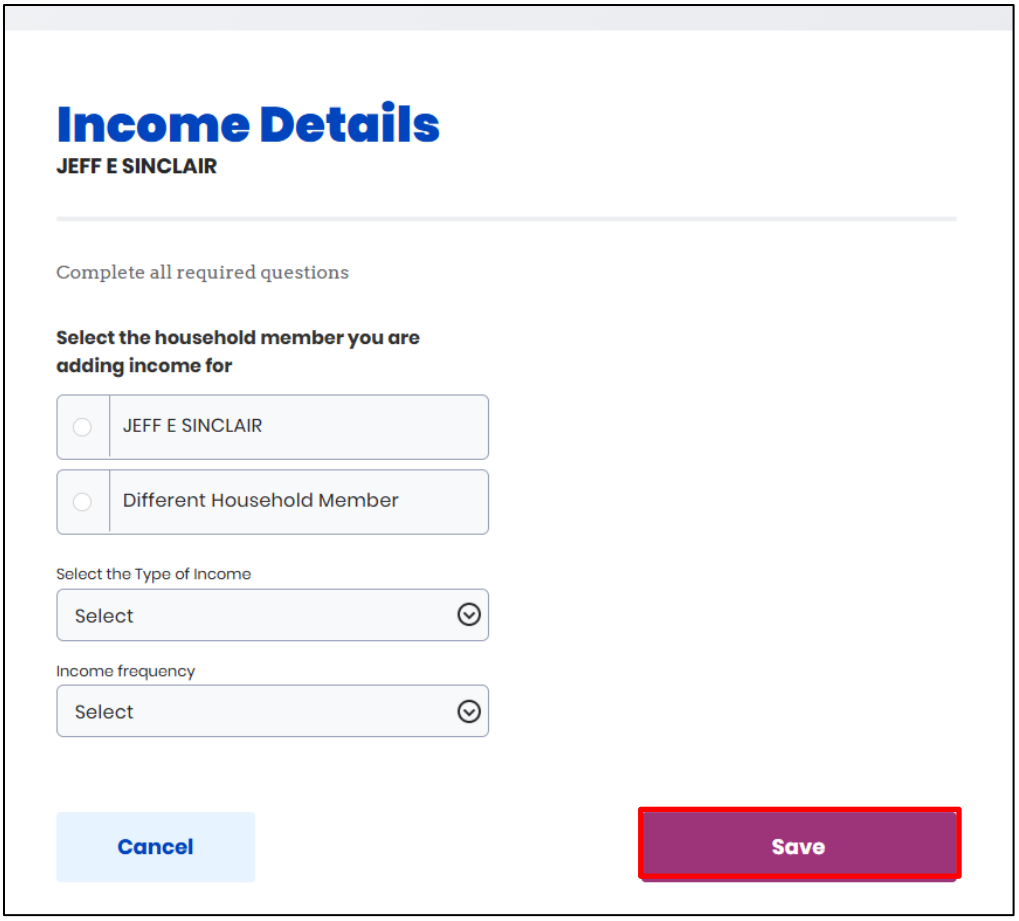
22. The **Adding Income** pop-up appears clarifying that QE employees must enter all sources of income, each having their own income record. Select **Next**.



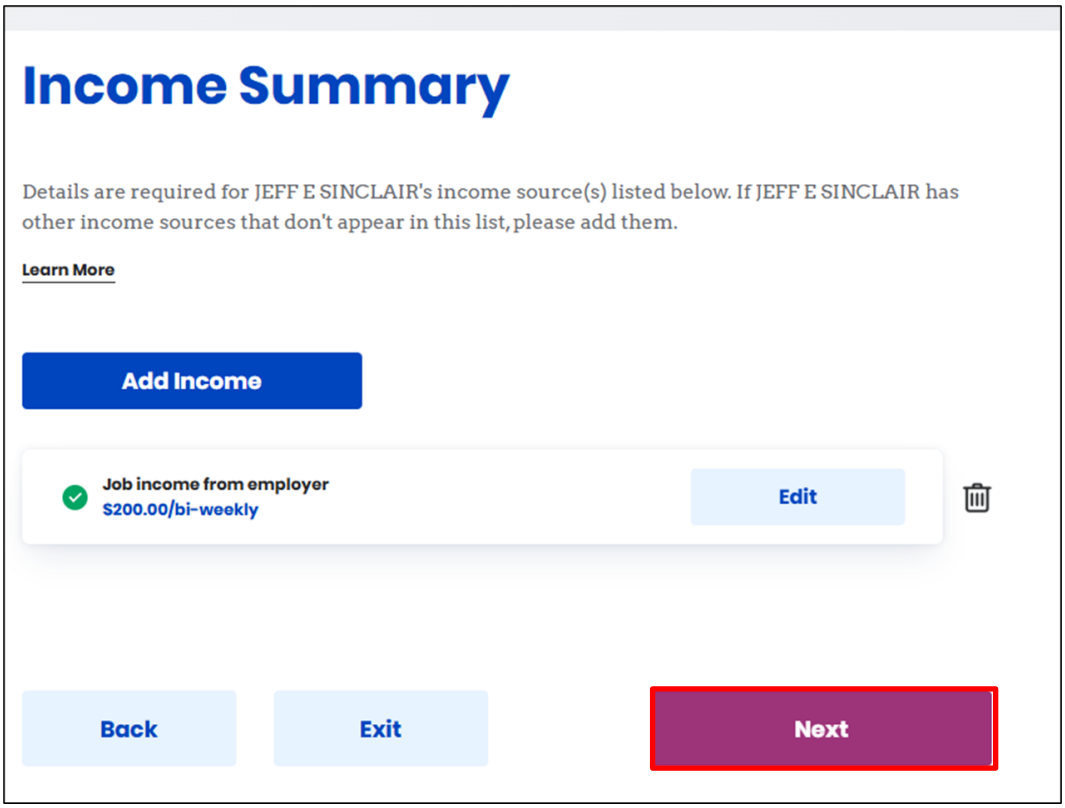
23. The **Income Summary** screen appears. If the Resident has income to report, select **Add Income**. If the Resident has no income to report, select **Next**.



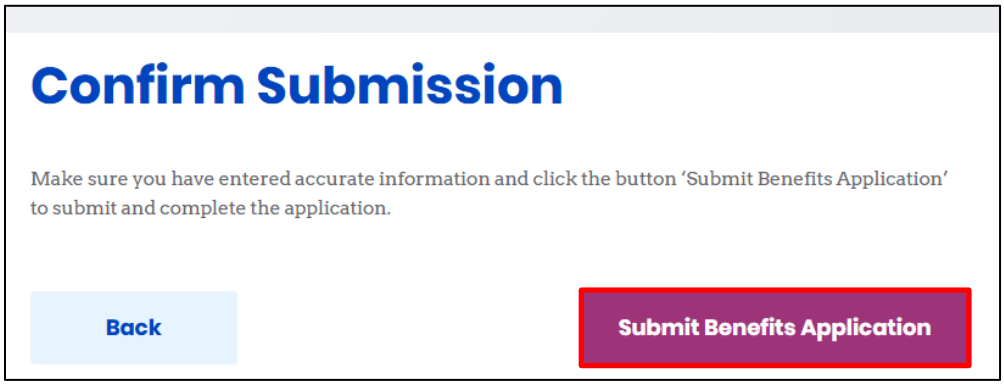
24. If **Add Income** is selected on the **Income Summary** screen, the **Income Details** screen displays. On the **Income Details** screen, select the correct Resident and answer all mandatory income questions. Once all mandatory income questions are completed, select **Save**.



25. The **Income Summary** screen appears displaying a record for the income added. If additional income information needs to be added, select **Add Income**. If all income information has been added, select **Next**.

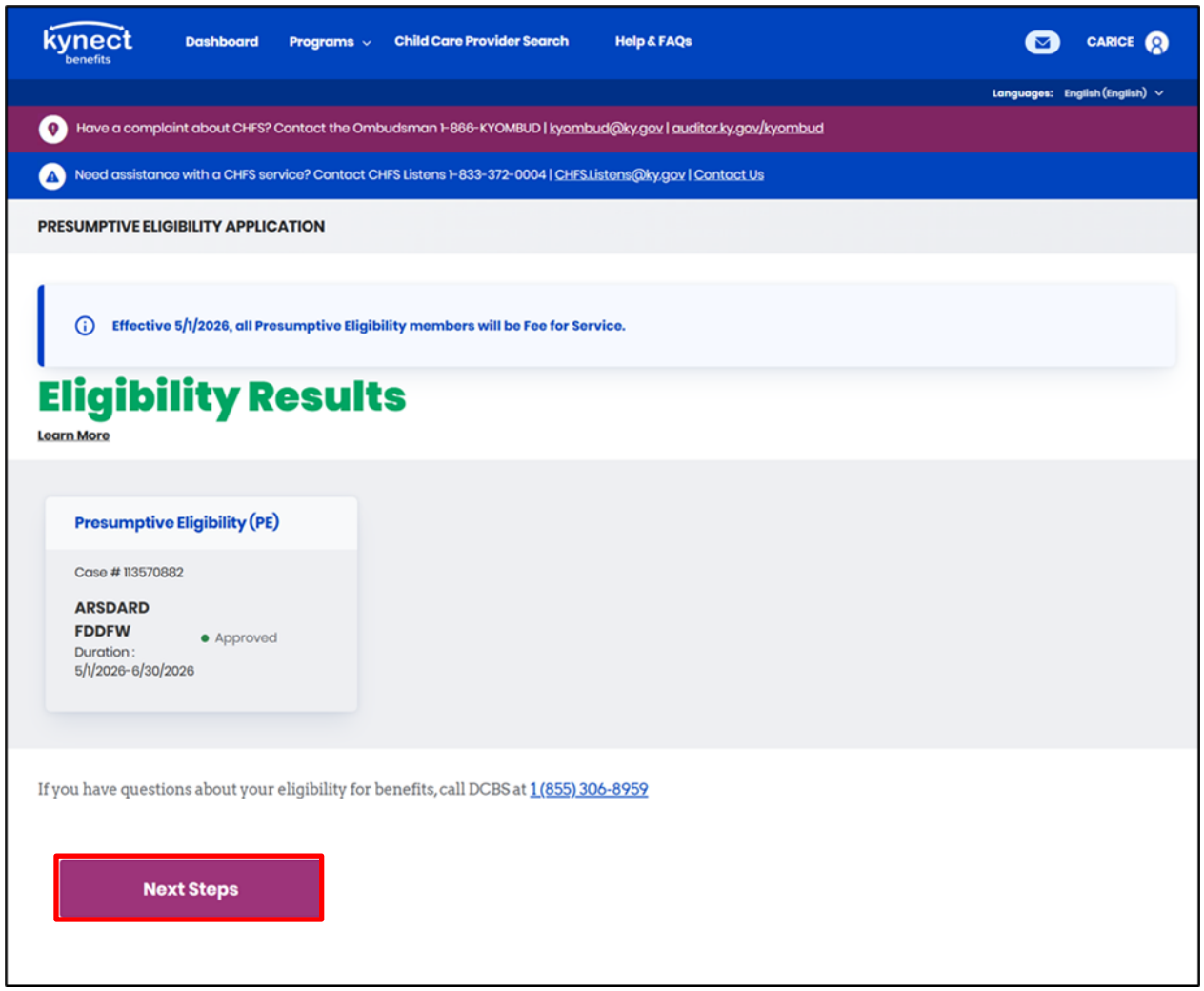


26. The **Confirm Submission** screen appears once all mandatory screens are completed. Select **Submit Benefits Application** to submit the Presumptive Eligibility application.



27. The **Eligibility Results** screen displays the eligibility determination results, indicating if the Resident is **Approved** or **Denied** for Presumptve Eligibility (PE). Select **Next Steps**.

Please Note: *The following banner message displays: "Effective 5/1/2026, all Presumptive Eligibilty members will be Fee for Service."*



28. On the **Next Steps** screen, there are two sections that can be expanded and contain *Information for Service Provider* and *Information for Recipient*. Select the **arrow icon** to expand each section and view the relevant information.
29. Select **Go to Dashboard** to return to the **Qualified Entity Dashboard**.

