

Hospital Presumptive Eligibility (HPE) Coverage for Pregnant Women

The following describes the medical services available to pregnant women who have been determined to be presumptively eligible for Medicaid. The coverage period for presumptive eligibility begins with the day your HPE is determined and ends the last day of the following month.

Presumptive eligibility medical services for pregnant women include:

- **Hospital Care – outpatient hospital services related to prenatal care**
- **Pharmacy – prescription drugs (ordered by a physician or other licensed health professional) related to prenatal care**
- **Emergency Services – for serious, immediate health problems that require emergency care related to prenatal care**
- **Physician Services – services related to prenatal care provided by doctors or other health professionals licensed to practice medicine, osteopathy, and psychiatry**
- **Laboratory Services for prenatal care**
- **X-ray Services - for prenatal care**
- **Transportation for prenatal care services – emergency transportation and non-emergency transportation through LogistiCare (1-866-386-8331)**

Pregnant women who apply for regular, full-benefit Medicaid and are found eligible, may receive additional benefits including inpatient hospital care, labor and delivery and services for conditions /illness other than pregnancy.

Failure to file a regular, full-benefit Medicaid application may result in missed coverage and/or out of pocket expenses for services received during a period of presumptive eligibility.

If you filed a Medicaid application before the end date of your presumptive eligibility coverage and have not received a decision by the end date, contact your local department of social services to have your presumptive eligibility continued during the application processing period up to a maximum of 45 days.