

- 1 SB102
- 2 V8KJVVP-2
- 3 By Senators Coleman-Madison, Figures, Kelley, Beasley,
- 4 Smitherman, Albritton, Stutts
- 5 RFD: Children and Youth Health
- 6 First Read: 05-Feb-25

SB102 Engrossed



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5	A BILL
6	TO BE ENTITLED
7	AN ACT
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9	Relating to Medicaid; to provide presumptive
10	eligibility to pregnant women for Medicaid prior to the
11	Medicaid agency's approval of an application for Medicaid
12	coverage; to limit the eligibility to what is provided under
13	the state Medicaid plan for a period not exceeding 60 days; to
14	authorize the agency to adopt rules to implement this
15	provision; and to provide for the repeal of this act.
16	BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:
17	Section 1. (a) For the purposes of this section, the
18	following terms have the following meanings:
19	(1) AGENCY. The Medicaid Agency of the State of
20	Alabama.
21	(2) PRELIMINARY INFORMATION. Proof of pregnancy and
22	documentation attesting to monthly household income.
23	(3) PRESUMPTIVE ELIGIBILITY PERIOD. The period that
24	starts on the date on which a qualified provider determines on
25	the basis of preliminary information that a woman is eligible
26	for Medicaid coverage for pregnant women and which ends on and
27	includes the earliest of the following dates:
28	a. On which the agency makes a determination of



29 eligibility for coverage based upon an application filed by 30 the woman.

b. If the woman fails to file an application with the agency for coverage, the last day of the month following the month in which the qualified provider made the determination of presumptive eligibility.

35 c. No later than the sixtieth day after the qualified36 provider made the determination of presumptive eligibility.

37 (4) QUALIFIED PROVIDER. Any provider of ambulatory
38 prenatal care as defined in 42 U.S.C. § 1396r-1 which is
39 qualified by the agency.

(b) (1) A pregnant woman shall be presumptively eligible for coverage for ambulatory prenatal care under Medicaid if a qualified provider determines on the basis of preliminary information that her household income does not exceed the modified adjusted gross income limit for the eligibility of pregnant women which is in effect under the state Medicaid plan.

47 (2) A pregnant woman who is determined to be
48 presumptively eligible may receive no more than one
49 presumptive eligibility period per pregnancy.

50 (3) Coverage provided by the agency for the presumptive 51 eligibility period may not be retroactively denied due to 52 failure of the woman to submit an application for Medicaid or 53 the agency's negative decision on the application.

(c) A qualified provider that determines that a woman
is presumptively eligible for ambulatory prenatal care, at the
time of making the determination, shall: (i) notify the agency

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57 of the determination within five working days; and (ii) inform 58 the woman that she must apply to the agency for Medicaid no later than the last day of the following month. 59 60 (d) A woman who is determined to be presumptively eligible for ambulatory prenatal care shall apply to the 61 62 agency for Medicaid no later than the last day of the month 63 following the month in which the determination is made. 64 (e) (1) The agency shall adopt rules that define the 65 acceptable documentation of preliminary information, which may not exceed proof of pregnancy and a facial proof of current 66 67 household income. (2) The agency may develop a worksheet and any other 68 necessary forms for use by a qualified provider to determine 69 70 preliminary eligibility. 71 (f) This section is repealed on October 1, 2028. Section 2. This act shall become effective on October 72

73 1, 2025.



74 75 76 Senate

77 Read for the first time and referred05-Feb-25 to the Senate committee on Children 78 and Youth Health 79 80 81 Read for the second time and placed12-Feb-25 on the calendar: 82 0 amendments 83 84 85 86 as amended Yeas 31 87 Nays O 88 Abstains 0 89 90 91 92 Patrick Harris, 93 Secretary. 94