

- 1 SB102
- 2 V8KJVVP-3
- 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 Enrolled



1 Enrolled, An Act,

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3 4 Relating to Medicaid; to provide presumptive 5 eligibility to pregnant women for Medicaid prior to the Medicaid agency's approval of an application for Medicaid 6 7 coverage; to limit the eligibility to what is provided under the state Medicaid plan for a period not exceeding 60 days; to 8 9 authorize the agency to adopt rules to implement this provision; and to provide for the repeal of this act. 10 11 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA: Section 1. (a) For the purposes of this section, the 12 13 following terms have the following meanings: 14 (1) AGENCY. The Medicaid Agency of the State of 15 Alabama. (2) PRELIMINARY INFORMATION. Proof of pregnancy and 16 17 documentation attesting to monthly household income. 18 (3) PRESUMPTIVE ELIGIBILITY PERIOD. The period that 19 starts on the date on which a qualified provider determines on 20 the basis of preliminary information that a woman is eligible 21 for Medicaid coverage for pregnant women and which ends on and 22 includes the earliest of the following dates: 23 a. On which the agency makes a determination of 24 eligibility for coverage based upon an application filed by 25 the woman. 26 b. If the woman fails to file an application with the 27 agency for coverage, the last day of the month following the 28 month in which the qualified provider made the determination



29 of presumptive eligibility.

30 c. No later than the sixtieth day after the qualified31 provider made the determination of presumptive eligibility.

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

35 (b)(1) A pregnant woman shall be presumptively eligible 36 for coverage for ambulatory prenatal care under Medicaid if a 37 qualified provider determines on the basis of preliminary 38 information that her household income does not exceed the 39 modified adjusted gross income limit for the eligibility of 40 pregnant women which is in effect under the state Medicaid 41 plan.

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

(3) Coverage provided by the agency for the presumptive eligibility period may not be retroactively denied due to failure of the woman to submit an application for Medicaid or 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 of the determination within five working days; and (ii) inform the woman that she must apply to the agency for Medicaid no later than the last day of the following month.

55 (d) A woman who is determined to be presumptively 56 eligible for ambulatory prenatal care shall apply to the

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agency for Medicaid no later than the last day of the month 57 following the month in which the determination is made. 58 59 (e) (1) The agency shall adopt rules that define the 60 acceptable documentation of preliminary information, which may 61 not exceed proof of pregnancy and a facial proof of current 62 household income. (2) The agency may develop a worksheet and any other 63 64 necessary forms for use by a qualified provider to determine 65 preliminary eligibility. (f) This section is repealed on October 1, 2028. 66

67 Section 2. This act shall become effective on October 68 1, 2025.



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