The provider must notify the local office within five working days after the determination of presumptive eligibility.

The woman's presumptive eligibility continues through the day on which the local office makes a determination on the woman's continued eligibility.

The worker must send a Notice of Action notifying the woman of the determination of her continued medical assistance. The worker also sends a copy of the Notice of Action to the provider.

{Effective 12/02/2006}

4-001.01E Guidelines for Parental Responsibility: The worker must use the following guidelines to determine if a child is considered part of the household:

1. If the child is living in the same household with parent(s), the parent(s)' income must be included.
   Exceptions: Home and Community Based and MR Waiver: If a child, living in the parent(s)' home is receiving Medicaid services through a Home and Community Based Service waiver or an MR waiver, the parent(s)' income and resources are not deemed. This does not require Central Office review.

   Katie Beckett: If the child is not receiving waiver services, the income and resources of a parent are not deemed if the minor is severely disabled, AABD-eligible, and would require the level of care provided in a medical institution (Katie Beckett child) and requires certain medical services for special needs (see 471 NAC 12-014). This exception applies only if the cost of care in the home is less expensive than the cost of care in a medical institution.

   Autism Waiver: If a child, living in the parent(s)' home is receiving Medicaid services through the Home and Community Based Autism waiver, both the parent(s)' income and Autism waiver child's income must be verified solely to determine a premium due amount when the gross income exceeds 185% FPL.