



Indiana Health Coverage Programs

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800-457-4584
www.in.gov/medicaid

«Letter Date»

«Member Name»

«Member Address»

Your PE ID: «Member ID»

Effective «Start Date» to «End Date».

Important Notice: you have been approved for short term health coverage. You must complete an Indiana Application for Health Coverage to keep your health benefits. **Take this form with you if you seek medical care.**

«Member Name»

Has been approved for Presumptive Eligibility (PE) Children Medicaid. **This is short term coverage that begins today and will end on «End Date», or until the date of eligibility determination on your Indiana Application for Health Coverage.** You can only qualify for presumptive eligibility once per year, and this coverage is temporary. In order to keep coverage, you must submit an Indiana Application for Health Coverage.

This coverage includes all benefits covered under Traditional Medicaid, such as visits to a doctor, lab work, emergency services and prescription drugs. You can learn about all of the benefits at www.in.gov/medicaid.

Next Step

You must submit a full Indiana Application for Health Coverage in order to keep coverage. You should do this right away. You can submit an application:

- At the provider where you were found presumptively eligible;
- On-line at www.dfrbenefits.in.gov;
- Over the phone 1-800-403-0864; or
- At a Division of Family Resources (DFR) local office

