Indiana Health Coverage Programs

«Letter Date»

«Member Name»
«Member Address»

> Your PE ID: «Member ID»
>
> Effective «Start Date» to «End Date».
>
> **<u>Important Notice</u>**: 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) Adult. **This is short term coverage that begins today and will end on «End Date», or earlier if you are denied coverage based on your full Indiana Application for Health Coverage**. You can only qualify for presumptive eligibility once per year, and this coverage is temporary. This coverage includes all benefits which mirror HIP Basic, such as visits to a doctor, lab work, emergency services and prescription drugs. Please be aware that a copay may be required for most services.

If you have questions about your prescription drug benefits, you may contact OptumRx 1-855-577-6317.

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

Children's Health Insurance Program ▪ Healthy Indiana Plan ▪ Hoosier Care
Connect Hoosier Healthwise ▪ M.E.D. Works ▪ Traditional Medicaid