## ADDENDUM TO APPLICATION FOR PRESUMPTIVE ELIGIBILITY

Do you want to apply for ongoing Medicaid?	🗌 Yes	🗌 No
Have you received Presumptive Eligibility (PE) for Medicaid in the last 12 months?	🗌 Yes	🗌 No
Note: If you are pregnant, only <b>answer YES</b> to this question if you had Presumptive Eligibility during your current pregnancy. <b>Answer NO</b> if you had Presumptive Eligibility in the last 12 months but not during your current pregnancy.		
Do you have any dependents living with you?	🗌 Yes	🗌 No
Do they all have other medical coverage or are they all currently applying for other medical coverage?	🗌 Yes	🗌 No
Were you concurrently enrolled in foster care and Medicaid in Iowa when you were age 18 or older?	🗌 Yes	🗌 No