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## **9/1/15 -- Changes to Eligibility and Enrollment for Pregnant Women**

### **1) Pregnant Applicants with income to 138% of poverty are now eligible for FULL SCOPE Medi-Cal!!**

Pregnant applicants who are citizens or lawfully present immigrants are now eligible for FULL SCOPE Medi-Cal with household income up to 138% of poverty. This eligibility expansion took effect Saturday, August 1, 2015.

As with other full scope enrollees, new pregnant applicants' coverage will be mandatory to Medi-Cal managed care.

The expansion has already been programmed into the eligibility computer rules engine (called CalHEERS), so it's being applied to new applicants as of August 1 at all Medi-Cal application "doors".

### **2) Beneficiaries already in Pregnancy-Related Medi-Cal with income to 138% as of August 1, 2015 have a choice.**

Citizen and lawfully present beneficiaries already in Pregnancy-Related Medi-Cal as of August 1, 2015 with income up to 138% of poverty have a choice. The state will soon be sending them notices about their two options:

**Option 1:** They can keep their current Pregnancy-Related Medi-Cal coverage and providers. No action is necessary to exercise this option. Women in Pregnancy-Related Medi-Cal will not be charged ACA tax penalties.

**Option 2:** Or these beneficiaries can switch to full-scope Medi-Cal. If they wish to switch, they need to contact the county eligibility worker to request the switch.

**IMPORTANT:** Requesting the switch to full scope would mean the woman goes into mandatory Medi-Cal managed care during her pregnancy and postpartum. If her current pregnancy-related care providers do not participate in the managed care network(s) available to her, the woman could lose continuity of care.

In addition, the eligibility of ALL members of her household would be redetermined. Redetermination might result in eligibility changes and/or discontinuance from Medi-Cal for family members.

**3) Pregnant applicants with income over 138% up to 213% of poverty are eligible for Pregnancy-Related Medi-Cal, which will soon be “Minimum Essential Coverage”.**

Pregnant applicants who are citizens or lawfully present immigrants with income over 138% up to 213% of poverty continue to be eligible for Pregnancy-Related Medi-Cal. (Undocumented pregnant women are eligible for Pregnancy-Related Medi-Cal with income 0-213% as they do not qualify for Full-Scope.)

Soon, we expect by Oct. 12, 2015, Pregnancy-Related Medi-Cal will be considered “Minimum Essential Coverage” (MEC). This means that pregnant applicants with income over the Full Scope limit (now 138%) who are citizens or lawfully present will no longer be eligible for Covered California with subsidies, and they should be enrolled only in Medi-Cal, during Open Enrollment or with a “qualifying life event” for Special Enrollment.

**IMPORTANT:** CalHEERS has NOT been programmed yet to stop enrolling such pregnant applicants into both Pregnancy-Only Medi-Cal and Covered California. We have asked the state to notify new applicants that they may disenroll from Covered California if they wish, so they no longer have to pay premiums during pregnancy. There is no ACA tax penalty.

Women already dually enrolled as of August 1 may also stop paying premiums and drop out of Covered California during their pregnancies if they choose to use Medi-Cal alone, without risking an ACA tax penalty.

**Postpartum coverage:** The postpartum coverage under Pregnancy-Related Medi-Cal was not going to be considered MEC by the feds. We are fighting hard to get the state to extend the same scope of coverage provided during pregnancy (see below) throughout the postpartum period. If that happens, then postpartum coverage will be MEC, too. We are waiting for the final policies and procedures on the scope of postpartum coverage and transitions. Remember, no tax penalty is charged for Pregnancy-Related Medi-Cal whether it’s MEC or not.

**4) All medically necessary services must be provided under Pregnancy-Related Medi-Cal.**

Women in Pregnancy-Related Medi-Cal with income up to 213% of poverty are entitled to ALL MEDICALLY NECESSARY SERVICES during pregnancy, not just a narrow set of prenatal and hospital labor and delivery services.

This applies to all women enrolled in Pregnancy-Related Medi-Cal with income up to 213% of poverty, including the undocumented, whether they were enrolled before or after August 1.

Services in Pregnancy-Related Medi-Cal continue to be delivered in fee-for-service (or “regular” Medi-Cal), not managed care plans.

As noted above, women in Pregnancy-Related Medi-Cal are not charged ACA tax penalties.

The state now says it means to provide all medically necessary services for women in Pregnancy-Related Medi-Cal. But we are still waiting to see new instructions in writing. So please stay tuned. As

noted, we are still waiting for the final decisions on post-partum coverage and transitions.

**5) Women with income to 213% who become pregnant AFTER enrolling in Covered California have a choice.**

Women with income up to 213% of poverty who become pregnant after enrolling in a Covered California plan have a choice:

**Option 1:** They can stay in their Covered California plans, with no changes and keep their Advance Premium Tax Credits and Cost-Sharing Reductions.

**Option 2:** Or they can switch to Medi-Cal, and not have to pay premiums or hospital copays for labor and delivery and receive Medi-Cal services, i.e. the Comprehensive Perinatal Services Program.

If a woman's income is at or below 138% of poverty at the time she reports her pregnancy, she can switch to Full Scope Medi-Cal. If instead her income is over 138% of poverty up to 213%, she can switch to Pregnancy-Related Medi-Cal.

Women who wish to switch to Medi-Cal should report the pregnancy to Covered California or contact the county Medi-Cal program.

**IMPORTANT:** If a woman enrolled in Covered California switches to no-cost Medi-Cal during her pregnancy, she could lose continuity of care with her Covered California providers. If continuity of care is important to the woman during her pregnancy, she should check first to see if her current providers will accept her as a Medi-Cal patient.

**6) AIM/MCAP for pregnant women with income over 213% up to 322%**

Reminder: Pregnant women with income over 213% up to 322% of poverty are eligible, without regard to immigration status, for comprehensive coverage under the Access for Infants and Mothers (AIM) Program.

AIM is now called the Medi-Cal Access Program (MCAP), but it does not provide Medi-Cal access.

The state left out AIM from the Single Streamlined Application. But you can get an AIM/MCAP application here: <http://www.aim.ca.gov/Downloads/>

And starting in October, pregnant applicants eligible for AIM/MCAP will be identified and enrolled when they apply from either the Covered California web portal or at the county.

Other major improvements for the eligibility and enrollment process for AIM/MCAP are coming soon; please stay tuned.

**7) Questions?** Please contact Lynn Kersey at [lynnk@mchaccess.org](mailto:lynnk@mchaccess.org) or Lucy Quacinella at [lucyqmas@gmail.com](mailto:lucyqmas@gmail.com). MCHA can help problem-solve applications and cases.