STATE OF CALIFORNIA–HEALTH AND WELFARE AGENCY

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March 3, 1998

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialist/Liaisons

Letter No.: 98-12

ELIMINATION OF STATE-ONLY FUNDED NONEMERGENCY PREGNANCY-RELATED SERVICES FOR CERTAIN ALIENS PURSUANT TO THE PERSONAL RESPONSIBILITY AND WORK OPPORTUNITY RECONCILIATION ACT OF 1996 (PUBLIC LAW (PL) 104-193); BALANCED BUDGET RECONCILIATION ACT OF 1997 (BBA)

Ref.: All County Welfare Directors Letters (ACWDL) Nos. 91-99, 94-60, 96-62, 97-22, 97-42, and 97-53

INTRODUCTION

In 1988, California enacted legislation which authorized Medi-Cal to use state-only funds to provide nonemergency pregnancy-related services to alien women without satisfactory immigration status. (Welfare and Institutions Code Section 14007.5 and Statutes of 1988, Chapter 1441, § 1, subd. (g).)

On August 22, 1996, President Bill Clinton signed into law The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, P.L. 104-193 (PRWORA). This law revises the provision of welfare benefits and the services available to specific aliens. Regulation package R-60-96 implements PRWORA, as amended by the BBA, by eliminating state-only funded nonemergency pregnancy-related services from the restricted scope benefits available to aliens who are not described in federal law as eligible to receive such services.

This ACWDL applies only to state-only funded nonemergency pregnancy-related services. Instructions regarding full implementation of PRWORA will be provided in future ACWDLs.

WHO WILL NOT BE ELIGIBLE FOR NONEMERGENCY PREGNANCY-RELATED SERVICES

With the enactment of PRWORA, specifically Section 411, federal law ends most current state and locally funded public benefits, including, but not limited to, state-only funded nonemergency pregnancy-related services for aliens who are not:

- qualified aliens (including aliens who have been battered or subjected to extreme cruelty in the United States (U.S.), aliens whose children have been battered or subjected to extreme cruelty in the U.S., or an alien child whose parent has been battered or subjected to extreme cruelty in the U.S.)

- nonimmigrant aliens under the Immigration and Nationality Act (INA)

- aliens paroled into the U.S. for less than one year under Section 212 (d) (5) of the INA

This means that aliens who are not lawfully present in the U.S. are no longer eligible for state-only funded nonemergency pregnancy-related services. This ACWDL addresses state-only funded nonemergency pregnancy-related services for aliens who are not within the classes of aliens described above.

(See Section 50302.1 of the attached regulation package R-60-96 for a complete description of aliens who are designated as qualified aliens, nonimmigrant aliens under the INA, or aliens paroled into the U.S. for less than a year under Section 212 (d) (5) of the INA.)

EFFECTIVE DATE

Effective March 1, 1998, new applicants who are not in one of the three categories described above will **not** be eligible to receive state-only funded nonemergency pregnancy-related services. Effective April 1, 1998, current recipients of state-only funded nonemergency pregnancy-related services who are unable to document that they are in one of the three categories described above, will have their level of benefits reduced and will not be eligible to receive state-only funded nonemergency pregnancy-related services.

Note: The Department of Health Services (DHS) plans to implement the regulations as of March 1, 1998, for applicants and for redeterminations, and as of April 1, 1998, for beneficiaries. However, implementation is contingent upon pending litigation.

Those aliens who are unable to document that they are in one of the three categories described above will only receive medical assistance under Title XIX of the Social Security Act for care and services that are necessary for the treatment of an emergency medical condition as defined in federal law (including labor and delivery), and state-only funded immunizations with respect to immunizable diseases and for testing and treatment of symptoms of communicable diseases, whether or not such symptoms are caused by a communicable disease, to the extent that these services are currently covered.

It is the expectation of the DHS that county systems will be changed to accommodate the new aid codes and that training for staff will occur no later than March 1, 1998. It is important that county changes are made expeditiously to avoid disruption in services to those individuals eligible for state-only funded nonemergency pregnancy-related services.

Eligibility processes and procedures remain unchanged.

NOTICE TO BENEFICIARIES

On or about March 15, 1998, a notice will be sent to all beneficiaries in affected aid codes (as of February 1998 month of eligibility [MOE]) instructing them to contact their eligibility worker immediately if they believe they are eligible to continue to receive state-only funded nonemergency pregnancy-related services because they are within one of the categories of aliens listed on page 2. A camera ready copy of the Notice of Action is enclosed with this ACWDL.

SYSTEMS CHANGES

In implementing these regulations, DHS will do special processing on Medi-Cal Eligibility Data Syste, (MEDS). At renewal for the April MOE, DHS will automatically convert any March eligibles on MEDS from the old aid code to the corresponding new aid code if counties have not already made the change for their ongoing eligible population. This will allow counties to focus first on making the changes necessary for reporting the new aid codes for new eligibility determinations.

Effective March 1, 1998, any alien with an application approval date of March 1, 1998, or later, who is **not** an alien who is listed in the three categories on page 2 will only be eligible for emergency services, including labor and delivery, and for state-only funded immunizations with respect to immunizable diseases and for testing and treatment of symptoms of communicable diseases, whether or not such symptoms are caused by a communicable disease, to the extent that these services are currently covered. These aliens must be placed in new Aid Codes 5G, 5N, 5H and 5M (described in detail below under "Changes in Benefits for Certain Aid Codes").

CHANGES IN BENEFITS FOR CERTAIN AID CODES

AID CODES INVOLVING PREGNANT UNDOCUMENTED WOMEN

Aid Code 58

Aid Code 58 currently identifies those beneficiaries who are eligible for restricted scope Medi-Cal benefits with or without a share of cost. Infants, children, men and pregnant/nonpregnant women are in this aid code. It includes aliens who are undocumented, as

well as nonimmigrant aliens lawfully admitted for a temporary period, such as aliens who are present in the U.S. under certain visitor and student visas (who can meet residency requirements). Some of these aliens may be aliens who are listed in the three categories on page 2. In these cases, the alien remains eligible for state-only funded nonemergency pregnancy-related services.

Through March 31, 1998, Aid Code 58 beneficiaries receive restricted scope Medi-Cal benefits, emergency care including labor and delivery, and state-only funded nonemergency pregnancy-related services.

Effective March 1, 1998, all applicants with an application approval date of March 1, 1998, or later, who are aliens not lawfully present in the U.S., will be placed in new Aid Code 5G. Aliens in Aid Code 5G are eligible for emergency care, including labor and delivery, and for state-only funded immunizations with respect to immunizable diseases and for testing and treatment of symptoms of communicable diseases, whether or not such symptoms are caused by a communicable disease, to the extent that these services are currently covered. New Aid Code 5G does not include any other state-only funded nonemergency pregnancy-related services.

Effective March 1, 1998, only applicants/beneficiaries who are lawfully present in the U.S. can be placed in Aid Code 58. These aliens are eligible for restricted scope Medi-Cal benefits with or without a share of cost. These services include state-only funded nonemergency pregnancy-related services as well as emergency care, including labor and delivery.

Aid Code 5F

Aid Code 5F was established as a means to separately identify those undocumented pregnant women who are otherwise eligible for Aid Code 58 with or without a share of cost. Counties were previously instructed to begin implementation of 5F on October 1, 1994, as eligible undocumented pregnant women applied for Medi-Cal. We did not require counties to move all pregnant women immediately from Aid Code 58 into Aid Code 5F. Only those identified at redetermination were required to be changed.

Aid Code 5F currently provides the same restricted Medi-Cal services as Aid Code 58, including emergency and state-only funded nonemergency pregnancy-related services.

Through March 31, 1998, Aid Code 5F beneficiaries receive restricted scope Medi-Cal benefits, emergency care including labor and delivery, and state-only funded nonemergency pregnancy-related services.

Effective March 1, 1998, all applicants with an application approval date of March 1, 1998, or later, who are alien women not lawfully present in the U.S. are only eligible to

receive emergency services, including labor and delivery, and for state-only funded immunizations with respect to immunizable diseases and for testing and treatment of symptoms of communicable diseases, whether or not such symptoms are caused by a communicable disease, to the extent that these services are currently covered. These aliens must be placed in new Aid Code 5N. Undocumented pregnant aliens in new Aid Code 5N are eligible for restricted scope Medi-Cal benefits with or without a share of cost (emergency care, including labor and delivery). New Aid Code 5N does not include any other state-only funded nonemergency pregnancy-related services.

Effective March 1, 1998, only those applicants/beneficiaries who are alien women lawfully present in the U.S. will be placed in Aid Code 5F. All aliens in Aid Code 5F are eligible for restricted scope Medi-Cal benefits with or without a share of cost. These services include state-only funded nonemergency pregnancy-related services as well as emergency care, including labor and delivery.

Aid Code 7C

This is the federal poverty level (FPL) program aid code for certain children born after September 30, 1983, who have not attained age 19 and whose family income is in excess of the maintenance need level but does not exceed 100 percent of the FPL. Services covered under this aid code are emergency services, including labor and delivery, and state-only funded nonemergency pregnancy-related services.

Through March 31, 1998, Aid Code 7C beneficiaries receive restricted scope Medi-Cal benefits, emergency care including labor and delivery, and state-only funded nonemergency pregnancy-related services.

Effective March 1, 1998, all applicants with an application approval date of March 1, 1998, or later, who are aliens not lawfully present in the U.S. are only eligible to receive emergency services, including labor and delivery, and for state-only funded immunizations with respect to immunizable diseases and for testing and treatment of symptoms of communicable diseases, whether or not such symptoms are caused by a communicable disease, to the extent that these services are currently covered. These aliens will be placed in new Aid Code 5M. Aliens in new Aid Code 5M are eligible for restricted scope Medi-Cal benefits without a share of cost (emergency care, including labor and delivery). New Aid Code 5M does not include any other state-only funded nonemergency pregnancy-related services.

Effective March 1, 1998, only those applicants/beneficiaries who are aliens lawfully present in the U.S. will be placed in Aid Code 7C. These aliens are eligible for restricted scope

Medi-Cal benefits without a share of cost. These services include state-only funded nonemergency pregnancy-related services as well as emergency care, including labor and delivery.

Aid Code 48

Aid Code 48 provides pregnancy-related services, including family planning and postpartum services for any age female who is undocumented, as well as nonimmigrant alien women lawfully admitted for a temporary period, if family income is at or below 200 percent of the FPL.

Through March 31, 1998, Aid Code 48 beneficiaries receive restricted scope Medi-Cal benefits, emergency care including labor and delivery, and state-only funded nonemergency pregnancy-related services.

Effective March 1, 1998, all applicants for Aid Code 48 with an application approval date of March 1, 1998, or later, who are not lawfully present in the U.S. are only eligible to receive emergency services, including labor and delivery, and for state-only funded immunizations with respect to immunizable diseases and for testing and treatment of symptoms of communicable diseases, whether or not such symptoms are caused by a communicable disease, to the extent that these services are currently covered. These aliens will be placed in new Aid Code 5H. Aliens in new Aid Code 5H are eligible for restricted scope Medi-Cal benefits (emergency care, including labor and delivery). New Aid Code 5H does not include any other state-only funded nonemergency pregnancy-related services.

Effective March 1, 1998, only those applicants/beneficiaries who are lawfully present in the U.S. will be placed in Aid Code 48. These aliens are eligible for restricted scope Medi-Cal benefits. These services include state-only funded nonemergency pregnancy-related services as well as emergency care, including labor and delivery.

Aid Code 76 (Postpartum)

Aid Code 76 identifies undocumented alien women who are in the 60-Day Postpartum program. Under PRWORA, alien women who are not lawfully present in the U.S. are not entitled to nonemergency postpartum services. Counties may place only alien women who are lawfully present in the U.S. in Aid Code 76 on or after March 1, 1998.

RIGHT TO A HEARING

If an alien was previously eligible to receive state-only funded nonemergency pregnancy-related services and on or after April 1, 1998, is no longer qualified to receive such services because the alien is ineligible for such services under PRWORA, the alien has the right to request a hearing on the issue of immigration status or on the issue of whether a service requested by the alien falls within one of the exceptions provided by PRWORA. However, these restrictions do not limit or change the hearing rights provided under current law. Any alien whose application for Medi-Cal benefits is denied is entitled to a hearing.

NOTICES OF ACTION (NOA)

Counties must revise current NOA language for new applicants and continuing beneficiaries before March 1, 1998, to indicate that state-only funded nonemergency pregnancy-related services are no longer provided to applicants or beneficiaries who are ineligible for such services under PRWORA.

RETROACTIVE ELIGIBILITY

Up to three months of retroactive coverage continues to be available under the Aid Codes 58, 5F, 7C, 48, and 76, as provided in Title 22, California Code of Regulations (CCR), Section 50710. Benefits for those retroactive months occurring prior to March 1, 1998, will include state-only funded nonemergency pregnancy-related benefits.

COMPLETING THE SUPPLEMENTAL DECLARATION OF ALIENAGE AND IMMIGRATION STATUS (MC 13S)

To implement the requirements of PRWORA on March 1, 1998, please use the MC 13S to determine which aliens are eligible for state-only funded nonemergency pregnancy-related services. DHS intends to make the necessary revisions to the MC 13 as soon as possible and will eliminate the MC 13S at that time. In the meantime, all alien applicants are required to complete the MC 13S.

SECTION A

All alien applicants for Medi-Cal are required to complete SECTION A to indicate their alien status. Categories 1 through 7 in Section A (and a category for visa holders similar to category 8) are currently included on the MC 13. Aliens in category 7 are potentially eligible for emergency and state-only funded benefits under PRWORA.

Aliens in category 8 remain eligible for state-only funded nonemergency pregnancy-related services in accordance with established Medi-Cal policies and procedures. However, beginning on March 1, 1998, counties will be required to verify the alien status of aliens in category 8 using the established secondary Systematic Alien Verification for Entitlement (SAVE) system procedures.

Aliens in category 9 only qualify for emergency services, including labor and delivery (except as discussed below). Aliens in category 9 will remain eligible for state-only funded immunizations with respect to immunizable diseases and for testing and treatment of symptoms of communicable diseases, whether or not such symptoms are caused by a communicable disease, to the extent that these services are currently covered.

SECTION B

Under federal law, battered aliens who meet certain specific requirements may be entitled to receive Medi-Cal services necessary to treat conditions related to the battery or cruelty. (See section 50302.1 (b)(8),(9), (10) and (c) of the attached regulation package R-60-96 for a description of battered aliens who are designated as qualified aliens.)

If an applicant or beneficiary answers "yes" to the question in Section B, counties are required to follow the battered alien identification and tracking instructions in ACWDL 97-42. Further instructions on services available to battered aliens will be provided in a future ACWDL.

SECTION C

All aliens applying for Medi-Cal are required to complete Section C of the MC 13S.

PRESUMPTIVE ELIGIBILITY FOR ALIENS

Presumptive eligibility for aliens still applies to all otherwise eligible aliens who indicate on the MC 13S that they are in an alien status that would make them eligible for full-scope Medi-Cal benefits. Aliens claiming to be in a satisfactory immigration status will be given a reasonable opportunity to provide the required documentation, as provided under Ruiz v. Kizer. If the alien does not provide the required documentation within the reasonable opportunity period, the county shall discontinue full-scope benefits and reduce services.

INS verification is required **prior** to granting eligibility to aliens who claim an alien status that would make them eligible for state-only funded nonemergency pregnancy-related benefits.

If you have any further questions regarding this letter, please contact the appropriate analyst listed below:

Alienage/Pregnancy/ Battered Aliens	Marlene King	(916) 657-0134
	Linda Rahmeyer	(916) 657-0398
MC 13S	John Zapata	(916) 657-0725

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosure

THE PERSONAL RESPONSIBILITY AND WORK OPPORTUNITY RECONCILIATION ACT OF 1996

You are receiving this notice because you may be eligible for Medi-Cal emergency and pregnancy-related services. In August 1996, federal law changed so that certain aliens may not get certain state-only funded pregnancy-related services (except for emergency services, including labor and delivery) under the Medi-Cal program. Private Medi-Cal providers and other providers of pregnancy-related services, may still give you pregnancy-related services at their expense if they wish, or at your own expense.

This change in the Medi-Cal program begins on March 1, 1998, for new applicants and for redeterminations, and on April 1, 1998, for current recipients. You will still be eligible for Medi-Cal nonemergency pregnancy-related services if you are in one of the three groups listed below ***and*** if you follow the steps listed on page 2 of this notice under the heading "Procedures":

1. You are a nonimmigrant alien. You are a nonimmigrant alien if you were allowed to be in the United States for a limited period of time and have a current and valid visa or another entry document. For example, if you have a student visa, a temporary visitor's visa, or a business visitor's visa, you are in this group. (These visas include B-1, B-2, E-1, E-2 and F-1 visas, and a number of other temporary visas).

2. You are one of the following:

   a. An alien lawfully admitted for permanent residence.

   b. An alien who has been granted asylum.

   c. An alien who is a refugee.

   d. An alien who was paroled into the United States.

   e. An alien whose deportation is being withheld.

   f. An alien who has been granted conditional entry.

   g. An alien who is a Cuban/Haitian entrant.

   <u>and</u> you have documents from the Immigration and Naturalization Service (INS) to show that you are in one of these categories.

3. You are an alien who has been battered or subjected to extreme cruelty in the United States, an alien whose child has been battered or subjected to extreme cruelty in the United States, or an alien child whose parent has been battered or

subjected to extreme cruelty or cruelty in the United States, and there is a substantial connection between the battery or cruelty and the need for benefits to be provided.

PROCEDURES:

1. If you believe that you are a member of one of the three groups described on page one of this notice (for example, if you believe you are in the United States with a current and valid temporary, nonimmigrant visa, or if you believe you are an alien who has been granted asylum), or if you are not sure whether you are a member of one of these three groups, contact (call or visit) your eligibility worker immediately. Tell your worker that you believe that you are still eligible for Medi-Cal nonemergency pregnancy-related services or you want to find out whether you are still eligible and set up an appointment to see your worker. Your worker will ask you to bring in documentation of your immigration status. You will be given 30 days to get this documentation and give it to your worker.

2. If you contact your eligibility worker before April 1, 1998, your Medi-Cal nonemergency pregnancy-related services will continue until a determination of your immigration status is made some time after your appointment. If you do not contact your eligibility worker before April 1, 1998, your Medi-Cal nonemergency pregnancy-related services will stop on that date. However, once you contact your eligibility worker, your eligibility for nonemergency pregnancy-related services will be restored the very next day and will continue until a determination of your immigration status is made some time after your appointment.

3. When you have your appointment with your eligibility worker, be sure to bring with you all documentation of your immigration status.

4. After your appointment with your eligibility worker, a determination of your immigration status will be made based on the documentation you bring in. Until the determination is made, your Medi-Cal nonemergency pregnancy-related services will continue.

5. Some time after your appointment, the county or your eligibility worker will send you a Notice of Action about whether you were determined to still be eligible for Medi-Cal nonemergency pregnancy-related services. If you are determined to be ineligible because you are not a member of one of the three groups listed on page one, but you think that you really are in one of the groups or are still not sure whether you are, or if you are denied treatment which you feel constituted emergency medical care, you may request a hearing by calling the phone number listed on the Notice of Action you will receive from the county or your eligibility worker.

6. If you request a hearing, your Medi-Cal nonemergency pregnancy-related services will continue until a decision is made after your hearing. If you do not request a hearing, your

Medi-Cal nonemergency pregnancy-related services will stop immediately and you may lose the right to go to court to get these services restored.

IMPORTANT NOTES:

1. If you have any questions about what this notice means, please call your eligibility worker as soon as possible. Your worker will try to answer any questions you may have.

2. This notice only deals with whether you may receive nonemergency pregnancy-related services under the Medi-Cal program. Private Medi-Cal providers may still give you pregnancy-related services at their expense, if they wish, or at your own expense.

3. Whether or not you are in one of the three groups listed on page one, Medi-Cal emergency services are still available to everyone who is otherwise eligible under the Medi-Cal program regardless of immigration status. In addition, you may still be eligible for state-only funded immunizations and testing and treatment of symptoms of communicable diseases.

LEY DE REFORMA DE ASISTENCIA PUBLICA

Usted está recibiendo esta carta porque puede ser elegible para Medi-Cal servicios de emergencia y relacionado con el embarazo. En Agosto 1996, la ley federal cambió para que ciertos extranjeros no puedan recibir beneficios relacionado con el embarazo (solamente servicios de emergencia, incluyendo el parto). Proveedores privados de Medi-Cal y otros proveedores de servicios relacionados con el embarazo pueden darle servicios relacionados con el embarazo a costo de ellos, si les gusta, o a costo de usted.

Este cambio en el programa de Medi-Cal comienza el 1o de marzo 1998, para nuevos solicitantes y para redeterminaciones, el 1o de abril 1998, para recipientes actuales. Usted seguirá siendo elegible para servicios de Medi-Cal relacionados con el embarazo que no sea de emergencia, si usted está en uno de los tres grupos mencionados abajo y si usted sigue los pasos mencionados en la página 2 de esta carta bajo el título "procedimiento".

1. Usted es un extranjero no inmigrante. Usted es un extranjero no inmigrante si fue admitido a los Estados Unidos por un tiempo limitado y tiene una visa válida u otro documento de entrada válido. Por ejemplo, si usted tiene una visa de estudiante, una visa temporal de visitante o una visa de negocio de visitante, usted está en este grupo. (Estas visas incluyen B-1, B-2, E-1, E-2 y F-1 visas, y otras visas temporales.)

2. Usted es uno de los siguientes:

   a. Un extranjero admitido legalmente para residencia permanente.

   b. Un extranjero que ha recibido asilo.

   c. Un extranjero que es un refugiado.

   d. Un extranjero que entró en los Estados Unidos bajo libertad condicional.

   e. Un extranjero para quien se detiene la deportación.

   f. Un extranjero que tiene permiso de entrada condicional.

   g. Un extranjero que es entrante de Cuba/Haitiano.

   y si tiene documentos de Servicio de Inmigración y Naturalización (INS), que verifica que usted está en una de las categorias.

3. Usted es un extranjero que ha sido golpeado o ha sufrido extrema crueldad en los Estados Unidos o un extranjero a quien su niño(a) ha sido golpeado o ha sufrido extrema crueldad en los Estados Unidos, o un niño(a) extranjero cuales padres han sido golpeado o han sufrido extrema crueldad o crueldad en los Estados Unidos y debe haber sustanciosa relación entre los golpes o la crueldad y la necesidad de que los beneficios sean proveados.

PROCEDIMIENTO:

1. Si usted piensa que es miembro de uno de los tres grupos mencionados en la primera página de esta carta (por ejemplo, si usted piensa que está en los Estados Unidos con una visa válida, temporal de no inmigrante o si piensa que es extranjero que ha recibido asilo), o si no está seguro si es miembro de uno de los tres grupos, comuníquese (llame o visite) su trabajador(a) de elegibilidad inmediatamente. Dígale a su trabajador(a) que usted piensa que es elegible para servicios de Medi-Cal relacionados con el embarazo que no son de emergencia o quiere saber si todavia es elegible y hacer cita con su trabajador(a). Su trabajador(a) le pedirá que traiga documentación sobre su situación migratoria. Tendrá 30 dias para obtener esta documentación y entregarla a su trabajador(a).

2. Si se comunica con su trabajador(a) de elegibilidad antes del 1o de abril 1998, sus servicios de Medi-Cal relacionados con el embarazo que no son de emergencia continuarán hasta que una determinación sobre su situación migratoria se haga después de su cita. Si no se comunica con su trabajador(a) de elegibilidad antes del 1o de abril 1998, sus servicios de Medi-Cal relacionados con el embarazo que no son de emergencia terminarán en esta fecha. Sin embargo, tan pronto se comunique con su trabajador(a) de elegibilidad, su elegibilidad para servicios relacionados con el embarazo que no son de emergencia serán restauradas para el siguiente día y continuarán hasta que una determinación sobre su situación migratoria se haga tiempo después de su cita.

3. Cuando tenga su cita con su trabajador(a), asegúrese de que traiga toda documentación sobre su situación migratoria.

4. Después de su cita con su trabajador(a), una determinación sobre su situación migratoria será determinada sobre toda la documentación que usted provee. Hasta que haga determinación, su Medi-Cal relacionado con el embarazo que no es de emergencia continuará.

5. Tiempo después de su cita, el condado o su trabajador(a) de elegibilidad le notificará por escrito si todavia es elegible para servicios de Medi-Cal relacionados con el embarazo que no son de emergencia. Si determinan que no es elegible porque no es miembro de uno de los grupos mencionados en la primera página, pero usted piensa que está en uno de los grupos o no está seguro si pertenece, puede pedir una audiencia llamando al numero telefonico en su notificacion de accion que recibira del candado o de su trabajador(a).

6. Si pide una audiencia, sus servicios de Medi-Cal relacionados con el embarazo que no son de emergencia continuarán hasta que una decisión se haya hecho después de su audiencia. Si no pide una audiencia, sus servicios de Medi-Cal relacionados con el embarazo que no son de emergencia terminarán inmediatamente y puede perder el derecho de una audiencia para que le restauren estos beneficios.

NOTAS IMPORTANTES:

1. Si tiene preguntas sobre lo que se refiere esta carta, por favor llame a su trabajador(a) de elegibilidad tan pronto sea posible. Su trabajador(a) le contestará las preguntas que tenga.

2. Esta carta trata solamente sobre qué servicios puede recibir relacionados con el embarazo que no son de emergencia bajo el programa de Medi-Cal. Su médico privado puede seguir proveéndole servicios relacionados con el embarazo a costo de él si desea, o a su costo.

3. Esté o no en uno de los tres grupos mencionados en la primera página, servicios de emergencia de Medi-Cal, incluyendo el parto, y también inmunizaciones y pruebas y tratamientos de síntomas de enfermedades comunicables, todavía son disponibles para todos bajo el programa Medi-Cal sin tomar en cuenta la situación migratoria.